

**C H E R E**  
*Annual  
Report  
1995*

*Centre for  
Health Economics  
Research & Evaluation*

# Foreword

It is with pleasure and a sense of privilege that I write this Foreword to the CHERE 1995 Annual Report. Western Sydney Area Health Service has been delighted to be associated with CHERE over these five years. The ever increasing demand for expertise in the field of Health Economics reinforces the foresight of those involved in the establishment of CHERE in 1991.

The broadening and development of the Centre's Research and Evaluation activities will become apparent to the reader of this report. The rapid expansion of CHERE's education and teaching role is of particular significance and receives appropriate emphasis and recognition.

During 1996, CHERE will be relocating to Camperdown and further developing its relationships with the University of Sydney and the Central Sydney Area Health Service. This move should provide CHERE the opportunity to further enlarge its vital role and functions.

Western Sydney will continue its close association with CHERE and looks forward to a continuing beneficial relationship. We wish you well and are confident you will prosper in your new environment.



O.G. CURTEIS  
**Chief Executive Officer**

# Contents

Director's Report	1
Research	4
Education	18
Policy Support	21
Staff and Associates	23
Publications 1995	26
Seminars and Presentations	31

# Director's Report

CHERE commenced functioning in 1991, so the completion of 1995 brings us towards the fifth anniversary of the foundation of the Centre for Health Economics Research and Evaluation. It has been a year of continued progress, a year of steady development and consolidation rather than major milestones.

The highlights for 1995 have been:

- ▶ the development of the teaching program under the PHERP Centre for Excellence Grant
- ▶ commencement of the NSW training scheme in health economics
- ▶ further evolution of the policy advisory role.

CHERE continues its strong commitment to research with projects related to our strategic plan around the themes of methodological development in economic evaluation, the assessment of quality of life, investigation of non-health outcomes and equity issues.

## RESEARCH

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The balance of our research has changed to longer term investigations, with ongoing projects including the valuation of health outcomes, the interpretation of quality of life scores, the valuation of non-health outcomes including patient satisfaction, choice and information. Many of these topics are rapidly developing issues within health economics internationally.

New projects have been funded in Primary Care and Aboriginal Health. It is particularly pleasing, in terms of our concern with equity, to have work underway in Aboriginal Health.



*Jane Hall*

## EDUCATION

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This year the new PHERP funded teaching program has commenced. This program provides for the development of a health economics specialty within the University of Sydney Master of Public Health. A number of new electives have been developed, namely the political economy of health, public health values and economics, and the economics of health promotion. These will complement the existing electives in economic evaluation and in key issues in health economics. This provides a health economics stream allowing for a specialisation within the Public Health degree, as intended in the Faculty of Medicine's strategic plan.

The core introductory unit in health economics has been radically restructured. Its educational objectives have been focused and it has been revised to replace the

predominantly lecture based format with more tutorial based learning. This will reduce the core content, in line with the aims of the Department of Public Health and Community Medicine, while providing a basic introduction to all MPH students.

This year, too, saw the start of the NSW Health Department training scheme in health economics. The scheme provides for one year of academic training followed by two years supervised experience in the NSW health services. Its aim is to produce health economists with a sound theoretical grounding combined with practical experience in both policy analysis and research. The first economist joined the program at the beginning of 1995 and spent the academic year at Monash University studying for the Graduate Diploma in Health Economics and Evaluation.

## **POLICY SUPPORT**

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The Centre works closely with NSW Health across a range of issues. This year has seen CHERE staff contributing to the Minister's Health Economics Statement, the development of the Research and Development Strategy, the development of a strategy for health promotion and the health outcomes initiative through policy forums and through specific outcomes projects.

CHERE staff are also active at the national level. CHERE members are represented on many NHMRC committees and other Commonwealth and AHMAC working groups.

## **PROFESSIONAL DEVELOPMENT**

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In addition to encouraging the development of health economics through academic and other educational programs, it is CHERE's aim to foster the professional development of its own staff. A number of staff are pursuing studies for higher degrees.

CHERE runs an active seminar program. Visitors in our series of occasional seminars in health economics for 1995 have included Jan Abel Olsen, Terry Alchin & Matthew Sutton.

During 1995, Alan Shiell undertook a study tour of the UK and North America to review developments in teaching in health economics. This has informed our review of the teaching program. I visited a number of health economics units in the UK and attended the European Conference of Health Economists. It was instructive to review the management structures of other units and to find that many of the difficulties I meet are faced elsewhere. However, it certainly confirmed the topicality and high quality of the work underway in CHERE.

## **STAFF MOVEMENTS**

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Many people in regular contact with CHERE will have come to know Pamela Everingham, our Centre co-ordinator, during the year. We were sorry to farewell Pamela who left to return to her home town of Adelaide just before Christmas. Robert Carruthers left to pursue his studies full time; Simon Eckermann to travel.

Joining the Centre during the year were Lyn Cooper, Sue Caleo and Alison Palmer. This year CHERE provided a placement for a student in health economics from the University of York, UK. At the completion of his successful term here, Stephen Himpson has also joined the CHERE staff to work on secondment with Central Sydney.

Rosalie Viney, Deputy Director, has taken maternity leave. During her absence, Marion Haas will be acting as Deputy.

## **THE FUTURE**

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During the year, NSW Health has released its Research and Development Strategy for consultation. The Department is to be congratulated for taking a strategic view and for the directions outlined in this document. The Strategy has several implications for the future of CHERE. Early in the new year, the Centre will be reformulating its strategic plan in the light of this. One of the implications of the Strategy is the need to develop an organisational structure that will ensure

independence and autonomy for CHERE as a research organisation.

Over the last two years, it has become increasingly pressing to find, not just a new organisational structure but also new physical accommodation. Our current facilities are stretched to maximum capacity and are the constraint to further expansion of the Centre. We have explored a number of options the most attractive of which is University accommodation in Mallett St, Camperdown. During 1996, CHERE will be re-located to the Mallett St precinct where we will join the NHMRC Clinical Trials Centre.

It is our intention not to leave Western Sydney completely. Following our re-location to Camperdown, we will continue to have a CHERE office within the Department of Public Health and Community Medicine, Westmead Hospital as the base from which we will continue our work in Western Sydney and Westmead Hospital.

## **ACKNOWLEDGEMENTS**

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We are grateful to Dr Owen Curteis and all the members of the Executive of Western Sydney Area Health Service for their support and encouragement in the establishment of the Centre. Our particular thanks go to Mr Ron Tindale, Deputy Chief Executive Officer of Western Sydney Area and Mr Russell Mills, Acting Executive Officer of the Westmead Hospital for their efforts in trying to meet our growing demands for organisational restructuring and for more space.

We would also like to acknowledge the many clinicians and administrative staff at Westmead Hospital who are collaborating in our research and supporting our research endeavours and for the financial and administrative support provided by the hospital.

We are very appreciative of the continued support of NSW Health, both in terms of funding and in practical support for the inclusion of more health economics in policy formulation and evaluation. It is a privilege to work with Mr John Wyn Owen, Director

General. We would also like to acknowledge the commitment of Dr George Rubin, Chief Health Officer and Dr Michael Frommer, Director for the Centre of Research and Development.

To Professor John Young, Dean of the Faculty of Medicine and Dr Diana Horvath, Chief Executive Officer of the Central Sydney Area Health Service are due special thanks for making the re-location and further growth of CHERE possible. We are all looking forward to the opportunities of working more closely with the University and developing links with Central Sydney and Royal Prince Alfred Hospital that 1996 will bring.

Professor Stephen Leeder, Head of the Division of Public Health and Community Medicine at Westmead, has continued his support and enthusiasm for health economics. His advocacy is an important contributor to the Centre's development and is warmly acknowledged. Finally, the commitment, loyalty and hard work of all the staff at CHERE is what makes the Centre what it is. As Director, my thanks go to each and every member of staff. Alan Shiell and Rosalie Viney have shared the challenges of the Director's responsibilities; I am grateful to them both for their work over the past year and to Marion Haas for happily shouldering the extra work as a Deputy.

# Research

Research is the major component of CHERE activities. Research projects range from those which are primarily conceptual and theoretical to those which are focussed on a specific and immediate policy issue.

At the conceptual level, research themes are developing around the meaning of equity and community values, the measurement and analysis of quality of life, the validity and reliability of utility measures for economic evaluation, patient/consumer satisfaction, and feminist economics. These are represented, at various stages of development, in the project accounts which follow.

CHERE's empirical research is largely in the disease areas of cancer and heart disease, where quality of life, patient satisfaction and carer issues are significant components of the outcome. Projects have been completed in palliative care, primary care and clinical budgeting, commissioned by N.S.W. Health or Western Sydney. The development of program budgeting and marginal analysis as a management technique for Area Health Services has continued through a number of demonstration projects.

## **LONG TERM INTERVENTION WITH PRAVASTATIN IN ISCHAEMIC DISEASE (LIPID)**

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Jane Hall, Virginia Wiseman, Paul Glasziou<sup>1</sup>,  
Sarah Mulray<sup>1</sup>, John Simes<sup>1</sup>

LIPID is a randomised controlled trial of 8,000 patients. Its aim is to determine whether HMG-CoA reductase inhibitors reduce coronary heart disease mortality in post myocardial infarction or unstable angina pectoris patients. For the most part, outcomes considered in economic evaluation are only those of the patient (recipient of care). However, this study considers not just the quality of life of patients as an outcome measure but recognises that the impact of illness extends beyond the person who suffers from it, and particularly affects the main care givers. A questionnaire to assess carer impact has been developed and will be tested for validity and reliability as well as being fielded in the LIPID trial.

**Funding source:** National Heart  
Foundation

**Status:** Current

**Publications / Reports to Date:**

DAVEY P, HALL J, SEYMOUR J.  
Cost effectiveness of pravastatin for  
secondary prevention of IHD - feasibility and  
pilot study, CHERE Discussion Paper 17,  
1993.

WISEMAN V. and HALL J.  
Care givers: The Invisible  
Labourforce. *Report to the LIPID  
Cost-Effectiveness Research Group.*

**Acknowledgement:**

1. NHMRC Clinical Trials Centre

## **COSTS AND QUALITY OF LIFE IN EARLY STAGE BREAST CANCER**

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Alan Shiell, Patsy Kenny, Madeleine King, Sue Cameron, Janelle Seymour, Dr John Boyages<sup>1</sup>, Professor Alan Langlands<sup>1</sup>

**Funding source:** PHRDC, NHMRC

**Status:** Current

**Acknowledgement:** 1. Department of Radiation Oncology, Westmead Hospital.

This is a descriptive study of costs and quality of life (QOL) following treatment for early stage breast cancer. The overall aim of the project is to assist clinicians and women in the choice of the best treatment for early stage breast cancer, by providing comprehensive information about quality of life. A set of self-completed questionnaires has been used to measure the relevant dimensions and to describe short-term and long-term effects of treatment on QOL. Recruitment to the study is complete and analysis of quality of life three months after surgery has commenced. Interviews have also been held with each of the women to elicit their valuation of their health state. The results of this phase of the study will also contribute to the understanding of valuation methods currently being used in health economics.



*CHERE members of the Breast Cancer Project Team:  
Sue Cameron, Alan Shiell, Madeleine King, Patsy Kenny and Janelle Seymour*



## **EVALUATION OF DOMICILIARY CHEMOTHERAPY**

Jane Hall, Madeleine King, Sue Cameron, Sue Caleo, Howard Gurney<sup>1</sup>, Paul Harnett<sup>1</sup>

This study is a prospective evaluation of domiciliary chemotherapy compared with standard hospital-based chemotherapy. Domiciliary care offers the patient home comforts, reduces travel to the hospital, and frees up hospital facilities under heavy demand. This is a prospective cross-over study, which means that each patient is provided with both home and hospital care, with the order of treatment being randomly allocated. Forty patients have completed the trial. Data have been collected on patient satisfaction, quality of life, staff and carer satisfaction. A full report of the evaluation is close to completion.

**Funding source:** NSW State Cancer Council

**Status:** Current

**Publications / Reports to date:**

AMOS N, HOLLINS M.  
Establishing a domiciliary chemotherapy service.  
*Cancer Forum* 1994; 18(3) 168-171

AMOS N, HOLLINS M, MAHER L, MORAN D.  
Establishing a domiciliary chemotherapy service.  
*Proceedings of the 21st Annual Scientific Meeting of the Clinical Oncology Society of Australia*, 1994.

**Acknowledgement:**

1. Departments of Medical Oncology, Westmead Hospital & Nepean Hospital.



*CHERE members of the Evaluation of Domiciliary Chemotherapy Project Team: Sue Cameron, Madeleine King, Jane Hall & Sue Caleo*

## ASSESSING QUALITY OF LIFE (QOL) IN CANCER

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Madeleine King

Collaborating individuals and departments.:  
Annette Dobson, Centre for Clinical  
Epidemiology and Biostatistics,  
University of Newcastle.

This project is about the measurement and statistical analysis of quality of life (QOL). It uses two instruments for the empirical component: the Functional Living Index - Cancer (FLIC) and the Quality of Life Questionnaire Core module (QLQ-C30). Given that the two instruments were designed for the same purpose, investigators will be interested in whether they produce the same results when used to discriminate between groups of patients who differ in health status. The study considers the distinction between statistical significance and clinical importance in QOL measures and considers the features of QOL scales which are important when choosing statistical methods.

**Funding source:**        *Public Health  
Research  
Scholarship, NHMRC*

**Status:**                 *Current*

**Publications/Reports to Date:**

KING MT, DOBSON AJ, HARNETT PH.

A comparison of two quality-of-life questionnaires for cancer clinical trials: the Functional Living Index - Cancer (FLIC) and the Quality of Life Questionnaire Core module (QLQ-C30).

*Journal of Clinical Epidemiology* 49 (1) 21-29  
1996.

KING MT.

Clinical importance and statistical significance of QLQ-C30 scores. *Quality of Life Research* (in press).

## A CLINICAL BUDGETING PILOT PROGRAM IN THE DIVISION OF ALLIED HEALTH, WESTMEAD HOSPITAL

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Marion Haas, Jane Hall, Sharelle Murphy<sup>1</sup>,  
Elizabeth Iskander<sup>1</sup>, Michael Price<sup>2</sup>

The major objective of this pilot project is to test the feasibility of a clinical budgeting model based on the creation of an "internal market" for allied health services in Westmead Hospital. CHERE's role is one of evaluation of the availability and usefulness of the data systems used to measure allied health inputs and outputs, the differences in resource allocation before and during the pilot project and the overall impact the introduction of clinical budgeting will have on both allied health and clinical departments in Westmead Hospital. A series of options for implementing a clinical budgeting service agreement were discussed and one was agreed as being the most appropriate for the Westmead setting. The report and CHERE discussion paper from this project will be complete in 1996.

**Funding source:**        *CHERE core funding*

**Status:**                 *Current*

**Acknowledgements:**

1. *Department of Allied Health,  
Westmead Hospital*

2. *Department of Geriatrics,  
Westmead Hospital*

## **PROGRAM BUDGETING AND MARGINAL ANALYSIS (PBMA)**

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Gavin Mooney, Marion Haas, Rosalie Viney,  
Lyn Cooper, Stephen Himpson

CHERE has been funded by NSW Health to liaise with some of the Areas and District Health Services in NSW to implement demonstration projects in 'Program Budgeting and Marginal Analysis' (PBMA). This process is a mechanism for assisting in priority setting in resource allocation. It involves identifying, according to programs such as care of the elderly, the mentally ill, surgery, etc., what monies are being spent where (program budgeting). Thereafter questions are posed with respect to the "margins" of these different programs (marginal analysis) as to whether some movement of funding between programs would result in some overall better outcome with the resources involved. In April 1995, a seminar was held at which representatives of Area and Districts were given the opportunity to learn about PBMA principles and practice. Subsequently, five pilot projects were chosen to receive NSW Health Department funding to undertake PBMA.

The five Areas/Districts and topics are:

Central Sydney Area Health Service  
Child Adolescent and Family Health  
Services

Central Coast Area Health Service  
Dental Services

South West Centre for Public Health  
Asthma Services

Riverina Health Service  
Alcohol and Drug Services

Western NSW Public Health Unit  
Smoking Prevention Services

These pilot projects will be completed during  
1996.



*Marion Haas, Rosalie Viney, Lyn Cooper & Gavin  
Mooney*

**Funding source:** NSW Health

Department

**Status:** Current

**Publications/Reports to Date:**

MOONEY G, JAN S, SEYMOUR J  
The NSW health outcomes initiative and  
economic analysis.  
*Aust J of Public Health* 1994; 18(3): 224-49

SHIELL A, HALL J, JAN S,  
SEYMOUR J, Advancing health in NSW:  
Planning in an economic framework.  
CHERE Discussion Paper No. 23 1993.

VINEY R, HAAS M and MOONEY G  
Program Budgeting and Marginal  
Analysis: a guide to resource  
allocation.  
*NSW Public Health Bulletin*; 6:29-30,32

## **DIABETES HEALTH OUTCOMES PROTOTYPE: PROGRAM BUDGETING AND MARGINAL ANALYSIS**

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Rosalie Viney, Marion Haas, Gavin Mooney,  
Lyn Cooper, Jane Overland<sup>1</sup>, Dennis Yu<sup>1</sup>,  
Maria Constantina<sup>1</sup>

This project is closely linked with CHERE's other work on PBMA. Diabetes management is being developed by the NSW Health Department as a prototype for a health outcomes approach in NSW. As part of this, CHERE has contributed to the Project Team developing the prototype. In particular, CHERE's role has been to provide advice on linking health outcomes and resource allocation, based on the PBMA framework. CHERE is currently working with the Diabetes Centre at RPAH and the NSW Health Department to apply the PBMA framework within diabetes management at RPAH.

**Funding source:** CHERE core funding

**Status:** Current

**Acknowledgement:**

1. Diabetes Centre, Royal Prince Alfred  
Hospital

2. NSW Health Department

## **ABORIGINAL AND TORRES STRAIT ISLANDERS' HEALTH SERVICES**

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Gavin Mooney, Alison Palmer

Within CHERE a study is being conducted to try to identify as far as is possible what the experience is on health services consumed by Aborigines and Torres Strait Islanders. Where such identification is not possible the study will try to indicate what is needed to be able to provide this information. The study is additionally looking at the basis on which health service resources are currently allocated to Aborigines and Torres Strait Islanders and what other bases might be considered appropriate on which to do this.

**Funding source:** NHMRC, NSW Health

**Status:** Current

## **PREFERENCES FOR HEALTH**

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Stephen Jan, Gavin Mooney

This project examined the assumption underlying the assessment of health related quality of life in cost-utility analysis that preferences for health do not vary. The analysis was done at a conceptual level through an investigation of the type of utility function which QALYs (and HYE) assume. The consistency of such a defined objective function with normal axioms of welfare economics was considered.

**Funding source:** CHERE core funding

**Status:** Completed

**Publications to date:**

JAN S and MOONEY G  
Health, QALYs and Preferences  
Paper Submitted for Publication

## HEALTH GAINS

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Gavin Mooney, Stephen Jan, Virginia Wiseman

Resource allocation decisions are often made implicitly on the basis that equal health gains are not valued equally in different contexts. The project sought to examine the basis for these value judgements in health care and the factors upon which they rely. One method used was to ask health care decision makers their relative preference for health gains allocated across groups which differ by age, sex, number, socio-economic status, health status and over time. The results will provide insights into the way the community views equity in the provision of health care.

**Funding source:** *CHERE core funding*

**Status:** *Current*

**Publications to date:**

MOONEY G

Resource allocation and Aboriginal Health  
*Australian and New Zealand Journal of Public Health*, 20 (1), 9 (in press)

## VALUATION OF TIME COSTS

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Stephen Jan, John Posnett<sup>1</sup>

Unpaid time represents a potentially significant input into the health production function. This project examines the basis for valuing time inputs consistent with the notion of opportunity cost. The analysis therefore involves examining whether time displaced in the production of health involves lost work or lost leisure.

**Funding source:** *CHERE core funding*

**Status:** *Completed*

**Publications / Reports to date:**

POSNETT J and JAN S

Indirect costs: valuing unpaid inputs into health care

*Health Economics* (in press)

POSNETT J and JAN S

The principles underlying the valuation of unpaid input into health care.

CHERE Discussion Paper No. 29.

**Acknowledgement:**

*1. York Health Economics Consortium, University of York.*



*Virginia Wiseman and Gavin Mooney*

## **EARLY RETURN TO NORMAL ACTIVITIES (ERNA)**

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David Ross<sup>1</sup>, Jane Hall, Virginia Wiseman,  
Rob Denniss<sup>1</sup>, Pramesh Kovoor<sup>1</sup>, Elizabeth  
Wallace<sup>1</sup>, Fiona Moir<sup>1</sup>

This project is designed to determine whether heart attack patients at low risk of dying or having another heart attack can safely return to normal activities one week after discharge.

Outcomes are assessed in terms of health related quality of life. Quality of life assessment includes return to normal daily activities. A modified version of the Rosser quality of life questionnaire is completed by patients once a week for six weeks, twelve weeks, six months and twelve months post discharge.

For the economic evaluation, quality of life outcomes will be calculated using the QALY methodology. The valuation of quality of life health states will be conducted using standard time trade-off techniques.

Recruitment commenced in 1993. Seventy-nine patients from Westmead and Blacktown hospitals have enrolled in the study. Recruitment will continue to the end of 1996 with 12 months follow-up.

**Funding Source:** MRC, NHMRC

**Status:** Current

**Acknowledgement:**

1. Cardiology Unit, Westmead Hospital.

## **PUBLIC AND PRIVATE PROVISION OF REHABILITATION SERVICES FOR OLDER PEOPLE**

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Ian Cameron<sup>1</sup>, Wes Baker<sup>1</sup>, Glenn Salkeld

This project involves a detailed cost analysis of two public and one private provider of rehabilitation services for older people. The study includes resources consumed in the hospital sector, community services and the cost of care. Extensive measurement of patient outcomes using SIP, Barthel and FIM have been used to evaluate the effectiveness of treatment post discharge. Data analysis has commenced.

**Funding source:** Research and  
Development Grants  
Advisory Committee

**Status:** Current  
**Acknowledgement:** 1. Northern Sydney  
Area Health Service

## A FEMINIST PERSPECTIVE ON HEALTH ECONOMICS

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Jane Hall, Virginia Wiseman, Rosalie Viney

This project draws on the feminist critique of neoclassical economics and considers its relevance to health economics which is grounded in neoclassical welfare economic traditions. Current work focuses on economic evaluation. Economic evaluation of health care is based on seeking maximisation of social welfare, and uses market or shadow prices to capture value. Even the recognised departures from applied welfare economics, such as QALYs are essentially based on an individual conception of welfare. We are exploring the issues of valuation of unpaid work, valuation of health states and the valuation of production gains and losses associated with health outcomes of treatment from a feminist perspective.

**Funding source:** *CHERE core funding*

**Status:** *Current*

**Publications / Reports to date:**

HALL J, WISEMAN V and VINEY R  
Unorthodox, troublesome, dangerous and disobedient: a feminist perspective on health economics.  
Australian Conference on Health Economics.  
Brisbane, 1995.

HALL J  
The valuation of informal care: a feminist issue? Paper presented to the Third European Conference on Health Economics. Stockholm, Sweden. 1995

## THE IMPLICATIONS OF INDUSTRY SPONSORED ECONOMIC EVALUATION RESEARCH

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Rosalie Viney, Jane Hall

The introduction of cost-effectiveness criteria for listing of new drugs on the Pharmaceutical Benefits Scheme shows that economic evaluation can be used to guide resource allocation in health care. However, criticisms of the practice of economic evaluation suggest that it may not always promote efficiency. These criticisms are directed at the quality of specific evaluations, the choice of which technologies are evaluated and the process by which evaluations are commissioned. With cost-effectiveness being seen as a criterion for approval of new therapies, industry will be a major sponsor of economic evaluation research. This project addresses four specific concerns about whether industry sponsored economic evaluation will promote the efficient allocation of resources to pharmaceutical therapies: the methods of economic evaluation as applied to industry sponsored research; the role of economic evaluation in setting prices for new therapies and the research agenda in health care and health economics.

**Funding source:** *CHERE core funding*

**Status:** *Current*

**Publications / Reports to date:**

VINEY R, HALL J. Health Economics Research and Evaluation: The Implications of Industry Sponsored Research. Ch. 11: 136-147. *Economic Evaluation in Australian Health Care*. Selby Smith C & Drummond MF(eds) Australian Government Publishing Service (in press)

HALL J. The Practice of Economic Evaluation in Australia. Paper presented to "Economic Evaluation in Health Care", Monash University, Department of Management. 12-13 December 1994.

## **PALLIATIVE CARE GENERAL PRACTICE PROGRAM**

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Marion Haas, Jane Hall, Phillip Lee<sup>1</sup>, Tony Odlum<sup>1</sup>, Howard Gurney<sup>2</sup>

CHERE was involved in the evaluation of the Western Sydney Area Palliative Care GP program. Two general practitioners were employed on a sessional basis to be involved in the education of and consultation with other health care providers about palliative care in the community. They also provided direct care to palliative care patients. CHERE evaluated the impact of the GPs' work on community nurses and general practitioners in the Area. A "before and after" design was used.

**Funding source:** *Blacktown Hospital,  
Medicare Incentive  
Program*

**Status:** *Completed*

**Publications / Reports to Date:**

HAAS M, HALL J, LEE P, ODLUM T,  
GURNEY H

Evaluation of the Western Sydney Palliative Care General Practice Program. *Report to the Western Sydney Area Health Service, September 1995.*

**Acknowledgement:**

1. *General Practitioner*
2. *Department of Medical Oncology, Westmead Hospital*

## **DELIVERY OF LESS URGENT AMBULATORY CARE IN A HOSPITAL SETTING**

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Rosalie Viney, Stephen Jan, Marion Haas

The aim of this project is to identify and develop appropriate models for the funding and delivery of less urgent ambulatory care in a hospital setting and to establish a framework for the evaluation of such models. The project is based on the initial premise that there are legitimate reasons for consumers to present to hospitals for less urgent ambulatory care services and that therefore, there is a role for hospitals in providing this type of care. Existing models of less urgent ambulatory care based in hospitals are discussed and models of care for pilot projects proposed for both metropolitan and rural settings.

**Funding source:** *NSW Health Department*

**Status:** *Current*

**Acknowledgement:** *NSW Health Department*

## **COST-EFFECTIVENESS ANALYSIS OF INTENSIVE CASE MANAGEMENT FOR PATIENTS WITH SCHIZOPHRENIA**

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Susan Johnston<sup>1</sup>, Glenn Salkeld

An economic evaluation is being conducted alongside a randomised controlled trial of ICM for people with severe schizophrenia. A major component of this study is to measure and value the costs of care. Data collection has been completed and data analysis and report writing has commenced.

**Funding source:** *NSW Health  
Department*

**Status:** *Current*

**Acknowledgement:**

1. *Inner City Mental Health Service, Eastern Sydney Area Health Service*



## **A REVIEW OF MEASUREMENT OF QUALITY OF LIFE IN OLDER PEOPLE**

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Glenn Salkeld, Charles Blummer<sup>1</sup>

This review summarises the main measurements of quality of life in older people. It describes the conceptual development of measurement tools, the application of the measures and methodological issues.

**Funding source:** *Department of Public Health, University of Sydney*

**Status:** *Current*

**Acknowledgement:** *1. Department of Public Health and Community Medicine, University of Sydney*

## **COMMUNITARIANISM AND HEALTH**

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Gavin Mooney

Most health economics assumes that values are derived from individuals qua individuals. This project is looking at the application of communitarian ideas to health economics. A paper for the International Conference in Health Economics in Vancouver is being prepared and will be presented in 1996.

**Funding source:** *CHERE core funding*

**Status:** *Current*

## **EQUITY AND HEALTH**

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Gavin Mooney and Stephen Jan

This project is examining different concepts of equity, particularly vertical equity. A survey of NSW health service decision makers is planned.

**Funding status:** *CHERE core funding*

**Status:** *Current*

**Publications/ Report to Date:**

CHERE Discussion Paper No. 28

## **ADEQUACY OF RESOURCES IN ABORIGINAL HEALTH**

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Gavin Mooney, Stephen Jan, Alison Palmer and Virginia Wiseman

This project is examining three features of the economics of Aboriginal health:

- a. the current level of resource consumption of health services by Aborigines
- b. the principles adopted by, for example, the Commonwealth Grants Commission, in allocating resources for Aboriginal health
- c. possible alternative equity principles

**Funding Source:** *NSW Health, Aboriginal Health Branch  
CHERE core funding  
NHMRC*

**Status:** *Current*

**Publications to Date:**

MOONEY G, JAN S, PALMER A and WISEMAN V

Adequacy of resources and development of a funding formula in Aboriginal and Torres Strait Islander health. *Interim report to the Aboriginal and Torres Strait Islander Health Standing Committee, National Health and Medical Research Council.* (1995)

## **COST-EFFECTIVENESS OF FAECAL OCCULT BLOOD TESTING FOR COLORECTAL CANCER IN AUSTRALIA**

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Glenn Salkeld, Graeme Young<sup>1</sup>, Les Irwig<sup>2</sup>, Marion Haas, Paul Glasziou<sup>3</sup>

Evidence of the effectiveness, of compliance with and cost-effectiveness of annual faecal occult blood testing is incomplete. The working party of the Australian Gastroenterology Institute and the Australian Cancer Society do not recommend routine population-based screening. However, they do recommend that pilot screening programs be established to evaluate various approaches. More information on the cost-effectiveness of screening should be available before proceeding to commit resources to pilot projects and any expansion of screening services.

**Funding source:** *CHERE core funding, Department of Public Health and Community Medicine, University of Sydney.*

**Status:** *Completed*

**Reports/Publications to Date:**

TOWLER B, IRWIG L, GLASZIOU P, HAAS M, PLUNKETT A and SALKELD G  
Potential benefits and harms of screening for colorectal cancer. *Australian Journal of Public Health* 1995; 19 (1): 24-8

SALKELD G, YOUNG G, IRWIG L, HAAS M and GLASZIOU P  
Cost-effectiveness analysis of screening by faecal occult blood testing for colorectal cancer in Australia.  
*Australian Journal of Public Health*  
(forthcoming)

**Acknowledgements:**

- 1. Department of Medicine, University of Melbourne.*
- 2. Department of Public Health and Community Medicine, University of Sydney*
- 3. Department of Social & Preventative Medicine, University of Queensland.*



*Glenn Salkeld and Marion Haas*

## **COST-EFFECTIVENESS OF A CVD RISK REDUCTION PROGRAM IN GENERAL PRACTICE**

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Glenn Salkeld, Philayrath Phongsavan<sup>1</sup>, Brian Oldenburg<sup>2</sup>, Magnus Johannesson<sup>3</sup>, Paula Convery, Peita Graham-Clark, Shiela Walker<sup>4</sup> and John Shaw<sup>5</sup>

The aim of the "Fresh Start" program is to diffuse and disseminate printed information and educational videos on CVD risk reduction amongst general practitioners. This in turn "predisposes" GPs to consider changing patient screening practices and encourage patients to adopt a healthier lifestyle. This economic evaluation examines the cost-effectiveness of three dissemination strategies in three Divisions of General Practice in South Western Sydney.

**Funding source:** *General Practice  
Evaluation Program*

**Status:** *Completed*

**Publications/ Reports to date:**

*Final report submitted to the General Practice  
Evaluation Program.*

### **Acknowledgements:**

- 1. Department of Community Medicine, University of NSW*
- 2. Queensland University of Technology*
- 3. Centre for Health Economics, School of Economics, University of Stockholm.*
- 4. National Heart Foundation (NSW Division)*
- 5. Department of Pharmacology, University of Sydney.*

## **IMPROVING THE MANAGEMENT AND HEALTH OUTCOMES OF DYSPERIA**

Johanna Westbrook<sup>1</sup>, Louise Rushworth<sup>2</sup>, Robert Batey<sup>3</sup>, Kerry Goulston<sup>4</sup>, Geoffrey Berry<sup>5</sup>, Rosalie Viney

Dysperia and abdominal pain are among the commonest symptoms suffered by Australians. Investigation of such symptoms involves visits to medical practitioners and the use of diagnostic tests such as endoscopy and barium meal. There is little information about the reasons for and outcomes of such diagnostic testing. Similarly, although the management of peptic ulcer has changed over recent years, there is considerable uncertainty about the most cost-effective management of patients with dyspeptic symptoms. This project investigates current management and outcomes of treatment for patients with dysperia. It will examine the costs and outcomes of alternative paths.

**Funding Source:** *NSW Department of  
Health*

**Status:** *Current*

### **Acknowledgements:**

- 1. School of Health Information Management, Cumberland College.*
- 2. NSW Health Department*
- 3. John Hunter Hospital*
- 4. Royal North Shore Hospital*
- 5. Department of Public Health and Community Medicine, University of Sydney*

## **ILLAWARRAGON: DEVELOPING RESOURCE ALLOCATION PRIORITIES WITHIN AN AREA HEALTH SERVICE**

Rosalie Viney, David Cromwell<sup>1</sup>, John Halsall<sup>1</sup>, Don Hindle<sup>1</sup>, Kathy Eager<sup>1</sup>

The aim of this project was to develop a framework which will assist in rationing health resources. The approach involved the construction of a linear programming model of resource allocation, based on information about the costs and effectiveness of and demand for the available treatments. The model is a decision support system because it assists in analysing alternative options, rather than dictating the solution.

**Funding Source:** DEET  
**Status:** Completed

### ***Publications/Reports to Date:***

CROMWELL D, HALSALL J, VINEY R and HINDLE D

Illawarregon: Development of a model to assist priority setting by an Area Health Service. Summary Report, November 1995.

CROMWELL D, HALSALL J, VINEY R and HINDLE D

Illawarregon: Development of a model to assist priority setting by an Area Health Service. Full Report, November 1995.

**Acknowledgements:** 1. The Centre for Health Service Development, Wollongong University.  
2. Illawarra Area Health Service

## **RELIABILITY OF STANDARD GAMBLE AND TWO-STAGE STANDARD GAMBLE IN THE MEASUREMENT OF HEALTH STATUS UTILITIES**

Janelle Seymour, Alan Shiell and Sue Cameron

The objective of this study is to examine the test re-test reliability of standard gamble (SG) and two-stage standard gamble (2SSG) in a healthy population. This study differs from previous work as it uses a number of different methods of measuring agreement. The general conclusion from this study is that the levels of agreement for both measures of health status utility are modest and that there is no difference between SG and 2SSG. The results of this study also suggest that participants use the interview process to reflect on and clarify their views.

**Funding source:** CHERE core funding  
**Status:** Current

# Education

There has been a greater emphasis on the development of educational programs during 1995. This was the first teaching year of the PHERP speciality centre in health economics. New elective courses have been offered in the Master of Public Health and the existing electives revised to form a coherent speciality stream. In addition, there has been a complete restructuring and revision of health economics in the core component of the MPH which will be taught in 1996.

There has been a significant contribution to the development of the new Graduate Medical Program (GMP). The learning objectives for the GMP reflect a concern for issues of financing, resource allocation, priority setting and ethics.

CHERE's involvement in the Monash Diploma in Health Economics and Evaluation has continued. The first trainee under the NSW Health program was enrolled in that course. The current undergraduate subject offered at the University of Sydney will be revised to become an elective in the Master's program commencing in 1996.

Other health economics teaching provided by CHERE in 1995 included a course for Public Health Officer Trainees, "Health Economics as a Way of Thinking". CHERE staff also ran a seminar on program budgeting, participated in the Management for Clinicians Course at Terrigal by providing a lecture titled "Why do doctors need health economics?" Two short courses "An Introduction to Economic Evaluation" were conducted during the year.

## POSTGRADUATE TRAINING

At the same time, the number of CHERE staff pursuing higher degrees has increased, thereby enhancing the skills and expertise of CHERE itself. In 1995 the following staff were enrolled in higher degrees:

Patsy Kenny, MPH  
Stephen Jan, MEd  
Sue Caleo, Graduate Diploma in Science (Pharmacy)

Madeleine King, PhD (Medical Statistics),  
Marion Haas, PhD (Public Health)  
Alan Shiell, PhD (Economics)  
Glenn Salkeld, PhD (Public Health), Process

Virginia Wiseman also undertook the Distance Learning Course in Health Economics from the University of Tromso, Norway.

## OCCASIONAL SEMINAR SERIES

Jan Abel Olsen - Professor, Department of Economics, University of Tromso, Norway.  
Terry Alchin - Department of Economics, University of Western Sydney  
Sue Carrick - National Breast Cancer Centre  
Matthew Sutton - Centre for Health Economics, University of York, UK

## OVERSEAS VISITORS

Jan Abel Olsen, Professor, Department of Economics, University of Tromso, Norway.  
Mandy Ryan, Research Fellow, Health Economics Research Unit, University of Aberdeen.

## **STUDENTS UNDER SUPERVISION**

CHERE continues to be involved in the supervision of postgraduate students. The following students were supervised by CHERE staff:

### **University of Sydney**

Ms Susan Johnston - MPH Treatise  
The cost effectiveness of intensive case management for people with schizophrenia living in the community.

Dr Robin Godding - MPH Treatise  
The commercialisation of the Australian Government Health Service.

Ms Jenny Niemeyer - MPH Treatise  
The effect of autopsy diagnoses on diagnosis related groups.

Ms Paula Convery - MPH Treatise  
Examination of general practitioner prescribing habits.

Ms Linda Shelley - MPH Treatise  
The cost effectiveness of Lamictal as an add-on therapy in treatment resistant epilepsy.

Mr Rodney Green - MPH Treatise  
Prevention of tap water scalds in young children: a cost effectiveness analysis.

Rick Newton - MPH Treatise  
General practice overservicing and the influence of GP: population density.

Alix Goodwin - MPH Treatise  
Consumer Participation in Health and Decision Making.

Michelle McClennan - MPH Treatise,  
University of Sydney, The feasibility of routine outcome measurement in cardiac surgery.

John Birrell - MPH Treatise,  
University of Sydney, The effect of feedback letters on GP pathology ordering.

Marion Haas - PhD  
Department of Public Health and Community Medicine.

Glenn Salkeld - PhD  
Department of Public Health and Community Medicine.

Robert Curruthers - PhD  
Department of Economics.

Alan Shiell - PhD, Department of Economics.

Peter McIntyre - PhD  
Childhood invasive haemophilus influenza disease in the Sydney region.

### **Other Universities**

Cam Donaldson - PhD, Department of Public Health, University of Aberdeen, Scotland.

Ivar Sonbo Kristiansen - PhD, Department of Social Medicine, University of Tromso, Norway

Mandy Ryan - PhD, Department of Public Health, University of Aberdeen, Scotland.

Sharon Wiley - Master in Nursing, Australian Catholic University.

## **COMMITTEES AND OTHER UNIVERSITY OF SYDNEY SUPPORT**

### **Jane Hall**

Departmental Management Advisory Committee, Department of Public Health and Community Medicine.

Member, Community and Doctor Theme Committee (sub-committee of the Post Graduate medical program curriculum committee).

Attendance, Faculty Heads of Department Meeting.

### **Gavin Mooney**

Member, Teaching Assessment and Curriculum Committee (TACC), Department of Public Health and Community Medicine.

Chair, Assessment Sub-Committee of TACC, Department of Public Health and Community Medicine.

Member, Research Committee, Department of Public Health and Community Medicine.

Deputy Post Graduate Co-ordinator, Department of Public Health and Community Medicine.

### **Glenn Salkeld**

Member, Library Committee, Department of Public Health and Community Medicine.

Member, Community and Doctor Theme Committee (sub-committee of the Post Graduate medical program curriculum committee).

Member, Teaching Assessment and Curriculum Committee (TACC), Department of Public Health and Community Medicine.

### **Alan Shiell**

Member, Teaching Assessment and Curriculum Committee (TACC), Department of Public Health and Community Medicine, Core Working Party.

# Policy Support

CHERE's policy support role is directed primarily to responding to NSW Health requirements. To some extent this is met through undertaking specific projects on commission from NSW Health. It also involves formal advice through representation on committees and working parties and informal consultations. CHERE members are involved at the highest level in NSW Health consultative and advisory roles in the Health Outcomes Forum and the Health Economics Reform Committee. CHERE members are also represented on a number of national committees and working parties.

## COMMITTEES AND WORKING PARTIES

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**Jane Hall** is Chair of the National Breast Cancer Program Evaluation Steering Committee (Commonwealth Department of Human Services and Health) and a member of the Steering Committee for the Evaluation of the National Mental Health Strategy (AHMAC). She is also a member of the Health Outcomes Forum (NSW), the NSW Health Working Party on Teaching and Research and the Health Economics Reform Committee (NSW). During 1995 Jane was a member of the Steering Committee for NSW Economic Statement for Health. She is also a Trustee for the Public Health Education and Research Trust. Jane is on the editorial panels of Health Economics, Health and Social Care in the Community and the NSW Public Health Bulletin.

**Rosalie Viney** is a member of the Health Advancement Standing Committee, National Health and Medical Research Council, a member of the NSW Cancer Expert Working Group and the NSW Diabetes Health Outcomes Project Team. She is also a committee member of the Health Systems Research and Evaluation Special Interest Group, Public Health Association and the NSW Committee to review health promotion. Rosalie is the Secretary of the Australian Health Economics Society.

**Alan Shiell** is a member of the PHRDC Training Awards Committee and the NHMRC Health and Medical Services sub-committee. He is also an advisory group member for the NHMRC Multidisciplinary Teams for the Management of Breast Cancer, the NHMRC Clinical Guidelines and Population Health Outcomes and Costs and RADGAC Priorities for Economic Evaluation. During 1995 Alan was also a member of the AHMAC Working Party on Acute Cardiac Specialties and AHMAC National Funded Centres in Health and Lung Transplantation. Alan is also on the editorial board for the Australian Journal of Public Health.

**Gavin Mooney** is a member of the Economics Sub-committee of the Pharmaceutical Benefits Advisory Committee (PBAC), NHMRC National Health Advisory Committee, NSW Health Working Party on Renal Services and a corresponding member of the Standing Committee on Aboriginal and Torres Strait Islanders Health. He is a founding member of the Centre for Values, Ethics and the Law in Medicine, University of Sydney. Gavin is also on the editorial boards of the International Journal for Health Planning and Management, Health Policy, Journal of Health Economics and Social Science and Medicine.



**Glenn Salkeld** is a member of the Economics Sub-committee of the Pharmaceutical Benefits Advisory Committee (PBAC) and the Australian Health Technology Advisory Committee working party on colorectal cancer screening.

**Marion Haas** is an executive committee member of the NSW Branch of the Australian Public Health Association. During 1995, she was a member of Diabetes Services and Outcomes Project Management Team (NSW Department of Health) and the Reference Group for the evaluation of the Medicine Information Project (Combined Pensioners and Superannuation Association NSW).

# Staff

**Jane Hall** is Director of CHERE, and a senior lecturer at the University of Sydney in the Department of Public Health and Community Medicine. She has been working in health services research and evaluation for over ten years. Research interests include assessment of quality of life in economic evaluation and equity in health and health care and feminist issues in economics. In 1991 Jane was awarded the Australasian Evaluation Society award for her contribution to evaluation in Australia.

**Alan Shiell** is Deputy Director of CHERE (University of Sydney) and Senior Lecturer at the University of Sydney in the Department of Public Health and Community Medicine. Alan joined CHERE from the Centre for Health Economics, in York, UK. His main research interests include outcome measurement and valuation; the value of community in economics; choice and decision making in health care.

**Rosalie Viney** is Deputy Director of CHERE (Westmead). She has a Masters of Economics from the University of Tasmania. Rosalie has worked as a Senior Policy Analyst in the NSW Department of Health where she was involved in the Medicare negotiations, development of the National Health Policy, and the National Health Strategy Review of Outpatients and Emergency Department Services. Her research interests include economic evaluation of health services, health financing and delivery arrangements, the value of information in health care, and the evaluation of health promotion.

**Gavin Mooney** is Professor of Health Economics at the University of Sydney in the Department of Public Health and Community Medicine. Gavin also holds visiting appointments at the University of Aberdeen, Scotland; Tromso University, Norway and Victoria University, New Zealand. He runs a Distance Learning Course in Health Economics for the University of Tromso. His research interests lie in priority setting, medical decision making, equity and what patients and citizens want from their health services.

**Sue Caleo** is a Senior Research Assistant who joined CHERE in September 1995. Sue is a practising community pharmacist who prior to joining CHERE worked in the Pharmacy Department at Sydney University, where she recently completed a Graduate Diploma specialising in health economics. She is currently involved in evaluating a domiciliary chemotherapy program and examining research associated with the cost utility analysis of breast cancer screening programs.

**Sue Cameron** is the Survey Manager at CHERE and has also worked for a number of years within the Department of Community Medicine. During 1995 she worked as part of the team on two funded projects, Domiciliary Chemotherapy and Costs and Quality of Life in the Treatment of Early Stage Breast Cancer. For both these projects Sue conducted interviews of cancer patients in their homes. In the Domiciliary Chemotherapy Project participants evaluated the domiciliary service compared to the usual hospital service. In the Early Stage Breast Cancer Project respondents

evaluated their own quality of life a year after diagnosis and compared it with full health. Sue also assisted with a methodological study examining measurement error associated with Standard Gamble and two-stage Standard Gamble using test re-test, which involved interviewing a number of staff and students from the Department of Public Health and Community Medicine.

**Robert Carruthers** worked as a Research Assistant with CHERE. Robert has an honours degree in economics from Murdoch University. His areas of interest include the measurement and evaluation of health outcomes and efficiency as well as the role of consumer sovereignty and equity in health care.

**Lyn Cooper** is a senior research assistant at CHERE. She began working in April 1995 as the project officer for PBMA. Prior to joining CHERE, Lyn worked as a mathematics teacher and had recently completed her Masters of Public Health. She is currently completing a costing of organ donation in NSW and, in the near future, will assist with the Aboriginal and Torres Strait Islanders' health services project.

**Simon Eckermann** worked as a Senior Research Assistant with CHERE. He is qualified in Economics and Mathematical Statistics and his interests include the provision of aged care, hospital productivity, agency theory and outcome measurement and valuation.

**Pamela Everingham** was the Centre Co-ordinator until December. Pamela provided general administrative support to the department, including financial and asset management, personnel, overseeing publications and organising seminars and workshops. She has completed a Bachelor of Business degree, majoring in Health Administration.

**Marion Haas** joined CHERE in January 1994 as a Research Officer. Marion was a physiotherapist before completing her Masters in Public Health at the University of Sydney and joining the NSW Department of Health's Public Health Officer Training Program in 1991. She is interested in a variety of research areas and the work she is currently involved with includes evaluations of a clinical budgeting pilot project, palliative care in general practice, health promotion strategies to reduce the prevalence of smoking and PBMA. She is currently enrolled in a PhD examining aspects of consumer appraisal of health care.

**Stephen Himpson** came to CHERE in July 1995 on a 3 month placement from the University of York to complete the MSc in Health Economics. Having stayed on at CHERE, he is currently a Senior Research Assistant, working on the Economics of Screening, Medical Decision Making and Program Budgeting and Marginal Analysis.

**Stephen Jan** is a health economist with an interest in equity, Aboriginal health and the role of community preferences in health care decision making. He is currently involved in teaching introductory health economics at the University of Sydney as well as undertaking his own postgraduate studies in economics.

**Patsy Kenny** worked as a registered nurse before joining CHERE in 1990 as a Research Officer. At present she is working on a PHRDC funded project examining costs and quality of life in the treatment of early stage breast cancer. In 1996, she will do the treatise component of the Masters of Public Health degree at the University of Sydney. This will examine clients' perspectives of treatment decision making in early stage breast cancer using both qualitative and quantitative methods.

**Madeleine King** is a medical statistician with CHERE. Madeleine has worked on many projects at CHERE, including obstetric early discharge, reasons why people quit smoking, and the evaluation of domiciliary chemotherapy. She enjoys involvement in all stages of research and is currently working on her PhD on quality of life in cancer, having won a Public Health Research Scholarship from NHMRC.

**Kathleen Latter** was secretary to the Director until October, and provided clerical support for all other staff members. Kathie has over 23 years experience in the hospital system.

**Alison Palmer** was employed as a research assistant in Aboriginal health, first on the NHMRC project from July to September looking at adequacy of resources and thereafter on the NSW Health funded project on improving identification of Aboriginality.

**Janelle Seymour** graduated from the University of Sydney with a BA degree in Economics and Government. After completing an 18 month traineeship in health economics at CHERE she was appointed as senior research assistant in 1993. Janelle is currently working on the cost utility analysis of the treatment of early stage breast cancer and reliability testing of valuation techniques.

**Virginia Wiseman** is a research assistant at CHERE. She has studied economics at Monash University and has worked as a microeconomics tutor. Virginia is interested in issues of equity, valuation of unpaid care and the financing and evaluation of health care in developing countries.

## RESEARCH ASSOCIATES

**Glenn Salkeld** is a lecturer in health economics in the Department of Public Health and Community Medicine, University of Sydney. He has a Diploma in Health Economics from the University of Tromso, MPH (University of Sydney) and is currently studying for a PhD in health economics at the University of Sydney. Glenn, a graduate of the Australian College of Health Service Executives training scheme, has also completed an NHMRC Public Health Training Fellowship in health economics. His research interests include the economics of prevention, quality of life in older people and economic evaluation.

# Publications 1995

## PEER REVIEWED PUBLICATIONS

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Briggs A and Shiell A. Interferon-Alfa in Hepatitis C: Dosage, Costs and Benefits  
*Pharmacoeconomics* (in press)

Caleo S, Benrimoj S, Collins D, Hall J, Lauchlan R and Stewart K  
A cost analysis of pharmacists' interventions with dispensed medicines.  
*Australian Pharmacist* (in press)

Haas M, Rushworth RL and Rob M  
Health services and the elderly: an evaluation of utilisation data.  
*Australian Journal on Ageing*, Volume 14 No. 4, November 1995

Hall J  
The challenge of health outcomes. *Journal of Quality in Clinical Practice* (in press)

Hall J  
Consumer utility, social welfare and genetic testing. A response to "Genetic testing: an economic and contractarian analysis".  
*Journal of Health Economics* (in press)

Hawe P and Shiell A.  
Preserving innovation under increasing accountability pressures: the health promotion investment portfolio approach. *Health Promotion Journal of Australia*, 1995, 5(2), 4-9

Jan S  
How community preferences can more effectively shape equity policy. *Critical Public Health* (in press)

Jan S and Wiseman V  
Resource allocation and vertical equity  
*Australian Journal of Public Health*, December 1995 (in press)

King M, Dobson A and Harnett P  
A comparison of two quality-of-life questionnaires for cancer clinical trials: the Functional Living Index - Cancer (FLIC) and the Quality of Life Questionnaire Core module (QLQ-C30) *Journal of Clinical Epidemiology* (in press)

Madden L, Hussey R, Mooney G and Church E  
Public health and economics in tandem: programme budgeting, marginal analysis and priority setting in practice. *Health Policy*, 1995, 33, 161-168.

Mant A, King M, Saunders N, Pond D, Goode E and Hewitt H  
Four-year follow-up of mortality and sleep-related respiratory disturbance in non-demented seniors.  
*Sleep* 1995; 18 (6): 433-438.

Mooney G  
Efficiency in health care: just health gains?  
*Australian Journal of Public Health*, 19, 4, 330 -335, 1995.

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Equity in health care beyond 2000, *Critical Public Health*, 1995, 6, 1, 37-43.

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What can the Japanese learn from international health service reforms?  
*Journal of the Health Service Administrators* (in press) (In Japanese)

Mooney G  
Vertical equity: some considerations arising from Aboriginal health. *Health Economics* (in press)

- Mooney G  
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*Australian and New Zealand Journal of Public Health*, 20 (1), 9 (in press)
- Mooney G, Jan S and Wiseman V  
Examining preferences for allocating health care gains.  
*Health Care Analysis*, 3 138, 1-5, 1995.
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A community study of snoring and sleep-disordered breathing. I: Prevalence and risk factors.  
*American Journal of Respiratory Critical Care Medicine* 1995; 152 (2): 711- 716.
- Olson L, King M, Hensley M and Saunders N  
A community study of snoring and sleep-disordered breathing. II: health outcomes.  
*American Journal of Respiratory Critical Care Medicine* 1995; 152 (2): 711- 716.
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A community study of snoring and sleep-disordered breathing. III: Symptoms.  
*American Journal of Respiratory Critical Care Medicine* 1995; 152 (2): 707 - 710.
- Posnett J and Jan S  
Indirect costs: valuing unpaid inputs into health care. *Health Economics* (in press)
- Richardson J, Hall J and Salkeld G  
The measurement of utility in multiphase health states.  
*International Journal of Technology Assessment in Health Care* (in press)
- Ross J  
The use of economic evaluation in health care; Australian decision makers' perceptions  
*Health Policy*, 1995, 31, 2, 103- 110.
- Salkeld G, Davey P, Arnold G  
A critical review of health-related economic evaluations in Australia: implications for health policy. *Health Policy*, 1995, 31, 2 111-125.
- Salkeld G, Young G, Irwig L, Haas M and Glasziou P  
Cost-effectiveness analysis of screening by faecal occult blood testing for colorectal cancer in Australia.  
*Australian Journal of Public Health* (forthcoming)
- Scott A and Hall J  
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*Health Policy* 1995 31: 183-195.
- Scott A, Shiell A and King M  
Is general practitioner decision making associated with patient socio-economic status?  
*Social Science and Medicine* (in press)
- Shiell, A  
What's in a name? The economics of burden of illness studies. *Australian Journal on Ageing*, 1995, 14, 1, 6-7.
- Smith RD, Jan S and Shiell A  
Efficiency considerations in the expansion of radiation therapy services.  
*International Journal of Radiation Oncology, Biology & Physics*, 1995, 31 (2) 379 - 385.
- Smith W, Chey T, Jalaludin B, Salkeld G and Capon T  
Increasing response rates in telephone surveys: a randomised trial.  
*Journal of Public Health Medicine*, 1995, 17; 1:33-38
- Taylor R and Salkeld G  
Health care expenditure and life expectancy in Australia: how do we compare?  
*Australian Journal of Public Health* (forthcoming)
- Towler B, Irwig L, Glasziou P, Haas M, Salkeld G.  
The potential benefits and harms of screening for colorectal cancer. *Australian Journal of Public Health*, 1995, 19:24-8

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Cromwell D, Viney R and Halsall J  
Illawarregon: research into using health  
outcomes for resource allocation.  
*Health Outcomes Bulletin*, 1995, 5: 4-9.

Haas M  
Study design. *Australian Physiotherapy  
Association, NSW Bulletin*. June 1995

Haas M  
Economic evaluation. *Australian  
Physiotherapy Association, NSW Bulletin*.  
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Hall J  
If casemix is the answer, what is the question?  
*Hospital and Health Care*. October 1995,  
36-38.

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Health Policy an introduction - book review  
*Medical Journal of Australia*, 1995, 163, 209.

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change by Richard G. Brooks.  
*Australian Journal of Public Health* 19, 2, 219  
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Kenny P  
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*ACHSE Newsletter*, June 1995

Mooney G  
The OECD doctor checks out our health  
system. *Health Cover*, 5, 4, 1995, 11-12.

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Book review. Social dimensions of health and  
disease. New Zealand perspectives by Spicer  
et al (eds); Whaiora: Maori health  
development by Mason Durie, *Australian  
Journal of Public Health*, 19, 3, 318-319,  
1995.

Mooney G  
What sort of future health care system do we  
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Mooney G and Cumming J  
Health gains: an economics perspective.  
*Public Sector*, 1995, 17, 4, 19-22.

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Inequality by P Saunders. *Health Economics*  
1995, 4, 74-5

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The economics of privatisation. *New Doctor*  
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Program budgeting and marginal analysis; a  
guide to resource allocation. *NSW Public  
Health Bulletin*, 1995, 6:29-30, 32

## BOOKS, CHAPTERS IN BOOKS

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Hall J  
The economic burden of disease; setting  
priorities; Introduction to economic  
evaluation; Methods of costing; Assessing  
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(eds) *Handbook of Public Health Methods*,  
McGraw-Hill. (forthcoming)

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The practice of economic evaluation in  
Australia in Selby Smith C and Drummond M  
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Health Care*. Australian Government Printing  
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University Press, May 1995.

Mooney G

Case-mix funding: some unanswered questions. In Harris A (ed) *Economics and Health 1994. Australian Studies in Health Service Administration*, University of New South Wales, Sydney.

Mooney G and Leeder S

Needs assessment, setting standards and effectiveness. In R Detels, W Holland, J McEwen and Omenn GS (eds) *Oxford Textbook in Public Health*, Third Edition, Oxford University Press (in press).

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The economic aspects of interferon, in R Stuart-Harris and R. Penny (eds) *The Clinical Application of interferons*, Prentice Hall, London (in press).

Viney, R

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## **PUBLISHED CONFERENCE ABSTRACTS AND CONFERENCE PROCEEDINGS**

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Caleo S, Benrimoj, S.I, Ausburn H, Baume P, Collins D, Hall J, Lauchlan R, Stewart K

Changes in therapy as a result of Community Pharmacists. Proactive Clinical Interventions with the Pharmaceutical Benefits Scheme. *Australian Pharmacist*, July 1995.

King MT

Clinical interpretations and sample size estimates for a quality of life questionnaire, the QLQ-C30. Abstracts and Programme of the International Society for Quality of Life 2nd Annual Meeting, 1995. *Quality of Life* 1995; 4(5): 448.

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A comparison of two quality-of-life questionnaires for cancer clinical trials: the Functional Living Index - Cancer (FLIC) and the Quality of Life Questionnaire Core module (QLQ-C30). *Proceedings and Program of the American Society of Clinical Oncology Annual Scientific Meeting*, 1995; 14: 504.

Should we screen for colorectal cancer? A case study in the contribution of economics and clinical medicine to health care policy. In Harris A (ed), *Economics and Health: 1995. Proceedings of the seventeenth Australian Conference of Health Economists*. Australian Studies in Health Services Administration, School of Health Services Management, University of New South Wales (forthcoming)

Shiell A

Commentary on Nord E et al, Do Australians want their health system to maximise health? In Harris A (ed) *Economics and Health 1994*, Proceedings of the sixteenth Australian Conference of Health Economists 1995, School of Health Services Management, University of New South Wales.

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Health Economics Research and Evaluation: the Implications of Industry Sponsored Research Ch 11:136 -147 *Economic Evaluation in Australian Health Care*. Selby-Smith C and Drummond MF (eds), Australian Government Publishing Service 1995.

## **CHERE DISCUSSION PAPERS**

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Seymour J, Newell D and Shiell A

The Quiet Revolution  
CHERE Discussion Paper 27.

Mooney G and Jan S

Vertical equity and Aboriginal health  
CHERE Discussion Paper 28.

Posnett J and Jan S

The principles underlying the valuation of unpaid inputs into health care.  
CHERE Discussion Paper 29.



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Evaluation of the Western Sydney Palliative Care General Practice Program. September 1995. Report to the Western Sydney Area Health Service.

Jan S  
Feasibility issues involved in the economic evaluation of the nurse practitioner pilot projects. Report to NSW Department of Health.

Mooney G  
Maori Health and Equity, Ministry of Health, Wellington, 1995.

Mooney G, Jan S, Palmer A and Wiseman V  
Interim Report to the Aboriginal and Torres Strait Islander Health Standing Committee, National Health and Medical Research Council: Adequacy of Resources and Development of a Funding Formula in Aboriginal and Torres Strait Islander Health. October 1995

Salkeld G, Phongsaven P, Oldenburg B and Graham-Clarke.  
The cost-effectiveness of a cardio-vascular risk reduction program in General Practice

Salkeld G  
Cost and outcomes of hospital-based cancer registries.  
Report for the Australian Cancer Society to the Commonwealth Department of Human Services and Health.

Viney R, Haas M and Seymour J  
Seeing through the smoke: using economic evaluation to allocate health promotion resources to prevent smoking.  
Report to NSW Health Department

Wiseman V and Hall J  
Care givers: The Invisible Labourforce.  
Report to the LIPID Cost-Effectiveness Research Group.

# Seminars and Presentations

## **Marion Haas**

Data for PBMA: what is required?  
PBMA Introductory Workshop, University of Sydney, May 12 1995.

Issues of ethics and economics in critical care.  
Australian Confederation of Critical Care Nurses.  
Cambelltown Hospital, June 26 1995.

Health Services Research.  
Presentation to the Hydrotherapy Special Interest Group of the Australian Physiotherapy Association, July 1995.

Delivering a quality service: can Health Economics help?  
Presentation to the Northern Sydney Area Health Service Senior Management Seminar, August 1995.

Career prospects for physiotherapists.  
Presentation to the Australian Physiotherapy Association, August 1995.

Quality Assurance and evaluation of physiotherapy.  
Presentation to the Paediatric Special Interest Group of the Australian Physiotherapy Association, August 1995.

Effectiveness research in physiotherapy.  
Presentation to Sports Physiotherapy Special Interest Group, August 1995.

Process and impact evaluation of a palliative care general practice program.

Presentation to the Public Health Association annual conference, Cairns, September 1995.

## **Marion Haas and Glen Salkeld**

Population screening for colorectal cancer: where are we up to?  
Liverpool Hospital Cancer Centre, April 22 1995.

## **Marion Haas and S. Murphy**

The evaluation of clinical budgeting. Allied Health Heads of Department Meeting, Westmead Hospital, June 14 1995.

## **Jane Hall**

Health Economics for Managers: ACHSE Student Forum. February 1995.

Health Outcomes - cost and benefits. Keynote Address. Health Outcomes at the grassroots. Wagga Wagga March 1995.

The implications of health outcomes for clinical practice.  
Royal Prince Alfred Hospital Medical Oncology Grand Rounds, July 1995 Sydney.

Invisible costs, uncounted gains: women and breast cancer.  
Second Symposium of the Paracelsus Foundation, October 1995 Einsiedeln, Switzerland (invited speaker).

The valuation of informal care: a feminist issue? Paper presented to the Third European Conference on Health Economics. Stockholm, Sweden 1995.

**Jane Hall and Rosalie Viney**

Calling the tune in commissioned research: a new slant on the ethics of resource allocation. University of Sydney, Department of Public Health and Community Medicine Seminar, April 1995.

**Jane Hall, Rosalie Viney and Virginia Wiseman**

Unorthodox, troublesome, dangerous and disobedient: a feminist perspective on health economics. Australian Conference on Health Economics, Brisbane, 1995.

**Stephen Jan**

Vertical Equity and Aboriginal Health AHES conference, July 1995.

Interactive session on resource allocation in Aboriginal Health - Public Health Association Conference September 1995

**Patsy Kenny**

Evaluating team midwifery - the client's perspective, Public Health Association of Australia 27th Annual Conference, Cairns 24-27th September.

**Madeleine King**

Clinical interpretations and sample size estimates for a quality of life questionnaire, the QLQ-C30., International Society for Quality of Life 2nd Annual Meeting, Montreal, Canada, 15-17th October 1995 and at the 1995 Clinical Oncology Society of Australia Mid-Year Meeting - Quality of Life, Alice Springs 5-6th July 1995.

Health outcomes and quality of life Measurement Conference, Canberra 14-15th August 1995, invited speaker.

A comparison of two quality-of-life questionnaires for cancer clinical trials: the Functional Living Index - Cancer (FLIC) and the Quality of Life Questionnaire Core module (QLQ-C30).

Poster presentation at the 1995 American Society of Clinical Oncology Annual Scientific Meeting, Los Angeles 20 - 23 May 1995.

Clinical interpretations and sample size estimates for a quality of life questionnaire, the QLQ-C30. Westmead Hospital Statistics and Epidemiology Group monthly meeting 16th June 1995.

Quality of Life.

University of Sydney, Department of Public Health and Community Medicine weekly research seminar, 22nd May 1995.

**Gavin Mooney**

Health outcomes financing. Workshop on Health Service Financing, Canberra, 27 January 1995.

Key Note Address: Equity and efficiency in rural health care. Rural Health Alliance Conference, Mount Beauty, 3 February 1995.

Health care lessons from Australia, Seminar for Norwegian Parliamentarians, Sydney, 17 February 1995.

Indigenous health and vertical equity, University of Tromso, 27 March 1995.

Equity in the economics of health care, Department of Economics, Sydney University, 18 May 1995.

Adequacy of resources in Aboriginal and Torres Strait Islanders' health, NHMRC Council, 8 June 1995.

Economic issues in social justice, Social Justice Seminar, Westmead Hospital, 19 June 1995.

Health promotion: whose health is it anyway? University of Sydney, Department of Public Health and Community Medicine Seminar, 26 July 1995.

Economic issues in health care, Chinese health service planners' seminar, NSW School of Health Services Management, 28 July 1995.

Vertical equity in Aboriginal health, Public Health Association Conference, Cairns, 26 September 1995.

Key Note Address: An international perspective on health services reform - is it taking us where we want to go? Japanese Health Service Administrators' Conference, Tokyo, 20 October 1995.

The economics of health care reform, Japanese Health Economics Forum, Tokyo, 21 October 1995.

Economics of funding issues in Aboriginal health, Northern Territory Public Accounts Committee, Darwin, 25 October 1995.

Program budgeting in asthma services, Health Outcomes Forum in Asthma, Albury, 16 November 1995.

Health promotion: what is it about? Health Promotion Conference, Sydney, 5 December 1995.

Aboriginality and resource allocation in NSW, Aboriginal Health Resource Cooperative, Sydney, 5 December 1995.

Resource allocation in funding for health services for Aborigines, NACCHO Conference, Broome, 15 December 1995.

#### **Gavin Mooney and Stephen Jan**

Vertical equity in Aboriginal health, Australian Conference of Health Economists, Brisbane, July 1995.

#### **Glenn Salkeld**

Economics of Mental Health. Seminar, Department of Community Medicine, University of Tromso, Tromso, Norway, September 1995.

Prevention, is it just health? Seminar, Health Economics Research Unit, University of Aberdeen, Aberdeen, Scotland, October 1995.

Utility in anticipation in preventive care. Seminar, Centre for Health Economics Research and Evaluation, Westmead Hospital, October 1995.

#### **Janelle Seymour**

QALYs, risk - adjusted QALYs and HYE: is there a difference? AHES Conference.

In a quandary over QALYs - Public Health Association Conference September 1995.

#### **Alan Shiell**

QALYs, risk - adjusted QALYs and HYE: is there a difference?

McMaster University - May 1995

UK HESG - July 1995

Community development and the challenge to economic evaluation

Brunel University, June 1995

Newcastle University, July 1995

PHA Conference, September 1995

## **Rosalie Viney**

Assessing the impact of casemix funding models on health promotion activities.  
Seventh National Health Promotion Conference Workshop, Brisbane, February 1995.

The economics of screening: prostate cancer.  
Liverpool Hospital Cancer Centre, April 22nd 1995.

Program Budgeting and Marginal Analysis in practice.  
PBMA Introductory Workshop. University of Sydney, May 12 1995.

Priority Setting, resource allocation and outcomes at the margin  
Queensland Public Health Economics Workshop, Brisbane, July 1995.

Program Budgeting and Marginal Analysis.  
NSW Community Health Forum Seminar, October 1995.

## **Rosalie Viney, Marion Haas and Janelle Seymour**

Economic Evaluation and health promotion: measuring elusive benefits.  
National Health Promotion Conference, Brisbane, February 1995.

## **Rosalie Viney, David Cromwell, John Halsall and Don Hindle**

The Illawarregon Project: using health outcome information to assist resource allocation.  
Health Outcomes and Quality of Life Conference, August 1995.

## **Virginia Wiseman**

Interactive session on resource allocation in Aboriginal health: Public Health Association Conference, September 1995

LIPID Carer Burden sub-study - presented at Prince Henry Hospital, December 1995.

***CHERE***

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