

Annual Report 1996

Centre

for

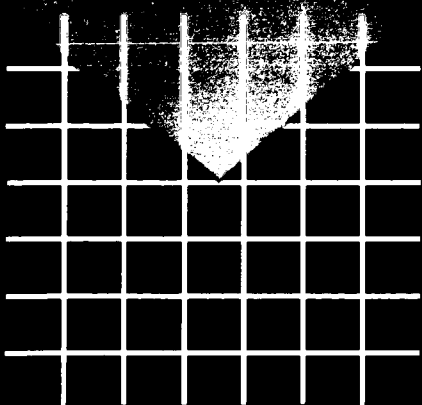
Health

Economics

Research

and

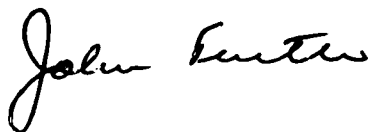
Evaluation



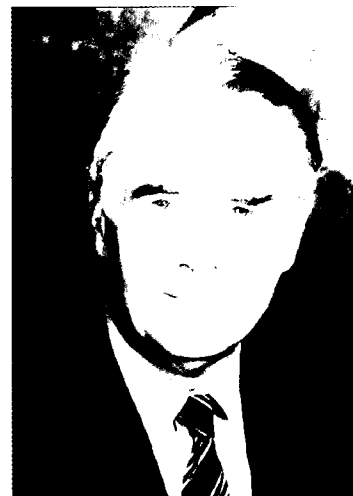
A Message from the Chairman

It is a pleasure to join the Advisory Board and to assume the role of the Chairman following Stephen Leeder. The new structure brings together representatives of the University of Sydney with Professor Young as Pro-Vice Chancellor of Health Sciences, Professor Stephen Leeder, Dean of the Faculty of Medicine, together with Dr Diana Horvath, Chief Executive Officer of the Central Sydney Area Health Service and Mr Peter Burrows, President of the Medical Foundation of the University of Sydney and a stockbroker. The Director of CHERE, Associate Professor Jane Hall complements these skills from University, Health and the Private Sector.

The new Advisory Board moved rapidly to establish CHERE's leadership role in health economics research and to link its activities with the Faculty of Medicine and State and Federal Departments of Health. An important initiative has been the formation of the CHERE Foundation recently approved by the Senate of the University of Sydney which will facilitate management and financial independence of CHERE within the University structure. Health care financing and delivery are changing rapidly throughout the world and there is a pressing need for stringent management to ensure high quality care with optimum use of available resources. The Centre for Health Economics Research and Evaluation will play a vital role in this evolutionary process as a centre of excellence contributing to the development of the theory of health economics, as a centre for the analysis and evaluation of health policy, and through teaching the new cohort of health economists, managers and policy makers.



Professor J Turtle AO



Contents

Director's Report	1
Research	4
Education	16
Policy Support	19
Visitors	21
Publications	22
Conference Papers, Seminars and Other Presentations	27
Advisory Board	31
Staff	32

Director's Report

1996 has been a year of both consolidation and change. The Centre has appointed a new Advisory Board, which we are very pleased that Professor John Turtle has agreed to chair.

In November, CHERE transferred from its base in the Department of Public Health and Community Medicine at Westmead Hospital to newly fitted out premises on the University of Sydney Mallett Street Campus. The new offices have provided us with comfortable working space, our own meeting rooms, the capacity to organise our collection of books and journals and, at last, room to expand. With the main CHERE offices on the University campus, the move has consolidated the two locations for CHERE's activities.

The change of location has also brought other changes for the Centre. CHERE funding is now organised through the Central Sydney Area Health Service and staff are now employed through Central Sydney. We have established new salary and career structures, with clear criteria and arrangements for promotion.

The Centre is maintaining its links with Western Sydney AHS and continues to be committed to research activities with clinicians and others at Westmead Hospital. We are also pleased to be part of Central Sydney AHS. We have already begun to work with Central Sydney on some projects and look forward to the opportunity to develop further research links with units within the Area during 1997.

While the year has brought a great deal of change, it has also been a year in which many of our teaching and research activities have been consolidated in a number of ways.



Jane Hall

RESEARCH

The strategic direction of CHERE's research work, both conceptual and policy based, is broadly focussed on the investigation of the contribution of health to social welfare. During 1996 our work was organised around three strategic research themes: development and application of methods of economic evaluation; investigation of the determinants of health and wellbeing; and the financing, organisation and planning of health services. The identification of strategic themes helps to shape the direction of the Centre's future work.

Development in the methods of economic evaluation encompasses work in measuring and valuing quality of life and non-health outcomes such as information and patient satisfaction. Research into the determinants of health includes investigation of issues of equity and understanding the role of community development. In terms of financing and organisation our work is focussed on priority setting and incentives.

We are increasingly recognising the value and importance of combining qualitative and quantitative approaches to answering research questions in these areas. The Centre's expertise in qualitative research is developing, and a range of projects which involve qualitative methods are now underway.

New projects funded this year included a content and discourse analysis of health care resource allocation in the media, a review of contemporary and emerging issues in public health commissioned by the Commonwealth Department of Health and Family Services, a review of enhanced cervical cancer screening methods commissioned by the Australian Health Technology Advisory Council and an economic evaluation of screening for tuberculosis.

EDUCATION

There has also been much consolidation in our education and training activities. This was the second year of the PHERP speciality centre program, and all the proposed new electives in health economics were offered in the Masters of Public Health Program. As part of the revision of the MPH program, the core unit in Introductory Health Economics has undergone major change to make it fully integrated with the other components of core. Further revision will undoubtedly be necessary as more changes to Masters degrees are implemented. However, at this stage the future of the PHERP program is uncertain.

This year also saw the first offering of Health Economics as a unit in the Master of Economics course work at the University of Sydney. A major benefit of this development is that it has enabled the health economists training in the NSW Health training program to study at the University of Sydney, rather than having to relocate temporarily to Melbourne. Three

new entrants to the training program commenced their academic study in 1996 and the first trainee commenced his practical work.

POLICY SUPPORT

The Centre continues to be actively involved in policy development and in contributing to the policy process at area, state and national level. Senior staff at CHERE contributed to the NHMRC policy process through participation on Council, Advisory Committees and Standing Committees. CHERE staff were also involved in a range of NSW Health Department policy committees, including the Health Economic Reform Committee, the Working Party on Teaching and Research, the Investing in Effective Health Care Working Party and the Advisory Committee for the NSW Cervical Screening Program.

In addition, the commissioned work we undertake reflects our commitment to using health economics to assist the policy process in NSW and nationally. A major activity in this area during 1996 was the work on the use of program budgeting and marginal analysis to assist priority setting and resource allocation in NSW Area Health Services. Other policy related projects included the development of a framework for evaluating delivery of less urgent ambulatory care in a hospital setting, and an evaluation of the cost of organ and tissue donation.

VISITORS

Stephen Birch, Professor of Health Economics at McMaster University, Hamilton, Canada, spent a sabbatical year with the Centre. His own interests in equity and health inequalities helped to stimulate ideas and papers within the Centre. He contributed enormously to the strategic planning of the Centre. In addition, he was

always a willing participant in the discussion of research topics and their interface with policy and practice.

CHERE played host to a number of international visitors, including Robert Evans, Professor of Economics, McMaster University, Alan Williams, Professor of Health Economics, Centre for Health Economics, University of York and Toni Ashton, Senior Lecturer in Health Economics, Department of Community Health, Auckland School of Medicine.

PROFESSIONAL DEVELOPMENT

The International Health Economics Association held its first meeting in Vancouver, Canada in May. CHERE was well represented with papers presented by Jane Hall, Marion Haas, Janelle Seymour, Alan Shiell and Gavin Mooney. This exposure to international health economics gave us a sense of quiet satisfaction with the quality and topicality of the work being done at CHERE.

STAFF MOVEMENTS

It has been a great pleasure to welcome Karen Gerard back to the staff of the Centre. Karen was instrumental in the initial development of the Centre. She left just as CHERE was getting off the ground and I am very pleased that she has decided to return once again to Australia.

Rosalie Viney has returned to full time work after a period of maternity leave. There are now two Deputy Director Positions within the Centre, one filled by Rosalie and the other by Marion Haas.

Stephen Jan and Virginia Wiseman left CHERE to join other research projects in the University Department of Public Health and Community Medicine. Sue Cameron, a member of CHERE since its inception, left to pursue her many other interests.

ACKNOWLEDGEMENTS

This year has been challenging as the external changes in the Centre location and letter-head have been matched by internal re-organisation and staff movements. Marion Haas and Rosalie Viney have been remarkably cheerful throughout, as well as careful and hardworking in their roles as Deputy, although that title fails to capture the range and extent of support that they both provide. I am grateful to them and to all of the staff in the Centre for their loyalty and effort over the past year.

Special thanks from the Centre go to all those involved in all of the activities associated with the move; Professor John Young who kept finding ways to make it possible, Dr Diana Horvath who continued to insist all was possible, and Mr Michael Wallace who made it happen. Professor Stephen Leeder continues to be the mentor and guardian of CHERE in very many ways. I would also like to thank Professor John Turtle for all his support and interest, as well as practical help in strengthening the Centre.

CHERE is grateful, too, to all the clinicians and policymakers who collaborate in our various projects. They are acknowledged individually in the research project reports.

Finally, our colleagues in NSW Health. Mr John Wyn Owen, until recently Director General, has been enormously supportive of research and its links to the policy process in NSW and that has changed the climate for research groups in NSW. Our thanks also to the new Director General, Mr Michael Reid, the Chief Health Officer, Dr George Rubin, and the Director of Research and Development, Dr Michael Frommer for their continued support.

Research

CHERE has identified a number of strategic themes in research. Overall, our research is directed towards developing health economics, by broadening its framework and seeking depth in its analytic tools. The Centre's research strategy can be summarised as exploring how health and health care contribute to individual well being and to social welfare. To do this we use the analytical framework and tools of economics but draw also on complementary qualitative and quantitative methods.

The three strategic themes are:

Development and application of economic evaluation methods, which encompass the development of the theoretical constructs which underlie economic evaluation, the development and validation of methods of measurement and the application of those methods.

Investigation of the determinants of health and variations in health status, which recognises that social and economic factors not only affect individual health status directly but also indirectly, by modifying the effect of other factors which influence health. This understanding is important in investigating differences in health across social groups, and in the development of health services which are equitable as well as efficient.

Finance, organisation and planning of health services, which involves systematic evaluation of alternative methods of funding and delivering services in terms of their impact on efficiency and equity. This includes the effect of incentives on system and provider behaviour, strategies for resource allocation and consideration of the interface between research, policy, planning and delivery.

ISSUES ASSOCIATED WITH CLIENTS' PARTICIPATION IN TREATMENT DECISIONS FOR EARLY STAGE BREAST CANCER: A QUALITATIVE APPROACH

Sue Quine¹, Alan Shiell, Patsy Kenny, Sue Cameron.

This project is a qualitative assessment of clients' perceptions of how treatment choices are made. The purpose of the study is to augment a larger quantitative study of treatment choice and quality of life. The client group is a sub-sample of 40 women who have been treated for early stage breast cancer and who participated

in the quantitative study. They were interviewed in order to understand more fully their experiences of the decision process, their preferences for participation in treatment decisions and their information needs.

1. DPH&CM University of Sydney

Funding source: NSW Cancer Council
Status: Current

ANALYSIS OF REPORTING OF HEALTH RESOURCE ALLOCATION IN THE QUALITY PRESS

Marion Haas, Simon Chapman¹, Andrew Ferguson, Jane Hall, Rosalie Viney

The aim of this project is to use the techniques of content and discourse analysis to describe how resource allocation issues in health are picked up by the media and how the media shapes the stories. The way they are reported and discussed in the media helps to shape our views and influence the debate. Influential stakeholders – doctor groups, private insurers and governments – use the media to act as a forum for their points of view.

All articles concerning resource allocation issues in health were collected from six leading newspapers and magazines across Australia during 1996. In total, over 1100 articles were found. These are now being analysed. As well, CD-ROM technology was used to search 3 of these publications for the previous 4 years. This allows recurring themes and issues to be traced over a number of years.

1. DPH&CM University of Sydney

Funding source: NHMRC

Status: Current



The media project team: Marion Haas and Andrew Ferguson.

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

Marion Haas, Jane Hall, Sharelle Murphy¹, Elizabeth Iskander¹, Michael Price²

The major objective of this pilot project was 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 was 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 has 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.

1. Department of Allied Health, Westmead Hospital

2. Department of Geriatrics, Westmead Hospital

Funding source: CHERE core funding

Status: Completed

Publications/Report:

HAAS M, HALL J.

Clinical budgeting for Allied Health: some options and issues in a hospital setting. CHERE Discussion Paper No. 30

MURPHY S, AISBETT CW, PRICE M, ISKANDER E, HAAS M.

A clinical budgeting project within allied health. Speech Pathology. *A report to Westmead Hospital.*

CURRENT AND EMERGING ISSUES IN PUBLIC HEALTH AND THEIR IMPLICATIONS FOR POLICY

Jane Hall, Marion Haas, Steve Leeder¹

The aim of this project was to identify current and emerging issues for public health; to discuss these issues in a critical way, using published literature and expert opinion; to describe the linkages between the issues in such a way that the important interdependence between them is clarified; and finally to point the way to future public health action, via a framework for identifying, monitoring and prioritising public health issues.

1. DPH&CM, University of Sydney

Funding source: Department of Health and Family Services

Status: Completed

Publications/reports to date:

HALL J, HAAS M, LEEDER S.

Current and emerging issues and their implications for policy. *A report to the Department of Health and Family Services.*



PAP smear screening devices project team: Marion Haas, Sue Caleo and Rosalie Viney.

REVIEW OF SEMI-AUTOMATED AND AUTOMATED SCREENING DEVICES FOR THE ENHANCEMENT OF PAP SMEAR SCREENING METHODS

Rosalie Viney, Marion Haas, Sue Caleo, Jane Hall

This project involved reviewing the scientific literature concerning the performance of automated and semi-automated devices available for enhancement of Papanicolaou (Pap) smear screening methods. A few of the devices have recently been given approval by the United States Food and Drug Authority (FDA) for re-screening and screening of Pap smears. These devices are now being marketed in Australia and there is discussion about the potential for such devices to improve the accuracy of cervical cancer screening. The evaluation involved assessment of the evidence concerning sensitivity and specificity, any other relevant information about the performance of the devices and information about costs and cost-effectiveness. Additionally, an estimate was made of the potential costs of introducing these devices as part of the national screening program.

Funding Source: Department of Health and Family Services. Australian Health Technology Advisory Committee (AHTAC)

Status: Completed

Acknowledgements: Dr Les Irwig (DPH&CM)

Publications/Reports to date:

VINEY R, HAAS M, CALEO S, HALL J. Review of Automated and Semi-Automated Screening Devices for the Enhancement of Pap Smear Screening Methods. *Final report submitted to AHTAC.*

ECONOMIC EVALUATION OF SCREENING FOR TUBERCULOSIS

Jane Hall and John Slater

An increase in tuberculosis infection, particularly in migrant communities, has been observed. This study analyses the costs and benefits, in terms of number of cases prevented and number of deaths prevented, of alternative screening strategies.

Funding source: Central Sydney Area Health Service Community Health Services

Status: Current

Acknowledgments: Dr Garth Alperstein and the Community Health Service, Central Sydney

MEASUREMENT AND VALUATION OF INFORMAL CARE

Jane Hall, Rosalie Viney, Virginia Wiseman, John Slater

This project aims to review systematically the extent to which informal care has been incorporated into economic evaluation of health care interventions. The Medline data base was used to extract a random sample of all economic evaluations published between 1986 and 1995. These studies have been critically appraised by the research team using a checklist which included assessment of whether informal care was relevant to the intervention, whether the costs of informal care were identified, measured or valued in the analysis, and whether health effects on carers were considered in the analysis. The data from the critical appraisal are currently being analysed.

Funding Source: CHERE core funding/ NSW Health Economics Training Program

Status: Current

A RANDOMISED TRIAL OF THE EFFECTS OF EDUCATION AND A PROFESSIONAL ALLOWANCE ON CLINICAL INTERVENTION RATES IN COMMUNITY PHARMACY

Stephen Himpson

This project involved the provision of health economics advice and support to a study being undertaken by the Department of Pharmacy at the University of Sydney. The study was attempting to assess how education and financial incentives would alter the behaviour of retail pharmacists in respect of dispensing prescriptions by encouraging intervention to improve health outcomes.

Funding source: Commonwealth Dept of Health and Family Services

Status: Completed

Publications/Reports to date: An economic evaluation of the effects of education and a professional allowance on clinical intervention rates in community pharmacy. *Report to the Department of Pharmacy.*

THE COST OF ORGAN AND TISSUE AND DONATION

Lyn Cooper and Jane Hall

The retrieval of organs for donation incurs costs to both the hospital in which the donor is treated and the hospital in which the transplant surgery will be carried out. This study was commissioned by the NSW Blood Bank to provide a basis for the negotiation of appropriate reimbursement.

Funding source: NSW Health

Status: Completed

Acknowledgments: Dr Jeremy Chapman and the NSW Blood Bank

Publications/Report to date:

COOPER L, HALL J.

The cost of organ and tissue donation in NSW. *Report to NSW Health Department.*

ECONOMICS OF COMMUNITY DEVELOPMENT

Alan Shiell, Penny Hawe

Economic evaluation of health promotion interventions poses few major difficulties when the theoretical approach of the program and the evaluation of cost and effect are confined within the context of the individual. Community development programs pose a special challenge as they usually have the community and not the individual as the focus. This project examined the different meanings attributed to the notions of community in economics and in health promotion and considered the implications of these differences for programme evaluation.

Funding source: CHERE core funding

Status: Completed

Publications/Reports to date:

SHIELL A, HAWE, P.

Health promotion, community development and the tyranny of individualism. *Health Economics*, 5, 241-7, 1996.

ECONOMIC EVALUATION OF MEASLES OUTBREAK CONTROL STRATEGIES

Alan Shiell, Louisa Jorm¹, Robert Carruthers², Gerard Fitzsimmons³

A recent outbreak of measles in western Sydney provided the opportunity to evaluate the economic efficiency of a number of outbreak control strategies. The costs and number of cases prevented were modelled for each of six possible strategies. The marginal cost per case prevented increases with coverage. Decisions about which children to target and whether to conduct school-based clinics will be influenced by local circumstances.

1. *Western Sydney Public Health Unit*

2. *University of Sydney*

3. *Western Sydney Public Health Unit*

Funding source: CHERE core funding

Status: Completed

Publications:

SHIELL A, JORM L, CARRUTHERS R, FITZSIMMONS G.

The cost effectiveness of measles outbreak intervention strategies. *ANZ Journal of Public Health* (forthcoming).

A WORKSHOP APPROACH TO OUTCOMES ASSESSMENT IN GYNAECOLOGICAL CANCER

Gerry Wain¹, Jeanette Ward², Annie Stenlake³, Alan Shiell, Ruth Dewar⁴

This project adopted a workshop approach in order to integrate an outcomes orientation into routine gynaecological cancer care and to develop performance indicators and benchmarks of best practice in gynaecological care.

1. *Director Gynaecological Oncology Unit Westmead Hospital*

2. *Director NAHOU*

3. *Gynaecological Unit, Westmead Hospital*

4. *Manager, Rural Primary Health, Central West District Health Service*

Funding source: NSW Health

Status: Completed

Publications/Reports to date:

WAIN G, WARD J, STENLAKE A, SHIELL A, DEWAR R.

A workshop approach to outcomes assessment in gynaecological cancer care. *Report to the NSW Health Department.*

ECONOMIC EVALUATION OF AN ABORIGINAL INFANT EAR SCREENING PROJECT

Gavin Mooney, Stephen Jan

The project involved an economic evaluation of an ear screening program for Aboriginal infants in the Armidale district.

Funding source: Commonwealth Dept of Health and Family Services

Status: Completed

Publications/Reports to date:

JAN S.

An Economic Evaluation of an Aboriginal Infant Ear Screening Project. *Report to the Commonwealth Department of Health and Family Services.*

THE ECONOMIC IMPLICATIONS OF POPULATION-BASED SCREENING FOR COLORECTAL CANCER (CRC)

Glenn Salkeld, Graeme Young¹, Les Irwig², Marion Haas, Paul Glasziou³

The research program on CRC screening in Australia includes a cost effectiveness analysis of screening which has been published in the ANZJPH. Work has also commenced on gaining qualitative information about the benefits of screening from participants.

1. Dept of Medicine, University of Adelaide
2. DPH&CM University of Sydney
3. Dept of Social & Preventative Medicine, University of Queensland

Funding source: DPH&CM

Status: Current

EQUITY AND ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH SERVICES

Gavin Mooney, Stephen Jan, Virginia Wiseman

This project examines resource allocation, in terms of both efficiency and equity, at the level of individual Aboriginal communities; across Aboriginal communities; and between Aboriginal and non-Aboriginal Australia. There are a number of aspects to the project. One aspect will be a consideration of the bases for examining and considering equity in health care. It will also involve examination of the concept of vertical as opposed to horizontal equity and thereafter consider methods for determining the relative weights to be attached to health gains to different groups in society.

Funding source: Commonwealth Department of Human Services and Health.

Status: Current

Publications/Reports to date:

MOONEY G, JAN S, WISEMAN V.

Equity and Aboriginal and Torres Strait Islander Health Services. *Interim Report Stage I, First Interim Report Stage II, to the Commonwealth Department of Health and Family Services.*



Equity and Aboriginal and Torres Strait Islander Health Services Project Team: Gavin Mooney, Virginia Wiseman and Stephen Jan.

RANDOMISED TRIAL OF HOME HAZARD REDUCTION FOR THE PREVENTION OF FALLS: ECONOMIC SUB-STUDY

Glenn Salkeld, Robert Cumming¹, Margaret Thomas², George Szonyi³

An economic evaluation is being conducted alongside a randomised controlled trial of home hazard reduction for the prevention of falls. The intervention involves an assessment by an occupational therapist of environmental home hazards and facilitation of any necessary home modifications. A falls surveillance system will be used to monitor the occurrence of falls during the one year follow-up period. Changes in health status over time will be measured using the SF36.

1. *DPH&CM University of Sydney*
2. *Health Promotion Unit, CSAHS*
3. *Geriatrician, CSAHS*

Funding source: PHRDC
Status: Current

EFFECTIVENESS OF EXTERNAL HIP PROTECTORS IN PREVENTING HIP FRACTURE: ECONOMIC SUB-STUDY

Glenn Salkeld, Ian Cameron¹, Sue Kurrle¹, Robert Cumming², Sue Quine²

A cost-utility analysis of external hip protectors in preventing hip fractures in high risk older women who are living at home in the community, will be conducted with a randomised controlled trial study design. Two economics studies will be conducted: the first study measures and values quality of life for hip fracture related

health states using the EQ-5D and time trade-off measurement technique. The second study will utilise conjoint analysis to explore the nature of the utility function for hip protectors.

1. *Aged Care & Rehabilitation Service, Hornsby Hospital*
2. *DPH&CM University of Sydney*

Funding source: PHRDC
Status: Current

REVIEW OF PROPOSED MEDICAL IMAGING SERVICES FOR THE NEW LITHGOW HOSPITAL

Rosalie Viney and Marion Haas

This project analysed alternative funding arrangements for the medical imaging services at the new Lithgow Hospital. A range of options involving mixed public/private provision have been proposed. The criteria used for assessing the options were technical and allocative efficiency and equity. The key issue in comparing options was identification of the true opportunity costs associated with each alternative. Financial savings may not reflect more efficient use of resources. This is particularly important when costs of capital are considered.

Funding Source: NSW Health
Status: Completed
Publications/Reports to date:
VINEY R, HAAS M.

Review of proposed medical imaging services for the new Lithgow Hospital.
Report to the NSW Department of Health.

LONG TERM INTERVENTION WITH PRAVASTATIN IN ISCHAEMIC DISEASE (LIPID)

Jane Hall, Virginia Wiseman, Paul Glasziou¹, Sarah Mulray¹, John Simes¹

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.

1. NHMRC Clinical Trials Centre

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.

GLASZIOU P, SIMES R, HALL J, DONALDSON C: on behalf of the LIPID Study Group.

Design of a cost-effectiveness study within a randomised trial: the LIPID trial for secondary prevention of IHD. *Controlled Clinical Trials* (forthcoming).

WISEMAN V. and HALL J.

Care givers: The Invisible Labourforce. *Report to the LIPID Cost-Effectiveness Research Group.*

ASSESSING QUALITY OF LIFE (QOL) IN CANCER

Madeleine King

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). The two instruments were designed for the same purpose, and this project assesses 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 demonstrates the use of hierarchical linear models in analysing longitudinal QOL data.

Funding source: Public Health Research Scholarship, NHMRC

Status: Current

Acknowledgements: Annette Dobson, Centre for Clinical Epidemiology and Biostatistics, University of Newcastle

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.

The interpretation of scores from the quality of life questionnaire QLQ-C30. *Quality of Life Research* 5(6), 555-567, 1996.

COSTS AND QUALITY OF LIFE IN EARLY STAGE BREAST CANCER

Alan Shiell, Patsy Kenny, Madeleine King, Janelle Seymour, Sue Cameron, John Boyages¹, Allan Langlands¹, Jane Hall

This is a descriptive study of the costs of treatment for early stage breast cancer and quality of life following this treatment. The overall aim of the project is to assist clinicians and patients in the choice of the best treatment for early stage breast cancer by providing comprehensive information about quality of life and the way it is valued by former patients, as well as the costs of the treatment options currently available. This project is also expected to contribute to the understanding of valuation methods currently being used in health economics. The three year recruitment and data collection phase was completed in July 1996. The analysis and writing continue with several papers expected to be completed in 1997.

1. Department of Radiation Oncology, Westmead Hospital

Funding source: PHRDC/NHMRC
Status: Current

EVALUATION OF DOMICILIARY CHEMOTHERAPY

Sue Caleo, Madeleine King, Sue Cameron, Jane Hall, Howard Gurney¹, Paul Harnett¹

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.

1. Dept of Medical Oncology, Westmead and Nepean Hospitals

Funding source: NSW State Cancer Council

Status: Completed

Publications/Reports to date:

CALEO S, KING M, CAMERON S, HALL J.

Evaluation of Domiciliary Chemotherapy. Report submitted to the NSW Cancer Council.



Early Stage Breast Cancer Project Team: Madeleine King, Patsy Kenny and Janelle Seymour.

EARLY RETURN TO NORMAL ACTIVITIES (ERNA)

David Ross¹, Jane Hall, Virginia Wiseman, Rob Denniss¹, Pramesh Kovoor¹, Elizabeth Wallace¹, Fiona Moir¹

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 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-off techniques.

Recruitment commenced in 1993. 132 patients from Westmead and Blacktown hospitals have enrolled in the study. Follow-up will continue until the end of 1997.

1. Cardiology Unit, Westmead Hospital

Funding Source: MRC, NHMRC

Status: Current

Acknowledgement: Cardiology Unit, Westmead Hospital

PROGRAM BUDGETING AND MARGINAL ANALYSIS (PBMA)

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

This project involved the use of Program Budgeting and Marginal Analysis (PBMA)

to assist resource allocation and priority setting in NSW Area Health Services. PBMA provides a framework for using economics principles to assist in the process of planning for health improvement. The program budget involves dividing the health services of an area into a set of programs and using the best available data to estimate the resource costs and outputs for each program. Marginal analysis involves consideration of the relative benefits, defined in terms of health gain and other objectives, such as equity, of shifting resources from one use to another. Funding was provided to undertake pilot projects in using the framework in NSW.

Three main pilot projects were funded: Central Coast Health Service (dental services), South West Public Health Unit (asthma services) and Central Sydney Area Health Service (child, adolescent and family health services).

Following on from the pilot projects, PBMA is now being used or considered for use by a number of Area Health Services, including the Central Coast Area Health Service, Central Sydney Area Health Service, the Greater Murray Area Health Service and South West Sydney Area Health Service.

Funding source: NSW Health

Status: Completed

Acknowledgements: NSW Health, Central Coast AHS, South West Centre for Public Health, CSAHS

Publications/Reports to date:

MOONEY G, HAAS M, VINEY R, COOPER L, HIMPSON S

Linking health outcomes to priority setting and resource allocation. *Report to the NSW Department of Health.*

VINEY R, HAAS M, MOONEY G. Program budgeting and marginal analysis: a guide to resource allocation. *New South Wales Public Health Bulletin*, V6-4, April, 1995.

ABORIGINAL AND TORRES STRAIT ISLANDERS' HEALTH SERVICES

Gavin Mooney, Alison Palmer, Lyn Cooper

This study attempted to identify as far as possible what health services are used by Aborigines and Torres Strait Islanders. Where such identification is not possible the study attempted to indicate what is needed to be able to provide this information.

In addition, the study looked at the basis on which health service resources are currently allocated to Aborigines and Torres Strait Islanders and what other bases could be considered appropriate on which to do this.

Funding source: NSW Health

Status: Completed

PUBLIC AND PRIVATE PROVISION OF REHABILITATION SERVICES FOR OLDER PEOPLE

Ian Cameron¹, Wes Baker¹, 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 been completed and the final report is being written.

1. Northern Sydney Area Health Service

Funding source: Research and Development Grants Advisory Committee

Status: Current

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

Susan Johnston¹, Glenn Salkeld

An economic evaluation was conducted alongside a randomised controlled trial of ICM for people with severe schizophrenia. A major component of this study was to measure and value the costs of care. A final report has been published and two articles submitted to peer reviewed journals.

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

Funding source: NSW Health

Status: Completed

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 was to examine the test re-test reliability of standard gamble (SG) and two-stage standard gamble (2SSG) in a healthy population. This study differed from previous work as it used a number of different methods of measuring agreement. The general conclusion from this study was that the levels of agreement for both measures of health status utility are modest.

Funding source: CHERE core funding

Status: Completed

Publications/Reports to date:

SEYMOUR J, SHEILL A, CAMERON S. Reliability of standard gamble and two-stage standard gamble in the measurement of health status utilities. CHERE Discussion Paper No: 31

DELIVERY OF LESS URGENT AMBULATORY CARE IN A HOSPITAL SETTING

Rosalie Viney, Stephen Jan, Marion Haas

The aim of this project was 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 was 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 were discussed and models of care for pilot projects proposed for both metropolitan and rural settings.

Funding source: NSW Health

Status: Completed

Acknowledgement: NSW Health

Publications/reports to date:

VINEY R, JAN S, HAAS M.

Delivery of less urgent ambulatory care in a hospital setting. *Report to the NSW Department of Health.*

A REVIEW OF MEASUREMENT OF QUALITY OF LIFE IN OLDER PEOPLE

Glenn Salkeld, Charles Blummer¹

This review summarises the main measurements of quality of life in older people. The results of this review have been used to support a successful PHRDC grant which included utility-based measurement of quality of care.

1. DPH&CM, University of Sydney

Funding source: DPH&CM, University of Sydney

Status: Completed

ADEQUACY OF RESOURCES IN ABORIGINAL HEALTH

Gavin Mooney, Stephen Jan, Alison Palmer and Virginia Wiseman

This project examined 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, NHMRC

Status: Completed

Publications to Date:

MOONEY G, JAN S, PALMER A, WISEMAN V

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

Education

CHERE is the national speciality centre for health economics under the Public Health Education and Research Program of the Commonwealth Department of Health and Family Services. Under this program CHERE provides introductory health economics to all MPH students at the University of Sydney and a number of electives for those who wish to develop their interest in health economics further.

The training program for health economists, is co-ordinated by CHERE and its aim is to develop health economists with a theoretical grounding and practical experience to meet the needs of the NSW health system.

HEALTH ECONOMICS TRAINING PROGRAM

Since 1995 the Centre for Health Economics Research and Evaluation (CHERE), in conjunction with NSW Health Department has offered three year traineeships in health economics. These are targeted at economic graduates who wish to pursue a career in health economics research or policy related areas within the NSW health sector. The training scheme is a direct response to the need for more health economists within the NSW health system.

The traineeship comprises one year of postgraduate study and two years supervised practical training. One trainee was accepted onto the scheme in 1995 and is now in the final year of his traineeship. Three trainees were accepted in 1996. At the end of 1996, a further two trainees were accepted into the scheme. They

will commence post-graduate study at the University of Sydney in 1997.

To date, postgraduate study has been completed at Monash University for the Graduate Diploma in Health Economics and Evaluation and at the University of Sydney for the Masters of Economics. The experiential training comprises an orientation program followed by a rotation of placements within CHERE, NSW Health and Area Health Services.



Karen Gerard, the co-ordinator of the Health Economics Training Program with the three trainees who began in 1996 – Irenie Smoker, Kim Foulds and Richard De Abreu Lourenco.

TEACHING AT THE UNIVERSITY OF SYDNEY

CHERE contributes to teaching in the Master of Public Health, in the Department of Public Health and Community Medicine, in the Master of Economics in the Department of Economics, in the development of the new Graduate Medical Program and in the Faculty of Health Sciences. The following courses are offered:

- Introducing health economics, Master of Public Health (core), co-ordinator: Alan Shiell
- Political economy of health, Master of Public Health (elective), co-ordinator: Alan Shiell
- Economics of health promotion, Master of Public Health (elective), co-ordinator: Alan Shiell
- Key issues in health economics, Master of Public Health (elective), co-ordinator: Glenn Salkeld
- Economic evaluation, Master of Public Health (elective), co-ordinator: Glenn Salkeld
- Economics, values and public health, Master of Public Health (elective), co-ordinator: Jane Hall
- Health economics, Master of Economics, (elective), Gavin Mooney
- Evaluation and quality in health care, Graduate Diploma of Applied Science (Health Information Management), Marion Haas
- Introductory health economics, Bachelor of Health Information Management, Stephen Jan.

The Centre's contribution to the Graduate Medical Program has been through the Community Doctor Theme; Jane Hall and Glenn Salkeld are members of the Theme Committee.

OTHER UNIVERSITIES

At the University of Western Sydney, Glenn Salkeld taught Introductory Health Economics in the Master of Public Health course.

INTRODUCTORY COURSE IN ECONOMIC EVALUATION

In May, CHERE ran a workshop on economic evaluation. The workshop took place over three days and was held at the Hyde Park Plaza Hotel in Sydney. The aim of the workshop was to introduce the concepts and methods of economic evaluation and their application to health programs. The tutors for the workshop were Jane Hall, Alan Shiell, Gavin Mooney and Stephen Jan.

POSTGRADUATE TRAINING

Gavin Mooney is the Post Graduate Co-ordinator in the Department of Public Health and Community Medicine. During 1996, the following staff were enrolled in higher degrees:

Patsy Kenny, Master of Public Health, University of Sydney
Stephen Jan, Master of Economics, University of Sydney
Madeleine King, PhD, Medical Statistics, University of Newcastle
Marion Haas, PhD, Public Health, University of Sydney
Alan Shiell, PhD, Economics, University of Sydney
Glenn Salkeld, PhD, Public Health, University of Sydney
Virginia Wiseman, Post-graduate Diploma in Health Economics, Tromso Distance Learning Course in Health Economics.

STUDENTS UNDER SUPERVISION

The following students have been supervised by CHERE staff during 1996:

UNIVERSITY OF SYDNEY

In the Department of Public Health and Community Medicine:

MPH Students

Rick Newton
Sue Brown
John Birrell
Paula Convery
Megan Gardiner
Alix Goodwin
Susan Johnston
Patsy Kenny
Michelle McLennan
Jenny Neimeyer

PhD Students

Glenn Salkeld
Marion Haas

In the Department of Economics:

Master of Economics

Stephen Jan
Kim Foulds
Irenie Smoker
Richard De Abreu Lourenco

PhD Student

Alan Shiell

OTHER UNIVERSITIES

Sharon Wiley – Master of Nursing,
Australian Catholic University
Ivar Sonbo Kristiansen – PhD, University
of Tromso, Norway
Andrew Hahn – Master of Public Health,
University of Newcastle
David Parry – Master of Science,
University of York

UNIVERSITY COMMITTEES

CHERE staff are also involved with a number of committees within the University of Sydney:

Jane Hall

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

External Affairs Committee, Faculty of Medicine

Research Committee, Department of Public Health and Community Medicine

Research Committee, Faculty of Medicine

Sub-dean for research, Edward Ford and Mallett Street Precinct, Faculty of Medicine

Gavin Mooney

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

Board of Post Graduate Studies, Faculty of Medicine

Teaching and Assessment Committee, MPH, Department of Public Health and Community Medicine

Policy Support

Much of CHERE's work involves the application of health economics in the development and evaluation of policy and specific programs. Policy support often takes the form of commissioned projects, which directly relate to priorities identified by the NSW Department of Health, the Commonwealth Department of Health and Family Services, Area Health Services and hospitals. Examples of such projects which CHERE undertook or to which CHERE contributed include:

- Economic evaluation of options to reduce passive smoking in the hospitality industry;
- Review of radiology services for the new Lithgow Hospital;
- Estimation of the costs of organ and tissue transplantation;
- Development of options for clinical budgeting for allied health at Westmead Hospital;
- Economic evaluation of TB screening in Central Sydney;
- Application of program budgeting and marginal analysis in a number of Area Health Services; and
- Contemporary and emerging issues in public health and their implications for action.

In addition, CHERE has contributed to a number of policy related activities for NSW Health and Area Health Services, including acting as an adviser to the Investing in Effective Health Program and to the NSW Cervical Screening Program, contributing to workshops on program budgeting and marginal analysis and the development of an outcomes orientation in gynaecological cancer, and providing advice in a range of areas including development of local Aboriginal health plans.

CHERE also provides health economics input to the policy process through its representation on a range of Commonwealth, State and Area level committees.

NSW HEALTH COMMITTEES

Health Economics Reform Committee
(Jane Hall)

Health Outcomes Forum (Jane Hall)

Outcomes and Quality of Care Committee
(Glenn Salkeld)

NSW Health Renal Services Working
Party (Stephen Jan)

Save Our Kids Smile Evaluation
Committee (Gavin Mooney)

Cancer Expert Working Group
(Rosalie Viney)

Review of Health Promotion Committee
(Rosalie Viney)

Cervical Cancer Screening Program
Advisory Committee
(Rosalie Viney, Marion Haas)

Working Party on Teaching and Research
(Jane Hall)

NHMRC COMMITTEES

National Health and Medical Research
Council (Jane Hall)

Strategic Planning and Evaluation
Committee (Jane Hall)

National Health Advisory Committee
(Gavin Mooney)

Aboriginal and Torres Strait Islander
Health Standing Committee
(Gavin Mooney, corresponding member)

Advisory Committee Working Party on
Colorectal Cancer Screening
(Glenn Salkeld)

Health and Medical Services Standing
Committee (Alan Shiell)

Advisory Committee on Multidisciplinary
Teams in Breast Cancer (Alan Shiell)

Advisory Committee on Care around
Pre-term Birth (Alan Shiell)

Advisory Committee on Economic
Evaluation (Alan Shiell)

Health Advancement Standing Committee
(Rosalie Viney)

Workplace Alcohol and Injury Working
Party (Rosalie Viney)

ATSI Nutrition Working Party
(Stephen Jan)

OTHER COMMITTEES

Steering Committee for the Evaluation of
the National Mental Health Strategy,
AHMAC (Jane Hall)

Economic Advisor, PBAC (Gavin
Mooney)

Economics Sub-Committee, PBAC (Glenn
Salkeld)

Training Awards Committee, PHRDC
(Alan Shiell)

Honorary Public Health Scientist
Westmead Hospital, Western Sydney Area
Health Service (Glenn Salkeld)

Visitors

During 1996, CHERE has been fortunate in attracting several distinguished international visitors who contributed to the occasional seminar series:

- Robert Evans, Professor of Economics, McMaster University
- Alan Williams, Professor of Health Economics, Centre for Health Economics, University of York
- Jon Nicholl, Director, Medical Care Research Unit, University of Sheffield
- Stephen Birch, Professor of Health Economics, Centre for Health Economics and Policy Analysis, Ontario
- Han Bleichrodt, Researcher, Institute of Medical Technology Assessment, Erasmus University, Rotterdam
- Toni Ashton, Senior Lecturer in Health Economics, Department of Community Health, Auckland School of Medicine



Rosalie Viney, Jane Hall and Toni Ashton



Professor Stephen Birch

OVERSEAS VISITORS

In January 1996, Professor Stephen Birch from the Centre for Health Economics and Policy Analysis in Ontario, arrived at CHERE to spend a year on sabbatical.

During his stay at CHERE, Stephen pursued his research interests which include the analysis of health-care resource allocation in the context of population health and inequalities in health and health-care utilisation.

In his twelve months at CHERE, Stephen had several peer reviewed journal articles published, in addition to presenting at a number of seminars in Australia as well as New Zealand.

Publications

PEER REVIEWED PUBLICATIONS

Birch S, Eyles J and Newbold B. Proxies for health care need among populations: Validation of alternatives - a study in Quebec. *Journal of Epidemiology and Community Health* (forthcoming).

Birch S, Gafni A. Cost effectiveness and cost utility analyses: Methods for the non-economic evaluation of health care programs and how we can do better. In Geisler E & Heller O (eds) *Managing Technology in Health Care*. Wiley, New York, 1996.

Birch S, Leake J, and Lewis D. Economic issues in development and use of practice guidelines: An application to resource allocation in dentistry. *Community Dental Health* (forthcoming).

Briggs A, Shiell A, Farrell G. The cost-effectiveness of alpha-interferon in the treatment of chronic active Hepatitis B. *Pharmacoeconomics* (forthcoming).

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

Caleo S, Benrimoj S, Collins D, Hall J, Lauchlan R and Stewart K. A cost analysis of pharmacists' clinical interventions with dispensed medicines. *Australian Pharmacist*. 15(3): 143-148, 1996.

Caleo S, Benrimoj S, Collins D, Lauchlan R, Stewart K. Clinical Evaluation of community pharmacists interventions with prescriptions. *International Journal of Pharmacy Practice*. 4: 221-7, 1996.

Gafni A, Birch S. QALYs HYE: Spotting the differences. *Journal of Health Economics* (forthcoming).

Glasziou P, Simes R, Hall J, Donaldson C, On behalf of the LIPID Study Group. Design of a cost-effectiveness study within a randomised trial: the LIPID trial for secondary prevention of IHD. *Controlled Clinical Trials* (forthcoming).

Hall J, Birch S, Haas M. Creating health gains or widening gaps: The role of health outcomes. *Australian Journal of Health Promotion*. 6(1): 4 - 6, 1996.

Hall J. The challenge of health outcomes. *Journal of Quality in Clinical Practice*. 16(1): 5, 1996.

Hall J. Consumer utility, social welfare and genetic testing. A response to 'Genetic testing: an economic and contractarian analysis'. *Journal of Health Economics*. 15(3): 377-380, 1996.

Hutchison B, Birch S, Hurley J, Lomas J, Stratford-Devai F. Defining the practice population in fee-for-service practice. *Health Services Research* (forthcoming).

Hutchison B, Birch S, Hurley J, Lomas J, Stratford-Devai F. Effect of a financial incentive to reduce hospital utilization in capitated primary care practice. *Canadian Medical Association Journal*. 154: 653-661, 1996.

Jan S, and Wiseman V. Resource allocation and vertical equity. *Australian & New Zealand Journal of Public Health*. 6(13): 12-18, 1996.

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

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*. 49(1): 21-29, 1996.

King MT. The interpretation of scores from the quality of life questionnaire QLQ-C30. *Quality of Life Research*. 5(6): 555-567, 1996.

Lavis J, Birch S. The answer is... now what was the question? Applying alternative approaches to estimating nurse requirements. *Canadian Journal of Nursing Administration* (forthcoming).

McDermott R, Plant A, Mooney G. Has access to hospital improved for Aborigines in the Northern Territory? *Australian and New Zealand Journal of Public Health*. 20: 589-593, 1996.

Markham B, Birch S. Back to the future. A framework for estimating health care human resource requirements. *Canadian Journal of Nursing Administration*. (forthcoming).

Mooney G. And now for vertical equity? Some concerns arising from Aboriginal health in Australia. *Health Economics*. 5: 99-103, 1996.

Mooney G. Resource allocation and Aboriginal health. *Australian and New Zealand Journal of Public Health*. 20: 9, 1996.

Mooney G. Funding Aboriginal health care: the case for a new initiative. Editorial. *Australian and New Zealand Journal of Public Health*. 20: 564-565, 1996.

Mooney G. An international perspective on health services reform. *Journal of the Japanese Society on Hospital Administration*. 33: 51-60, 1996.

Mooney G, Jan S. Vertical equity: weighting health outcomes or establishing procedures? *Health Policy* (forthcoming).

Mooney G, Jan S. Cost utility and varying preferences for health. *Health Policy* (forthcoming).

Mooney G, Jan S, Wiseman V. Examining preferences for health care gains. *Health Care Analysis*. 3 (138): 231-234, 1996.

Mooney G, Leeder S, Blyth F. Outcomes - An Introduction (Editorial) *Health Policy*. 39: 1-4, 1997.

Newbold B, Birch S, Eyles J, Spencer A. Derivation and validation of proxies for health care need in Ontario. *Health and Place* (forthcoming).

O'Byrne P, Cuddy L, Taylor D, Birch S, Morris J, Syrotuik J. Efficacy and cost benefit of inhaled corticosteroids in patients considered to have mild asthma in primary care practice. *Canadian Respiratory Journal*. 3: 169-175, 1996.

Posnett J and Jan S. Indirect costs: valuing unpaid inputs into health care. *Health Economics*. 5: 13-23, 1996.

Richardson J, Hall J and Salkeld G. The measurement of utility in multiphase health states. *International Journal of Technology Assessment in Health Care*. 12(1): 151-162, 1996.

Salkeld G, Phongsavan P, Oldenburg B. Getting your message across to GPs efficiently. *Health Promotion Journal of Australia*. 6(3): 8-13, 1996.

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*. 20: 138-143, 1996.

Scott A, Shiell A and King M. Is general practitioner decision making associated with patient socio-economic status? *Social Science and Medicine*. 42: 35-46, 1996.

Scott A, Shiell A. Do fee descriptors influence treatment choices in general practice? A multilevel discrete choice model. *Journal of Health Economics* (forthcoming).

Seymour J, Newell D, and Shiell A. The quiet revolution. Reporting of health outcomes in general medical journals. *Australian Health Review* (forthcoming).

Shiell A. Health outcomes are about choices and values: an economist's perspective on the health outcomes movement. *Health Policy* (forthcoming).

Shiell A, Hawe P. Health promotion, community development and the tyranny of individualism. *Health Economics*. 5: 241-7, 1996.

Shiell A, Hawe P, Seymour J. Values and preferences are not the same. *Health Economics* (forthcoming).

Shiell A, Jorm L, Carruthers R, Fitzsimmons G. The cost effectiveness of measles outbreak intervention strategies is under review. *Australian and New Zealand Journal of Public Health* (forthcoming).

Taylor R and Salkeld G. Health care expenditure and life expectancy in Australia: how do we perform? *Australian Journal of Public Health*. 20: 233-40, 1996.

Viney R. Health promotion economics, priority setting, resource allocation and outcomes at the margin. *Health Promotion Journal of Australia*. 6(2): 9-14, 1996.

Viney R, Haas M and Seymour J. Seeing through the smoke: Using economic evaluation to allocate health promotion resources to prevent smoking. *Health Promotion Journal of Australia*. 6:7-15, 1996.

Wiseman V. Caring: The Neglected Health Outcome? Or input? *Health Policy*. 39: 43-53, 1997.

BOOKS, CHAPTERS IN BOOKS

Hall J. Setting priorities. The economics of disease. Introduction to economic evaluation. Methods of costing; Assessing Benefits. 5 Chapters in Kerr, Taylor and Heard (eds) *Handbook of Public Health Methods*, McGraw-Hall (forthcoming).

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 (forthcoming).

Shiell A and Salkeld G. The economic aspects of interferon, in R Stuart-Harris and R. Penny (eds). *The Clinical Application of Interferons*, Prentice Hall, London (forthcoming).

Viney R. Health Insurance section in *The Law Handbook*, Redfern Legal Publishing Centre, 688-690, 5th ed, Redfern Legal Publishing Centre, Sydney.

Mooney G. Communitarianism and Health (care) Economics in Barer M, Getzen T and Stoddart G (eds). Wiley, New York.

CONFERENCE PROCEEDINGS AND PUBLISHED CONFERENCE ABSTRACTS

Hall J, Viney R, Wiseman V. Unorthodox, troublesome, dangerous and disobedient: a feminist perspective on health economics. In *Economics and Health 1995 Proceedings of the Seventeenth Australian Conference of Health Economists*.

REPORTS

Beaver C, Mayston D, McDermott R, Warchivker I, Wiseman V, Mooney G. Needs based allocation of health care resources to remote Australia. Report to the Commonwealth Department of Health and Human Services.

Caleo S, Cameron S, King M, Hall J. Evaluation of domiciliary chemotherapy. Report submitted to the NSW Cancer Council.

Cooper L, Hall J. The cost of organ and tissue donation in NSW. Report to the NSW Health Department.

Hall J, Haas M, Leeder S. Current and emerging issues and their implications for policy. Report to the Department of Health and Family Services.

Himpson S. An economic evaluation of the effect of education and professional allowance on clinical intervention rates in pharmacy. Report to University of Sydney, Department of Pharmacy.

Mooney G, Jan S. An economic evaluation of an Aboriginal infant ear screening project. Report submitted to Commonwealth Department of Health and Family Services.

Mooney G, Haas M, Viney R, Cooper L, Himpson S. Linking health outcomes to priority setting and resource allocation. Report to NSW Department of Health.

Mooney G, Jan S, Palmer A, Wiseman V. Feasibility study into the adequacy of resources and the development of a funding formula in Aboriginal and Torres Strait Islander health. Report to the Aboriginal and Torres Strait Islander Health Standing Committee NHMRC.

Murphy S, Aisbett C, Price M, Iskander E, Haas M. A clinical budgeting project within allied health. Speech pathology. Report to Westmead Hospital.

Sanderson K, Issakidis C, Johnston S, Teeson M, Salkeld G. Cost-effectiveness of intensive case management for people with serious mental illness. Report to the NSW Department of Health, Health outcomes Program.

Viney R, Haas M. Review of proposed radiology services for the new Lithgow Hospital. Report to the NSW Department of Health.

Viney R, Haas M, Caleo S and Hall J. Review of automated and semi-automated screening devices for the enhancement of pap-smear screening methods. Report to the Commonwealth Department of Human Services and Health.

Viney R, Haas M and Jan S. Delivery of less urgent ambulatory care in a hospital setting. Report to the NSW Department of Health.

Wain G, Ward J, Stenlake A, Shiell A, Dewar R. A workshop approach to outcomes assessment in gynaecological cancer care. Report to NSW Department of Health.

Wiseman V, Hall J. LIPID sub-study: assessment of the impact and cost of caring. Report to the LIPID cost effectiveness study group.

CHERE DISCUSSION PAPERS

Haas M, Hall J. Clinical Budgeting for Allied Health: Some options and issues in a hospital setting: *CHERE Discussion Paper 30*.

Seymour J, Shiell A, Cameron S. Reliability of standard gamble and two-stage standard gamble in the measurement of health status utilities. *CHERE Discussion Paper 31*.

Shiell A, Seymour J, Cameron S. A test of the difference between time trade-off and healthy years equivalents. *CHERE Discussion Paper 32*.

NON PEER REVIEWED PUBLICATIONS

Hall J. Is private cover healthy? *Hospital and Healthcare*. December 1996.

Mooney G. What sort of future health care system do we want? *New Doctor*, Winter, 21-23, 1996.

Conference Papers, Seminars and Other Presentations

Birch S. Equity and health outcomes: A Canadian perspective. Eighth National Health Promotion Conference Sydney, Australia, 4-7 February, 1996.

Birch S. Informing the health policy process: Evidence based medicine unplugged. Australian Commonwealth Department of Health, Canberra, 23 April 1996.

Birch S. Measuring preferences for health outcomes: Myths and realities in the QALY-HYE debate. Injury Prevention Research Unit, University of Otago, Dunedin, New Zealand, 16 May 1996.

Birch S. Programme evaluation and the determinants of health: Implications for evidence-based decision making. New Zealand Ministry of Health, Wellington, New Zealand, 17 May 1996.

Birch S. The use and misuse of cost-effectiveness studies. New Zealand Ministry of Health, Wellington, New Zealand, 17 May 1996.

Birch S. QALYty control in measuring individuals' preferences for health outcomes. Health Services Research Centre, Victoria University, Wellington, New Zealand, 17 May 1996.

Birch S. A population perspective on evidence-based decision making. Health

Department of Western Australia, Strategic Planning Branch, Perth, 17 June 1996.

Birch S. Common problems with uncommon causes: A determinants of health approach to generating evidence. Symposium on Evidence-based Medicine, Queensland University of Technology, Brisbane, Australia, 24 July 1996.

Birch S. Rewarding or changing practice styles: Effects of financial incentives in Ontario, Canada. School of Public Health, Queensland University of Technology, Brisbane, Australia, 25 July 1996.

Birch S. Equity and health outcomes. National Conference on integrating health outcomes in routine health care. Australian Institute of Health and Welfare, Canberra, 13-14 August 1996.

Birch S. Solutions in search of problems: a Canadian perspective on health care reform. 25th Annual Conference of Economists' Society of Australia, Canberra, 24 September 1996.

Birch S. Research-led or research responsive approaches to informed decision-making. Centre for Health Program Evaluation, Faculty of Business and Economics, Monash University, Melbourne, 26 September 1996.

Birch S. As a matter of fact: Evidence-based decision-making in health unplugged. Department of Public Health and Community Medicine, University of Sydney, 9 October 1996.

Caleo S, King M, Cameron S, Hall J. Evaluation of domiciliary chemotherapy. Annual Conference of the Public Health Association, Perth, September 1996.

Caleo S, King M, Cameron S, Hall J. Evaluation of domiciliary chemotherapy. Faculty of Medicine Biennial Research Conference, October 1996.

Caleo S, King M, Cameron S, Hall J. Evaluation of domiciliary chemotherapy, Annual Conference of the Clinical Oncology Society of Australia, Brisbane, November 1996.

Haas M, Viney R. Evaluating health care reforms: cost-effectiveness is not enough. First International Health Economics Association Conference, Vancouver, May 1996.

Hall J. Genetic screening: problems in economic evaluation. First International Health Economics Association Conference, Vancouver, May 1996.

Hall J. Commentary: A Shorten, D Lewis, 'Economic evaluation of repeat Caesarean section'. Annual Conference of Australian Health Economists, Coffs Harbour, July 1996.

Hall J. Invited paper: The future of health care policy in Australia. Policy Forum. Annual Conference of Australian Health Economists, Coffs Harbour, July 1996.

Hall J. Invited paper: Industry - government challenges in public health. ARCS-TGA Working in Partnership Annual Conference, August 1996.

Hall J. Invited paper. The real cost of population screening. The Royal College of Pathologists Annual Scientific Meeting, September 1996.

Hall J. Interactive session: contemporary and emerging issues in public health. Annual Conference of the Public Health Association, Perth, September 1996.

Hall J. Economic evaluation of genetic screening. Faculty of Medicine Biennial Research Conference, October 1996.

Hall J. Invited plenary paper: The next 100 years in public health. NSW Health Public Health Network Annual Conference, December 1996.

Hall J, Viney R, Wiseman V. Beyond market failure? A feminist perspective on health economics. 6th Annual Interdisciplinary Congress for Women, Adelaide, April 1996.

Hall J, Haas M, Birch S. Health outcomes and equity. National Health Promotion Conference, Sydney, February 1996.

Himpson S. PBMA in Central Sydney Area Health Service. PBMA Seminar, Sydney, November 1996.

Jan S. Incentives for quality in general practice, Annual Conference of Australian Health Economists, Coffs Harbour, July 1996.

King M. Preliminary results of a factor analysis of a comprehensive quality of life questionnaire completed by 300 early stage breast cancer patients three months after surgery. Department of Radiation Oncology, Westmead Hospital, March 1996.

King M. Two-period cross-over analysis of ordinal outcomes. Westmead Hospital Statistics and Epidemiology Group, May 1996.

Mooney G. A communitarian critique of health economics. First International Health Economics Association Conference, Vancouver, May 1996.

Mooney G. The consequences of process utility for consequentialism in Health economics. Annual Conference of Australian Health Economists, Coffs Harbour, July 1996.

Mooney G. How much is your health worth? Inaugural Conference, Centre for Values, Ethics and the Law in Medicine, University of Sydney, November 1996.

Mooney G. What is resource allocation? Conference on Resource Allocation, Aboriginal Medical Services Alliance in Northern Territory, Alice Springs, November 1996.

Mooney G. Linking efficiency and equity. Conference on Resource Allocation, Aboriginal Medical Services Alliance in Northern Territory, Alice Springs, November 1996.

Mooney G. PBMA Applied to Asthma Services. Asthma Outcomes Council, Albury, September 1996.

Mooney G. Vertical equity in health care. University of Tromsø, February 1996.

Mooney G. Doctors and economics. Management for Clinicians Workshop. Terrigal, June 1996.

Mooney G. Equity in resource allocation in Aboriginal Health, Tropical Public Health Unit, Cairns, October 1996.

Mooney G. The use of PBMA in NSW. PBMA Seminar, Sydney, November 1996.

Mooney G. Ethics and economics in general practice. Division of General Practice Seminar, Balmain, November 1996.

Mooney G. Paying doctors. Centre for Values, Ethics and the Law in Medicine, University of Sydney, November 1996.

Mooney G. Priority setting in health care. Seminar, Macquarie Area Health Service, November 1996.

Mooney G. Mental Health Priority Setting. Seminar, Central Coast Area Health Service, Gosford, December 1996.

Salkeld G. Do process attributes enter the maximand for preventive goods? Annual Conference of the Australian Health Economists, Coffs Harbour, July 1996.

Salkeld G. To screen or not to screen for colorectal cancer: Will pilot projects answer the questions? Annual Conference of the Public Health Association of Australia, Perth, September 1996.

Salkeld G. Cost-effectiveness analysis of screening by faecal occult blood testing for colorectal cancer in Australia. Faculty of Medicine Research Conference, Wollongong, October 1996.

Seymour J, Shiell A, Cameron S. Can you count on HYE's? First International Health Economics Association Conference, Vancouver, May 1996.

Shiell A. Value of Community. First International Health Economics Association Conference, Vancouver, May 1996.

Shiell A. Beyond health outcomes: The value of community. First International Health Economics Association Conference, Vancouver, May 1996.

Viney R. Commentary: B. Petkarsky, P. Bolton L. Harding, M. Mira, H. Usher and G. Prior. Does the Balmain Hospital General Practice Casualty (GPC) represent an efficient model of the provision of casualty services. Annual Conference of Australian Health Economists, Coffs Harbour, July 1996.

Viney R. Economic Evaluation. Australian Health & Research Data Management Association Workshop, July 1996.

Viney R, Haas M. Evaluating alternative approaches to the delivery of less urgent ambulatory care. Second Faculty Research Conference, Faculty of Medicine, University of Sydney, October 1996.

Viney R, Haas M, Seymour J. Economic evaluation of alternative health promotion strategies to reduce smoking. Second Faculty Research Conference, Faculty of Medicine, University of Sydney, 1996.

SEMINAR SERIES

CHERE runs two seminar series. The occasional seminar series is designed to provide a forum for distinguished international speakers to present research and policy issues to a wider audience in the NSW health system. Some of the presenters during 1996 included:

- Prof. Alan Williams, University of York. *Intergenerational equity: The fair innings argument*
- Prof. Robert Evans, University of British Columbia. *Private health insurance as a barrier to health reform*
- Jim Pearse, NSW Department of Health. *Economic reforms of the NSW health system*
- Toni Ashton, Auckland University. *New Zealand health reforms*
- Han Bleichrodt, Erasmus University, Rotterdam. *Theoretical and empirical aspects of QALYs*

Advisory Board

- Professor John Turtle AO, Professor of Medicine, University of Sydney;
- Professor John Young AO, Pro-Vice-Chancellor, College of Health Sciences, University of Sydney;
- Professor Stephen Leeder, Head, Department of Public Health and Community Medicine, University of Sydney;
- Dr Diana Horvath AO, Chief Executive Officer, Central Sydney AHS;
- Mr Peter Burrows, President, University of Sydney Medical Foundation;
- Assoc. Professor Jane Hall, Director of CHERE.

Staff

Jane Hall is the founding Director of CHERE and was promoted this year to Associate Professor at the University of Sydney. She is also Sub-Dean for Research in the Edward Ford and Mallett Street Precinct at the University. Her research interests focus on the contribution of health and care to welfare. She is actively involved in the application of health economics to policy at both State and Federal levels.

Karen Gerard is a Principal Research Officer at CHERE and a Senior Lecturer at the University of Sydney in the Department of Public Health and Community Medicine. Karen has an MSc in Health Economics from the University of York. She joined CHERE in December 1996 from the Department of Epidemiology and Public Health in the University of Newcastle upon Tyne, UK. There she conducted economic evaluations of policy options for breast screening in the UK for the Medical Research Council and Department of Health. She also taught on the Masters of Public Health Medicine. Her research interests include outcome measurement and valuation, economic evaluation methods and practice, priority-setting and theories of and analysis of equity. At CHERE she has responsibility for co-ordinating the NSW Health Economics Training Program and developing research.

Marion Haas is a Deputy Director and Principal Research Officer at CHERE. She has a Master of Public Health from the University of Sydney and prior to joining CHERE in 1994, she completed her Public Health Officer training. Her research interests include the application of economics and economic evaluation to health policy and health services research, the use of qualitative methods in health services research and issues of equality and equity in health and health care. She is currently enrolled in a PhD examining the concepts underlying consumer appraisal of health care from economic and sociological perspectives.

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 Tromsø University, Norway and Victoria University, New Zealand. He runs a Distance learning Course in Health Economics for the University of Tromsø. He is currently co-editing one book on the economics of Australian health policy and another on the ethics of epidemiology. He has recently been appointed Regional Editor for Australia, New Zealand and Asia of the international journal *Health Policy*. His research interests lie in priority setting, efficiency, equity, Aboriginal health, general practice, patients' values, and medical decision making.

Alan Shiell is a Senior Lecturer at the University of Sydney in the Department of Public Health and Community Medicine. He is enrolled in a PhD in the Department of Economics at the University of Sydney. Alan joined CHERE from the Centre for Health Economics, in York, UK. His research interests include the economics of public health, choice and decision making, and the value of community development.

Rosalie Viney is a Deputy Director and Principal Research Officer at CHERE, and a lecturer at the University of Sydney in the Department of Public Health and Community Medicine. She has a Masters of Economics from the University of Tasmania. Rosalie joined CHERE from the NSW Department of Health. Her research interests include, health financing and delivery arrangements, resource allocation and priority setting, the interface between research and policy, the value of information in health care and evaluation of health promotion. Rosalie was on maternity leave for part of 1996.

RESEARCH STAFF

Sue Caleo is a Research Officer at CHERE. She also practices occasionally as a community pharmacist. Sue joined CHERE in 1995 after completing a Graduate Diploma of Science specialising in health economics. During 1996, Sue was involved in projects concerning the evaluation of a domiciliary chemotherapy program and also in the examination of the new automated and semi-automated Pap smear devices.

Sue Cameron was a Research Officer and survey manager at CHERE from its inception in 1990 until November 1996. With a background in occupational therapy and childbirth education, Sue worked as a research assistant in the Department of Community Medicine at Westmead Hospital prior to joining CHERE. Sue has an interest in qualitative research and women's health.

Richard De Abreu Lourenco is in the first year of the Health Economics Training programme. He is currently completing honours in Masters of Economics at the University of Sydney. Richard spent the three years prior to joining the programmes as a research graduate at the Reserve Bank of Australia, after moving to Sydney from Perth in 1992.

Andrew Ferguson is a part time Research Assistant at CHERE. He holds a commerce degree from the University of New South Wales and is currently completing his honours year at the University of Technology. His research interests include text and discourse analysis. During his time at CHERE, Andrew has worked on the media project with Marion Haas.

Kim Foulds is a Health Economics Trainee currently studying for a Master of Economics at the University of Sydney. She has a degree in Medicine from the University of Sydney and an honours degree in Economics from Macquarie University. Prior to joining the trainee program she worked in research positions at Royal Prince Alfred Hospital and, more recently, at Central Sydney Division of General Practice.

Stephen Himpson arrived at CHERE from the University of York in July 1995, to commence a three month placement at CHERE. During this period he worked on the treatise for his Masters which was titled 'An Economic Evaluation of Prostate Screening'. On the completion of his treatise, Stephen stayed on at CHERE and worked as a Research Officer on a number of projects.

Stephen Jan is a Research Officer with interests in Aboriginal health, equity, economic evaluation and underdevelopment. He joined CHERE as a trainee health economist in 1991 and in the middle of 1996 took up a position at the University of Sydney. He is currently also completing post graduate studies in economics.

Patsy Kenny joined CHERE in 1990 as a Research Officer. She worked as registered nurse before completing a Bachelor of Arts in Government and Political Economy at the University of Sydney. Patsy is currently working on two projects related to the treatment of early stage breast cancer. The first examines the cost and quality of life after treatment. The second uses qualitative methods to examine patient participation in treatment decisions for early stage breast cancer. The second project is also the topic of the treatise Patsy is currently doing for the MPH degree at the University of Sydney.

Madeleine King is a Senior Research Officer who is the medical statistician within CHERE. She has worked on many projects, 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 scholarship from NHMRC.

David Parry spent three months at CHERE from July 1996. During this time, he completed the treatise for his Master of Science in Health Economics from the University of York. The treatise was titled 'Modelling the Cost Effectiveness of Colorectal Cancer Screening: Uncertainties and Misgivings'. David was supervised during his time at CHERE by Glenn Salkeld and Marion Haas.

Janelle Seymour is a health economist who works as a Research Officer at CHERE. She has a degree in economics from the University of Sydney. Her research interests include outcome measurement and valuation, priority setting and the economics of health promotion.

John Slater is the first of the NSW Health Economics Trainees to do a placement with CHERE. He has an honours degree in Economics from the University of New England, and a Graduate Diploma in Health Economics and Evaluation from Monash University. During his placement at CHERE, John carried out an economic evaluation of TB screening of school aged children within Central Sydney Area Health Service. His other research interests are unpaid care and health care resource allocation formulae.

Irenie Smoker is a Health Economics Trainee and is currently in the first year of the program. She has a degree in Economics from the University of Sydney and has spent the first year of the traineeship completing a Master of Economics at the University of Sydney. The following two years will be spent working placements at CHERE, NSW Department of Health and an Area Health Service.

Virginia Wiseman is a Senior Research Assistant and health economist at CHERE. Her research interests include Aboriginal health, the evaluation of unpaid care, equity and the financing and evaluation of health care in developing countries. Virginia graduated from Monash University with an honours degree in Economics. She then continued working at the University as a microeconomics tutor. She also has a Graduate Diploma in Health Economics from the University of Tromso. At the end of 1996 she moved on to the Department of Public Health at the University of Sydney where she is employed as a health economist on an Aboriginal health project.

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 screening, process utility, cost-effectiveness analysis, economic evaluation and health care policy, quality of life in older people, non-expected utility theory.

SUPPORT STAFF

Sylvia Bowring is the Secretary at CHERE. She joined CHERE in November 1995. Besides attending to the secretarial duties of Professor Hall, Sylvia manages the distribution of the newsletters, annual reports and the discussion papers published by CHERE, together with the notification of seminars and workshops held from time to time.

Lyn Cooper became the Centre's co-ordinator in September 1996. Prior to this she worked as a Research Officer within the Centre. Lyn started at CHERE in 1995, after the completion of a Master of Public Health degree. As a research assistant she was involved with the PBMA project, the costing of tissue and organ donation and the piloting of surveys designed to more accurately record the numbers of Aboriginals and Torres Strait Islanders accessing health services.



University of Sydney

Mallett Street Campus

Level 6, Building F

88 Mallett Street

Camperdown NSW 2050

Phone (02) 9351 0900

Facsimile (02) 9351 0930

