1997 Annual Report

Centre

for

Health

Economics

Research

and

Evaluation

About the Centre

The Centre for Health Economics Research and Evaluation is a centre of excellence in health economics and health services research.

The Centre aims to contribute to the development and application of health economics through research, teaching and policy support.

Our research program encompasses theories, methods and applications of health economics particularly in the organisation and delivery of health services.

Our teaching includes introducing clinicians, health services managers, public health professionals and others to health economics, developing practical skills in health economics and health services research, and ensuring the continuing professional development of our own staff.

Our policy support covers working with policy and decision makers at all levels of the health system to ensure a more efficient and equitable health system.

The Centre is funded by NSW Health under a Research and Development Infrastructure Grant, with additional support from Central Sydney Area Health Service. It is an affiliated research unit of the Department of Public Health and Community Medicine, Faculty of Medicine, The University of Sydney.



CHERE's Reception Area

Advisory Board

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Professor John Young AO
Pro-Vice-Chancellor
College of Health Sciences
The University of Sydney

Professor Stephen Leeder
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The University of Sydney

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Mr Peter Burrows,
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Assoc. Professor Jane Hall Director *CHERE*

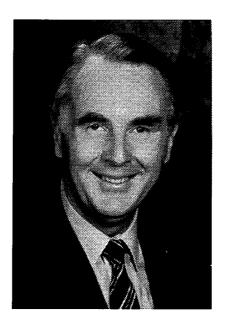
Chairman's message

It is a pleasure to review the progress made by CHERE over the 1997 calendar year. There are two important milestones, the NSW Health infrastructure funding and the Medical Foundation Program Grant. The confirmation of CHERE's funding under the NSW Health research infrastructure firmly establishes the role of CHERE as a research unit. Future funding, though by no means assured, is less uncertain with the commitment of NSW Health to providing research infrastructure and the establishment of the performance criteria against which CHERE will be judged.

Medical Foundation Program Grants are highly competitive. They require a research scientist and team with international standing, a coherent and important theme of research, and the capacity to deliver research results.

That CHERE's application met these criteria is an indicator of its growing national and international reputation as a centre of excellence in health economics.

Although the achievements of this year have strengthened research, this is not at the expense of policy relevance. All countries are facing similar problems in ensuring that their populations have equitable access to appropriate, effective and high quality health care at a socially acceptable and affordable cost.



Addressing these problems will require a strong research basis to inform the development and implementation of policy. I am sure that the Centre for Health Economics Research and Evaluation will continue to play a vital role in contributing to the research base and its application in policy.

Professor John Turtle

Contents

Director's report	7
Policy support	12
Research	14
Projects	15
Education	28
Publications	32
Conference papers, seminars, and other presentations	37
Staff	42
Professional activities	47

Director's report

This year saw CHERE settled into its new premises in Mallett St, Camperdown. Our new accommodation provides functional offices in one location, with our own meeting rooms and library collection, but most importantly an adequate working space for each staff member plus room to expand. Closer proximity to NSW Health at North Sydney has enabled the development of better working relationships with the Department, with more contact between CHERE staff and members of the Department.

The move is symbolic as well as functional. Good working space makes staff feel valued. The layout encourages team work and problem sharing. Perhaps more importantly, the sense of owning some permanent accommodation gives the Centre a feeling of being well established and optimistic about the future. 1997 has been a key year in the Centre's development, one in which the Centre itself moved from considering itself a new centre to a greater sense of maturity. This has prompted a re-examination of the aims and strategies of the Centre.

NSW Health moved to implement its research and development strategy. Under the strategy, research infrastructure funding is given to independent research institutions or public health and health services research groups. CHERE's funding has now been included under this program, with a three year forward commitment. Although this has not increased



Jane Hall

the amount or the forward commitment to the support of CHERE, it has clarified the purpose of the funding. As part of the strategy, each group which receives funding is required to develop a performance agreement with NSW Health. This agreement has been finalised and focusses on the assessment of CHERE's performance in terms of research output and relevance to the health system.

During the year, we have reviewed our research performance and goals. Health economics is relevant to so many issues and areas of research that it is easy for research effort to be widely spread across a range of topics. However, if we are to reach our goal of contributing to the development of health economics then it is important that our research program includes theoretical and conceptual research, and that it is sufficiently focussed to build cumulatively on our skills and expertise. As a result we have identified a strategic direction for our research

which builds on our existing strengths and will also guide new research in theory and methods, and inform our approach to applied projects. Our emergent research theme is valuing the benefits of health programs. This encompasses understanding what individuals value from health and health care, how such values can and should be measured, and exploring what social values are attached to these benefits. It is described in more detail in the research section of this report. This framework formed the basis of a program grant application to the University of Sydney Medical Foundation.

CHERE's program grant application was one of four program grants awarded by the Medical Foundation. Each program grant is worth \$165,000 per annum for a five year period. The program grant will fund the theoretical and conceptual work associated with our research theme. This type of theory building and testing, basic disciplinary rather than applied work, is difficult to fund given the emphasis of most funding bodies on applied and practical problem oriented research in public health and health services research. The Medical Foundation grant represents a very exciting opportunity for CHERE.

Policy support

This is the description given to working directly with policy makers and decision makers, sometimes through a formal consultation process and being represented on boards and working parties, sometimes through commissioned research. Increasingly, much of our policy support work is informal, simply discussing an issue or problem. In some instances, this will lead to a specific research project but very often it helps focus an analysis of the issue and the decision options become clear without any further research. This is a more effective and efficient way to work, both for the policy/decision maker and the researcher/adviser. But the output is far less tangible.

Policy projects undertaken in 1997 include working with the Commonwealth Department of Health on assessing the feasibility and costs of the national catch-up immunisation campaign, working with NSW Health on the costs and benefits, and financing issues associated with telehealth services, and working with Central Sydney Area Health Service to plan an evaluation of PET diagnostic technology. Work with a number of Area Health Services using program budgeting and marginal analysis as an approach to priority setting has continued.

This year I was invited to join the Steering
Committee for a new International Program in
Health Policy sponsored by the Commonwealth
Fund of New York. The International Progam is
an interesting window on health policy issues in
the USA, UK, New Zealand and Canada and
covers a number of activities, including cross
country policy research. It also includes the
Harkness Fellowship, now focussed exclusively
on health policy and health services research.
The Fellowship program is an exciting
opportunity for mid career researchers and
policy analysts to further their experience in
both the USA and Australia.

Research

The focus of our applied research is economic evaluation, the appraisal of new programs or new ways of delivering services. It is work in this area that has most prompted our investigator initiated research topics. Questions about what consumers and patients see as the benefits of health programs have led to studies of patient decision making, patient expectations and how good health contributes to people's welfare. These research studies draw primarily on qualitative research methods. The importance of quality of life as an aspect of health outcome has instigated studies on the measurement of quality of life, the appropriate statistical methods for analysing quality of life data, and alternative methods for valuing health outcomes.

The emphasis on reducing hospital use and the concomitant increasing need for the care provided by family and friends has prompted studies into aspects of unpaid care.

The observation that services are not always provided efficiently has led to consideration of the effect of financial and other incentives on how services are used and organised. The need to assess social values prompts questions about the interplay of equity and efficiency.

It is said there are three stages to any research project, getting it started, getting it finished, and getting it published. Over the year, we have concentrated on progressing a number of major projects through the second and into the third stages. Research does not finish with the final piece of data collection but requires analysis and reporting.

Education

1997 was the third and planned to be the final year of the PHERP specialty centre funding. During the year, the Commonwealth Department of Health and Family Services announced a one year extension to the program with a review of the specialty centres and the specialty program to be completed early in 1998.

The NSW Health Economics Training Program has continued with two new entrants to the program commencing their academic year at the beginning of 1997. There are now six economists in the training program with the four whose academic year has been completed, placed in supervised projects across the NSW health system. This has increased the need for CHERE input for supervision and co-ordination of those placements. CHERE continued to teach the health economics course in the Master of Economics at The University of Sydney.

Teaching in the Master of Public Health has also continued. There have been further developments in integrating introductory health economics with other subjects in "Approaches to public health problems". This has been well received by the students, and we have seen an increased demand for the health economics electives. All the elective subjects were offered this year. A new course in health economics for clinicians has been developed as part of the Master's level course in clinical epidemiology.

Over the next twelve months, it will be important to review our commitment of resources to teaching. The PHERP specialty centre funding in its present form will not be continued. The NSW Health performance agreement is specific in its focus on research. Meanwhile, the Department of Public Health and Community Medicine is reviewing the structure and teaching approach of its courses.

Staff

A new conjoint academic position was created.

Marion Haas has been appointed to this

position, after three years in the Centre as a
senior research officer.

CHERE has welcomed two new research staff. Marian Shanahan joins the Centre from the Manitoba Centre for Health Policy and Evaluation in Canada. Ana Lowin comes to us from the UK where she worked in the London School of Economics.

Alan Shiell took leave for the second semester and resigned at the end of 1997, to pursue his post graduate studies. Alan has been with CHERE since 1991 and became a Deputy Director soon after. His contribution to the development and management of CHERE, to critical and innovative insight into research topics, and to novel and student centred ways of teaching is missed.

Lyn Cooper has left to resume her teaching career. She joined CHERE as a research officer to work specifically on the PBMA projects. She then willingly stepped into a temporary position as Centre co-ordinator and assisted us through the most challenging co-ordination task, getting the Centre moved and settled into Mallett St.

Acknowledgements

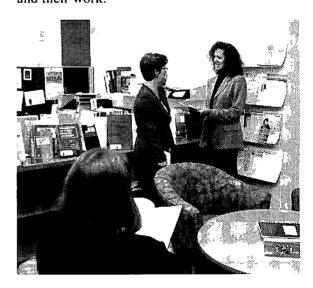
My thanks go to Professor John Turtle, as Chair of the Advisory Board, for his support, encouragement and wise counsel during the year. I am appreciative also of the help and support of all the Board members, both in those roles and in the other roles they fill, the CEO of Central Sydney Area Health Service, the Dean of Medicine, and the Pro Vice Chancellor of the College of Health Sciences.

Settling into a new organisation can be very difficult. The staff of Central Sydney have been very welcoming and helpful and I am sure that has made the transition much easier than it might have been. There are too many to name individually, but thanks to you all.

CHERE is grateful, too, to all the clinicians and policy makers who collaborate in our various projects. They are acknowledged individually in the research project reports. Most of our research would not be possible without the involvement of people, as patients, consumers and citizens. We are very appreciative of their willingness to share their views and experiences.

NSW Health has continued to be very supportive of research in general and of health economics. Our thanks go to Mr Michael Reid, Dr Tim Smythe, Dr George Rubin and Dr Andrew Wilson, Dr Michael Frommer and Mr Jim Pearse.

As Director, I owe a special debt of gratitude to the senior staff at CHERE. 1997 was a difficult year with the disruption consequent on a move, my extended absence on sick leave, and the absence of another senior staff member. Rosalie Viney, Marion Haas and Karen Gerard ensured that the Centre kept going with its established commitment to relevance, delivery of results and high quality work. My thanks go to all the staff for their continued hard work and loyalty. After all, the Centre is not represented by its letterhead, or its new offices, but by the staff and their work.



The CHERE Library

Policy support

A key role of the Centre is the provision of quality health economics policy advice to the health system. This policy support role has been achieved through a number of activities: working with clinicians and managers in the health system on practical research projects, undertaking workshops aimed at increasing the use of health economics principles in health system planning and management, undertaking research projects and consultancy projects commissioned by government, providing informal advice to all levels of the health system and through participation in working parties and committees.

The links between the policy support and research activities of the Centre are very important. The development of policy is informed by high quality research and research questions are generated by policy issues. Work undertaken with clinicians and managers in the health system to address a specific issue often leads to the joint development of a research proposal to be submitted to a peer-reviewed research granting body. A significant amount of CHERE's work involves applying the principles of economics in the evaluation or planning of specific programs or services. Such projects are often commissioned by the NSW Department of Health, the Commonwealth Department of Health and Family Services, Area Health Services, hospitals or hospital departments.

In 1997 these projects included:

- Working with South-Western Sydney Area
 Health Service using program budgeting and marginal analysis to plan coronary heart
 disease services in the Area
- Undertaking a costing of the proposed national measles immunisation 'catch-up' program for the Commonwealth Department of Health and Family Services
- Undertaking research assessing
 potential funding models for telehealth
 services for the AHMAC National Telehealth
 Funding and Financing Options Working
 Group
- Working with the Royal Women's Brisbane Hospital on the evaluation of antenatal shared care.

In 1997, staff at CHERE contributed to the following boards, working parties and committees at Commonwealth, State and Area Health Service level.

Board

Jane Hall

NSW Cancer Council Board

Committees

NSW Health

Jane Hall

Health Economics Reform Committee

Glenn Salkeld

Outcomes and Quality of Care Committee

Gavin Mooney

Save Our Kids Smile Evaluation Committee

Rosalie Viney, Marion Haas NSW Cervical Cancer Screening Program Advisory Committee

NHMRC

Glenn Salkeld

Advisory Committee Working Party on Colorectal Cancer Screening

Other

Jane Hall

Steering Committee for the Evaluation of the National Mental Health Strategy, AHMAC

Harkness Fellowships in International Health Policy, Australian representative and member of selection committee

Advisory Committee, PHERP Specialty Centre Review

Australian Medical Workforce Advisory Committee

Chair of Trustees, Public Health Association Education and Research Trust

Gavin Mooney

Economic Advisor, Pharmaceutical Benefits Advisory Committee

Glenn Salkeld

Economics Sub-Committee, Pharmaceutical Benefits Advisory Committee

Honorary Public Health Scientist Westmead Hospital, Western Sydney Area Health Service

Marion Haas

PHERP consortium visiting committee (representing NSW PHA)

CSAHS Health Services Research Committee

Research

The major theme in our research is the development and application of the methods of economic evaluation. The most important development in economic evaluation has been the Quality Adjusted Life Year (QALY) as a measure of benefit for health programs. QALYs combine both survival and quality of life into a single measure. Research into quality of life measurement and valuation remains important and is represented in the work reported here.

But quality of life is not all that is important to consumers, providers, and funders of health care. There are other benefits that lie beyond QALYs. In many of our research projects, the importance of other aspects, such as satisfaction, choice of treatment, convenience, preferred location of treatment, are also included in assessing the benefits of programs. These disparate aspects are not readily combined into a single measure of benefit which makes it difficult to compare the overall benefits of different programs.

These problems have led many health economists to consider valuing benefits in money, using contingent valuation methods. Under this approach, the evaluator does not specify the range of benefits that can be valued; consumers can include anything that can seem important to them. Asking people to value the benefits of health programs in terms of what they would be prepared to pay for these programs presents several problems: do people

understand the benefits? In a health system where people pay nothing or much less than the full costs of health care, do they know enough about costs to be able to estimate the value of any specific program? Is willingness to pay the right approach to valuing the social benefits of health programs?

The next challenge in developing and applying economic evaluation is to move beyond QALYs. This will be the focus of new research projects.

Projects

Peer reviewed grants

Long Term Intervention with Pravastatin in Ischaaemic Heart Disease (LIPID)

LIPID is a randomised controlled trial of 8000 patients. Its aim is to determine whether HMG-CoA reductase inhibitors reduce coronary heart disease mortality in post MI or unstable angina pectoris patients. An economic evaluation has been incorporated into the trial as a sub-study. As well as the considering the outcomes of the patients, including quality of life, this study considers the impact of the illness on carers. A questionnaire to assess carer impact has been developed and tested.

Funding	source	National Heart Foundation

CHERE staff Jane Hall

Sue Caleo

Collaborators Virginia Wiseman¹

Paul Glaziou² Sarah Mulray²

John Simes²

1. DPHCM, University of Sydney

2. Clinical Trials Centre, University of Sydney

Early return to normal activity (ERNA)

This study was designed to determine whether heart attack patients at low risk of dying or having another heart attack can return to normal activities soon after being discharged from hospital. So far 132 patients have been randomised to early return to normal activities or to a six week cardiac rehabilitation program. Recruitment will continue until end of 1997. Preliminary analysis has shown no differences between the groups in terms of adverse events, quality of life or activities other than return to paid work. Those encouraged to return to normal activities returned to paid work earlier.

Funding	source	NHMRC
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CHERE staff Jane Hall

Madeleine King

Collaborators David Ross¹

Virginia Wiseman²

Rob Denniss¹

Pramesh Kovoor¹ Elizabeth Wallace¹

Fiona Moir¹

1. Cardiology Unit, Westmead Hospital

2. DPHCM, University of Sydney

Discourse Analysis of Health Resource Allocation in the Print Media

Resource allocation issues in health are always in the news. However, to date, the public health perspective on resource allocation issues has been under- represented in the public debate in the media. However, resource allocation is fundamental to improving population health. 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. 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.

Funding source PHRDC

CHERE staff M:

Marion Haas

Jane Hall

Rosalie Viney

Andrew Ferguson

Collaborators

Simon Chapman¹

1. DPHCM, University of Sydney

Costs and Qualityof Life in Early Stage Breast Cancer

This is a descriptive study of costs and quality of life 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. The analysis and the writing up of the project are underway.

Funding source PHRDC

CHERE staff Alan Shiell

Patsy Kenny

Janelle Seymour

Madeline King

Jane Hall

Collaborators John Boyages¹
Allan Langlands¹

Department of Radiation Oncology,
 Westmead Hospital



Research Officer Patsy Kenny working on Early Stage Breast Cancer project

Assessing Quality of Life in Cancer

This project is about the measurement and statistical analysis of quality of life (QOL). It compares two instruments used in assessing QOL, (Functional Living Index-Cancer) and the Quality of Life Questionnaire Core module (QLQ-C30) in their ability to distinguish statistically and clinically between groups of patients who differ in health status. The data collection is complete and analysis is underway.

Funding source PHRDC Scholarship,

NHMRC

CHERE staff Madeleine King

Collaborators Annette Dobson¹

1. Centre for Clinical Epidemiology and Biostatistics, University of Newcastle

Clients' Choice Treatment Decisions in Breast Cancer

This project is a qualitative assessment of clients' perceptions of the treatment selection process. The client group is a sub-sample of 40 women who have been treated for early stage breast cancer and who participated in a larger 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. Writing up is underway.

Funding source NSW Cancer Council

CHERE staff Patsy Kenny

Alan Shiell Sue Cameron

Collaborators Sue Ouine¹

1.DPHCM, University of Sydney

Effectiveness of External Hip Protectures in Preventing Hip Fracture

CHERE is involved in a project evaluating a randomised trial of hip protectors for older women at risk of fractured hip. Recruitment is underway. Within the project, a valuation study and a costing component are being developed.

Funding source NHMRC

CHERE staff Glenn Salkeld

Janelle Seymour

Collaborators Ian Cameron¹

Sue Kurrle¹

Robert Cumming²

Sue Ouine²

 Aged Care & Rehabilitation Service, Hornsby Hospital

2. DPHCM, University of Sydney



Rosalie Viney, Marian Shanahan and Marion Haas

Randomised Trial of Home Hazard Reduction For The Prevention of Falls

This is an economic evaluation of a randomised controlled trail 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 instrument.

Funding source PHRDC

CHERE staff Glenn Salkeld

Collaborators Robert Cumming¹

 $Margaret\ Thomas^2$

George Szonyi³

- 1. DPHCM, University of Sydney
- 2. Health Promotion Unit, CSAHS
- 3. Geriatrician, CSAHS

Other research in progress

Patient Expectations of the Process and Outcomes of Health Care

Measuring "patient satisfaction" is an important part of understanding how the consumers of health care evaluate the process and outcomes of care. What actually contributes to satisfaction is not well understood. In this study, patients at Westmead Hospital who are undergoing gynaecological surgery are participating in "before and after" in-depth interviews about their expectations of and satisfaction with the process and outcomes of their health care experiences. It is hoped that the results of the study will add to our knowledge of the benefits beyond health status (non-health benefits) which may accrue to patients as a result of care.

Funding source CHERE

CHERE staff Marion Haas

Evaluation of the Non-Health Related Costs and Benefits of Health Care Interventions

The aim of this project is to investigate how the health and non-health related aspects of screening decisions impact on utility. The first stage will involve the development and empirical specification of a model of the decision to participate in screening tests. The model will be based on a Lancastrian approach to consumer theory, where the utility function is modelled as a function of the underlying characteristics of goods.

Funding source CHERE

CHERE staff Rosalie Viney

Economic Evaluation of Extended Treatment of Hepatit C with Interferon

This is a reworking of an earlier evaluation using more recent epidemiological data about the natural history of the disease and more recent trial data about the effectiveness of treatment. Revised cost-effectiveness ratios are being estimated.

CHERE Staff Alan Shiell

Collaborators Geoff Farrell¹

Susan Brown²

- 1. Gastroenerology, Westmead Hospital
- 2. Director of Pharmacy, St Vincents Hospital

Evaluation of PET at the Royal Prince Alfred Hospital

This project will involve assessment of the costs and outcomes of the use of Positron Emission Tomography (PET) in the diagnosis and manage ment of a range of conditions.

CHERE Staff Jane Hall

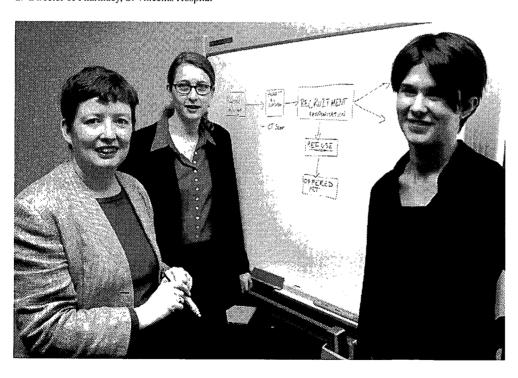
Rosalie Viney

Ana Lowin

Collaboration

Dr Michael Fulham¹

1. Director of PET Unit, RPAH



Rosalie Viney,
Madeleine King
and Ana Lowin
working on
PET proposal
for Royal Prince
Alfred Hospital

CUA Review

In 1992 Karen Gerard conducted a study looking at the state of the art of cost-utility analysis (CUA) during the period of 1980-1991. Analysis of the 51 cost-utility studies published during this period revealed that there were a number of areas where there was room for improvement both in the methods used and the reporting of results. It was important for both health economists and users of economic evaluation information to be made aware of this finding.

With greater understanding of cost-utility analysis and the introduction of a number of guidelines for economic evaluations since 1991, it was decided that the quality of current economic evaluations could expect to improve. This study was undertaken to determine whether the quality of CUAs studies published recently had improved and to gain a better understanding of the role of economic evaluation guidelines in the peer review process.

Funding Source CHERE

NSW Health Department

CHERE Staff

Karen Gerard Irenie Smoker Janelle Seymour

Aboriginal Health in NSW

This project is looking at how to draw up a local Aboriginal health plan in one community in NSW. It involves a self-assessed health survey of individuals in the community followed by two community meetings. These meetings are looking at how to prioritise costed and 'benefited' options that the community seek to have implemented.

Funding source NSW Health Department,

Aboriginal Health Division

CHERE staff Gavin Mooney



Karen Gerard, Janelle Seymour and Irenie Smoker discuss the Cost Utility Analysis project

Equity in Resource Allocation

Equity is an important objective in health service resource allocation. This project examines principles of equity, particularly concepts of vertical and horizontal equity, in terms of funding Aboriginal health services.

Funding source NHMRC and

Commonwealth Dept

of Health and Family Services

CHERE staff Gavin Mooney

Commissioned projects and consultancies

Program Budgeting and Marginal Analysis (PBMA) in South West Sydney

PBMA is a tool to assist planning and priority setting using an economic framework. It involves identifying according to programs what resources are being used where (program budgeting) and then deciding whether the movement of resources between sub-programs would result in better overall outcomes (marginal analysis). In SW Sydney Area Health Service, PBMA is being used to assist the design and implementation of the Health Improvement Plan for Coronary Heart Disease.

Funding source South Western Sydney Area

Health Service

CHERE staff Rosalie Viney

Marion Haas

Collaborators Maurie Breust¹

Liz Kristensen¹

Kim Foulds²

^{1.} Division of Planning, South Western Sydney Area Health Service

^{2.} Health Economics Trainee, NSW Department of Health

PBMA for Central Coast Mental Health Services

This project is supporting an advance in the use of program budgeting and marginal analysis on the Central Coast. A project team locally is looking at how best to prioritise in these services on the basis of cost and benefit information.

Funding source

Central Coast Area Health

Service

CHERE staff

Gavin Mooney

Economic Evaluation of TB Screening

The aim of this project is to assess the relative cost-effectiveness of different screening strategies for TB. The strategies compared were population screening and targeted screening for children of different ages. Preliminary analysis has revealed that screening Year 8 students is more effective and less costly than screening Year 1 students. Targeted screening prevents approximately 94% of cases and is more cost-effective than population screening.

Funding source

Community Health

Services, Central Sydney

CHERE staff

Jane Hall

Health Services

Collaborators

John Slater¹

Dr Garth Alperstein²

- 1. Health Economics Trainee, NSW Department of Health
- 2. Community Health Services Central Sydney



The Immunisation team,
Paul Scuffham, Ana Lowin, Jane Hall

Equity and Aboriginal and Torres Strait Islander Health Services

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 communities.

Funding source Commonwealth

Department of Human Services and Health

CHERE staff Gavin Mooney

Collaborators Tropical Public Health

Unit (Cairns)

NSW Aboriginal Health Resource Co-operative Virginia Wiseman¹

Stephen Jan¹

Development of Local Aboriginal Health Plans With Aboriginal Health Resource Committee (AHRC)

In liaison with the AHRC this project is examining ways of assisting in the development of Aboriginal health plans in communities in NSW.

Funding source NSW Health Department

CHERE staff Gavin Mooney

Collaborators Virginia Wiseman¹

Stephen Jan¹

Aboriginal Health

1. DPHCM, University of Sydney

1. DPHCM, University of Sydney



Richard De Abreu Lourenco and Rosalie Viney discuss health insurance issues

Shared Care Project

The program evaluated antenatal care for shared care and clinic patients during 1996 at the Royal Women's Hospital Brisbane. CHERE was involved with the economic components of the project which compared the costs of antenatal care for shared care and clinic patients and also estimated the potential cost-shifting from State to the Commonwealth Government.

Funding source Commonwealth

Department of

Human Services and

Health - the Ambulatory Care Reform Program

CHERE staff Sue Caleo

Collaborators Margaret Wall¹

1. Commonwealth Department of Health and Family Services

Costing of National Measles Elimination 'Catch up' Program

This project is to provide the costs of immunisation of both secondary and primary school children in Australia and will include the logistics of delivery, vaccines, staff involvement and education promotion.

Funding source The Commonwealth

Department of Health and

Family Services

CHERE staff

Sue Caleo

Jane Hall

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An Economic Impact of Psychotherapy

Psychotherapy appears to reduce the total cost of care for patients with a borderline personality disorder. In this study the cost of psychotherapy is estimated and compared with the costs of treatment patients were receiving before prior to the study.

Funding source

Department of

Psychological

Medicine (Westmead

Hospital)

CHERE Staff

Sue Caleo

Jane Hall

Program Budgeting and Marginal Analysis in Macquaire Area Health Service

This is an area wide priority setting exercise in the west of NSW being undertaken in conjunction with the Area Executive and various officers of the service.

Funding source

Macquarie Area Health

Service

CHERE Staff

Gavin Mooney

Collaborators

Virginia Wiseman¹

John Stephenson²

- 1. DPHCM, University of Sydney
- 2. Macquarie Area Health Service



Meeting to discuss Program Budgetting and Marginal Analysis (PBMA) with NSW Health

Telehealth Options for Funding and Financing

A number of potential models for funding and financing Telehealth in Australia were examined and recommendations made based on a set of pre-determined criteria.

Funding Source AHMAC National

Telehealth Funding and Financing Options

Working Group

CHERE Staff Rosalie Viney

Marion Haas

Priority Setting and Setting Principles for Purchasing

In the wake of a number of studies involving program budgeting and marginal analysis this project is looking at whether it is possible to draw up principles for the basis of 'purchasing' health services and also whether weights can be attached to the principles involved. It appears that there is more to health services than simply health maximisation and the project hopes to tease out what other factors policy makers consider to be relevant.

Funding Source SA Health

Commission

CHERE Staff Gavin Mooney

Education

CHERE has a strong commitment to providing education and training in health economics. In 1997 staff were involved in a broad range of education and training activities for both economists and non-economists in the health sector. CHERE is the national specialty centre for health economics under the Public Health Education and Research Program of the Commonwealth Department of Health and Family Services, and the teaching activities of the Centre have been supported by this program over the past three years.

The teaching and training activities of the Centre are undertaken at three levels. The first is aimed at providing familiarity with the prinicples and practice of health economics to enable people in the health system to be skilled consumers of the health economics literature, particularly the economic evaluation literature, and of health economics advice. In 1997 CHERE's activities at this level included the health economics teaching undertaken in the core of The University of Sydney's Master of Public Health degree, and in a number of other courses at the University. Staff at CHERE also organised and participated in a number of health economics workshops. The second level is more focused and specialised education that enables people to undertake some straightforward analyses and use health economics in their policy and planning work. Training at this level has included the development of a number of

electives within the Masters of Public Health, including a new elective which was approved at the end of 1997, Principles of Microeconomics. CHERE staff have also been involved in supervising a number of post-graduate students in public health and related areas at The University of Sydney and other Universities who are undertaking economic analyses as part of the research components of their degrees.

The third level is the development of specialised skills in health economists, and is largely undertaken through the NSW Health Economics Training Program and through professional development of staff at the Centre. Several of the Centre's staff are enrolled in PhDs and other higher degrees

Health Economics Training Program

Since 1995, CHERE in conjunction with NSW Health Department, has offered traineeships in health economics. These are targeted at economic graduates who wish to pursue a career in health economics.



Health Economics trainees Kees Van Gool and John Bridges who began their training program in 1997, Karen Gerard Program Co-ordinator, Richard De Abreu Lourenco and Irenie Smoker who commenced their training program in 1996.

The training scheme has been a direct response to overcoming shortages in health economics skills within the NSW health services.

Thus the aims of the training program are to develop health economics competence and build up relevant work experience so that on completion trainees may pursue a future career as a research or policy related health economist in the NSW health sector.

This innovative scheme comprises one year of postgraduate study and two years of experiential training. Currently one trainee has successfully completed training this year and is employed by NSW Health. Three trainees are developing competencies by undertaking placements within CHERE, NSW Health Structural and Funding Policy Development Branch and the Planning Unit of South Western Area Health Service. A further two trainees are completing a Masters of Economics at The University of Sydney, specialising in the theory of health economics.

Teaching and training

University of Sydney

CHERE contributes to training 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 in the Faculty of Health Sciences. The following courses were offered:

- Approaches to Public Health Problems: Introducing health economics,
 Master of Public Health,
 co-ordinator: Alan Shiell
- Clinical Economics, Master of Medicine (Clinical Epidemiology),
 co-ordinator: Rosalie Viney

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

Other

- University of Western Sydney
 Introductory Health Economics,
 Master of Public Health,
 Glenn Salkeld
- South West Sydney Area Health Service
 Economics of Health Promotion, Workshops,
 Alan Shiell

Post graduate training

During 1997, the following staff were enrolled in higher degrees: Patsy Kenny Master of Public Health, 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

Rosalie Viney
PhD, Economics, University of Sydney

Sue Caleo Master of Commerce, University of NSW

Janelle Seymour

Master of Public Health, University of Sydney

Thesis passed by CHERE staff MPH (Treatise) - Patsy Kenny

Fellowships and scholarships received by CHERE staff
PHRDC Scholarship - Janelle Seymour

Students under supervision

The following students have been supervised by CHERE staff during 1997:

Department of Public Health and Community Medicine, University of Sydney

MPH Students

PhD

Rick Newton

Glenn Salkeld

Sue Brown

Marion Haas

John Birrell

Allison Shorten

Paula Convery

Megan Gardiner

Alix Goodwin

Susan Johnston

Patsy Kenny

Michelle McLennan

Jenny Neimeyer

Janelle Seymour

Kathy Christie

Sonia Wutzke

Department of Economics, University of Sydney

Master of Economics

PhD

Kim Foulds

Alan Shiell

Rosalie Viney

Other universities

University of Newcastle

Sharon Wiley - Master of Nursing

Australian Catholic University

Andrew Hahn - Master of Public Health

University committees

CHERE staff were 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
- University Promotions Committee, Faculty of Medicine
- University Appointments Committee, Faculty of Medicine
- Selection Committee, Department of Public Health and Community Medicine at Westmead Hospital.

Gavin Mooney

- Board of Post-Graduate Studies, Faculty of Medicine
- Departmental Management Advisory
 Committee, Department of Public Health and Community Medicine
- Chair, Post Graduate Panel, Department of Public Health and Community Medicine Centre for Values, Ethics and the Law in Medicine, Faculty of Medicine.

Rosalie Viney

 MPH Teaching, Assessment and Curriculum Committee, Faculty of Medicine.

Publications

Peer reviewed

Gerard K, Brown J, Johnston K.

The UK Breast Screening Programme: How does it reflect the Forrest recommendations?

Journal of Medical Screening, 1997; 4:10-15.4

Glaziou P, Simes R, Hall J, Donaldson C (on behalf of the LIPID study group).

Design of a cost effectiveness study with a randomised controlled trial: the LIPID study for secondary prevention of IHD.

Controlled Clinical Trials, 1997; 18: 464-467

Hall J, Himpson S.

The costs and value of unpaid health care.

Health and Social Care in the Community

(forthcoming)

Hall J, Viney R and De Abreu Lourenco R. Whither private health insurance?

Australian and New Zealand Journal of Public Health, 1997; 21:119-120

Jan S, Mooney G.

Cost utility and varying preferences for health, Health Policy (forthcoming)

Jan S, Mooney G.

The outcomes of health promotion: are QALYs enough? *Health Promotion Journal of Australia*, 1997; 7:88-90

Johnston K, Brown J, Gerard K, Morton A. The non-health service costs of breast screening in the UK, *Journal of Public Health Medicine*, (forthcoming)

Millar P, Lewis D, Parkin D, Gerard K.
Less fog on the Tyne? Programme Budgeting in
Newcastle and North Tyneside,
Health Policy, 1997; 40: 217-229

Mooney G, Jan S.

Vertical equity: weighting outcomes or establishing procedures?

Health Policy, 1997; 39:1- 4

Mooney G, Leeder S, Blyth F. Editorial. Outcomes - an introduction. *Health Policy*, 1997; 39:1-4

Mooney G, Irwig L and Leeder S. Editorial. Priority setting in health care: unburdening from the burden of disease. *Australian and New Zealand Journal of Public Health*, 1997; 21: 680-1

Mooney G.

Editorial. Rationing and the objectives of health care. What do we want from our health services? *Medical Journal of Australia*, 1997; 166:575

Mooney G.

Beyond health outcomes: the benefits of health care, *Health Care Analysis*, (forthcoming)

Mooney G.

'Communitarian claims' as an ethical basis for resource allocation in health care; *Social Science and Medicine* (forthcoming)

Scott A, Shiell A.

Analysing the effects of competition on general practitioners' behaviour using a multilevel modelling framework. *Health Economics* (forthcoming)

Scott A, Shiell A.

Do fee descriptors influence treatment choices in general practice? A multilevel discrete choice model. *Journal of Health Economics*, 1997; 3:303-321

Seymour J, Newell D and Shiell A.

The quiet revolution: Reporting of health outcomes in general medical journals.

Australian Health Review, 1997; 20:88-99

Shiell A, Hawe P and Seymour J. Values and preferences are not necessarily the same. *Electronic Health Economics Letters*, 1997; 1:1-6

Shiell A, Hawe P, Seymour J. Values and preferences are not necessarily the same. *Health Economics*, 1997; 6:515-518

Shiell A.

Health outcomes are about choices and values: an economist's perspective on the health outcomes movement, *Health Policy*, 1997; 5:5-15

Shiell A, Jorm L, Carruthers R, Fitzsimmons G.

The cost-effectiveness of measles outbreak intervention strategies, Australian and New Zealand Journal of Public Health (forthcoming)

Wiseman V, Mooney G.
Burden of illness estimates for priority setting:
a debate revisited. *Health Policy* (forthcoming)

Non-peer reviewed articles

Gerard K.

The New South Wales Health Economics
Training Program. Health Economics Review,
Newsletter of the Centre for Health Economics
Research and Evaluation

Haas M, Mooney G, Viney R, Cooper L. Program Budgeting and Marginal Analysis in NSW. NSW Public Health Bulletin, 8(10):81-83

Hall J, Caleo S.

Managed Care. Health Economics Review, Newsletter of the Centre for Health Economics Research and Evaluation

Books

Mooney G and Scotton R
(eds) Economics and Australian Health Policy,
Allen and Unwin. Sydney (forthcoming)

Book chapters

Donaldson C, Mooney G.

The new NHS in global context, in *Changes in Health Care, Reflections on the NHS Internal Market*, P Anand and A McGuire, Macmillan (eds), London. (Edited version of paper originally published in Health Policy), 1997

Hall J.

Setting priorities . In *A Handbook of Public Health Methods*, Kerr C, Taylor R, Heard G (eds). McGraw Hill (forthcoming)

Hall J.

The economics of disease. In *A Handbook of Public Health Methods*, Kerr C, Taylor R, Heard G (eds). McGraw Hill (forthcoming)

Hall J.

Introduction to economic evaluation. In *A*Handbook of Public Health Methods, Kerr C,

Taylor R, Heard G (eds). McGraw Hill

(forthcoming)

Hall J.

Methods of costing. In *A Handbook of Public Health Methods*, Kerr C, Taylor R, Heard G (eds). McGraw Hill (forthcoming)

Hall J.

Assessing benefits. In *A Handbook of Public Health Methods*, Kerr C, Taylor R, Heard G (eds). McGraw Hill (forthcoming)

Mooney G.

Communitarianism and Health (Care)
Economics, in *Quality and Inequality:*What Care, What Costs, Whither Health?
Barer M, Getzen T, Stoddart G (eds), Wiley,
Toronto, 1997

Mooney G, Jan S, Wiseman V.
Economic issues in Aboriginal health care.
In the *Economics of Australian Health Policy*,
G Mooney and R Scotton (eds), Allen and
Unwin, Sydney (forthcoming)

Mooney G.

Economics in Health Policy. In the Economics of Australian Health Policy, G Mooney and R Scotton (eds), Allen and Unwin, Sydney (forthcoming)

Shiell A, Salkeld G.

The economic aspects of interferon. In *the Clinical Application of the Interferons* R. Stuart-Harris and R Penny (eds), London, Chapman and Hall, 1997

Viney R.

Redfern Legal Centre Publishing, *The Law Handbook*, section on Health Insurance, 1997

Commissioned reports

Caleo S, Hall J.

Measles Elimination: Costing of a National Measles Immunisation 'Catch Up' Program. Interim Report to the National Centre for Disease Control.

Caleo S, Hall J.

Measles Elimination: Costing of a National Measles Immunisation'Catch Up' Program. Final Report to the National Centre for Disease Control.

Mooney G, Haas M, Viney R, Cooper L. Linking health outcomes to priority setting, planning and resource allocation. Report to the NSW Department of Health on the application of PBMA in NSW.

Viney R, Haas M.

Current and proposed funding and financing arrangements for Telehealth. Report to the National Telehealth Funding and Financing Options Working Group.

Wall M, Caleo S.

Shared Antenatal Care - Economic Evaluation.

April. Report to Commonwealth Department of Health and Family Services.

CHERE discussion papers and project reports

Hall J, Viney R and Wiseman V. "Unorthodox, troublesome, dangerous and disobedient": a feminist perspective on health economics. Discussion Paper 33.

Mooney G, Haas M, Viney R, Cooper L. Linking health outcomes to priority setting, planning and resource allocation. Project Report 1.

Viney R, Jan S, Haas M.

Delivery of less urgent ambulatory care in a hospital setting. Project Report 2.

Ivers R, Palmer A, Jan S, Mooney G. Issues relating to access to health services by Aboriginal and Torres Strait Islander people, Series of Papers in Health Economics and Equity in ATSI Health, 1/97, Department of Public Health and Community Medicine, University of Sydney.

Jan S, Mooney G.

The notion of need applied to resource allocation in Aboriginal and Torres Strait Islander health, Series of Papers in Health Economics and Equity in ATSI Health, 2/97, Department of Public Health and Community Medicine, The University of Sydney.

Mooney G, Jan S.

The application of the Principle of vertical equity to the funding of Aboriginal and Torres Strait Islander health services, Series of Papers in Health Economics and Equity in ATSI Health, 3/97, Department of Public Health and Community Medicine, University of Sydney.

Kenny P, Quine S, Shiell A, Cameron S. Participation in treatment decision making by women with early stage breast cancer: a qualitative approach. Report to NSW Cancer Council, August.

Conference papers, seminars and other presentations

Gerard K.

The NSW Health Economists Training Program, presentation to the delegation of Chinese health care practitioners, February.

Hall J.

Health economics and its practical applications, presentation to the delegation of Chinese health care practitioners, February.

King M.

Hierarchical Linear Models
Applied to Longitudinal Quality of Life
Assessment, Hierarchical Modelling in
Epidemiological Data Analysis - A two day
workshop at the Department of Public
Health and Community Medicine,
University of Melbourne, February.

Mooney G.

Priority setting in health care, Inaugural Invited Lecture to the Overseas Graduates, Department of Community Health, University of New South Wales, February.

Mooney G.

Program budgeting and marginal analysis, Planning Conference, Macquarie AHS, Dubbo, February.

Mooney G.

The economics of ethical decision making, Workshop on Ethical Decision Making in Cancer Services, NSW Cancer Council, February.

Viney R.

Introduction to health care evaluation, presentation to the delegation of Chinese health care practitioners, February.

Viney R, Haas M.

Program Budgeting and Marginal Analysis, South Western Sydney Area Health Service Coronary Heart Disease Working Party, March.

Viney R, Hall J, Haas M.

Participation in screening: towards a wider examination of benefits and costs, NSW Genito Urinary Oncology Group, March.

Hall J.

The Role of Managed Care in Australia. IIR Conference. Competition in Health Care. April.

King M.

Hierarchical Linear Models Applied to Longitudinal Quality of Life Assessment, Medical Psychology Unit, Royal Prince Alfred Hospital and University of Sydney, April.

Mooney G.

Changing the basis for priority setting in health care, Department of Social Medicine, University of Tromso, Norway, April.

Mooney G.

Claims: a basis for priority setting in health care? Department of Public Health, University of Aberdeen, April.

Viney R.

Current Issues in Health Insurance, Royal Australian College of Medical Administrators, April.

Viney R, Haas M.

Issues in the economic evaluation of telemedicine services. NSW Health Clinical Evaluation Workshop for Telemedicine Project Managers, April.

Hall J.

The Real Costs of Screening. Family Planning Association Annual Conference. May.

Mooney G.

The economics of drug therapy, Annual Conference of Australian and New Zealand Psychiatrists, Sydney, May.

Mooney G.

Addressing equity in Aboriginal health services, Social Policy Research Unit, University of New South Wales. Invited Seminar, May.

Viney R, Hall J.

Pharmacoeconomics: new opportunities or new limits for health economics, Department of Pharmacy, University of Sydney, May.

Gerard K.

Commentary on V Wiseman:
Is homoeconomicus a caring citizen?
Australian Health Economics Society
Conference, July.

Mooney G.

Claims: a basis for priority setting in health care, Australian Health Economics Society Conference, July.

Mooney G.

Priority setting in health care: a health service nightmare but an economist's dream,
Australian College of Health Services
Executives Conference, Adelaide, July.

Viney R.

Commentary on Don Lewis: Increasing co-payments for medical services: a painless scheme. Australian Health Economics Society Conference, July.

Viney R.

Prostate Cancer: What is important from an economics perspective? Inaugural National Meeting of the Genito-Urinary Oncology Group, July.

Haas M.

From the patients' perspective: investigating cancer patients' expectations of care. Westmead Scientific Week Allied Health Symposium, August.

Hall J, Viney R, Haas M.

How can we evaluate genetic testing? Public Health Association One Day Seminar on the Public Health Implications of Genetics, August.

Gerard K.

Utility Based Quality of Life Measures. The Drug Information Association Workshop, International Policies in Health Economics: State of play and Future Directions for Pharmaceuticals, Cairns, September.

Haas M.

Economics and planning for health improvement. Seminar in Aged Care and Rehabilitation. Bankstown-Lidcombe Hospital, September.

Hall J.

Evaluating the benefits of screening programs. Commonwealth Department of Health and Family Services, September.

Hall J, Caleo S.

Feasibility and costs of a national measles immunisation catch-up program. Westmead Hospital, September.

Cromwell D, Viney R, Halsall J, Hindle D. When casemix met health outcomes: mapping Oregon classes to AN-DRGs. Managing and Measuring Health Outcomes: From Policy to Practice, October.



Guests and staff enjoy lunch prior to a CHERE seminar

Haas M.

Cancer patients' expectations of care.

Gynaecological Oncology Seminar. Westmead
Hospital, October.

Mooney G.

The minimally decent samaritan or the good South African: Equity in South African health care, Cape Town University, South Africa, October.

Shiell A.

Plenary Speaker 'Practical applications of health utility measures - whose values?' Australian Health Outcomes Collaboration. October Barden P, King M, Harnett P, Moore H, Stuart-Harris B.

It is possible to use Quality of Life assessments in individual patient care? Clinical Oncology Society of Australia (COSA) 24th Annual Scientific Meeting, Hobart, November.

Haas M.

CHERE's experience with PBMA. NSW Health Workshop 'Some PBMA Applications in NSW Area Health Services, November.

Hall J.

Health economics and clinical practice. St Vincents Hospital Grand Ward Round, November.

Hall J.

PBMA an overview. NSW Health Workshop 'Some PBMA Applications in NSW Area Health Services, November.

King M, Dobson A.

Sources of Variability in Quality of Life, Clinical Oncology Society of Australia (COSA) 24th Annual Scientific Meeting, Hobart, November.

King M, Dobson A.

Responsiveness of Two Quality of Life Measures (FLIC & QLQ-C30), Clinical Oncology Society of Australia (COSA) 24th Annual Scientific Meeting, Hobart, November. Miller RM, King M, Butow PN, Dunn SM, Brown JE.

Psychological adjustment to cancer in the last year of life in metastatic melonoma patients, Clinical Oncology Society of Australia (COSA) 24th Annual Scientific Meeting, Hobart, November.

Mooney G.

Priority setting in health care: problems with burden of illness, Priority Setting Conference, Canberra, November

Mooney G.

Alternative approaches to priority setting, Conference of Women's and Children's Hospitals, Randwick, November.

Mooney G.

Markets or communitarian preferences for health care: should we settle for a minimally decent Samaritan's view of health care? Department of Public Health and Community Medicine, University of Sydney. November

CHERE seminar series

De Abreu Lourenco R. HIV/AIDS related poverty. February.

King M.

Hierarchical linear models applied to longitudinal quality of life data. February.

Foulds K, Smoker I.

How should we remunerate GPS? March.

Haas M.

Reporting of resource allocation issues in the media. June.

Bridges J.

The economics of heroin use. Rational addiction and legislation. July.

Hall J, Viney R, Haas M, Gerard K. Assessing the benefits of public health programs. August.

Hall J, Haas M, Viney R.

Why people seek genetic testing? August.

Gerard K, Smoker I.

CUA Review: State of the Art Mark II. October.

Kenny P.

Participation in treatment decision making by women with early stage breast cancer.

November.

Foulds K.

Setting priorities in coronary heart disease: Application of PBMA. December.



CHERE Seminars - Jim Pearse (NSW Health) presents a seminar on 'Product Costing in NSW Public Hospitals'

Staff



CHERE staff team

Academic staff

Jane Hall is Director of CHERE and Associate Professor in the Department of Public Health and Community Medicine. Her undergraduate studies were in economics and she holds a PhD in health economics. She is interested in the development of methods of economic evaluation and sees genetic testing as a specific case new methodological approaches are needed. Whilst primarily a health economist, she is also involved in broader aspects of public health research and policy. She sits on a number of committees and working parties, with her most recent appointment being to the Board of the NSW Cancer Council.

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 a MSc in Health Economics from the

University of Newcastle upon Tyne, U.K.
Her research interests include outcome
measurement and valuation, economic
evaluation methods and practice, priority
setting, theories and analysis of equity and
social welfare; evaluation of antenatal day care
and benefit assessment of screening programs.
She has responsibility for co-ordinating the
NSW Health Economics Training Program;
co-ordinating the Principles of
Microeconomics course for the Master of
Public Health and developing research as well
as supervising research staff.

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 completed her Public Health Officer training prior to joining CHERE in 1994. 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 understanding and describing outcomes of health care from the patient's perspective.

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. He also holds visiting appointments
at the University of Tromso in Norway and
Victoria University in New Zealand. His main
research interests lie in Aboriginal health,
equity and priority setting. At a conceptual
level, Gavin is currently examining health care
from a communitarian stance. He has just
co-edited a book on the economics of the
Australian health care system.

Alan Shiell is a senior lecturer in health economics in the Department of Public Health and Community Medicine. Alan was Deputy Director of CHERE from 1992 until 1994 when he took on the responsibility for the development and co-ordination of the PHERP specialty centre program in health economics. He is enrolled in a PhD in economics at The University of Sydney, and is researching issues of choice and decision making in health care.

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. Her research interests include health financing and delivery arrangements, resource allocation and priority setting, the interface between research and policy, and decision making under uncertainty in health. Rosalie is enrolled in a PhD in the Department of Economics at the University of Sydney

Research staff

Madeleine King joined CHERE in 1991.

As the Centre's statistician, Madeleine has worked on many of the Centre's projects. She is currently completing her PhD on quality of life in cancer, having won a scholarship from NHMRC. The last phase of her PhD has focussed on the analysis of repeated measures and the responsiveness of health status.

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.

Patsy Kenny joined CHERE in 1990 as a research officer. She worked as a registered nurse before completing the BA in Government and Political Economy at the University of Sydney. In 1997, Patsy submitted her treatise for the Master of Public Health at The University of Sydney. Her treatise used qualitative methods to examine patient participation in treatment decisions for early stage breast cancer. Her other research areas of interest include quality of life in early stage breast cancer, evaluation of midwifery care and the incorporation of the work of unpaid carers into the evaluation of health services.

Sue Caleo is a research officer. She trained originally as a pharmacist and came to health economics by way of a Graduate Diploma of Science and research into pharmacy practice. She is developing her skills in economics through part time study for a Master of Commerce. Sue has worked on a number of different projects at CHERE, including measles immunisation.

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. She is currently completing a Master of Public Health degree by research at The University of Sydney on the economics of health promotion.

Ana Lowin is a research officer at CHERE.

Ana has a MSc in Health Economics from the University of York in England. She came to CHERE in 1997 from the London School of Economics, where she worked on issues of the economics of mental health. Since joining the CHERE team, Ana has been involved in research of vaccination strategies for Australia and evaluation of advanced diagnostic imaging tools.

Marian Shanahan arrived at CHERE in December 1997. She was previously at the Manitoba Centre for Health Policy and Evaluation (MCHPE) in Canada for four years following the completion of a Masters in Economics at McMaster University. At MCHPE, Marian worked on several health service costing projects,. These involved working with case weights, hospital finance data and large administrative data sets.

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 administrative assistant and is the first point of contact at CHERE. Sylvia assists the Centre's co-ordinator with administrative tasks including the distribution of Commonwealth Fund Harkness Fellowship information packages, promotion of the Centre's seminar series, the updating and dissemination of CHERE's discussion papers and reports as well as providing secretarial support to the Director.

Lyn Cooper became the Centre's co-ordinator in September 1996, and played a major role in the organisation of CHERE's move to Mallett Street. Prior to this she was employed as a research assistant at CHERE, working on the PBMA project, the costing of tissue and organ donation as well as the piloting of surveys designed to more accurately record the numbers of Aboriginals and Torres Strait Islanders accessing health services. Lyn left CHERE at the end of the year to pursue her teaching interests.

Liz Chinchen is a qualified librarian and joined the team in July,1997 as the Centre's Information Officer. In this role, Liz is responsible for the management of the

Centre's library which consists of a large number of books, reports and discussion papers and journal articles. Liz also works closely with the researchers, undertaking literature searches as well as locating and providing information as required.

Trainees

Richard De Abreu Lourenco is in the second year of the Health Economics Training program. He completed his honours in Masters of Economics at The University of Sydney in 1996. Since then, he has spent his first placement at the Structural & Funding Policy Branch of NSW Health, working on a variety of projects including work related to the negotiation and maintenance of the Medicare Agreement.

John Slater is the first of the NSW Health Economics Trainees to complete training. 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 final placement at Central Sydney Area Health Service Planning Unit, he has researched the costs incurred in providing inpatient services within the specialty of cardiology.

Kim Foulds is a Health Economics Trainee in the second year of the program. She holds degrees in Medicine and Economics from The University of Sydney and an honours degree in Economics from Macquarie University. Following the completion of her masters and an orienation period at CHERE, she spent the latter half of 1997 working at South Western Sydney Area Health Service on the program budgetting and marginal analysis component of the Health Improvement Plan for Coronary Heart Disease.

Irenie Smoker is a Health Economics Trainee and is currently in her second year of the program. She has a degree in Economics from The University of Sydney and in the first year of the programme, completed a Master of Economics at The University of Sydney. During 1997, Irenie spent her first placement at CHERE where she conducted an evaluation of cost-utility studies. She spent her second placement at the NSW Health Department working in the Structural and Funding Policy Branch.

John Bridges completed the first year of the NSW Health Economics Training Program this year. John has been awarded a Bachelor of Economics with honours from the Australian National University, Canberra and a Masters of Economics with first class honours from The University of Sydney. John's main interests to date has been a theoretical analysis of herion use in Australia, using a rational addiction modelling technique.

Kees Van Gool is in his first year of the training program and is currently completing the Master's of Economics at Sydney University. Prior to joining the training program, Kees worked at the Commonwealth Department of Health and Family Services in Canberra where he worked on the Coordinated Care Trials, the 96/97 budget pathology reforms and public health infrastructure. He has a Bachelor of Economics and Arts from the Australian National University, Canberra.

Professional activities

Memberships

Australian Health Economics

Society (AHES)

Jane Hall, Rosalie Viney, Karen Gerard, Gavin Mooney, Janelle Seymour, Glenn Salkeld, Alan Shiell

Public Health Association (PHA)

Jane Hall, Rosalie Viney, Marion Haas, Patsy Kenny, Sue Caleo

International Health Economics

Association (iHEA)

Jane Hall, Marion Haas, Marian Shanahan, Alan Shiell, Gavin Mooney, Janelle Seymour, Glenn Salkeld

International Society of Clinical Biostatistics

Madeline King

Statistical Society of Australia

(NSW Branch)

Madeline King

Clinical Oncology Society

of Australia (NSW)

Madeline King

International Society for Quality of Life

Research

Madeline King

European Society of Psychosocial Oncology

Madeline King

Pharmaceutical Society of NSW

Sue Caleo

Canadian Health Economics

Research Association

Marian Shanahan

Australian Library and Information

Association (ALIA)

Liz Chinchen

Australasian Epidemiological

Association (AEA)

Marion Haas

Health Economics Study Group, UK

Jane Hall, Karen Gerard, Ana Lowin,

Alan Shiell

Reviews conducted by CHERE staff for:

- Health Policy
- Health Care Analysis
- Health Economics
- Journal of Health Economics
- European Journal of Public Health
- Social Science and Medicine
- Australian and New Zealand Journal of Public Health
- Pharmacoeconomics
- Journal of Health Services Research and Policy
- Medical Journal of Australia
- International Journal of Health Promotion

Editorial roles by CHERE staff for:

- Health and Social Care in the Community
- Journal of Health Economics
 Australian and New Zealand Journal of Public Health
- Asia, Australian and New Zealand, Health Policy including special issue
 'Health Outcomes and Health Policy'
- Social Science and Medicine including international special issue
 - 'The Ethics of Epidemiology'
- International Journal of Health Planning and Management including special issue
 'The Economics of Indigenous Health'

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