

Summary

We need to make research evidence produced by applied health research more usable through its design and dissemination. Study outputs and evidence syntheses need to provide information of relevance to organisational decision processes, budgets, timescales, and pan-sectorial care pathways.

Examples of work that will be undertaken in these projects include:

(i) assessing health services for patients with long-term conditions using a multi-method system appraisal tool that draws on his extensive experience in high and middle income countries. This tool will be adapted to make it fit for evaluating care performance in the NIHR CLAHRC North Thames area, across care sectors and based on a systems approach which can address complex interactions required to ensure delivery of high-quality care. The approach envisages a need for physical, human and intellectual and social resources. It will provide a structured process that will help to identify weaknesses along care pathways across the interface between primary and secondary care

(ii) research to measure appropriate costs for economic analyses. This involves developing cost frameworks including multi-sectorial impacts from commissioner and provider perspectives to aid decision-making. We will identify which cost components are important, and how they ought to be quantified, and then undertake modelling exercises using case studies from the 'Innovations in systems and models of health and health care theme to investigate feasibility and materiality

(iii) we have developed and tested a tool, the Socio-technical Allocation of Resources (STAR) which enables stakeholders to set priorities by using visual models. We will further develop the tool and work with stakeholders to identify studies involving cross-sectorial conditions (eg atrial fibrillation and dementia) where the appropriate balance of care (between hospital, community and social care) needs to be modelled.

The results of this research will benefit patients by increasing the immediate usefulness and relevance of, often routinely available data, allowing patients to benefit from improved services in a more timely fashion.

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