

High Impact Intervention

Great Britain: Department of Health

High Impact Intervention Great Britain. Department of Health,2006

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Field Trials of Health Interventions Peter G. Smith,Richard H. Morrow,David A. Ross,2015 This is an open access title available under the terms of a CC BY-NC 4.0 International licence. It is free to read at Oxford Scholarship Online and offered as a free PDF download from OUP and selected open access locations. Before new interventions are released into disease control programmes, it is essential that they are carefully evaluated in field trials'. These may be complex and expensive undertakings, requiring the follow-up of hundreds, or thousands, of individuals, often for long periods. Descriptions of the detailed procedures and methods used in the trials that have been conducted have rarely been published. A consequence of this, individuals planning such trials have few guidelines available and little access to knowledge accumulated previously, other than their own. In this manual, practical issues in trial design and conduct are discussed fully and in sufficient detail, that Field Trials of Health Interventions may be used as a toolbox' by field investigators. It has been compiled by an international group of over 30 authors with direct experience in the design, conduct, and analysis of field trials in low and middle income countries and is based on their accumulated knowledge and experience. Available as an open access book via Oxford Medicine Online, this new edition is a comprehensive revision, incorporating the new developments that have taken place in recent years with respect to trials, including seven new chapters on subjects ranging from trial governance, and preliminary studies to pilot testing.

Improving Healthcare Quality in Europe Characteristics, Effectiveness and Implementation of Different Strategies

OECD,World Health Organization,2019-10-17 This volume, developed by the Observatory together with OECD, provides an overall conceptual framework for understanding and applying strategies aimed at improving quality of care. Crucially, it summarizes available evidence on different quality strategies and provides recommendations for their implementation. This book is intended to help policy-makers to understand concepts of quality and to support them to evaluate single strategies and combinations of strategies.

Social Isolation and Loneliness in Older Adults National Academies of Sciences, Engineering, and Medicine, Division of Behavioral and Social Sciences and Education, Health and Medicine Division, Board on Behavioral, Cognitive, and Sensory Sciences, Board on Health Sciences Policy, Committee on the Health and Medical Dimensions of Social Isolation and Loneliness in Older Adults, 2020-06-14 Social isolation and loneliness are serious yet underappreciated public health risks that affect a significant portion of the older adult population. Approximately one-quarter of community-dwelling Americans aged 65 and older are considered to be socially isolated, and a significant proportion of adults in the United States report feeling lonely. People who are 50 years of age or older are more likely to experience many of the risk factors that can cause or exacerbate social isolation or loneliness, such as living alone, the loss of family or friends, chronic illness, and sensory impairments. Over a life course, social isolation and loneliness may be episodic or chronic, depending upon an individual's circumstances and perceptions. A substantial body of evidence demonstrates that social isolation presents a major risk for premature mortality, comparable to other risk factors such as high blood pressure, smoking, or obesity. As older adults are particularly high-volume and high-frequency users of the health care system, there is an opportunity for health care professionals to identify, prevent, and mitigate the adverse health impacts of social isolation and loneliness in older adults. *Social Isolation and Loneliness in Older Adults* summarizes the evidence base and explores how social isolation and loneliness affect health and quality of life in adults aged 50 and older, particularly among low income, underserved, and vulnerable populations. This report makes recommendations specifically for clinical settings of health care to identify those who suffer the resultant negative health impacts of social isolation and loneliness and target interventions to improve their social conditions. *Social Isolation and Loneliness in Older Adults* considers clinical tools and methodologies, better education and training for the health care workforce, and dissemination and implementation that will be important for translating research into practice, especially as the evidence base for effective interventions continues to flourish.

Patient Safety and Quality Ronda Hughes, 2008 Nurses play a vital role in improving the safety and quality of patient care -- not only in the hospital or ambulatory treatment facility, but also of community-based care and the care performed by family members. Nurses need to know what proven techniques and interventions they can use to enhance patient outcomes. To address this need, the Agency for Healthcare Research and Quality (AHRQ), with additional funding from the Robert Wood Johnson Foundation, has prepared this comprehensive, 1,400-page, handbook for nurses on patient safety and quality -- *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*. (AHRQ Publication No. 08-0043). - online AHRQ blurb, <http://www.ahrq.gov/qual/nursesfdbk/>

Promoting Cardiovascular Health in the Developing World Institute of Medicine, Board on Global Health, Committee on Preventing the Global Epidemic of Cardiovascular Disease: Meeting the Challenges in Developing Countries, 2010-06-29 Cardiovascular disease (CVD), once thought to be confined primarily to industrialized nations, has emerged as a major health

threat in developing countries. Cardiovascular disease now accounts for nearly 30 percent of deaths in low and middle income countries each year, and is accompanied by significant economic repercussions. Yet most governments, global health institutions, and development agencies have largely overlooked CVD as they have invested in health in developing countries. Recognizing the gap between the compelling evidence of the global CVD burden and the investment needed to prevent and control CVD, the National Heart, Lung, and Blood Institute (NHLBI) turned to the IOM for advice on how to catalyze change. In this report, the IOM recommends that the NHLBI, development agencies, nongovernmental organizations, and governments work toward two essential goals: creating environments that promote heart healthy lifestyle choices and help reduce the risk of chronic diseases, and building public health infrastructure and health systems with the capacity to implement programs that will effectively detect and reduce risk and manage CVD. To meet these goals, the IOM recommends several steps, including improving cooperation and collaboration; implementing effective and feasible strategies; and informing efforts through research and health surveillance. Without better efforts to promote cardiovascular health, global health as a whole will be undermined.

Closing the Quality Gap Kaveh G. Shojania, 2004

High-impact Educational Practices George D. Kuh, 2008 This publication is the latest report from AAC&U's Liberal Education and America's Promise (LEAP) initiative and defines a set of educational practices that research has demonstrated have a significant impact on student success. Author George Kuh presents data from the National Survey of Student Engagement about these practices and explains why they benefit all students, but also seem to benefit underserved students even more than their more advantaged peers. The report also presents data that show definitively that underserved students are the least likely students, on average, to have access to these practices.

High-Impact Assessment Reports for Children and Adolescents Robert Lichtenstein, Bruce Ecker, 2019-02-07 Assessment provides rich opportunities for understanding the needs of children and adolescents, yet reports are often hard for parents, teachers, and other consumers to comprehend and utilize. This book provides step-by-step guidelines for creating psychoeducational and psychological reports that communicate findings clearly, promote collaboration, and maximize impact. Effective practices for written and oral reporting are presented, including what assessment data to emphasize, how to organize reports and convey test results, and how to craft useful recommendations. In a large-size format for easy photocopying, the book includes sample reports, training exercises, and reproducible templates, rubrics, and forms. Purchasers get access to a Web page where they can download and print the reproducible materials. This book is in The Guilford Practical Intervention in the Schools Series, edited by Sandra M. Chafouleas.

Guidelines on Core Components of Infection Prevention and Control Programmes at the National and Acute Health Care Facility Level World Health Organization, 2017-01-31 Health care-associated infections (HAI) are one of the most common

adverse events in care delivery and a major public health problem with an impact on morbidity, mortality and quality of life. At any one time, up to 7% of patients in developed and 10% in developing countries will acquire at least one HAI. These infections also present a significant economic burden at the societal level. However, a large percentage are preventable through effective infection prevention and control (IPC) measures. These new guidelines on the core components of IPC programmes at the national and facility level will enhance the capacity of Member States to develop and implement effective technical and behaviour modifying interventions. They form a key part of WHO strategies to prevent current and future threats from infectious diseases such as Ebola, strengthen health service resilience, help combat antimicrobial resistance (AMR) and improve the overall quality of health care delivery. They are also intended to support countries in the development of their own national protocols for IPC and AMR action plans and to support health care facilities as they develop or strengthen their own approaches to IPC. These are the first international evidence-based guidelines on the core components of IPC programmes. These new WHO guidelines are applicable for any country and suitable to local adaptations, and take account of the strength of available scientific evidence, the cost and resource implications, and patient values and preferences.

Disease Control Priorities, Third Edition (Volume 2) Robert Black,Ramanan Laxminarayan,Marleen Temmerman,Neff Walker,2016-04-11 The evaluation of reproductive, maternal, newborn, and child health (RMNCH) by the Disease Control Priorities, Third Edition (DCP3) focuses on maternal conditions, childhood illness, and malnutrition. Specifically, the chapters address acute illness and undernutrition in children, principally under age 5. It also covers maternal mortality, morbidity, stillbirth, and influences to pregnancy and pre-pregnancy. Volume 3 focuses on developments since the publication of DCP2 and will also include the transition to older childhood, in particular, the overlap and commonality with the child development volume. The DCP3 evaluation of these conditions produced three key findings: 1. There is significant difficulty in measuring the burden of key conditions such as unintended pregnancy, unsafe abortion, nonsexually transmitted infections, infertility, and violence against women. 2. Investments in the continuum of care can have significant returns for improved and equitable access, health, poverty, and health systems. 3. There is a large difference in how RMNCH conditions affect different income groups; investments in RMNCH can lessen the disparity in terms of both health and financial risk.

Structural Interventions for HIV Prevention Richard A. Crosby,Ralph J. DiClemente,2018-10-26 A COMPREHENSIVE NEW REFERENCE WORK ON STRUCTURAL APPROACHES TO PREVENTING HIV Structural interventions -- changes to environment aimed at influencing health behaviors -- are the most universal and cost-effective tool in preventing new incidences of HIV. They are not easy to get right, however. Structural Interventions for HIV Prevention offers an authoritative reference for both understanding these programs and instituting them to greatest effect. Whether through

changes to policy, environment, social/community norms, or a combination of each, this volume offers actionable and attainable blueprints to creating and evaluating programs in any setting or country. It is an essential resource for researchers and practitioners in the continuing fights against HIV.

High Quality Care for All Secretary of State for Health,2008 This review incorporates the views and visions of 2,000 clinicians and other health and social care professionals from every NHS region in England, and has been developed in discussion with patients, carers and the general public. The changes proposed are locally-led, patient-centred and clinically driven. Chapter 2 identifies the challenges facing the NHS in the 21st century: ever higher expectations; demand driven by demographics as people live longer; health in an age of information and connectivity; the changing nature of disease; advances in treatment; a changing health workplace. Chapter 3 outlines the proposals to deliver high quality care for patients and the public, with an emphasis on helping people to stay healthy, empowering patients, providing the most effective treatments, and keeping patients as safe as possible in healthcare environments. The importance of quality in all aspects of the NHS is reinforced in chapter 4, and must be understood from the perspective of the patient's safety, experience in care received and the effectiveness of that care. Best practice will be widely promoted, with a central role for the National Institute for Health and Clinical Excellence (NICE) in expanding national standards. This will bring clarity to the high standards expected and quality performance will be measured and published. The review outlines the need to put frontline staff in control of this drive for quality (chapter 5), with greater freedom to use their expertise and skill and decision-making to find innovative ways to improve care for patients. Clinical and managerial leadership skills at the local level need further development, and all levels of staff will receive support through education and training (chapter 6). The review recommends the introduction of an NHS Constitution (chapter 7). The final chapter sets out the means of implementation.

Equity and excellence: Great Britain: Department of Health,2010-07-12 Equity and Excellence : Liberating the NHS: Presented to Parliament by the Secretary of State for Health by Command of Her Majesty

Advances in Patient Safety Kerm Henriksen,2005 v. 1. Research findings -- v. 2. Concepts and methodology -- v. 3. Implementation issues -- v. 4. Programs, tools and products.

The Green Book Great Britain. Treasury,2003 This new edition incorporates revised guidance from H.M Treasury which is designed to promote efficient policy development and resource allocation across government through the use of a thorough, long-term and analytically robust approach to the appraisal and evaluation of public service projects before significant funds are committed. It is the first edition to have been aided by a consultation process in order to ensure the guidance is clearer and more closely tailored to suit the needs of users.

Intervention Research Bernadette Mazurek Melnyk, PhD, APRN-CNP, FAANP, FNAP, FAAN,Dianne Morrison-Beedy,

PhD, RN, WHNP, FNAP, FAANP, FAAN, 2012-04-23 2012 First Place AJN Book of the Year Award Winner in Nursing Research! This is a resource for success and should be a part of any researcher's library.--Doody's Medical Reviews This book is a practical, user-friendly guide for health care researchers across multiple disciplines who are involved in intervention research. It provides all of the essential elements needed for understanding how to design, conduct, analyze, and fund intervention studies that are replicable and can withstand the scrutiny of the Institutional Review Board and peer review. Developed from an annual continuing education workshop on intervention studies conducted by Dr. Melnyk, this text is the most comprehensive body of information available on this topic. Contributors address the design of interventions that are ethically considerate and sensitive to culture, race/ethnicity, and gender, minimizing threats to external and internal validity, measurement, and budgeting. The guide explores such implementation issues as subject recruitment and retention, data management, and specialized settings, cost analysis, and explaining intervention effects. The text also guides readers in writing grant applications that fund , and addresses how to move intervention study findings into the real world. A unique addition to the book is the availability of digital examples of progress reports, final reports, and research grant applications that have received funding from the National Institutes of Health and other relevant organizations. This text is a valuable resource for all health care professionals conducting research and for doctoral students in health care studies. Key Features: Presents the essential tools for designing, conducting, analyzing, and funding intervention studies Designed for use by health care professionals conducting intervention research Provides comprehensive, accessible guidelines for doctoral students across all health care disciplines Instructs readers on writing grant applications that fund Includes digital examples of funded research grants, progress reports, and final reports

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