

## Announcing the Australian Health Review Editorial Board

AS FORESHADOWED IN OUR LAST ISSUE, an Editorial Board has been established by the Australian Healthcare Association, with the task of setting policy directions and safeguarding the independence of the journal (see *page 256* for the list of the founding members). We look forward to working with the new Board and extend a warm welcome to the members.

## Termination of pregnancy

WITH THE OBJECTIVE of shedding some new light on the abortion debate (without the expected discussion of rights) we open this issue with three papers on aspects of termination of pregnancy of concern to health care providers. We aim to do so from a position of respect for the private moral views of all our readers — hopefully providing some new information on termination of pregnancy of interest to Australian decision makers. Ellwood (*page 139*) sketches the picture in provision of abortion services after 20 weeks (“late abortion”) in Australia. Mitchell and Dyson (*page 135*) summarise what is known about the role of sexuality education in preventing unplanned and unwanted pregnancies, and Petersen (*page 142*) reviews the regulation of abortion services through the various crime statutes and common law judgements in Australian jurisdictions.

## In this issue ...

THIS ISSUE presents more local evidence for policy making in health systems and health care. O’Connell and Ostaszkiwicz (*page 146*) call for action on a strategy to address the looming health care issues for our ageing population and Cordato, Saha and Price summarise the evidence for geriatric interventions (*page 151*). The need for a

planned approach to developing the role of nurses in general practice is presented by Halcomb et al (*page 156*). Walker and colleagues (*page 167*) model the likely future of private health insurance coverage, while Hanning highlights the approaching end of reductions in the average length of hospital stays due to conversion of overnight to same day admissions (*page 178*).

Rose and Harris (*page 185*) provide advice for mental health providers about engaging with employment programs, and Eagar and colleagues (*page 189*) review the lessons from the National Mental Health Integration Program.

We are pleased to present a significant collection of papers about the current and future health care workforce. Duckett (*page 201*) challenges the providers of education as well as employers to take on fundamental reform of professional roles. Mickan (*page 211*) summarises the literature on the effectiveness of teams, while Boucher identifies six archetypes among clinician-managers — from the born manager to the stuck manager (*page 218*). Rotem et al. (*page 226*) survey the job market for public health workers finding a need to review the role, structure and content of formal public health education programs.

The perspective of long-stay patients on their hospital care is not often heard — Johnson and colleagues (*page 235*) address this gap. Our two final papers address clinical governance, not at the usual rather abstract level of structures and principles, but rather through the lens of clinical practice. Crispin, Crowe and McDonald (*page 240*) investigate who decides about transfusion in hospital (and whether they’re making good decisions) while Kulh and colleagues use the management of delirium in hospital as a way of measuring the effectiveness of clinical governance policies (*page 246*).

## A global view on health services research

AS WE WERE FINALISING OUR LAST ISSUE, and exploring the problem of linkages among

researchers, policy makers and practitioners, the World Health Organization was convening a summit in Mexico on health research.<sup>1</sup> The establishment of a global clinical trials register (which had been in preparation for some time) got the most press, but the Mexico Statement has other important planks in its platform, including a call on the funders of health research to “support a substantive and sustainable programme of health system research aligned with priority country needs” (p. 3). Unfortunately, Australia wasn’t officially represented. Health Ministers and Deputy Ministers of 29 countries, and delegations of another 22, including the UK, the USA, Malaysia, Indonesia, Canada and Ireland, agreed on the need to ensure that their efforts to deliver effective health care were guided by “reliable evidence from high quality research” (p. 1).

## Please write back ...

WE GET QUITE A LOT OF FEEDBACK from readers about the Journal — understandably, it’s mostly those who like what they’ve read who talk to us. We also keep an eye on what articles are being cited and the requests for permission to reprint. But our mailbox has plenty of room for your letters — if you have a printable comment on any of the Journal’s papers, the lines are open. Please go to [www.aushealthreview.com.au](http://www.aushealthreview.com.au) to submit all correspondence.

**Sandra G Leggat and Judith Dwyer**  
Editors, Australian Health Review

1 WHO (2004). The Mexico Statement of Health Research. Available from: <http://www.who.int/rpc/summit/en/> □

### PRELIMINARY NOTIFICATION

The Australian Government Department of Health and Ageing's Sharing Health Care Initiative is pleased to provide preliminary notification for the

#### **Managing Pain Using Self-Management Approaches: Evidence and Implementation**

½ Day Workshop on 19 August 2005 in Sydney.

Speakers at the Workshop will provide the latest research and evidence for Chronic Condition Self-Management in Australia and internationally. The Workshop is part of the 2 day Australian Pain Society's Partners In Pain Meeting *Patients, Clinicians and Pain Management*.

#### **Who should attend**

GPs and Divisions of General Practice, nurses, allied health professionals, Aboriginal health workers, health provider organisations, consumers, health insurance policy makers, and health trainers and educationists.

#### **International speaker**

Professor Kate Lorig, Stanford Patient Education Research Center, United States of America.



**Evolution or revolution**

**3rd Australasian Conference on Safety and Quality in Health Care**

**Adelaide**

**11-13 July 2005**

<http://www.sapmea.asn.au/conventions/aaqhc2005/index.html>

**The AHA has joined the Australian Association for Quality in Healthcare in co-hosting a truly diverse conference in Adelaide**

from 11-13 July 2005.

Major partners are the Australian Council on Safety and Quality in Healthcare and the South Australian Department of Health.

Proudly sponsored by Baxter Healthcare and HESTA Super Fund.