

# HEALTH OUTCOMES 2008: Facilitating Knowledge Exchange and Transfer For a Dynamic Future

13<sup>th</sup> Annual National Conference  
30 April – 1 May 2008, Rydges Lakeside, Canberra, Australia.



## CALL FOR PAPERS

With health costs climbing and budgets being stretched, it is crucial that health professionals practice according to the best available evidence. Failure to make use of effective treatments and worse, giving treatments that do harm is a major cause of morbidity in the population. It has been estimated that up to one in two patients fail to receive best evidence care, and up to one in ten may actually get treatment which has the potential to be harmful. In addition, it has been estimated that patients only receive around half the treatments they need.

How can we more effectively monitor and improve our practice through the examination of patient health outcomes? How can we more effectively facilitate the implementation of evidence-based health care in routine care settings? How can knowledge management systems help us confront the information deluge? How can we bridge the gap between innovation and routine implementation?

How can we ensure the most effective allocation of our health care resources so as to do the most good? How can we achieve better health outcomes for our patients and the population? Importantly, how can draw on our current knowledge base to do all of this while fostering health, creating a dynamic future?

### Health Outcomes 2008 will explore:

- The applications of information and communication technologies; in managing and developing our knowledge base, in facilitating clinical and research applications, and in extending health service reach.
- The contributions – both realised and potential - of health outcomes assessment in the context of the major demographic, social, political and environmental challenges that confront our health systems.
- The role and implementation of health outcomes evaluation processes in the National Health Priority Areas. This year we would encourage a greater focus on cancer, dementia, and other chronic diseases.
- Health outcomes evaluation in relation to specific population groups (e.g. indigenous people, children and adolescents, people from a non-English speaking background, women's and men's health and people with disabilities) and projects that address health differentials and health inequities.
- The particular characteristics of evaluation projects, which have made a real difference to the health outcomes of their target group(s).
- The lessons learned from the implementation of practice improvement and clinical benchmarking initiatives

Reports on health outcomes research from all countries are warmly invited. Prof Neil Aaronson (Netherlands) and Dr Kirstie Haywood (UK) will be joining us as international speakers.

### Special Awards

This year there will be three awards for outstanding presentations. Assessment will be on the basis of importance and/or originality of topic; rigour and/or innovation of methodology; and clarity of expression. Further details regarding conditions and eligibility are available at <http://chsd.uow.edu.au/ahoc>.

Health Outcomes 2006 was sponsored by: the National Palliative Care Program, Better Arthritis and Osteoporosis Care Program, Mental Health and Suicide Prevention Branch, the Office for an Ageing Australia and the Primary Care Division of the Australian Government Department of Health and Ageing, The Australian Government Department of Veterans' Affairs, Queensland Health, and Eli Lilly Australia.

**For the 2008 conference we invite submissions for papers addressing health outcomes evaluation in the following areas:**

- The application of evidence-based approaches and health outcomes evaluation in routine practice;
- The impact of outcomes assessment for developing policy, promoting inter-sectoral collaboration and predicting future trends in health care and health promotion;
- Innovative and experimental approaches to health outcomes measurement– particularly in program implementation and clinical practice, clinical benchmarking, and analyses and applications of comparative data;
- Use of information and communication technologies to drive improvement in health service provision and research, including use of data sets and data linkage in outcomes evaluation and health assessment;
- New directions and methodological issues in research, design and application of tools for assessing health outcomes (e.g. symptoms, function, health-related quality of life, needs, satisfaction);
- The assessment of patient health outcomes in the National Health Priority Areas (arthritis, asthma, cancer, CVD, dementia, diabetes, injury and mental health). This year we would like to see a greater focus on cancer;
- Chronic disease management, including co-morbidity and palliative care, and conditions associated with ageing;
- Population health, burden of disease, health differentials and inequalities, and health programs and issues for particular population groups. We encourage papers on Indigenous health outcomes;
- Equity, access and determinants of health and social policy – particularly in relation to (a) health promotion and preventative health initiatives, and (b) strategies for managing resources for the future;
- Evidence-based and multi-disciplinary approaches in general practice, primary and community care, allied health, the nursing sector and dental care;
- Quality improvement systems, hospital and patient quality and safety, and clinical pathways;
- Economic modeling and the evaluation of interventions in relation to population health policy and practice; and
- Consumer participation in, and satisfaction with, health outcomes initiatives.

***There will also be interactive Discussion Panels, Discussion Groups and Poster Presentations.***

**Papers – all submissions to be emailed to [Astoria.Barr@act.gov.au](mailto:Astoria.Barr@act.gov.au)**

Papers should contain new and original work. Authors will generally be required to present data to support their conclusions. Abstracts are required by **8 October 2007** to ensure consideration by the conference selection committee. Final papers and associated PowerPoint presentations are required by **14 March 2008**, and must be written as for journal publication. Details of requirements are available at <http://chsd.uow.edu.au/ahoc>.

**'First Time' Presenters' Session**

In 2008 we will once again include a session for papers presented by 'first time' speakers. Selected 'first time' presenters will be given constructive feedback on their work by appointed mentors. Papers should report on original research. (First time presenters' papers will also be considered for other sessions.) If you wish to be considered for this session clearly indicate this on your abstract.

**Posters**

Posters are encouraged and abstracts should be submitted by **5 March 2008** to ensure inclusion in scheduling, but the selection committee may consider later submissions for poster presentations. Details of requirements are available at <http://chsd.uow.edu.au/ahoc>.

**Peer Review**

Speakers may nominate to have their papers peer-reviewed, and this will assist with their recognition for DEST points. If you choose to have your paper peer-reviewed, you must also make yourself available to review another author's paper if requested by the conference committee. Speakers applying for peer review must lodge their final paper and power point with the conference secretariat by **18 February 2008**. If you wish to have your paper peer-reviewed this must be clearly indicated under the title of your abstract.

**For further details about the Call for Papers and conference registration contact:**

Australian Health Outcomes Collaboration Web site: <http://chsd.uow.edu.au/ahoc>

Astoria Barr or Jan Sansoni, Email: [astoria.barr@act.gov.au](mailto:astoria.barr@act.gov.au) or [jan.sansoni@bigpond.com.au](mailto:jan.sansoni@bigpond.com.au)

Telephone: (Astoria) (+61) 02 6205 0869 or (Jan) (+61) 02 6291 7271 Fax: (+61) 02 6244 4201

**Health Outcomes 2006 was sponsored by: the National Palliative Care Program, Better Arthritis and Osteoporosis Care Program, Mental Health and Suicide Prevention Branch, the Office for an Ageing Australia and the Primary Care Division of the Australian Government Department of Health and Ageing, The Australian Government Department of Veterans' Affairs, Queensland Health, and Eli Lilly Australia.**