Bridging Research and Policy for Better Health and Social Care

Winning submission for the Queen’s Anniversary Prizes for Higher and Further Education 2009
Applying research to the advancement of global health and social care policy

Over a period of twenty years the University’s research centre has brought together multidisciplinary approaches and innovative methods to address challenges in health and social care in the UK, Europe and internationally. This has been achieved through the modelling of demographic change and its consequences and implications, pioneering work on the NHS and comparative health systems analysis, cutting edge research into the impact of EU law and governance on health systems, and through extensive contributions to health and social care policy developments in many countries. The work is widely seen as unique in its continuing ability to bridge the gap between research and policy. It is widely and frequently referenced by policy makers and has contributed to raising the quality of evidence-based policy making within government. Practical applications of the work have led to improvements in choice and competition in the National Health Service and the implementation of clinical governance and ‘star rating’ of the NHS in England, the overhaul of national stroke services, and groundbreaking research on the shaping of new models for care management in the community which have underpinned legislation.

Beyond the UK, the University’s leading role in the European Observatory on Health Systems and Policies is a notable instance of its success in combining technical competence with a clear focus on the contexts and drivers of policy, and in forming networks and partnerships with other leading academic institutions, governments and organisations. This has enabled the work to be efficiently transmitted to the international scene. Five large postgraduate programmes are delivered, attracting high quality students from around the world and helping to prepare a well trained cadre of future leaders in health and social care policy.

Acknowledgements

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Bridging research and policy for better health and social care

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INTRODUCTION

LSE Health and Social Care is a research centre that brings together diverse disciplinary perspectives and cutting edge methods to tackle current and future challenges to health and social care in the UK, Europe and beyond.

Our work is unique in its commitment to bridging the gap between research and policy. We produce first-class policy-relevant research which has influenced policy developments in many countries. In 2004 the Lancet cited one of the Centre’s flagship programmes, the European Observatory on Health Systems and Policies, as an ideal model for a “support function for public policymakers”. Our social care programme has been the leading advisory body to the Department of Health on social and long-term care developments for more than twenty years and we regularly advise many other governments and international agencies.

Our dedication to combining technical competence with policy mindedness runs through our research, policy advice, partnerships and networks. It is also an essential element of our postgraduate programmes, which train future generations of leaders in health and social care. In the coming years the Centre aims to consolidate and expand its portfolio nationally and internationally, with increased emphasis on health and development.

The Centre’s focus on ‘bridging the gap’ is supported by rigorous academic standards in six key areas of innovative research.

1. Learning from health systems around the world
We are at the forefront of developing methods to compare health and social care systems within and across countries. Our comparative analysis aims to identify what works best in different settings and why.

2. Understanding changing needs in health and social care
The Centre’s work aims to improve understanding of issues with major implications for health and social care ranging from population ageing to HIV/AIDS. The Centre plays a leading role in developing mathematical and micro-simulation models to help governments in planning for changing needs. The Centre is also developing a novel approach to setting priorities for populations at local and national levels.

3. Improving quality of care
Our work has contributed to major national and international efforts to improve health and social care system performance and quality, ultimately improving citizens’ lives, through better regulation and the development of quality indicators and evaluation of their impact.

4. Enhancing choice, competition and incentives for health and wellbeing
Choice, competition and incentives can play a key role in improving health system performance and fostering more responsive and individual-centred care. The Centre has influenced choice policies in the NHS and social care market governance, examined incentives in pharmaceutical markets internationally and enhanced understanding about the role of incentives in encouraging beneficial health behaviour.
5. Improving efficiency and access to services
Through extensive research and methodological advances, we have made an important contribution to measuring and understanding inequalities in health and access to health care, and developing policies to reduce them. We have also contributed to improving efficiency in the use of resources.

6. Thinking about how best to pay for health and social care
How we pay for health and social care can have profound effects on individuals, the health system and the wider economy. The Centre has carried out award-winning and innovative work on financing, including developing pioneering computer models for projecting long-term care expenditure and policy analysis to inform health care reform.

CONTRIBUTING TO LSE’S WORLD-LEADING REPUTATION

LSE Health and Social Care was the first cross-departmental, interdisciplinary centre to be established at LSE. Bringing together academics from different disciplines and several departments (Social Policy, Management, Accounting and Social Psychology) has encouraged collaboration across different disciplines and broadened the scope of research. The Centre was also one of the first to link health and social care, now a mainstream combination in the UK.

We run four large postgraduate teaching programmes (International Health Policy, Health Economics, Health Population and Society, and Health Economics, Policy and Management), with a fifth (Health Policy, Planning and Financing) run jointly with the London School of Hygiene & Tropical Medicine (LSHTM). Many of the courses taught under these MSc programmes derive from the Centre’s research and are exclusively taught at the Institution. Moreover, a large proportion of the Centre’s non-teaching staff (i.e. researchers rather than lecturers) are involved in teaching at postgraduate level, providing students access to the latest thinking and evidence from the field. Our commitment to building capacity in developing countries will be cemented in 2011 with a new MSc in Global Health and Policy (run jointly with Imperial College). We are also helping to establish a programme in international health policy at the Tata Institute of Social Sciences in India.

We consistently attract high quality students from around the world (from 91 countries: a third from North America, a quarter from Europe and a quarter from Asia and Africa). More than 1,200 students have graduated from our programmes in the past twenty years. Our Masters courses are rated as some of the ‘healthiest’ in the Institution; the entry criteria are high and over 75% of students graduate with merit or distinction.

In the 2008 Research Assessment Exercise (RAE), the Centre’s staff accounted for 45% of the submission of the Institution’s Department of Social Policy, which has consistently been ranked first in the UK, with 50% of its research classified as world-leading and 100% recognised internationally in terms of originality, significance and rigour. The Centre contributed over half of the department’s RAE-eligible income in 2008.
The Centre uses its substantial reserve fund to fund doctoral and post-doctoral students. This year the Institution’s Research Review Committee highlighted the Centre’s PhD programme and postdoctoral support systems as “exemplary”. Nearly half (54) of all PhDs completed in the Department of Social Policy in the last decade have been in the field of health and social care.

We strongly promote continuous professional development (CPD) and training. This includes cooperation with governments and the private sector. Since 2000, the Centre has organised CPD activities involving more than 700 trainees, generating significant income.

There is evidence that the unique combination of academic rigour and policy mindedness embodied in the Centre’s work will form part of a major shift in UK academic thinking in the future: the Research Excellence Framework (REF), which will replace the RAE in 2010, will explicitly reward institutions that demonstrate the policy impact of their work, and the British Academy set up a Policy Centre in September 2009 to expand the range and influence of its policy work and facilitate and incentivise policy engagement and impact generation.

VALUE AND BENEFIT TO THE WIDER COMMUNITY

In 2008 the *Times Higher Education Supplement* bemoaned the divorce between politics and academia, concluding that “pulling down the barriers between the academy and public life could only have a stimulating impact on public thinking”. In bridging the gap between research and policy, the Centre is doing just that.

This is particularly visible in the work of the European Observatory on Health Systems and Policies. The Centre is the leading academic partner of the Observatory – a unique international partnership between six European governments, one regional government, two academic institutions (the Centre and LSHTM), WHO, the World Bank and the European Investment Bank. Ireland, France and the European Commission are expected to join the partnership in 2009. The Observatory supports and promotes evidence-based health policy-making through comprehensive and rigorous analysis of the dynamics of health care systems in Europe. In doing so, it reflects the Centre’s aim of influencing public policy. The Observatory is considered to be a success story in knowledge development and transfer and a potential model for national decision-making in low- and middle-income countries.  

1. Belgium, Finland, Norway, Slovenia, Spain, Sweden and the Region of Veneto in Italy.

The Observatory is at the forefront of international health policy and its reputation for high standards is crucial to its success.

- It produces comprehensive analytic reports entitled *Health Systems in Transition* profiles describing health system organisation, financing, service delivery and reforms in an extensive range of countries in across Europe and beyond.
- Policy dialogues provide a forum for the neutral exchange of comparative evidence, with international experts supporting national decision-makers through dialogue and knowledge transfer.
- An annual summer school brings together high-level policy-makers in a stimulating environment and provides a platform for European health policy debate.
- Several books have been published as part of the Observatory Series with Open University Press and Cambridge University Press drawing together evidence on key policy issues regarding funding health care, hospitals, health policy in an enlarged European Union, the health care workforce in Europe, and mental health policy and practice.
- Policy briefs synthesise key policy lessons from published studies in a format that responds to policy-makers’ needs, thus contributing to evidence uptake and playing an active role in knowledge transfer.
An important part of the Observatory’s work is organising ‘policy dialogues’ with ministries of health in Europe. These bring together high-level policy makers to debate specific policy issues with international experts. In the last two years alone we have been involved in 30 policy dialogues across Europe on subjects ranging from health system governance and primary care to hospital reform. The Observatory also produces policy briefs, which summarise key research findings in an accessible format to inform policy makers.

The centre’s contribution to science and policy in the field of social care is long-standing. It established its reputation with groundbreaking research on care management which influenced the provisions of the 1990 NHS and Community Care Act and continues to have comparable influence with its work on the future funding of adult social care among others. Its recent evaluation of the UK Department of Health’s high profile ‘individual budgets’ initiative has been essential to shaping policy implementation and future developments.

The Centre brings together a wide group of academics, professionals and policy makers by hosting major public policy networks (such as the European Health Policy Group, the Health Equity Network and the Preference Elicitation Group, which include over 1,200 members) and by holding regular seminars. Over the next two years the Centre will run a series of interactive seminars in partnership with the NHS Confederation to transfer practical and topical health policy knowledge from Europe to the UK. It also reaches a broad audience through its print media, particularly its policy publications Eurohealth and Euro Observer. The Centre’s findings are widely disseminated through its regular Research Bites and Research Digest publications as well as through lay summaries, which enhance public understanding of the Centre’s work.

Our research and other activities have had a significant impact in many areas of health and social care policy in the UK and internationally, in countries ranging from Finland and Russia to China and India.

**INFLUENCING POLICY**

We encourage our staff to be involved in advising policy makers and to take on expert leadership outside the Centre and support them in developing necessary expertise. Two staff members have been seconded to the Strategy Unit at the Department of Health, and former staff have gone on to take up roles such as Director of Policy at the King’s Fund and Director of WHO’s Health Evidence Network.

Recent graduates have a direct influence on policy through their work at ministries of health, as governmental advisers and at major international agencies. The Centre has produced more Harkness Fellows than any other institution in the UK. These Fellows have joined prestigious US universities such as Harvard, Stanford and Columbia. This scheme has a distinct two-way benefit, as the Fellows take their European knowledge to the US and return with a solid understanding of US policy issues. We also enjoy a fruitful collaboration with the Commonwealth Fund, one of the largest foundations in the US with a long involvement in health policy issues.
The important role our staff members play in the UK health and social care system and internationally is reflected in the influential positions they hold and have held outside the Centre. These include: Senior Policy Adviser to the Prime Minister at No 10 Downing Street; Chairman of Health England; Director of the Patient Benefit Programme in the National Institute for Health Research; Director of the Office for Information on Healthcare Performance at the Commission for Health Improvement; Welfare Reform Adviser to the Secretary of State for Work and Pensions; Specialist Adviser to the House of Lords (Parliamentary) Select Committee Inquiry on the European Commission’s Green Paper on a Mental Health Strategy for Europe; adviser to the European Commission for the European Pharmaceuticals Forum; members of the Department of Health’s Advisory Committee on Resource Allocation; committee member for the Overview of the Review of Health Inequalities Post-2010 in England; International Expert Panel member for the Institute for Quality and Efficiency in Health Care (IQWiG) in Germany; adviser to the Directorate for Social Affairs of the European Parliament; member of the Board of the European Medicines Agency; and advisers to numerous governments globally including Austria, China, Sweden and Russia.

NEW DEVELOPMENTS AND DIFFERENT APPROACHES

The Centre has set international standards for research and teaching. Its multi-disciplinary and comparative approach and its work in engaging policy makers are unique strengths that have encouraged replication around the world. The Centre’s postgraduate degree in international health policy is now being taken up in Mumbai and the Observatory has served as the model for various international initiatives, including WHO’s Asian Health Systems Observatory, the International Observatory on Mental Health and an African Observatory on Health Systems and Policies proposed by the United States Agency for International Development (USAID).

The following sections highlight specific examples of our contribution to innovative research and new knowledge, as well as our impact on policy.

1. Learning from health systems around the world

The Centre makes a key contribution to cross-national comparative analysis in two ways: it lays the groundwork for others to engage in comparative analysis and it produces award-winning comparative analysis of its own. Through the Observatory, the Centre provides the international research community with robust and systematic information on every health system in Europe. The Observatory’s health system profiles are internationally recognised for their innovative approach, their rigour and their comprehensive scope.

“Next time you go to ‘Europe’, download the profile to stick in your bag along with your *Lonely Planet* guidebook, and you’ll have plenty to think about on the plane.”

Jane Salvage, British Medical Journal 2005;331:241

4. The Observatory has produced profiles of health systems in all 52 countries of WHO’s European Region as well as Australia, New Zealand, Mongolia and Canada, and is producing profiles for Japan and South Korea.
Aimed at a multi-national audience, our comparative work highlights the diversity of approaches to health policy as well as the importance of history and context in shaping these approaches. We have tried to identify what works best in different settings and why. Our knowledge and skills have led to requests from many countries to draw lessons for national policy, often with the explicit intention of informing health care reform.

- The Centre is internationally recognised for its comparative work on health care financing in Europe, which covers health care, mental health and long-term care.

- Our work on mental health policy in Europe won the Baxter Prize in 2007. In 2005 WHO commissioned an official background paper on the economics of mental health for its Ministerial Conference on Mental Health. The socioeconomic case we made for investment in mental health featured heavily in the conference’s Declaration and Action Plan signed by 52 European health ministers. Our comparative work was also prominent in the European Commission’s Green Paper on Mental Health (2005) and has fed directly into several other high-level reports in the UK and at European level. We are currently involved in developing the EU’s mental health strategy.

- In 2007 and 2008 the Centre compared health system performance across seven European countries to inform debate about health care reform in the United States. Our work formed the centrepiece of a high-level symposium for US policy makers in Washington DC following the presidential elections in 2008. This was attended by senior US government officials, advisers to President-elect Obama’s transition team and several ministers of health from other countries.

- The Centre was a major contributor to WHO’s landmark conference on health systems, health and wealth in Tallinn 2008.

- We have twice been invited by the Belgian government to undertake groundbreaking analysis of the impact of EU law and governance on health systems.

- We are leading the health work of the European Observatory on the Social Situation, set up by the European Commission in 2005 to analyse social and demographic trends. We report on key health and social care policy challenges and produce research and policy briefs to assist the Commission.

2. Understanding changing needs in health and social care
The Centre’s work aims to improve understanding of issues with major implications for health and social care, ranging from population ageing to HIV/AIDS. The Centre plays a leading role in developing models to help governments in planning for changing needs.

- The Centre is at the forefront of developing formal mathematical and micro-simulation models and interdisciplinary work that cuts across demography, other social sciences, epidemiology, biology and human genetics.

5. Awarded by the European Health Management Association for an outstanding publication and/or practical contribution to excellence in health care management.
We have developed new methods for analysing demographic and health data. These have shown how the large mortality increases in Russia post-1990 mainly affected less-educated men and women, while the mortality of the university-educated improved.

Our forecasts of the future living conditions of older people in Europe, including a large ESRC-funded multi-disciplinary project (Modelling Needs and Resources of Older People to 2030), have fed into the government’s imminent Green Paper on long-term care.

In terms of reproductive health and HIV/AIDS our research has challenged the migrant worker thesis that riskier sexual behaviour is associated with rural-urban migration and highlighted the importance of cultural understandings of sex in Kenya and Tanzania. We have also provided empirical evidence of the beneficial effect of grandmothers on child survival rates in the Gambia.

The Centre’s HIV/AIDS group brings together leading social scientists to confront the disease’s socioeconomic implications. A report commissioned by DFID in 2003 led to a change in policy from pursuing so-called labour saving technologies to replace labour lost to AIDS-related morbidity and mortality, to investing instead in ARVs, which has had a positive effect on many lives in developing countries.

3. Improving quality of care
The Centre’s work has contributed to major efforts to improve health and social care system performance and quality through priority setting, better regulation and the development of quality indicators.

The Centre is a leading member of QQuIP, the Health Foundation’s flagship research programme providing independent reports on the quality of health care in the UK. This research programme includes the development of a novel approach to priority setting using Decision Conferencing. The research is being applied in collaboration with Primary Care Trusts and the Department of Health.

We have developed methods for analysing how money might be spent to greatest effect, helping ministers and managers to understand the impact of policies and priorities, and providing blueprints for action in critical areas such as care for stroke patients.

Centre staff have been involved in the development of methods to assess the implementation of clinical governance and 'star rating' of the NHS in England and the impact of these initiatives.

As part of the UK government effort to improve governance of the social care sector, we are developing a range of performance indicators for social care organisations that will tap into users' views about the quality of their care, thus putting users' views at the heart of performance assessment and enabling organisations to develop a service which best meets the needs of users.

The Centre’s pioneering work in applying systematic methods and mathematical computer modelling to aid decision making in complex areas has fed into decision-making about health and immigration for the National Audit Office.
Our Health Information Systems group leads work on evaluating the implementation of electronic patient records in the NHS, which aim to improve safety and quality by providing health care staff with faster access to reliable patient information.

In developing countries the Centre works to identify valid and practical indicators of quality of care in maternal health, a neglected area in research and policy.

4. Enhancing choice, competition and incentives for health and wellbeing
Choice, competition and incentives can play a key role in improving health system performance and fostering more responsive and individual-centred care.

The Centre was one of the major architects of recent NHS reforms introducing greater patient choice of provider to reduce waiting times for treatment.

Our work in developing and evaluating innovative care choice models such as person-centred planning and individual or patient budgets was endorsed in the Darzi Report on the NHS, *High Quality Care for All 2008*. Pilot programmes are now underway across the NHS.

In pharmaceutical policy the Centre has contributed to conceptual and methodological developments in measuring the determinants of competition in different markets; in stimulating research and development (R&D) for neglected diseases; and in investigating and recommending incentives for antibiotic R&D for the Swedish government’s EU presidency to address the growing problem of antibiotic resistance – pioneering work that will feed into European Council regulation on investment in antibiotics R&D in Europe.

The Centre has furthered understanding on how people make health care choices under conditions of risk (smoking, obesity, avian flu) and the extent to which incentives can be used to encourage better health and wellbeing. In 2008 its research formed the basis of a Health England report (*Incentives for Prevention, Health England Report No. 3*) highlighting the performance of incentive schemes in the NHS. As a result we were recently awarded a major grant from the Wellcome Foundation to investigate the use of incentives in health.

5. Improving efficiency and access to services
Through its extensive research and methodological advances, the Centre has made an important contribution to measuring and understanding inequalities in health and access to health care. It has also contributed to improving efficiency in the use of resources.

The Centre’s commitment to improving equity and efficiency in health and social care is reflected in its service evaluation programme, which includes national evaluations of: the English community care reforms; the Individual Budgets pilots; and new technologies for supporting people with physical and mental health problems.

The Centre has played a key role in creating conceptual and methodological tools to measure inequalities in access to health care. This work has been applied to a wide range of countries around the world, including the UK.
Research that predicted the impact of variations in social care services on delayed hospital discharge rates was instrumental in the Department of Health’s decision to allocate £300 million of special funds to local authorities in 2002.

In 2004 we co-authored a widely-cited OECD report that placed the comparative measurement of inequalities in the use of health care on the world scene and which developed methodological tools that we have since used to understand inequalities in hospital service utilization in Europe. We have also explored the factors that explain inequalities in older populations in the UK and Europe.

We proposed a novel statistical model which has been considered by the Department of Health to analyse the relationship between hospital costs and reimbursement through Health Related Groups.

Centre staff produced a report for the Secretary of State for Health (published by the Department of Health in 2009) reviewing the formula used to allocate resources to improve equity within the NHS in England.

We have produced reviews for the Audit Commission (2004) on Caring for Older People and Employment and The Effectiveness and Cost-Effectiveness of Support and Services to Informal Carers of Older People.

The National Service Frameworks for mental health, older people and children used evidence from the Centre to point to the level of need, the short- and longer-term economic consequences of not meeting need, and the cost-effectiveness of interventions.

Our staff’s work formed the basis for ‘Social Work Practices’, a major policy initiative first outlined in the Care Matters Green Paper (2006), which recommended the setting up of social workers in professional partnerships akin to GP practices, and now counts six pilots (2009).

In 2007 the Centre carried out the first comprehensive review of six European health technology assessment (HTA) systems. This led to requests from the Quebec and Chinese ministries of health to advise them on improving their HTA systems. Research on the National Institute for Clinical Excellence (NICE) in the UK has fed into recent US meetings on the creation of a potential national HTA agency and has supported similar developments in central and eastern Europe.

6. Thinking about how best to pay for health and social care
The methods used to pay for health and social care can have a profound effect on individuals, the health and social care system, and the wider economy. One of our notable achievements has been to bring academic rigour and evidence to a debate frequently polarised by ideology. We contribute to knowledge and policy in four main areas: social care, long-term care, health care financing in Europe and health system financial sustainability.

In 2005–06 the Centre produced the most comprehensive review to date of options for financing social care for older people in England. Winner of the 2007 prize for best think tank report, our
work recommended a more universal system for financing social care and fed into the Treasury’s Comprehensive Spending Review and the Social Care Working Group chaired by the Parliamentary Under Secretary for Health. We also developed a model projecting levels of demand for and spending on social care and disability benefits for ‘working age’ adults for the Cabinet Office and the Department of Health.

- We developed a pioneering computer model to make projections of long-term care expenditure which are sensitive to the changing needs of older people and changes in patterns of formal and informal care. The model has been an important resource, informing the 1999 Royal Commission on Long Term Care, the Treasury’s Health Trends Review (2002), the Department of Health’s study of residential care supply (2002), projections of demand for long-term care for older people for the National Assembly of Wales (2005), the European Commission’s 2006 public expenditure projections and the OECD’s 2005 study of long-term care.

- The Centre was the first to carry out comprehensive analysis of health care financing in Europe. The Centre’s book on this subject won the 2002 Baxter Prize, leading to a request from the Treasury to prepare a companion report to the Wanless Report on financing health care in the UK. A 2002 study was the first detailed analysis of markets for private health insurance across the European Union and is still the most comprehensive source of comparative information on this subject (updated in 2009 to cover all 27 member states).

- In 2007 we produced a report on the financial sustainability of European health systems for the European Parliament. WHO commissioned policy reports on long-term care financing and financial sustainability to form the basis for health and finance ministerial policy discussions during the Czech Presidency of the European Union in 2009.

- Our staff proposed the Partnership Scheme for funding pensions and long-term care whereby the state provides matching grants that match individual and family contributions. This was endorsed by the 2005 Wanless Report Securing Good Care for Older People and is under serious consideration to be included in the forthcoming Government green paper on the subject.

## OUR ACHIEVEMENTS RECOGNISED

Internal and external evaluation of the Centre’s work has consistently highlighted its strengths:

- In 2009 LSE Health and Social Care was unanimously nominated as the Institution’s candidate for the 2009 Queen’s Anniversary Prizes in recognition of its research excellence and its significant contribution to graduate teaching and to the wider health and social care policy environment in the UK and internationally

- Since 1996 our host department has ranked first in social policy in the UK in the RAE.

### “The work of the Centre’s HIV/AIDS group is pioneering and truly world class, and has had a real impact on the advancement of effective policy in the fight against HIV/AIDS globally.”

Alan Whiteside, Director of the Health Economics and HIV/AIDS Research Division at the University of KwaZulu-Natal, South Africa

### “The Centre’s work is of exceptional quality and is a standard reference when we look at international health systems developments to inform national policy-making.”

Franz Knieps, Director-General for Health Care, Health Insurance and Long-Term Care Insurance, Federal Ministry of Health, Germany

### “The quality of the review of Finnish pharmaceutical policy regulation was outstanding. The review has already contributed to significant policy changes, and will most probably continue to do so.”

Paula Risikko, Minister of Health and Social Services, Finland
In 2008 an evaluation by the Institution’s Research Review Committee, chaired by the Pro-Director of Research and Development, found that the Centre was the largest in the Institution in terms of staff numbers, research outputs and income.

Independent external academic evaluation of the Observatory (2004, 2008) showed it is highly successful in generating and disseminating evidence to influence policy and noted that it is unambiguously the top institution in Europe in its field.

The latest (2003) independent external evaluation of our social care work stated that “the [Centre] is an outstanding organisation that has contributed greatly to policy and academic research in the United Kingdom and internationally”.

Other indicators of the Centre’s achievements include its track record in publishing, fundraising, establishing academic partnerships, and external recognition of staff excellence:

- In the last decade the Centre’s staff have published more than 700 papers in leading peer-reviewed journals as well as 200 books, book chapters and monographs. The Centre hosts leading peer-review journals (Health Economics, Policy and Law and Globalization and Health) and is the base for Population Studies.

- In the last four years the Centre has raised £17.1 million from research grants from the Department of Health, the Economic and Social Research Council, the National Institute for Health Research, the Medical Research Council, the European Commission, the World Bank, the World Health Organization (WHO) and the Wellcome Trust (among others). Most grants have been awarded as part of a competitive process, underlining the quality of the Centre’s work relative to others in the field.

- The Centre was nominated by the National Institute for Health Research to host the new School for Social Care Research, launched in May 2009, with a budget of £15 million.

- The Centre has significant academic partnerships with leading UK Universities (Imperial College, LSHTM, King’s College London) and has developed several international academic research programmes (University of KwaZulu-Natal, Tata Institute of Social Sciences in Mumbai and Stanford University).

- Extensive staff membership of editorial and advisory boards, associations, technical committees and professional boards and scientific and research councils; fellowships and honorary posts held; prizes won; requests for presentations and keynote speeches; and requests from governments and councils for advice and consultation.

“The contribution of the Centre to the economics of social care is unrivalled. It has an established national and international reputation for the quality of its analytical models and analyses. But it is also able to apply this science effectively, providing an essential source of expertise for the Department’s policy and analytical communities.”

Professor Dame Sally C Davies, Director General, Research and Development Directorate and David Behan, Director General, Social Care, Local Government and Partnerships Directorate, Department of Health

NIHR School for Social Care Research

The Centre leads and hosts the new School for Social Care Research, a major partnership initiative that opened in May 2009 and brings together six leading academic centres of social care research in England. Social care affects the lives of approximately 1.8 million people and their families in England; the new national research school will conduct and commission studies that can improve care and support, and so improve individual lives.

With an emphasis on engagement with users of services, carers and practitioners; the highest standard of scientific excellence and relevance; and visibility and accessibility of information on projects and their findings, the School aims to improve the evidence base for social care practice through world-class research in order to ensure that people in England are provided with better and more effective services in the future.
### STAFF LIST

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<td>Research Assistant in Health Policy</td>
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<td>Dr Marin Gemmill</td>
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<td>Professor Howard Glennerster</td>
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<td>Dr Scott Greer</td>
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<td>Dr Gill Hastings</td>
<td>Senior Scientific Administrator, NIHR School for Social Care Research</td>
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<td>Mrs Champa Heidbrink</td>
<td>Centre Manager, LSE Health</td>
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“The Centre is at the forefront of innovative and constructive thinking about health and social policy in the UK. Its contributions are thought-provoking, challenging and, perhaps above all else, practical. It is rare in my experience for a pre-eminent academic institution to produce research that leads in its field and policy proposals that are radical in scope and yet capable of implementation. The Centre does just that.”

Alan Milburn, UK Secretary of State for Health, 2000–2003

“It is arguably the leading Centre on comparative health systems analysis. Their work to bridge the gap between research and policy is admirable and has influenced our own work.”

Bjørn-Inge Larsen, Chief Medical Officer for Norway
"The Centre’s research on health systems and policy is exceptional in its field. The Centre was a major contributor to the Greek government’s 2000 White Paper on the reform of our national health system, which led to the development of major health reforms on decentralisation and hospital restructuring."

Alexandros Papadopoulos,
former Minister of Health,
Home Affairs and Finance, Greece
The Centre is an international leader in health policy analysis with a strong reputation and influence within Europe, the USA, and the rest of the world. The Centre’s work is a model for policy-relevant research.

— Alan Garber, Professor of Health Policy and Director, Centre for Health Policy, Stanford University

The MSc struck an important and unique balance between the technical and policy aspects of international health. The experience I gained on this world-class programme has served me well in my work as Assistant Director General at AusAID.

— Andrew Laing (MSc International Health Policy 2004)

“I consider your team as a world leader in the field. Your work has had major policy implications for poor communities, particularly in the developing world.”

— Baron Peter Piot, former Director of UNAIDS and Director, Institute for Global Health Policy, Imperial College
The Queen’s Anniversary Prizes for Higher and Further Education

The Queen’s Anniversary Prizes for Higher and Further Education recognise work of outstanding achievement, importance and quality, and promote excellence in UK universities and colleges.

Educational establishments may offer any subject area or type of work or project in which they are involved. They must be able to demonstrate work of a world-class level and are subject to a rigorous assessment process.

The prizes are awarded biannually by the Royal Anniversary Trust and are part of the UK national honours system.

The Queen’s Anniversary Prizes are made by The Queen upon the advice of the Prime Minister, on the recommendations of the Royal Anniversary Trust’s Awards Council. The Queen presents the medal and prize certificate at an honours ceremony at Buckingham Palace the day after an evening banquet at Guildhall in the City of London attended by representatives of prize-winning institutions and leading figures in economic, social and cultural life at home and overseas.
“Thanks to its consistently outstanding and innovative work, the Centre is universally recognised as a world leader in the field of health and social care. Its work has played a large role in contributing to the success of our Department of Social Policy in leading the field in the UK in all Research Assessment Exercises, and underpins and enhances the strong national and international reputation of our institution.

“There is no doubt that the Centre’s work has a very real impact on health and social care policy and thus on the lives of citizens nationally and internationally.

“Furthermore, the immensely successful and high quality postgraduate teaching programmes bear testament to the Centre’s dedication to sharing knowledge and nurturing future international leaders.

“Crucially for sustainability and citizenship within the institution, the Centre attracts one of the highest research incomes in the institution.”

Howard Davies, Director of London School of Economics & Political Science

“An exceptional research centre that truly deserves its outstanding reputation as an innovative and influential international leader in the field of health policy research. The Centre has had an unprecedented and direct influence on our work. I cannot overstate the impact that the Centre has achieved in the field of health policy in the European region.”

Dr Marc Danzon, WHO Regional Director for Europe

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LSE Health and Social Care

Established in 2000, LSE Health and Social Care is a research centre in the Department of Social Policy at the London School of Economics and Political Science (LSE) and is also affiliated with the Departments of Accounting and Management. It brings together in one centre LSE Health and the Personal Social Services Research Unit.

The mission of LSE Health and Social Care is to advance, transmit and sustain knowledge and understanding through the conduct of research, teaching and scholarship at the highest international standards, for the benefit of the international and national health and social care policy community.

We aim to expand and improve conceptual frameworks, apply new methodologies, encourage debate about issues raised by research developments and introduce new questions or themes that will contribute to policy discussions.

The Centre is committed to interdisciplinary research that benefits policy makers and health and social care professionals.

To support this mission the Centre’s key priority is to recruit, develop and retain staff of the highest quality and provide a working environment that enables staff to optimise their contribution to the Centre. Disciplinary backgrounds include accounting, applied social statistics, demography, econometrics, economics, geography, health policy, health services research, public health, and social policy.

The Centre’s unique research base contributes to LSE’s established world presence and reputation in health policy, health economics, social care policy, health services research and mental health economics.