Walter Holland’s book is unique in that it provides an overview of Health Services Research, a growing area of research, and examines its genealogy and evolution to enable those working or researching the field to have a better understanding of where HSR has come from and the directions it could go in the future, finds Chloe Sharp.


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In the UK, health services regularly receive huge attention in the media. Quality of healthcare and accessing health services are important topics for patients. To improve health services, having an understanding the history and methods for evaluation are of interest to academics, policy makers, health service managers and health care professionals.

Health Services Research is a multi-disciplinary field within academia that evaluates local and national health services in the UK, how patients access services, cost of health care and patient outcomes. It is an area in which Professor Walter Holland at the London School of Economics has had a long history. In 1954, Holland qualified from St Thomas’s Medical School with a degree in Physiology, he went on to serve in the Royal Air Force attached to the Epidemiological Research Laboratory in Colindale. He was a lecturer in the Department of Medicine at St Thomas’s and became an MRC Clinical Research Fellow in the Department of Epidemiology and Medical Statistics at the London School of Hygiene and later returned to St Thomas’s in 1962 and was appointed to Professor in 1968 and recently retired. Throughout his career, Professor Walter Holland main research interests included epidemiologic principles to health services research and he has published widely in the area from inequalities in accessing health services to evaluating how health services can be improved.

Improving Health Services provides a personal account of Health Services Research (HSR) by Holland, drawing upon the research experiences of the St Thomas' Research Unit, which he founded. Walter has a vast amount of expertise in this area and his book provides a background of HSR, a comparison of HSR between the UK and US, HSR in practice, key questions and priorities for the future for HSR. The book has 9 chapters; the first part describe health services research in general, in the UK and the USA; the second part represents Holland’s reflections and observations on organisational and funding issues, HSR in practice and priorities in medical research; and the final part is a thoughtful précis on key questions in HSR and conclusion.

The book provides a detailed history of HSR from research and policy perspectives. A background of HSR is useful as the lessons learned through the evolution of HSR can be drawn upon when moving this area of research forward and making improvements in HSR. However, due to constantly changing structures in health, it raises the question of whether lessons could be readily applied from previous changes. Having an outline of the history of HSR, which has contributed toward organisational issues, could allow researchers working in the field to better understand why there are difficulties in accessing funding and why organisational challenges exist.

I review this book as a relatively new HSR researcher. For me, the book provided a useful context for my field as a researcher of health services and enabled me to understand where my area of research sits as HSR is a huge area and the book provides a succinct way of viewing HSR in its entirety. The genealogy of the use of certain research
methodologies, such as Randomised Controlled Trials, allowed me to reflect on common research designs used in HSR.

The book is aimed at those relatively new to working in administration or management in Health Services or academic researchers in HSR but may not be useful for students or those who have worked in HSR for a considerable amount of time. However, the book does offer key questions that could be considered by policy makers or managers in Health Services or researched further by HSR scholars, particularly the evaluation of research in HSR.

One key aspect of the book is the application of HSR. However, I feel that the applicability of the book is limited: there is a focus on HSR in the UK and US and not Europe or Australia; it does not focus on the current and ever changing environment of HSR; it is a personal account and not an objective, critical appraisal of the field; it focuses on certain diseases and health services with no real rationale of their selection; and finally, the book does not consider the cultural and ethnically diverse population, where health inequalities and unequal access to health services is a marked problem. It is recommended that future versions of the book, or books that build upon this book, consider the inclusion of these areas.

In conclusion, *Improving Health Services* sets out to provide a background of HSR, methods used and its application and learning from its history to improve health services in its evaluation and delivery. It is unique in that it provides an overview of Health Services Research, a growing area of research, and examines its genealogy and evolution to enable those working or researching the field to have a better understanding of where HSR has come from and the directions it could go in the future. However, the book does have its limitations, which can hinder the wider applicability and relevancy of the book in the current milieu of HSR. In UK and US settings, as Walter focuses on, HSR exists within increasingly ethnically and culturally diverse populations. In addition, research itself is changing as it is currently exists in a global environment where information about research of Health Services is readily available and accessible.

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