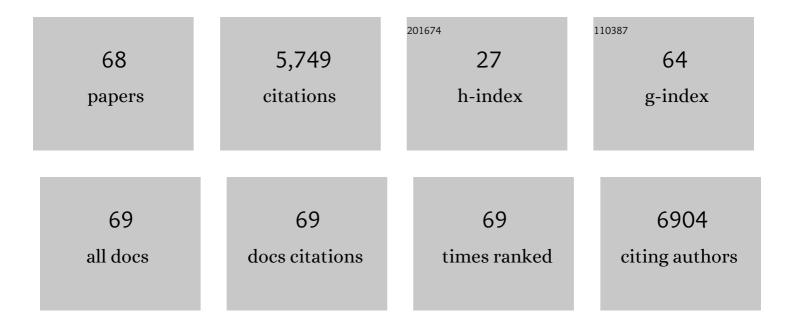
## Joanne Greenhalgh

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/8229492/publications.pdf

Version: 2024-02-01



| #  | Article   | IF  | CITATIONS |
|----|---|-----|-----------|
| 1  | Understanding â€~context' in realist evaluation and synthesis. International Journal of Social Research<br>Methodology: Theory and Practice, 2022, 25, 583-595.   | 4.4 | 75        |
| 2  | An Evidence-Based Theory About PRO Use in Kidney Care: A Realist Synthesis. Patient, 2022, 15, 21-38.   | 2.7 | 9         |
| 3  | Understanding the complexities of collecting and using PRO data in a primary care context. BMJ<br>Quality and Safety, 2022, 31, 175-178.  | 3.7 | 2         |
| 4  | Contextualising Youth Justice Interventions: Making the Case for Realist Synthesis. Sustainability, 2022, 14, 854.  | 3.2 | 5         |
| 5  | How, when, and why do inter-organisational collaborations in healthcare work? A realist evaluation.<br>PLoS ONE, 2022, 17, e0266899.  | 2.5 | 9         |
| 6  | Design and evaluation of an interactive quality dashboard for national clinical audit data: a realist evaluation. , 2022, 10, 1-156.  |     | 4         |
| 7  | Using an implementation science approach to implement and evaluate patient-reported outcome measures (PROM) initiatives in routine care settings. Quality of Life Research, 2021, 30, 3015-3033.  | 3.1 | 127       |
| 8  | Institutional use of National Clinical Audits by healthcare providers. Journal of Evaluation in Clinical Practice, 2021, 27, 143-150.   | 1.8 | 14        |
| 9  | How do team experience and relationships shape new divisions of labour in robot-assisted surgery? A realist investigation. Health (United Kingdom), 2021, 25, 250-268.  | 1.5 | 9         |
| 10 | Why do some inter-organisational collaborations in healthcare work when others do not? A realist review. Systematic Reviews, 2021, 10, 82.  | 5.3 | 40        |
| 11 | When trust, confidence, and faith collide: refining a realist theory of how and why<br>inter-organisational collaborations in healthcare work. BMC Health Services Research, 2021, 21, 602.   | 2.2 | 19        |
| 12 | Hidden labour: the skilful work of clinical audit data collection and its implications for secondary use of data via integrated health IT. BMC Health Services Research, 2021, 21, 702.   | 2.2 | 9         |
| 13 | Analysis of a Web-Based Dashboard to Support the Use of National Audit Data in Quality Improvement:<br>Realist Evaluation. Journal of Medical Internet Research, 2021, 23, e28854.  | 4.3 | 3         |
| 14 | Routine provision of feedback from patient-reported outcome measurements to healthcare providers and patients in clinical practice. The Cochrane Library, 2021, 2021, CD011589.   | 2.8 | 45        |
| 15 | STOPP/START interventions to improve medicines management for people aged 65 years and over: a realist synthesis. Health Services and Delivery Research, 2021, 9, 1-118.  | 1.4 | 2         |
| 16 | A realist analysis of treatment programmes for sex offenders with intellectual disabilities. Journal of<br>Applied Research in Intellectual Disabilities, 2020, 33, 729-738.  | 2.0 | 3         |
| 17 | Exploring variation in the use of feedback from national clinical audits: a realist investigation. BMC<br>Health Services Research, 2020, 20, 859.  | 2.2 | 9         |
| 18 | Developing an Initial Program Theory to Explain How Patient-Reported Outcomes Are Used in Health<br>Care Settings: Methodological Process and Lessons Learned. International Journal of Qualitative<br>Methods, The, 2020, 19, 160940692091629. | 2.8 | 8         |

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|----|--|-----|-----------|
| 19 | Building an initial realist theory of partnering across National Health Service providers. Journal of<br>Integrated Care, 2020, 29, 111-125.   | 0.5 | 8         |
| 20 | Searching for Programme theories for a realist evaluation: a case study comparing an academic database search and a simple Google search. BMC Medical Research Methodology, 2020, 20, 217.                                 | 3.1 | 6         |
| 21 | How, in what contexts, and why do quality dashboards lead to improvements in care quality in acute hospitals? Protocol for a realist feasibility evaluation. BMJ Open, 2020, 10, e033208.                                  | 1.9 | 12        |
| 22 | Effects of interorganisational information technology networks on patient safety: a realist synthesis. BMJ Open, 2020, 10, e036608.  | 1.9 | 1         |
| 23 | The effects of interoperable information technology networks on patient safety: a realist synthesis.<br>Health Services and Delivery Research, 2020, 8, 1-162.   | 1.4 | 2         |
| 24 | Implementation of a problem-solving training initiative to reduce self-harm in prisons: a qualitative perspective of prison staff, field researchers and prisoners at risk of self-harm. Health and Justice, 2019, 7, 14.  | 2.1 | 10        |
| 25 | Factors supporting and constraining the implementation of robot-assisted surgery: a realist interview study. BMJ Open, 2019, 9, e028635.   | 1.9 | 24        |
| 26 | Problem-solving training: assessing the feasibility and acceptability of delivering and evaluating a problem-solving training model for front-line prison staff and prisoners who self-harm. BMJ Open, 2019, 9, e026095.   | 1.9 | 13        |
| 27 | Networked information technologies and patient safety: a protocol for a realist synthesis. Systematic Reviews, 2019, 8, 307.   | 5.3 | 4         |
| 28 | Strategies for incorporating patient-reported outcomes in the care of people with chronic kidney disease (PRO kidney): a protocol for a realist synthesis. Systematic Reviews, 2019, 8, 20.                                | 5.3 | 14        |
| 29 | How and in what Contexts Does Networked Health IT Improve Patient Safety? Elicitation of Theories from the Literature. Studies in Health Technology and Informatics, 2019, 264, 753-757.                                   | 0.3 | 2         |
| 30 | Guidance on guidelines: Understanding the evidence on the uptake of health care guidelines. Journal of Evaluation in Clinical Practice, 2018, 24, 105-116.   | 1.8 | 13        |
| 31 | †The harmony of social theory in evaluation' – commentary on †The art and science of non-evaluation evaluation'. Journal of Health Services Research and Policy, 2018, 23, 270-271.  | 1.7 | 3         |
| 32 | How do patient reported outcome measures (PROMs) support clinician-patient communication and patient care? A realist synthesis. Journal of Patient-Reported Outcomes, 2018, 2, 42.   | 1.9 | 299       |
| 33 | How do aggregated patient-reported outcome measures data stimulate health care improvement? A realist synthesis. Journal of Health Services Research and Policy, 2018, 23, 57-65.  | 1.7 | 69        |
| 34 | Percutaneous coronary intervention patients' and cardiologists' experiences of the informed consent process in Northern England: a qualitative study. BMJ Open, 2017, 7, e015127.  | 1.9 | 14        |
| 35 | Eliciting Context-Mechanism-Outcome configurations: Experiences from a realist evaluation<br>investigating the impact of robotic surgery on teamwork in the operating theatre. Evaluation, 2017, 23,<br>444-462.           | 1.8 | 14        |
| 36 | Functionality and feedback: a realist synthesis of the collation, interpretation and utilisation of patient-reported outcome measures data to improve patient care. Health Services and Delivery Research, 2017, 5, 1-280. | 1.4 | 129       |

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|----|--|-----|-----------|
| 37 | A realist process evaluation of robot-assisted surgery: integration into routine practice and impacts on communication, collaboration and decision-making. Health Services and Delivery Research, 2017, 5, 1-140.            | 1.4 | 29        |
| 38 | Quality and reporting standards, resources, training materials and information for realist evaluation: the RAMESES II project. Health Services and Delivery Research, 2017, 5, 1-108.  | 1.4 | 86        |
| 39 | Embedding robotic surgery into routine practice and impacts on communication and decision making:<br>a review of the experience of surgical teams. Cognition, Technology and Work, 2016, 18, 423-437.                        | 3.0 | 49        |
| 40 | Framework and guidance for implementing patient-reported outcomes in clinical practice: evidence, challenges and opportunities. Journal of Comparative Effectiveness Research, 2016, 5, 507-519.                             | 1.4 | 147       |
| 41 | RAMESES II reporting standards for realist evaluations. BMC Medicine, 2016, 14, 96.  | 5.5 | 446       |
| 42 | Referral management centres as a means of reducing outpatients attendances: how do they work and<br>what influences successful implementation and perceived effectiveness?. BMC Family Practice, 2016, 17,<br>37.            | 2.9 | 7         |
| 43 | Demand management for planned care: a realist synthesis. Health Services and Delivery Research, 2016, 4, 1-222.  | 1.4 | 9         |
| 44 | Outpatient services and primary care: scoping review, substudies and international comparisons.<br>Health Services and Delivery Research, 2016, 4, 1-290.  | 1.4 | 19        |
| 45 | Using realist reviews to understand how health IT works, for whom, and in what circumstances.<br>Journal of the American Medical Informatics Association: JAMIA, 2015, 22, e216-e217.  | 4.4 | 6         |
| 46 | Protocol—the RAMESES II study: developing guidance and reporting standards for realist evaluation:<br>FigureÂ1. BMJ Open, 2015, 5, e008567.  | 1.9 | 105       |
| 47 | Exploring complex causal pathways between urban renewal, health and health inequality using a theory-driven realist approach. Social Science and Medicine, 2015, 124, 266-274.   | 3.8 | 51        |
| 48 | What's in a mechanism? Development of a key concept in realist evaluation. Implementation Science, 2015, 10, 49.   | 6.9 | 502       |
| 49 | Electronic whiteboards: review of the literature. Studies in Health Technology and Informatics, 2015, 210, 389-93.   | 0.3 | 5         |
| 50 | Surgeon's experiences of receiving peer benchmarked feedback using patient-reported outcome<br>measures: a qualitative study. Implementation Science, 2014, 9, 84.   | 6.9 | 34        |
| 51 | The experiences of professionals with using information from patient-reported outcome measures to improve the quality of healthcare: a systematic review of qualitative research. BMJ Quality and Safety, 2014, 23, 508-518. | 3.7 | 358       |
| 52 | Do reviews of healthcare interventions teach us how to improve healthcare systems?. Social Science and Medicine, 2014, 114, 129-137.   | 3.8 | 35        |
| 53 | Functionality and feedback: a protocol for a realist synthesis of the collation, interpretation and utilisation of PROMs data to improve patient care. BMJ Open, 2014, 4, e005601-e005601.                                   | 1.9 | 107       |
| 54 | ISOQOL recommends minimum standards for patient-reported outcome measures used in<br>patient-centered outcomes and comparative effectiveness research. Quality of Life Research, 2013, 22,<br>1889-1905.                     | 3.1 | 613       |

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|----|--|-----|-----------|
| 55 | How do doctors refer to patient-reported outcome measures (PROMS) in oncology consultations?.<br>Quality of Life Research, 2013, 22, 939-950.  | 3.1 | 65        |
| 56 | Implementing patient-reported outcomes assessment in clinical practice: a review of the options and considerations. Quality of Life Research, 2012, 21, 1305-1314.   | 3.1 | 665       |
| 57 | The influence of objective measurement tools on communication and clinical decision making in neurological rehabilitation. Journal of Evaluation in Clinical Practice, 2012, 18, 216-224.                                      | 1.8 | 18        |
| 58 | The use of measurement tools in clinical practice: an observational study of neurorehabilitation.<br>Clinical Rehabilitation, 2010, 24, 74-81.   | 2.2 | 13        |
| 59 | The applications of PROs in clinical practice: what are they, do they work, and why?. Quality of Life<br>Research, 2009, 18, 115-123.  | 3.1 | 514       |
| 60 | Tacit and encoded knowledge in the use of standardised outcome measures in multidisciplinary team<br>decision making: A case study of in-patient neurorehabilitation. Social Science and Medicine, 2008, 67,<br>183-194.       | 3.8 | 65        |
| 61 | A survey of the practice of stroke doctors in developing transient ischaemic attack services in the UK.<br>Journal of Evaluation in Clinical Practice, 2007, 13, 395-399.  | 1.8 | 3         |
| 62 | The use of patient reported outcome measures in routine clinical practice: lack of impact or lack of theory?. Social Science and Medicine, 2005, 60, 833-843.  | 3.8 | 355       |
| 63 | An assessment of the feasibility and utility of the MS Symptom and Impact Diary (MSSID). Quality of Life<br>Research, 2005, 14, 1363-1374.   | 3.1 | 8         |
| 64 | The role and impact of patient-based health status measures on clinical decision making and clinician-patient communication in routine clinical practice. Clinical Therapeutics, 2003, 25, D13-D14.                            | 2.5 | 0         |
| 65 | The effectiveness of the use of patient-based measures of health in routine practice in improving the process and outcomes of patient care: a literature review. Journal of Evaluation in Clinical Practice, 1999, 5, 401-416. | 1.8 | 302       |
| 66 | Reviewing and selecting outcome measures for use in routine practice. Journal of Evaluation in Clinical Practice, 1998, 4, 339-350.  | 1.8 | 83        |
| 67 | The value of an outcomes information resource. Journal of Health, Organization and Management, 1996, 10, 55-65.  | 0.6 | 4         |
| 68 | Routine provision of information on patient-reported outcome measures to healthcare providers and patients in clinical practice. The Cochrane Library, 0, , .  | 2.8 | 16        |