Glenn Robert,, Ba

List of Publications by Year in Descending Order

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

107
papers7,887
citations31
h-index88
g-index118
ext. papers9,367
ext. citations3
avg, IF6
L-index

#	Paper	IF	Citations
107	Co-designing models for the communication of genomic results for rare diseases: a comparative study in the Czech Republic and the United Kingdom <i>Journal of Community Genetics</i> , 2022 , 1	2.5	O
106	Addressing inactivity after stroke: The Collaborative Rehabilitation in Acute Stroke (CREATE) study. <i>International Journal of Stroke</i> , 2021 , 16, 669-682	6.3	4
105	A co-design study to develop supportive interventions to improve psychological and social adaptation among adults with new-onset type 1 diabetes in Denmark and the UK. <i>BMJ Open</i> , 2021 , 11, e051430	3	O
104	Exploring liminality in the co-design of rehabilitation environments: The case of one acute stroke unit. <i>Health and Place</i> , 2021 , 72, 102695	4.6	O
103	Developing a novel intervention for type 1 diabetes and disordered eating using a participatory action design process: Safe management of people with Type 1 diabetes and EAting Disorders study (STEADY). <i>Diabetic Medicine</i> , 2021 , e14749	3.5	1
102	Clinician and patient experiences when providing and receiving information and support for managing chemotherapy-induced peripheral neuropathy: A qualitative multiple methods study. <i>European Journal of Cancer Care</i> , 2021 , e13517	2.4	1
101	Understanding amputation care in England and Scotland: a qualitative exploration of patient stories posted on an online patient feedback site. <i>Disability and Rehabilitation</i> , 2021 , 1-9	2.4	1
100	Co-designing Healthcare Services with Patients 2021 , 313-333		7
99	A systematic review of behavioural and exercise interventions for the prevention and management of chemotherapy-induced peripheral neuropathy symptoms. <i>Journal of Cancer Survivorship</i> , 2021 , 1	5.1	8
98	Patient experience data as enacted: Sociomaterial perspectives and 'singular-multiples' in health care quality improvement research. <i>Sociology of Health and Illness</i> , 2021 , 43, 1032-1050	3	3
97	Developing a theory-informed complex intervention to improve nurse-patient therapeutic engagement employing Experience-based Co-design and the Behaviour Change Wheel: an acute mental health ward case study. <i>BMJ Open</i> , 2021 , 11, e047114	3	4
96	Doing nothing? An ethnography of patients' (In)activity on an acute stroke unit. <i>Health (United Kingdom)</i> , 2021 , 1363459320969784	1.9	3
95	Is the end in sight? A study of how and why services are decommissioned in the English National Health Service. <i>Sociology of Health and Illness</i> , 2021 , 43, 441-458	3	3
94	An outbreak of appreciation: A discursive analysis of tweets of gratitude expressed to the National Health Service at the outset of the COVID-19 pandemic. <i>Health Expectations</i> , 2021 ,	3.7	2
93	Applying Elinor Ostrom's Design Principles to Guide Co-Design in Health(care) Improvement: A Case Study with Citizens Returning to the Community from Jail in Los Angeles County. <i>International Journal of Integrated Care</i> , 2021 , 21, 7	2	3
92	"What matters to me": A multi-method qualitative study exploring service users', carers' and clinicians' needs and experiences of therapeutic engagement on acute mental health wards. <i>International Journal of Mental Health Nursing</i> , 2021 , 30, 703-714	3.8	5
91	Co-designing organisational improvements and interventions to increase inpatient activity in four stroke units in England: a mixed-methods process evaluation using normalisation process theory. <i>BMJ Open</i> , 2021 , 11, e042723	3	5

(2019-2020)

90	Enabling 'citizen voice' in the English health and social care system: A national survey of the organizational structures, relationships and impacts of local Healthwatch in England. <i>Health Expectations</i> , 2020 , 23, 1108-1117	3.7	2	
89	Lost in the shadows: reflections on the dark side of co-production. <i>Health Research Policy and Systems</i> , 2020 , 18, 43	3.7	65	
88	Using co-production to increase activity in acute stroke units: the CREATE mixed-methods study. Health Services and Delivery Research, 2020 , 8, 1-136	1.5	3	
87	Is Co-production Just Really Good PPI? Making Sense of Patient and Public Involvement and Co-production Networks. <i>Organizational Behaviour in Health Care</i> , 2020 , 213-237	0.6	12	
86	Enacting quality improvement in ten European hospitals: a dualities approach. <i>BMC Health Services Research</i> , 2020 , 20, 658	2.9	3	
85	Exploring the conceptualisation and study of freebirthing as a historical and social phenomenon: a meta-narrative review of diverse research traditions. <i>Medical Humanities</i> , 2020 , 46, 512-524	1.4	6	
84	Exploring the sustainability of quality improvement interventions in healthcare organisations: a multiple methods study of the 10-year impact of the 'Productive Ward: Releasing Time to Care' programme in English acute hospitals. <i>BMJ Quality and Safety</i> , 2020 , 29, 31-40	5.4	40	
83	Gratitude in Health Care: A Meta-narrative Review. Qualitative Health Research, 2020, 30, 2303-2315	3.9	12	
82	Response to "comments on: involving service users in the qualitative analysis of patient narratives to support healthcare quality improvement. <i>Research Involvement and Engagement</i> , 2019 , 5, 26	4.4	O	
81	Translating research on quality improvement in five European countries into a reflective guide for hospital leaders: the 'QUASER Hospital Guide'. <i>International Journal for Quality in Health Care</i> , 2019 , 31, G87-G96	1.9	9	
80	Explaining organisational responses to a board-level quality improvement intervention: findings from an evaluation in six providers in the English National Health Service. <i>BMJ Quality and Safety</i> , 2019 , 28, 198-204	5.4	14	
79	Call for Papers by IJPA for a Special Issue on Engaging Vulnerable Populations in the Co-Production of Public Services. <i>International Journal of Public Administration</i> , 2019 , 42, 706-706	1.7		
78	Conceptualising nurse-patient therapeutic engagement on acute mental health wards: An integrative review. <i>International Journal of Nursing Studies</i> , 2019 , 93, 106-118	5.8	28	
77	Involving service users in the qualitative analysis of patient narratives to support healthcare quality improvement. <i>Research Involvement and Engagement</i> , 2019 , 5, 1	4.4	35	
76	Codesigning health and other public services with vulnerable and disadvantaged populations: Insights from an international collaboration. <i>Health Expectations</i> , 2019 , 22, 284-297	3.7	30	
75	The origins and implementation of an intervention to support healthcare staff to deliver compassionate care: exploring fidelity and adaptation in the transfer of Schwartz Center Rounds from the United States to the United Kingdom. <i>BMC Health Services Research</i> , 2019 , 19, 457	2.9	6	
74	Organisational strategies and practices to improve care using patient experience data in acute NHS hospital trusts: an ethnographic study. <i>Health Services and Delivery Research</i> , 2019 , 7, 1-112	1.5	6	
73	The 10-year impact of a ward-level quality improvement intervention in acute hospitals: a multiple methods study. <i>Health Services and Delivery Research</i> , 2019 , 7, 1-172	1.5	1	

7 2	Exploring, measuring and enhancing the coproduction of health and well-being at the national, regional and local levels through comparative case studies in Sweden and England: the 'Samskapa' research programme protocol. <i>BMJ Open</i> , 2019 , 9, e029723	3	13
71	Ethics of limb disposal: dignity and the medical waste stockpiling scandal. <i>Journal of Medical Ethics</i> , 2019 , 45, 575-578	2.5	5
70	Co-creative approaches to knowledge production: what next for bridging the research to practice gap?. <i>Evidence and Policy</i> , 2019 , 15, 331-337	2.1	14
69	The Participatory Zeitgeist: an explanatory theoretical model of change in an era of coproduction and codesign in healthcare improvement. <i>Medical Humanities</i> , 2019 , 45, 247-257	1.4	79
68	Emergency department staff priorities for improving palliative care provision for older people: A qualitative study. <i>Palliative Medicine</i> , 2018 , 32, 417-425	5.5	21
67	Doing More with Less in Health Care: Findings from a Multi-Method Study of Decommissioning in the English National Health Service. <i>Journal of Social Policy</i> , 2018 , 47, 543-564	0.9	10
66	'It's sometimes hard to tell what patients are playing at': How healthcare professionals make sense of why patients and families complain about care. <i>Health (United Kingdom)</i> , 2018 , 22, 603-623	1.9	15
65	Using Experience-based Co-design with older patients, their families and staff to improve palliative care experiences in the Emergency Department: A reflective critique on the process and outcomes. <i>International Journal of Nursing Studies</i> , 2017 , 68, 83-94	5.8	44
64	New models to support the professional education of health visitors: A qualitative study of the role of space and place in creating 'community of learning hubs'. <i>Nurse Education Today</i> , 2017 , 54, 69-76	3.7	3
63	Nursing work and sensory experiences of hospital design: A before and after qualitative study following a move to all-single room inpatient accommodation. <i>Health and Place</i> , 2017 , 46, 121-129	4.6	26
62	What outcomes are associated with developing and implementing co-produced interventions in acute healthcare settings? A rapid evidence synthesis. <i>BMJ Open</i> , 2017 , 7, e014650	3	67
61	Exploring the adoption of Schwartz Center Rounds as an organisational innovation to improve staff well-being in England, 2009-2015. <i>BMJ Open</i> , 2017 , 7, e014326	3	26
60	How do hospital boards govern for quality improvement? A mixed methods study of 15 organisations in England. <i>BMJ Quality and Safety</i> , 2017 , 26, 978-986	5.4	38
59	Taking data seriously: the value of actor-network theory in rethinking patient experience data. Journal of Health Services Research and Policy, 2017 , 22, 134-136	2.4	7
58	Training Genetic Counsellors to Deliver an Innovative Therapeutic Intervention: their Views and Experience of Facilitating Multi-Family Discussion Groups. <i>Journal of Genetic Counseling</i> , 2017 , 26, 199-2	. 7 45	10
57	Decommissioning health care: identifying best practice through primary and secondary research has prospective mixed-methods study. <i>Health Services and Delivery Research</i> , 2017 , 5, 1-194	1.5	11
56	One size fits all? Mixed methods evaluation of the impact of 100% single-room accommodation on staff and patient experience, safety and costs. <i>BMJ Quality and Safety</i> , 2016 , 25, 241-56	5.4	66
55	Using institutional theory to analyse hospital responses to external demands for finance and quality in five European countries. <i>Journal of Health Services Research and Policy</i> , 2016 , 21, 109-17	2.4	26

54	An open letter to The BMJ editors on qualitative research. BMJ, The, 2016, 352, i563	5.9	179
53	Developing an intervention to facilitate family communication about inherited genetic conditions, and training genetic counsellors in its delivery. <i>European Journal of Human Genetics</i> , 2016 , 24, 794-802	5.3	27
52	Improving childhood nutrition and wellness in South Africa: involving mothers/caregivers of malnourished or HIV positive children and health care workers as co-designers to enhance a local quality improvement intervention. <i>BMC Health Services Research</i> , 2016 , 16, 358	2.9	11
51	What patients do and their impact on implementation. <i>Journal of Health Organization and Management</i> , 2016 , 30, 258-78	1.9	34
50	Enhancing the experience of carers in the chemotherapy outpatient setting: an exploratory randomised controlled trial to test impact, acceptability and feasibility of a complex intervention co-designed by carers and staff. <i>Supportive Care in Cancer</i> , 2015 , 23, 3069-80	3.9	28
49	Sustaining improvement? The 20-year Jākþing quality improvement program revisited. <i>Quality Management in Health Care</i> , 2015 , 24, 21-37	1	25
48	Response to: 'A 'work smarter, not harder' approach to improving healthcare quality' by Hayes et al. <i>BMJ Quality and Safety</i> , 2015 , 24, 407-8	5.4	2
47	Experience based co-design reduces formal complaints on an acute mental health ward. <i>BMJ Quality Improvement Reports</i> , 2015 , 4,		12
46	Patients and staff as codesigners of healthcare services. <i>BMJ, The</i> , 2015 , 350, g7714	5.9	187
45	Experience-based Co-design and Healthcare Improvement: Realizing Participatory Design in the Public Sector. <i>Design Journal</i> , 2015 , 18, 227-248	0.6	193
44	Exploring the Legacies of Filmed Patient Narratives: The Interpretation and Appropriation of Patient Films by Health Care Staff. <i>Qualitative Health Research</i> , 2015 , 25, 1241-50	3.9	9
43	Evaluating a major innovation in hospital design: workforce implications and impact on patient and staff experiences of all single room hospital accommodation. <i>Health Services and Delivery Research</i> , 2015 , 3, 1-304	1.5	31
42	Understanding and improving patient experience: a national survey of training courses provided by higher education providers and healthcare organizations in England. <i>Nurse Education Today</i> , 2014 , 34, 112-20	3.7	6
41	Investigating the organisational impacts of quality improvement: a protocol for a realist evaluation of improvement approaches drawing on the Resource Based View of the Firm. <i>BMJ Open</i> , 2014 , 4, e005	5650	3
40	Disentangling rhetoric and reality: an international Delphi study of factors and processes that facilitate the successful implementation of decisions to decommission healthcare services. <i>Implementation Science</i> , 2014 , 9, 123	8.4	34
39	Exploring the nature and impact of leadership on the local implementation of the Productive Ward Releasing Time to Care. <i>Journal of Health Organization and Management</i> , 2014 , 28, 154-76	1.9	20
38	Using a national archive of patient experience narratives to promote local patient-centered quality improvement: an ethnographic process evaluation of 'accelerated' experience-based co-design. <i>Journal of Health Services Research and Policy</i> , 2014 , 19, 200-7	2.4	60
37	Applying different quality and safety models in healthcare improvement work: Boundary objects and system thinking. <i>Reliability Engineering and System Safety</i> , 2014 , 125, 134-144	6.3	14

36	Testing accelerated experience-based co-design: a qualitative study of using a national archive of patient experience narrative interviews to promote rapid patient-centred service improvement. <i>Health Services and Delivery Research</i> , 2014 , 2, 1-122	1.5	46
35	Co-producing novel wound care products for Epidermolysis bullosa; an empirical case study of the use of surrogates in the design and prototype development process. <i>International Wound Journal</i> , 2013 , 10, 265-73	2.6	2
34	Investigating the use of patient involvement and patient experience in quality improvement in Norway: rhetoric or reality?. <i>BMC Health Services Research</i> , 2013 , 13, 206	2.9	74
33	Mechanisms can help to use patients' experiences of chronic disease in research and practice: an interpretive synthesis. <i>Journal of Clinical Epidemiology</i> , 2013 , 66, 856-64	5.7	16
32	Measuring relational aspects of hospital care in England with the 'Patient Evaluation of Emotional Care during Hospitalisation' (PEECH) survey questionnaire. <i>BMJ Open</i> , 2013 , 3,	3	25
31	Prospects for comparing European hospitals in terms of quality and safety: lessons from a comparative study in five countries. <i>International Journal for Quality in Health Care</i> , 2013 , 25, 1-7	1.9	28
30	'Catching up': The significance of occupational communities for the delivery of high quality home care by community nurses. <i>Health (United Kingdom)</i> , 2013 , 17, 422-38	1.9	7
29	Testing Accelerated Experience-Based Co-design: Using a National Archive of Patient Experience Narrative Interviews to Promote Rapid Patient-Centred Service Improvement 2013 , 173-185		4
28	'Poppets and parcels': the links between staff experience of work and acutely ill older peoples' experience of hospital care. <i>International Journal of Older People Nursing</i> , 2012 , 7, 83-94	2.3	79
27	Implementing patient-centred cancer care: using experience-based co-design to improve patient experience in breast and lung cancer services. <i>Supportive Care in Cancer</i> , 2012 , 20, 2639-47	3.9	111
26	Using patients' experiences to identify priorities for quality improvement in breast cancer care: patient narratives, surveys or both?. <i>BMC Health Services Research</i> , 2012 , 12, 271	2.9	80
25	Implementing large-scale quality improvement: lessons from The Productive Ward: Releasing Time to Care. <i>International Journal of Health Care Quality Assurance</i> , 2012 , 25, 237-53	1.3	52
24	The adoption, local implementation and assimilation into routine nursing practice of a national quality improvement programme: the Productive Ward in England. <i>Journal of Clinical Nursing</i> , 2011 , 20, 1196-207	3.2	36
23	A longitudinal, multi-level comparative study of quality and safety in European hospitals: the QUASER study protocol. <i>BMC Health Services Research</i> , 2011 , 11, 285	2.9	34
22	Adopting and assimilating new non-pharmaceutical technologies into health care: a systematic review. <i>Journal of Health Services Research and Policy</i> , 2010 , 15, 243-50	2.4	81
21	The Clinical Services Redesign Program in New South Wales: perceptions of senior health managers. <i>Australian Health Review</i> , 2010 , 34, 352-9	1.8	4
20	Technological innovations: from bench to bedside. <i>Nursing Management</i> , 2009 , 16, 20-1	1.4	
19	Toward More User-Centric OD: Lessons From the Field of Experience-Based Design and a Case Study. <i>Journal of Applied Behavioral Science, The</i> , 2007 , 43, 41-66	1.8	85

18	Using a Design Approach to Assist Large-Scale Organizational Change: 10 High Impact Changes Ito Improve the National Health Service in England. <i>Journal of Applied Behavioral Science, The</i> , 2007 , 43, 135 ⁻¹	1 <mark>8</mark> 2	37
17	'Build it and they will come' Ibr will they? Choice, policy paradoxes and the case of NHS treatment centres. <i>Policy and Politics</i> , 2006 , 34, 651-672	1	7
16	Experience-based design: from redesigning the system around the patient to co-designing services with the patient. <i>Quality and Safety in Health Care</i> , 2006 , 15, 307-10		469
15	Lost in Translation: A Multi-Level Case Study of the Metamorphosis of Meanings and Action in Public Sector Organizational Innovation. <i>Public Administration</i> , 2006 , 84, 59-79	3	49
14	Storylines of research in diffusion of innovation: a meta-narrative approach to systematic review. Social Science and Medicine, 2005, 61, 417-30	.1	486
13	Diffusion of innovations in service organizations: systematic review and recommendations. <i>Milbank Quarterly</i> , 2004 , 82, 581-629	.9	4 ¹ 77
12	Redesigning mental health services: lessons on user involvement from the Mental Health Collaborative. <i>Health Expectations</i> , 2003 , 6, 60-71	·7	29
11	Where next for policy evaluation? Insights from researching National Health Service modernisation. Policy and Politics, 2003 , 31, 249-262	1	12
10	Studying health care "quality" qualitatively: the dilemmas and tensions between different forms of evaluation research within the U.K. National Health Service. <i>Qualitative Health Research</i> , 2002 , 12, 966-8?	.9	15
9	Cost of quality management and information provision for screening: colorectal cancer screening. Journal of Medical Screening, 2000, 7, 31-4	·4	8
8	Assessing low volume, high cost, potentially life saving surgical interventions: how and when? Left ventricular assist devices (LVADs) as a case study. <i>Journal of Evaluation in Clinical Practice</i> , 1999 , 5, 387-91	·5	4
7	A Delphi study to establish national cost-effectiveness research priorities for positron emission tomography. <i>European Journal of Radiology</i> , 1999 , 30, 54-60	. . 7	11
6	Which are the best information sources for identifying emerging health care technologies? An international Delphi survey. <i>International Journal of Technology Assessment in Health Care</i> , 1998 , 14, 636 ⁻¹ 2	43 43	14
5	Early warning of new health care technologies in the United Kingdom. <i>International Journal of Technology Assessment in Health Care</i> , 1998 , 14, 680-6	.8	10
4	Identifying new health care technologies in the United Kingdom. <i>International Journal of Technology Assessment in Health Care</i> , 1997 , 13, 59-67	.8	18
3	Organizing for Quality		23
2	Special Issue- Engaging Vulnerable Populations in the Co-Production of Public Services. International Journal of Public Administration, 1-4	·7	2
1	New development: Mitigating and negotiating the co-creation of dis/value E linor OstromE design principles and co-creating public value. <i>Public Money and Management</i> ,1-6	5	0