

# Joanne Reeve

## List of Publications by Year in descending order

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Version: 2024-02-01

63  
papers

1,128  
citations

471509

17  
h-index

434195

31  
g-index

64  
all docs

64  
docs citations

64  
times ranked

1361  
citing authors

#	ARTICLE	IF	CITATIONS
1	Fear of childbirth measurement: appraisal of the content overlap of four instruments. Journal of Reproductive and Infant Psychology, 2022, 40, 329-341.	1.8	6
2	The Craft of Generalism clinical skills and attitudes for whole person care. Journal of Evaluation in Clinical Practice, 2022, 28, 1187-1194.	1.8	7
3	Optimising planned medical education strategies to develop learners' person-centredness: A realist review. Medical Education, 2022, 56, 489-503.	2.1	14
4	Academic primary care: challenges and opportunities. British Journal of General Practice, 2022, 72, 104-105.	1.4	5
5	Rethinking generalist health care: opportunities from challenges. British Journal of General Practice, 2022, 72, 338-339.	1.4	1
6	Avoiding harm: Tackling problematic polypharmacy through strengthening expert generalist practice. British Journal of Clinical Pharmacology, 2021, 87, 76-83.	2.4	4
7	Improving the Reporting of Primary Care Research: An International Survey of Researchers. Journal of the American Board of Family Medicine, 2021, 34, 12-21.	1.5	9
8	Understanding the impact of professional motivation on the workforce crisis in medicine: a rapid review. BJGP Open, 2021, 5, BJGPO.2021.0005.	1.8	6
9	What is Wise GP? The intellectual and scholarly challenge of general practice. British Journal of General Practice, 2021, 71, 225-225.	1.4	2
10	Supporting social prescribing in primary care by linking people to local assets: a realist review. BMC Medicine, 2020, 18, 49.	5.5	93
11	Polypharmacy and rationalisation of medications. InnovAiT, 2020, 13, 87-93.	0.0	3
12	A career in academic general practice. InnovAiT, 2019, 12, 149-152.	0.0	0
13	Identifying enablers and barriers to individually tailored prescribing: a survey of healthcare professionals in the UK. BMC Family Practice, 2018, 19, 17.	2.9	20
14	REVITALIZING GENERALIST PRACTICE: THE MONTREAL STATEMENT. Annals of Family Medicine, 2018, 16, 371-373.	1.9	7
15	Feeling blue, sad, or depressed: how to manage these patients. British Journal of General Practice, 2018, 68, 330-331.	1.4	0
16	Scholarship-based medicine: teaching tomorrow's generalists why it's time to retire EBM. British Journal of General Practice, 2018, 68, 390-391.	1.4	9
17	Primary care redesign for person-centred care: delivering an international generalist revolution. Australian Journal of Primary Health, 2018, 24, 330.	0.9	9
18	Implementing change in primary care practice: lessons from a mixed-methods evaluation of a frailty initiative. BJGP Open, 2018, 2, bjgpopen18X101421.	1.8	8

#	ARTICLE	IF	CITATIONS
19	Enabling the flow of compassionate care: a grounded theory study. BMC Health Services Research, 2017, 17, 174.	2.2	32
20	The fall and rise of generalism: perceptions of generalist practice amongst medical students. Education for Primary Care, 2017, 28, 250-251.	0.6	3
21	Revitalising general practice: unleashing our inner scholar. British Journal of General Practice, 2017, 67, 266-266.	1.4	4
22	Realising the full potential of primary care: uniting the "two faces"™ of generalism. British Journal of General Practice, 2017, 67, 292-293.	1.4	10
23	Person-centred medicines optimisation policy in England: an agenda for research on polypharmacy. Primary Health Care Research and Development, 2017, 18, 24-34.	1.2	17
24	Measuring medicine-related experiences from the patient perspective: a systematic review. Patient Related Outcome Measures, 2016, Volume 7, 157-171.	1.2	34
25	Developing, delivering and evaluating primary mental health care: the co-production of a new complex intervention. BMC Health Services Research, 2016, 16, 470.	2.2	31
26	Measuring compassionate care: views of healthcare staff. Nursing Management, 2016, 23, 22-26.	0.2	2
27	Australian academic primary health-care careers: a scoping survey. Australian Journal of Primary Health, 2016, 22, 167.	0.9	3
28	Recovering the self: a manifesto for primary care. British Journal of General Practice, 2016, 66, 582-583.	1.4	11
29	Patients' expectations of medicines "a review and qualitative synthesis. Health Expectations, 2016, 19, 179-193.	2.6	12
30	Rethinking how we understand individual healthcare needs for people living with long-term conditions: a qualitative study. Health and Social Care in the Community, 2016, 24, 27-38.	1.6	13
31	Supporting expert generalist practice: the SAGE consultation model. British Journal of General Practice, 2015, 65, 207-208.	1.4	9
32	Solutions to problematic polypharmacy: learning from the expertise of patients. British Journal of General Practice, 2015, 65, 319-320.	1.4	66
33	UK academic general practice and primary care. BMJ, The, 2015, 351, h4164.	6.0	9
34	Generalist solutions to overprescribing: a joint challenge for clinical and academic primary care. Primary Health Care Research and Development, 2014, 15, 72-79.	1.2	17
35	Investigating the sustainability of careers in academic primary care in the United Kingdom. Primary Health Care Research and Development, 2014, 15, 331-335.	1.2	6
36	Investigating the sustainability of careers in academic primary care: a UK survey. BMC Family Practice, 2014, 15, 205.	2.9	5

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37	Thoughts of self-harm and depression as prognostic factors in palliative care patients. <i>Journal of Affective Disorders</i> , 2014, 166, 324-329.	4.1	13
38	Resisting the tick box culture: refocusing medical education and training. <i>British Journal of General Practice</i> , 2014, 64, 422-423.	1.4	14
39	Generalist solutions to complex problems: generating practice-based evidence - the example of managing multi-morbidity. <i>BMC Family Practice</i> , 2013, 14, 112.	2.9	62
40	Learning from challenges in the recruitment of patients with advanced cancer from hospice day care. <i>Progress in Palliative Care</i> , 2013, 21, 265-271.	1.2	2
41	Antidepressant medication in patients with advanced cancer—an observational study. <i>QJM - Monthly Journal of the Association of Physicians</i> , 2013, 106, 995-1001.	0.5	12
42	Dismantling Lord Moran's ladder: the primary care expert generalist. <i>British Journal of General Practice</i> , 2013, 63, 34-35.	1.4	21
43	Examining the practice of generalist expertise: a qualitative study identifying constraints and solutions. <i>JRSM Short Reports</i> , 2013, 4, 204253331351015.	0.6	40
44	SAPC hot topic "capacity for blue sky research in academic primary care. <i>Primary Health Care Research and Development</i> , 2012, 13, 285-287.	1.2	0
45	What we talk about when we talk about depression: doctor-patient conversations and treatment decision outcomes. <i>British Journal of General Practice</i> , 2012, 62, e55-e63.	1.4	40
46	Do GPs really provide 47 minutes a year for the patient?. <i>British Journal of General Practice</i> , 2012, 62, 404.3-405.	1.4	4
47	From personal challenge to technical fix: the risks of depersonalised care. <i>Health and Social Care in the Community</i> , 2012, 20, 145-154.	1.6	17
48	Access to primary mental health care for hard-to-reach groups: From "silent suffering" to "making it work". <i>Social Science and Medicine</i> , 2011, 72, 763-772.	3.8	118
49	<i>Ubi Scientia</i> in the midst of the cosy cardigans of Caritas. <i>British Journal of General Practice</i> , 2011, 61, 717.2-717.	1.4	0
50	A pause for thought: reflections on the 2011 SAPC Annual Conference. <i>Primary Health Care Research and Development</i> , 2011, 12, 393-394.	1.2	1
51	The Society for Academic Primary Care: Position Statement April 2011. <i>Primary Health Care Research and Development</i> , 2011, 12, 183-184.	1.2	2
52	Can generalism help revive the primary healthcare vision?. <i>Journal of the Royal Society of Medicine</i> , 2011, 104, 395-400.	2.0	10
53	(S)APC hot topics. <i>Primary Health Care Research and Development</i> , 2011, 12, 277.	1.2	0
54	Protecting generalism: moving on from evidence-based medicine?. <i>British Journal of General Practice</i> , 2010, 60, 521-523.	1.4	31

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55	Revisiting biographical disruption: Exploring individual embodied illness experience in people with terminal cancer. <i>Health (United Kingdom)</i> , 2010, 14, 178-195.	1.5	89
56	Interpretive medicine: Supporting generalism in a changing primary care world. Occasional Paper (royal College of General Practitioners), 2010, , 1-20, v.	3.0	29
57	Insights into the impact of clinical encounters gained from personal accounts of living with advanced cancer. <i>Primary Health Care Research and Development</i> , 2009, 10, 357.	1.2	1
58	Towards a re-conceptualisation of the management of distress in palliative care patients: the self-integrity model. <i>Progress in Palliative Care</i> , 2009, 17, 51-60.	1.2	8
59	Narrative Research Methods in Palliative Care Contexts: Two Case Studies. <i>Journal of Pain and Symptom Management</i> , 2009, 37, 788-796.	1.2	41
60	Distress in palliative care patients: Developing patient-centred approaches to clinical management. <i>European Journal of Cancer</i> , 2008, 44, 1133-1138.	2.8	42
61	Real life ethics. <i>British Journal of General Practice</i> , 2008, 58, 509.1-509.	1.4	0
62	Depression in terminal illness: the need for primary care-specific research. <i>Family Practice</i> , 2007, 24, 263-268.	1.9	18
63	Evaluating the evaluation: Understanding the utility and limitations of evaluation as a tool for organizational learning. <i>Health Education Journal</i> , 2007, 66, 120-131.	1.2	26