

**Research Title:** Research-informed decision-making: learning from each other to develop research capacity and activity within South Tyneside Council whilst harnessing the benefits of a wider regional research support infrastructure.

## **Background**

### ***What is the problem being addressed?***

Health & social care organisations including local government face many challenges. These include an ageing population, more people living with long-term conditions and an increasing demand on services, coupled with ever-increasing scarcity of resources. Austerity and the consequent severe financial constraints, exacerbated by recent events due to COVID 19, mean that local governments are facing deep cuts in public spending (1)) and a situation where public health priorities may suffer (2). Under such circumstances, it is crucial that scarce resources are allocated and decisions are made in such a way to maximise effectiveness, efficiency and equity of services and so provide services that reflect local needs and priorities but ensure health and wellbeing of local populations are maximised. These challenges are especially obvious in the North East and North Cumbria (NENC), where health and social inequalities are higher and worsening (3). Residents, of already socioeconomically deprived communities are facing significant disadvantages in relation to welfare reform, and now disproportionately suffer the effects of COVID-19 (4).

### ***Why is this research important?***

Given the challenges facing decision-makers in local governments, the need to utilise evidenced based approaches to aid local decision-making is crucial. However, decision-making within the context of local government is complex and involves multiple dimensions that can be seemingly at odds with each other. There are significant political and organisational challenges where elected members are the key actors playing a central role in decision-making. Hunter *et al.*, (5) highlighted key factors shaping the likely acceptability and utility of evidenced based or informed decision making in English local authority settings. These being the need to take into account the importance of the wider organisational and cultural context of local government to ensure the take up and

spread of the use of research to aid decision-making. Furthermore, ensuring committed leadership and engagement from elected members as well as officers was identified as being critical to success (6). Other challenges regarding the use of research findings and evidence is that the evidence base is often incomplete and contested. The use of tacit knowledge by local government officers and perceived real limited applicability of the findings of large-scale studies to local communities can reduce the use of research evidence. As a consequence, research evidence utilised by local government may take on a different meaning than that used in health services research with 'evidence' only being seen as one factor amongst many that local authority (LA) decision-makers may consider and include in their decision-making (7).

Evidence informed decision-making involves integrating the best available research evidence with contextual factors including community preferences, local issues (e.g., health, social), political preferences, and resources (8). It is clear that decision-makers are under increasing pressure to ensure their decisions are 'evidence-based' but there are often other barriers which include the absence of personal contact between researchers and policy makers and practitioners, and the lack of time, skills and resources to mobilise this. Hence, a collaboratively developed research capacity tool kit that is fit for purpose, shaped by multiple stakeholders, which can maximise the use and generation of research in South Tyneside Council, is the overarching aim of this research proposal.

### **Case Study Site**

South Tyneside is a compact geographical borough in the North East of England with a population of approximately 150,000 people. It has lower than average life expectancy and healthy life expectancy when compared to England. There are also stark inequalities within the borough with a healthy life expectancy gap of nearly 18 years between some wards. To help address these significant challenges, the Council took the lead on the development of South Tyneside Alliance in 2017 to fulfil its duty to develop integrated commissioning, join up health and care services and oversee £350m per year resource allocation to improve the health and wellbeing of local people.

The Alliance is based on an approach developed by Canterbury District Health Board and is grounded in a set of leadership behaviours of being proactive, fair and personalised and aims to embed an ethos of continuous learning, reflection and improvement. The membership includes staff and

volunteers from teams across South Tyneside Council, South Tyneside Clinical Commissioning Group, South Tyneside and Sunderland NHS Foundation Trust, North of England Commissioning Support Unit, Northumberland, Tyne and Wear NHS Foundation Trust, Primary Care Networks, Third sector organisations, care providers, emergency services and many more.

This Alliance provides an excellent opportunity to harness the benefits of increasing research capacity and share learning not just within the council but also across multiple stakeholder groups.

There is existing engagement with research with South Tyneside Council, with the Public Health Team securing funding to undertake a two-year evaluation of their Best Start in Life Alliance through the NIHR School of Public Health Public Health Practitioner Evaluation Scheme. Team members have been involved in bids to the North East and North Cumbria (NENC) Applied Research Collaboration (ARC) and the Director of Public Health is on the Operational Executive of the ARC and sits on the crosscutting theme of Inequalities and Marginalised Communities. The Public Health Knowledge and Intelligence Lead is an Associate Lead for Public Health Research on the NIHR Local Clinical Research Network (CRN).

The Public Health Team also supported access for a PhD student to use South Tyneside as a study site for research into the long-term impact of Universal Credit and an MPharm student to research the role of Health Ambassadors as their degree project. More broadly, the South Tyneside Alliance approach has been featured as a case study in evaluations by the Royal Society for the encouragement of Arts, Manufacturers and Commerce, the Kings Fund and the Local Government Association

([https://www.local.gov.uk/sites/default/files/documents/1%2095\\_Health\\_and\\_wellbeing\\_boards\\_V06%20WEB.pdf](https://www.local.gov.uk/sites/default/files/documents/1%2095_Health_and_wellbeing_boards_V06%20WEB.pdf).)

South Tyneside would like to spread the undertaking and engagement with research across the council, particularly those that influence the wider determinants of health.

**Research Question:** Why, what, how, who, when and where can and should research be used and undertaken to inform local authority decision-making? Learning from each other to develop research capacity and activity within South Tyneside Council whilst harnessing the benefits of a wider regional research support infrastructure.

**Research Aim:** To co-create a research capacity toolkit to enhance the research infrastructure within South Tyneside Council and existing regional research collaborations, to ensure decisions are research informed and made in such a way to maximise effectiveness, efficiency and equity, ensuring optimal maximisation of the health and wellbeing of local populations.

**Objectives:**

1. To conduct a research needs assessment to explore the research needs and capacity of South Tyneside Council in relation to identifying, undertaking, utilising and applying research and evidence to aid decision-making. Thereby identifying existing research and analytical expertise and, identifying gaps for further development, collaborative support and training.
2. To explore how South Tyneside Council interacts and collaborates as an active member of existing research infrastructures both regionally and nationally, creating “a road map for research” for use by the council.
3. To synthesise findings and co-create in collaboration with the council, a research capacity framework building on existing platforms and gaps in the organisation related to research and its various components.
4. To produce a research capacity toolkit, incorporating a framework and “a road map for research” to aid utilisation of research via appropriate knowledge transfer mechanisms and to aid production of research.

**Plan of work**

The methodological focus of this research is aimed at producing a collaboratively developed research capacity tool kit, with the aim of maximising the use of existing research and the generation of research evidence in South Tyneside Council. A subsidiary aim is to use the learning from this and similar work to support the development of research capacity in other local authorities in the region. No funds for this are requested but members from the NIHR NENC Applied Research Collaborative (ARC) and The Centre will support it for Translational Research in Public Health (Fuse).

We aim to generate a comprehensive understanding of the production and use of research evidence and skills and expertise surrounding this in order to design a research development toolkit that is

able to generate new research and critically assess and mobilise existing research. This will be designed in such a way that the Council will be able to identify and actively participate with key regional research collaborators such as the NIHR funded Research Design Service (RDS) NENC, the NIHR Clinical Research Network (CRN) NENC, Fuse, the NIHR School of Public Health Research (SPHR) and the NIHR NENC ARC.

Several organisations have priorities aimed at developing and supporting research in non-NHS settings such as local authorities. For example, the ARC is a multi-stakeholder network of academics and health, care, public health, social work and voluntary sector practitioners and leaders undertaking applied research in key areas as defined by the stakeholders. These are Multi-morbidity and ageing, Families and children, Prevention and behaviour changes, Integration of physical, mental health and social care and Inequalities and marginalised communities. There is also cross cutting enabling methodologies and training and capacity building elements.

Furthermore, the regional CRN (CRN NENC) now has a remit to support research in non-NHS settings, social care and public health research and this is now a key part of their strategy with investment to support this. Amongst various pump-priming initiatives, a local authority internship scheme has been developed, and although delayed due to Covid 19, will now launch in August 2020. The content of the internship scheme has been developed in collaboration with Newcastle University and two interns have been appointed from Newcastle and North Tyneside Local Authorities with the aim of gaining exposure to the academic research environment and developing practical skills to undertake a research project supported by an expert academic and workplace supervisor. Further national investment has also been announced to support embedded leadership and research support across LAs within the CRN and it is envisaged that this will serve to enhance the goals of the current proposal.

Established in April 2012, the NIHR School for Public Health Research (SPHR) is a partnership between eight leading centres of academic public health research excellence across England. The School aims to build the evidence base for effective public health practice by bringing together England's leading public health research expertise in one virtual organisation. A crosscutting theme of SPHR is the Efficient and Equitable Public Health Systems theme (Co Leads Gray and Vale). One of

the aims of this theme is to ensure that the outputs of the SPHR research programmes are relevant and useful for public health practice and policy by informing how evidence on financial and economic impact is best reported. Consequently, work is underway in the region that will focus on engaging with experts in efficiency and equity and systems methods, thorough a series of workshops. These workshops will seek to collate the current evidence base and synthesise this into guidance for researchers in these areas. This work will likely be included for consideration in this current proposal.

Senior leaders of these organisations in NENC whom will form an expert steering group to advise this research and will provide their time in kind will support the research.

In order to address the aims and objective set out above, the research aspects of the study will be organised around the following work packages:

**WP1: Scoping exercise/research needs assessment to explore and scope the research capacity needs of South Tyneside Council (Objective 1)**

This will be conducting utilising multiple methods:

**1. Focus groups and interviews**

We will conduct focus groups with employees and elected members of South Tyneside Council to establish if and how they currently access, undertake, generate, and utilise research in their day-today work thereby understanding the contextual complexities surrounding this. We will use a structured focus group topic guide to explore their views on research, if and what research is undertaken, where research sits alongside other evidence, what and how research evidence (and other types of evidence) are used and applied, by whom and barriers and facilitators. We will conduct all the focus group virtually via Microsoft Teams or Zoom. We will record the audio from the focus groups to aid transcription. All participants will be consented beforehand. We will conduct 4-5 focus groups with different groups within the Alliance (i.e. housing, leisure, social care etc.). There will be a maximum of 8-10 participants recruited through the Council in each focus group (representing differences in expertise/job role). For those who cannot attend a focus group or if we require further follow up on a specific issue raised in the focus groups, we will conduct a small number of follow up interviews. Again, these will be conducted via Teams or Zoom. Focus groups

and interviews will be transcribed verbatim and this data will inform the analysis. A basic thematic analysis will be used to describe the data with respect to how research is used within the council and the barriers and facilitators to this.

## 2. Documentary and evidence review

We synthesise the evidence base regarding the development of research and its use across the wider public sector and utilise this contextual information when undertaking this research. There are lessons already learnt regarding this such as key organisational and system level issues that need addressing (9, 10). Furthermore, we will identify any pre-existing tools kits/ frameworks that have been developed to address these issues (such as those highlighted by Huber et al (11)) with a view to understanding if these can be shaped and modified for use within South Tyneside Council ensuring that they have toolkit that is bespoke to their needs. .

## 3. Evidence and expertise mapping

Incomplete knowledge regarding expertise, training and support often acts as an inhibitor for research utilisation and its production. We will develop an evidence map and expertise directory. We will review official documents internal to the council to identify standards for undertaking, generating and utilising research, training guides and support to identify how research is promoted, what training is available for staff and how they might access this. We will also conduct an internal survey of the council with respect to what evidence they generate and utilise, data sets that they have access to and the use of software to facilitate analysis. This will also incorporate an audit of who has what expertise in relation to research capacity.

The above can all be completed alongside each other/concurrently

WP1 output – descriptive analysis of current level of research capacity of South Tyneside Council and an evidence map and expertise directory.

## **WP2: Development and Co-creation of a research capacity toolkit. (Objective 2& 3)**

This will include a research capacity framework document and a “road map for research”. This will therefore have an internal focus for research development within the council. Furthermore, it will

incorporate an external focus in the format of the “road map for research” enabling and mobilising further research collaborations with the existing research infrastructure within the region.

#### Phase 1 Co creation of a Research Capacity Framework

We will synthesise findings from WP1 and co-create in collaboration with the council, a research capacity framework building on existing platforms and gaps in the organisation related to research and its various components.

We will host a 1-day consensus development workshop to synthesise the findings from WP1 online via teams or Zoom (for practical reasons it is likely that this will be split over several individual sessions that total one day in length). The workshop will include members of the research team, the council and the Alliance groups. The workshop will discuss the findings from the earlier phases of the work and agree the development of a research capacity framework that builds on the existing research provision and expertise within the council. In particular, this will identify what, why, who, when and how research capacity can be developed. During the workshop, we will present the findings from all phases of WP1 and an outline of a research capacity framework developed by the research team (written summaries will also have been circulated a week prior to the workshop). Workshop participants will work in small groups to refine the framework and present these changes back to the wider workshop group who will collectively refine and agree the final framework.

Phase 1 output: research capacity framework.

#### Phase 2: Development of a road map for research

Lead by the research team and informed by the other phases of the research, we will develop a research road map that will identify key providers of research expertise, support and training within the region. This will involve organisational documentary analysis and expert opinion from members of the expert steering group as specified above. This group will include representation from key organisations such as Professor Eileen Kaner who is the Director of the NIHR NENC ARC. Key organisations will include HEIs (Universities of Newcastle upon Tyne, Northumbria, Durham, Sunderland and Teesside), the NIHR funded RDS NENC, NENC ARC and the CRN NENC. It is



anticipated that other organisations to be included in this mapping exercise will include the North of England Commissioning Support Unit (NECSU), the Academic Health Sciences Network (AHSN), Fuse and the NIHR SPHR. This road map will detail key providers of research expertise, support and training within the region in order that South Tyneside Council will be able to build on existing relationships and collaborations and further shape not only its own research strategy but also that of the regional footprint.

Phase 2 output: roadmap.

### **WP3 Production and refinement of Research Capacity Toolkit (Aim 4)**

The outputs from WP1 and WP2 ( Phases 1 and 2) will be combined and a research capacity toolkit will be developed for use by the Council to develop further the generation and use of research to aid decision-making that enhances the health and well-being of the local population.

Final output: research capacity toolkit (incorporating a research capacity framework and a road map for research)

### **Ethical considerations**

This proposal has been developed in line with the UK Policy Framework for Health and Social Care Research and Caldicott Principles. We have completed the Health Research Authority decision tool and considered the defining research table produced by the Research Ethics Service. As this project examines usual practice in order to develop an approach to build research capacity, it does not meet the HRA criteria for research or require REC review. We will however gain ethical approval from Northumbria Universities Research Ethics committee. In doing so we will ensure all research practice will be carried out with the full, written, informed consent of participation. At all stages, verbal and full written explanations of the research process will be distributed to respondents. At no point will anybody be coerced into taking part in the research. Those that do choose to participate will be given the opportunity to opt out at any point in the research without giving reason. Furthermore, throughout the research and in subsequent reports and publications, all findings will be anonymised; a scheme for renaming participants and pseudo anonymisation will be devised and only known to

the research team. All data will be held securely, and confidentiality maintained.

### **Governance**

Governance of this research will be overseen by an expert steering group chaired by the Director of Public Health within South Tyneside Council. This will comprise of key stakeholders both internal and external to the council who have an interest in developing research capacity within local government. Likely members of this board will likely include two research champions from the council and two members of the public. Further representation from key collaborators will include NECSU (Dr Joanne Smith, Research manager NECS Research & Evidence training lead for NE&NC commissioners, policy makers and primary care practitioners), the ARC (Training Lead to be confirmed), the RDS (Helen Hancock, Director), the CRN (Sharon Dorgan, Training lead) and other Local Authorities (Steph Downey, Service Director Adult Social Care / Care, Wellbeing and Learning / Gateshead Council, Chair of ADSS North East).

The role of this group will be to help shape the research and to provide support regarding the development of the research capacity toolkit. It is anticipated that this group will meet at the start of the project and monthly thereafter. The project will be managed by the Joanne Gray (Co-lead Applicant) supported by Luke Vale (Co-lead) to ensure work is undertaken and completed to the required timescales. The project board will report directly to the South Tyneside Council Executive ensuring engagement and ownership of the toolkit. In addition, update(s) will be provided to Health and Wellbeing Board to gain insight from relevant partners.

### **Dissemination and Outputs**

In addition to the outputs required by the NIHR, as specified, a research capacity toolkit will be developed and produced for use by employees of the council that are responsible for the strategic direction of the organisation. This will contextualise the complexities surrounding the generation and use of evidence within local government and help the council overcome some of these. In addition, this will set out key areas for research capacity development in the form of a framework detailing what, why, who, when and how? Furthermore, this will include a road map for research that will detail key providers of research expertise, support and training within the region in order

that South Tyneside Council will be able to build on existing relationships and collaborations and further shape not only its own research strategy but that of the wider regional research footprint.

## **Impact**

This piece of work will provide a co-created research capacity toolkit that is relevant to the strategic aims of South Tyneside Council and is readily useable by employees engaged with strategic objectives. Furthermore, this will include why, what, how, who, when and where can research can be expanded upon in terms of engagement with research generation activities and use of research to inform policy formulation and decision-making. In doing so, it will add to the development of skills, expertise and strategic direction of the council with regards to engagement and use of research. Furthermore, it will harness the benefits of further engagement and collaboration with an external research infrastructure provided by a range of organisations across the region who provide extensive expertise, support, skills and strategic direction.

Furthermore, this research and the development of the research capacity tool will provide a vehicle to build on the of work of the South Tyneside Alliance to fulfil its duty to develop integrated commissioning, join up health and care services and oversee resource allocation to improve the health and wellbeing of local people.

South Tyneside is one of several local authorities in the NENC facing the same dilemma. The proposed work will inform support for other local authorities. This work forms part of the work programme for the Enabling Methodologies theme (lead Vale) for the NENC ARC.

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