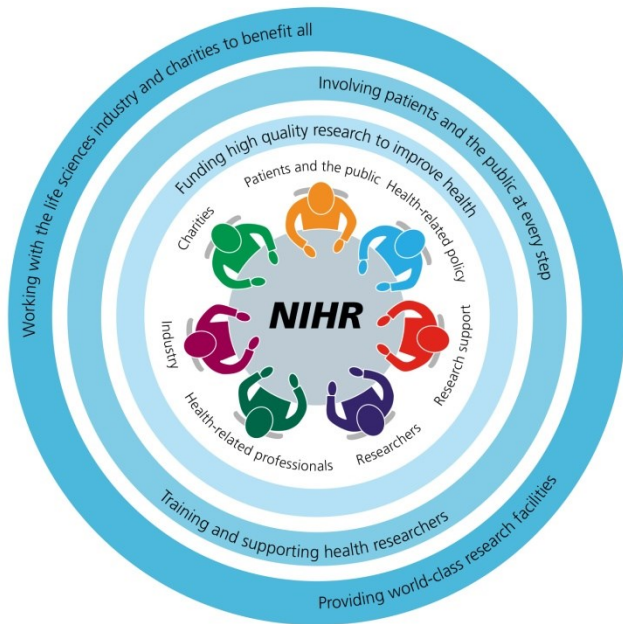


NIHR School for Social Care Research: activities & priorities

Martin Knapp

Personal Social Service Research Unit
London School of Economics and Political Science
and
NIHR School for Social Care Research

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www.nihr.ac.uk

Improving the health and wealth of the nation through research.

Established by DH (now DHSC) in 2006, the NIHR:

- **funds** high-quality research to improve health and care
- **trains** and supports health researchers
- provides world-class research **facilities**
- works with the life sciences **industry and charities** to benefit all
- involves **patients and the public** at every step.

NIHR School for Social Care Research, 2009-2019



Mission: *“to develop the evidence base for adult social care practice in England by commissioning and conducting world-class research.”*

Phase 1

- 2009-14; budget of £15m;
- LSE, KCL, Universities of Kent, Manchester & York
- 60 primary research projects; 28 Methods & Scoping Reviews

Phase 2

- 2014-19; further budget of £15m
- LSE, Universities of Bristol, Kent, Manchester & York
- 65 primary research projects; some Reviews underway

Phase 3

- Being commissioned – university members announced in June?

Guiding values



Research that:

- is **relevant** – wide engagement in setting research priorities; real-world impact
- is **robust** – methodological rigour; wide methodological repertoire; peer review
- is conducted to the highest **ethical and governance standards**
- has **user, carer and practitioner engagement** at its heart
- promotes high standards of **knowledge exchange & impact**
- offers **value for money**

Involvement throughout SSCR

SSCR operations:

- User, Carer and Practitioner Reference Group
- Advisory Group

Project-level:

- Users and carers on advisory and steering groups
- Some separate advisory groups of users, carers (often also professionals)
- User-led research project
- Peer-interviewers (2 projects)
- Professionals, users and carers as co-investigators
- Collaborations with user, carers or professional organisations

Overall: many studies developed through user, carer or professional organisational links and discussions

Research commissioning

Research internal to SSCR core members:

- Each core member university has a budget to spend on research approved by the Executive Group; subject to peer review

Externally commissioned research:

- Open calls for research applications from researchers outside SSCR; all peer-reviewed; commissioning panel
- No further calls in SSCR Phase II
- One call completed on ***building research capacity awards***; no more expected in SSCR Phase II
- New calls are likely in SSCR Phase III, from mid 2019?

Social care research challenges

- **Research funding** limited compared to other areas (e.g. health)?
- **Methodology limitations**: design, duration, data utilisation & analysis, ambition?
- **Researcher capacity** is constrained: too few *practitioner-researchers*? Too few non-practitioners attracted in?
- Low **sense of 'community'** among researchers?
- Increasingly difficult to get local authorities/providers to **participate in research**?
- Increasingly difficult to **translate research messages** into local/national policy decisions, or to professional training?
- **Support costs** for research too low (compared to health)?

Overcoming these challenges?

- **Appropriate affirmative action**: not lower quality thresholds for funding but support social care researchers to 'up their game'
- Appropriately **judge proposed** topics and methods
- Raise **methodological expertise** (professional training; 'methods reviews'; Research Design Service support)
- Attract **new researchers** – fellowships, networking; including fellowships for **practitioners** to do research
- Encourage better **language** ('health and social care')
- Better **representation** on key NIHR and other research-focused groups
- Consult widely on **research priorities** (e.g. JLA)
- Improve ease of **publication** in social care-specific places
- Develop **research champions** in the sector: key sector leaders who can emphasise need for & relevance of robust research
- Build long-term **research partnerships** across stakeholders

Agreeing adult social work research priorities

- **James Lind Alliance** consultation on priorities for research in Adult Social Work
 - Sponsored by the Chief Social Worker for Adults
 - Stage 1 consultation complete
 - Around 500 people responded
 - Questions raised include ones related to safeguarding, strengths/assets, isolation/loneliness, wellbeing ...
 - Further consultation to agree the priority list
 - Report summer 2018
 - These priorities will significantly influence research in the future
- <http://www.jla.nihr.ac.uk/priority-setting-partnerships/adult-social-work/>

Examples of studies #1

- Are personal budgets always the best way of delivering personalised social care services to older people? (Coventry)
- Indirect payments: direct payments for people who lack capacity (Mental Health Foundation)
- Personalisation of home care for older people using managed personal budgets (York)
- Personalisation and carers: the role of carers in assessment, support planning and managing personal budgets (York)
- Risk, safeguarding and personal budgets: exploring relationships and identifying good practice (KCL)
- The role of workplace Personal Assistants for physically disabled people (York)

Examples of studies #2

- Meeting the information needs of self-funders
- The role of adult social care in the provision of appropriate adults for vulnerable adults in police custody
- Fathers with learning disabilities & their experiences of adult social care services
- Lesbian, gay, bisexual and transgender (LGBT) disabled men & women and social care support
- Socially oriented approaches to recovery for African & Caribbean men
- Is there a clearer role for telecare in adult social care that will deliver better outcomes for older people?
- Effectiveness of a staff training intervention to improve support staff attitudes & empathy towards adults with learning disability & challenging behaviours

Research priorities

- Variability across DPs for different groups of individuals
- Role of carers in supporting/managing personal budgets; carer stress
- Use of DPs by people with LT conditions to enable occupational engagement
- Support for risk management, e.g. safeguarding from financial abuse
- Alternatives to PBs; different models of support planning & brokerage; roles of PAs; options for management of PBs
- What can big data tell us; use of routinely collected data in providing evidence
- How to assess outcomes for people with PBs – the POET tool, ASCOT etc.
- PB holders as employer – impacts on them as individuals
- Quality of services being purchased by PB; choice available; markets
- Support to PB holders to make informed choices about services, support, people
- Unbiased research: not commissioned by DH / Incontrol / TLAP aiming to prove it works ...
- How to deliver maximum choice

Future prospects ...

- SSCR Phase III from May 2019
- NIHR recognition of need for more social care research
- Identification of evidence gaps & priorities – JLA, NETSCC etc.
- Particular funding efforts by (e.g.) Research for Patient Benefit
- CRN support for recruitment into studies
- DHSC Policy Research Units, including one on Adult Social Care
- Investment in research capacity ('Faculty')
- Green Paper 2018

SSCR Contact details

Email: sscr@lse.ac.uk

Web: www.sscr.nihr.ac.uk

Twitter: @NIHRSSCR

Journal of Long-Term Care: Journal.of.Long-Term.Care@lse.ac.uk