



Canolfan PRIME Cymru PRIME Centre Wales

Social Care Research Strategy

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Ymchwil Iechyd
a Gofal Cymru
Health and Care
Research Wales



Ariennir gan
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PRIME Centre Wales Social Care Research Strategy

Introduction

This document is the Social Care Research Strategy for PRIME Centre Wales (Wales Centre for Primary and Emergency Care Research). It includes the research priorities and themes agreed essential to develop evidence based social care practice in primary and emergency care in Wales. In October 2015 the new PRIME Centre Wales convened a consensus meeting with the key individuals from academia, practice, government, statutory and the third sector to set its social care research priorities for Wales (appendix 1 list of participants). The meeting was led by Professor Joyce Kenkre and Dr Carolyn Wallace, University of South Wales.

Policy Context: These discussions take place against a background in Wales of considerable shifts both in the provision of social care, and in the relation between health and social care. These are summed up in two major pieces of Welsh Government legislation: The Social Services and Well-being (Wales) Act, which came into force on 6 April 2016, and the Well-Being of Future Generations Act (Wales) 2015. The first affects social care directly; the second more indirectly. Both, however, have significant implications for practice in social services, and will pose considerable challenges in terms of interpretation and implementation of their key requirements. The term well-being is crucial to both Acts, though it is defined differently in each. The key relevant aspects of the Social Services Act concern the improvement of targeting of services, of information and advice, of assessment of needs, of support for carers, and of safeguarding against abuse and neglect. The Future Generations Act applies generally to public bodies, and requires that they carry out their work in a sustainable way – and can demonstrate that they have taken into account not just those immediately affected by the service in question, but people living their lives in Wales in the future.

The aim and objectives of the day were:

Aim: To agree the PRIME Centre Wales social care research strategy.

Objectives:

- To collaborate across health and social care for future delivery of services
- To set priorities for social care research within the primary and emergency care context
- To identify facilitators to enable the priorities to be delivered.
- To agree an action plan for future delivery.

Methodology & Method

A Nominal Group technique was used to develop the agreed research priorities and action plan.

This consisted of three phases:

1. *Phase one:* Private discussions prior to the event. All participants were asked to consult with their colleagues and bring with them three priorities for research.
2. *Phase two:* The face-to-face interaction with background presentations and consensus workshops reported below.
3. *Phase three:* The dissemination of the findings were distributed for consultation on the 3rd December 2015 until 4th January 2016. This has resulted in this final report.

The face to face interaction

The background presentations included the following:

- Dr Dan Venables gave a Welsh Government perspective and commenced with a quote from Prof. Mark Drakeford stating that *'we invest in research because it makes a difference to patients and service users'*. He outlined the principles of prudent health and social care reinforcing the need for high quality research evidence to underpin policy and practice. Dan then reminded us about the vision for Health and Care Research Wales
- Prof. Judith Phillips (Swansea University) who outlined the new Wales School for Social Care Research vision as *'Wales: the place to do social care research = increasing the quality and quantity of research for the benefit of the public, social care users, carers and patients'*. She included the principles of collaboration with users, inter and multi-agency working, across sectors, developing a strategy for training, involving people, strengthening the capacity to deliver on prioritised policy and practice research agendas in the areas of world leading research, working in partnership with external bodies. The priority areas are:
 - Coordination and need for a new social care research strategy
 - Develop capacity and skills in academia and workforce
 - Organisational culture change
 - Strengthen knowledge base
 - Dissemination and Implementation
 - User involvement
 - Business and Industry
 - Collaboration
 - Champion for social care research in Wales
- Profs Steve Smith and Gideon Calder (University of South Wales) gave an explanation of the concept of wellbeing in the context of the Well Being of Future Generations (Wales) Act 2015. They used the simple definition "well-being relates to how well a person's life is going". They posed the basic questions,
 - So what *is* well-being, then?
 - How does it relate to other values and priorities (fairness, equality, etc)?
 - How do we balance the quantitative, the qualitative and the philosophical elements of the well-being 'package'?
- Prof Adrian Edwards (Cardiff University) set the strategy into the context of the new PRIME Centre Wales. He stated that a *'Strong primary and emergency care is essential for the effective and efficient functioning of the NHS as a whole'* and a strong academic base must

underpin this. PRIME Centre Wales ([Web: www.primecentre.wales](http://www.primecentre.wales)) is funded by Health and Care Research Wales, Welsh Government, and aims to improve the health and wellbeing of people in Wales, and internationally through high quality research and influencing policy. Adrian described its structure and work packages, emphasising that this inclusive all Wales centre works with patients and public, social care services, third sector, industry, health and care research Wales infrastructure including its centres and units.

There were five rounds of consensus within the structured workshop where participants undertook the following stages which resulted in agreed research priorities and action plan:

1. Individuals wrote down their three identified key priorities for research, training and support on green paper provided. These may have been agreed within their host organisations or with colleagues beforehand.
2. Participants paired with another person and presented their ideas to each other. Then jointly agreed on the most important three ideas out of the six originally presented. They wrote these three ideas onto the pink paper provided.
3. Participants regrouped with another pair of participants (who had completed the same process) presented and discussed their collective six ideas. The four together then narrowed the six ideas down and agreed three ideas. These were then written onto the blue paper provided.
4. Participants regrouped with another four participants who had completed the same process, presented and discussed their collective six ideas. The eight together then narrowed the six ideas down and agreed three ideas. These were written down on the yellow paper provided.
5. Participants regrouped with another eight participants who had completed the same process, then presented and discussed their collective six ideas. The sixteen participants then narrowed the six ideas down to three agreed ideas. These were then written on the flip chart paper provided.

Research Themes

The individual research priorities gathered in step 1 above were analysed into research themes (see appendix 3). Some of the priorities may be seen as cross cutting a number of themes. For example, 'Involving older people in the design and planning of services – how? What happens when views cannot be realised/conflict with policy agenda?' This could be placed in both the 'commissioning, organisation and workforce' or 'Acts, policy and their impact' themes. For the purpose of this exercise it has been placed into only one theme and would be a consideration for the researchers as to how they engage with colleagues who deliver other themes within the strategy.

Ten research themes were identified from stage 1:

- Research awareness, engagement and capacity building;
- Long term Care;
- Integration;
- Acts, policy and their impact;

- Wellbeing;
- Commissioning, Organisation and workforce;
- Resilience;
- Medicines;
- Assessment and outcomes;
- Abuse.

Agreed Research Priorities

The two flip chart lists of six priorities from the 5 consensus rounds were then debated and through agreement rated in order of importance. This resulted in the overarching principle and four research priorities. An agreed action plan was developed.

An overarching principle was agreed:

How do we ensure that the research/work we do is 'fit for purpose' – in the view of the public, patients, carers as well as professional stakeholders in developing the research question, design, dissemination and evaluating effectiveness and long term impact? How can we be sure that all of the voices are heard when we develop evidence – informed 'rules of thumb'?

With the following research priorities:

1. The SSWA (Social Services and Wellbeing Act) contains a number of key principles linked to outcomes e.g. co-production and user involvement. In what ways can research be used to monitor and capture the extent to which these principles are changing practice and outcomes?
2. The role of social and organisational functioning in the demand and implementation of social and health care. Develop protocols for meaningful information sharing across the boundaries between health and social care and between practitioners and the public.
3. What are the individual and social characteristics of receptive/engaged service users/carers/people and how can these characteristics be identified and nurtured?
4. Develop and evaluate new models of commissioning for health and social care which put the service users' voice in the centre of the frame and includes 3rd sector organisations, and uses a wide range of measures.

Agreed Action Plan

- Write up and accept feedback.
- Circulate and ask who wants to be involved in which priority – get a sense of who wants to be involved and generate energy.
- Develop steering group? – How do we take all of this forward?
- Ensure distribution to all not within the meeting, invited groups and individuals.
- Enquire to the group as to level of involvement – use email list, researcher network etc.
- Meta engagement with other groups like PRIME and so strengthening the engagement.
- Signposting people of interest within one research area with another – how do we achieve that?

Consultation Questions

The draft document was distributed to the original participants and also to those key organisations and individuals who were not able to attend. The consultation period occurred from the 4th December 2015 until 5th January 2016. The consultation questions asked were:

Question 1:

Do you agree with the content of the consultation document?

All returned consulted participants were in agreement with the content of the document and that discussions were accurately reflected.

Question 2:

Are there any disparities?

All returned consulted participants agreed that there were no disparities.

Question 3:

Are there any areas of research you would like to take forward which are identified in the document?

The following offers of support were received:

The Care Council for Wales welcomed the *emphasis on the Social Services and Well-being Act and offered some support in terms of information/contacts etc to support research in this area.*

Age Alliance Wales would like to support more that relates specifically to improving life for people with life limiting conditions – for example, the impact of sensory loss for people with dementia and/or stroke survivors.

Question 4:

Are there any further suggested actions you would like to add?

General comments received were:

'It is good to see the principles of the Act as a research priority. I think it would be helpful if all the research could clearly identify the implications for practice, to support the sector to more easily incorporate learning and evidence into practice. It would be useful if for each priority there was clarity on what was being sought to be identified/ learnt from the research – the first and third priority does this to a certain extent.'

'Good to identify the principles of the Act as a research priority. Obviously that's very broad brush and we could offer links with managers and practitioners (through the regions) to develop the detail. It would be good to have research considering the issues for all people affected by the Act – adults, children and carers and prisoners.'

These will be taken into account in the next steps.

Next steps for PRIME Centre Wales Social Care Research

- Develop steering group to take the research priorities forward.
- Identify people of interest within the research themes to take the priorities forward.
- Engage with other centres, units and groups like PRIME to strengthen the engagement.
- Develop a network distribution list to keep interested participants informed and develop research capacity.
- Identify methods of dissemination of ideas, information on funding opportunities, research training and research outputs.
- Apply for funding grants for key areas including studentships.

Appendix 1- List of participants

(Positions / affiliations correct at date of meeting October 2015)

1. Adrian Edwards, Director PRIME Centre Wales, Cardiff University
2. Alison Orrell, Research Fellow, Bangor University
3. Alun Toghill, Service User Research, Partnership Public
4. Angela Watkins, Operations & Communications Manager, PRIME Centre Wales, Cardiff University
5. Annie Williams, Research Fellow, Cardiff University
6. Bridie Evans, Research Officer, PRIME Centre Wales, Swansea University
7. Carolyn Wallace, Reader Integrated Care, PRIME Centre Wales, University of South Wales
8. Cathryn Thomas, Programme and Improvement Lead, Social Services Improvement Agency
9. Chris Jones, Project Manager, Care Directorate Group Gwalia Housing
10. Dan Venables Head of Social Care Research & Development Division for Social Care and Health Research, Welsh Government
11. David Pontin, Aneurin Bevan Chair of Community Health, University of South Wales
12. Dean Chapman, Health and Care Research Wales.
13. Edward Oloidi, PhD Researcher, University of South Wales
14. Elizabeth Young, Director, Research Evaluation & Policy Home-Start UK
15. Gerry Evans, Director of Regulation and Professional Standards, Care Council for Wales
16. Hayley Fidler, Centre Manager, Pontypridd YMCA
17. Helene Hayes, Partnership Development Manager, Citizens Advice Cymru
18. John Moore, My Home Life Cymru Manager, Age Cymru
19. Jonathan Huish, Chair, Project Board Pontypridd YMCA
20. Joyce Kenkre, Professor of Primary Care, PRIME Centre Wales, University of South Wales
21. Judith Phillips, Lead, School for Social Care Research, Welsh Government; Professor of Gerontology and Director of the Research Institute for Applied Social Sciences, Swansea University
22. Kate Thomas, Health and Social Care Facilitator, Newport Gavo
23. Kristen Evans, Service Development Coordinator, Calan DVS
24. Lewis Darmanin, Team Lead Health and Care Research Wales Workforce
25. Micaela Gal, Research Fellow, PRIME Centre Wales, Cardiff University
26. Paula Walters, Director, NHS Centre for Equality and Human Rights
27. Rachel Lewis, Manager, Age Alliance Wales
28. Rosanne Palmer, Policy Adviser, Age Cymru
29. Sarah McCarty, Care Council for Wales
30. Sarah Wallace, PhD Researcher, University of South Wales
31. School for Social Care Research
32. Sheila Lyons, Care Council for Wales
33. Sophie Hansen, Director, The Office Choir Company
34. Steve Smith, Professor of Political Philosophy and Social Policy, PRIME Centre Wales, University of South Wales
35. Steve Smith, Professor of Political Philosophy and Social Policy, PRIME Centre Wales, University of South Wales
36. Susan Jordan, Reader, Swansea University
37. Susan Thomas, PhD Student, University of South Wales

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