# Oxford and Thames Valley Applied Research Collaboration

# Public Health and Social Care Strategy 2021-2024

#### Acronyms

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AHSN	Academic Health Science Network
ARC OxTV	Applied Research Collaboration Oxford and Thames Valley
CCG	Clinical Commissioning Group
GMC	General Medical Council
HEE TV	Health Education England Thames Valley
HEI	Higher Education Institutions
ICS	Integrated Care System
PHE	Public Health England
UKPHR	United Kingdom Public Health Register

#### Purpose

This document sets out the vision, goals, and approach for the Applied Research Collaboration Oxford and Thames Valley's (ARC OxTV) Public Health and Social Care Strategy, 2021-2024.

#### The vision:

Greater collaboration between public health and social care professionals, with researchers within the Oxford and Thames Valley Applied Research Collaboration; leading to greater implementation of findings, and health and wellbeing benefits for the population of the Thames Valley and beyond.

#### Aims

The Strategy has been developed through discussions with Consultants within local authorities across the region; Public Health England colleagues; ARC researchers; workforce development leads; and other parts of the regional applied research infrastructure. The Strategy has three broad strategic aims:

- 1. Greater research capacity within the public health and social care workforce
- 2. Further collaboration between the public health and social care workforce, the health and social care infrastructure and ARC OxTV researchers
- 3. Implementation of ARC OxTV research findings regionally and nationally

#### Context

It is well established that clinical care and access to health care accounts for only a fraction of the factors that contribute to our health and wellbeing. Whilst estimates vary, it is largely accepted that other socio-economic, cultural and environmental factors; such as our housing, education, employment and economic circumstances, physical and social environment, including experience of discrimination; play a much larger part in determining our health.<sup>1,2,3</sup> As highlighted by the COVID-19 pandemic, deep-rooted inequalities within these determinants influence health outcomes in both communicable and non-communicable disease. Public health and social care professionals and researchers work to influence these wider-determinants of health, to reduce health inequalities and prevent disease.



Dahlgen and Whitehead, 1991.4

The statutory responsibilities for Public Health and Social Care in the UK are held within local authority Public Health <sup>5</sup> and Adult and Children's Social Care teams, government agencies and departments such as the newly announced UK Health Security Agency, and the Office for Health Promotion within the Department of Health and Social Care, and parts of the NHS infrastructure. Local authority public health and social care professionals work closely with colleagues in housing, leisure, environmental health, planning, licencing, transport, trading standards and education; to ensure population health is part of decision-making across departments. Public health and social care teams also work with external partners to deliver interventions; such as the emergency services, the NHS and primary care, third sector organisations, the voluntary sector, academic institutions and the private sector. Over recent years, moves towards greater integration and coordination of public health, social care, primary and secondary care, has been formalised through the establishment of the Sustainability and

Transformation Partnerships and subsequent Integrated Care Systems (ICSs). The February 2021 White Paper *'Integration and Innovation: working together to improve health and social care for all'*<sup>6</sup> sets out plans to further strengthen collaboration between the NHS, local government and other partners, to both address the wider determinants of health, reduce health inequalities and deliver better and more coordinated health and care services for people. The proposed ICS Health and Care Partnerships\* will develop plans to address the local health, social care and public health needs. These will be 'place'-based partnerships, based on the geographies of local government and will work closely with health and wellbeing boards, addressing Joint Strategic Needs Assessments and the joint health and wellbeing strategies within their system.<sup>7</sup> This Place based approach recognises that much of the work of integration and improving population health is driven by organisations collaborating at this level. See section 3 for further discussion of the implications of these changes and what it means for the ARC OxTV.

\*including local government, the NHS and other partners such as the voluntary and community sector, social care providers, housing providers and others involved in health and wellbeing

In recent years there has been a real drive to strengthen research collaborations and capacity within public health and social care. It is recognised that whilst Primary care and the NHS has a strong culture and infrastructure for research, this is lacking within local authority settings. Public Health teams can have the freedom to deliver innovative schemes at scale, however, this is sometimes based on the limited evidence available, and evaluation of the effectiveness of interventions is often limited.<sup>8,9</sup> Therefore opportunities for building the evidence-base and identifying interventions that should be more widely adopted, are being lost.<sup>8</sup> Local authorities can and do commission work with researchers in academic institutions, however, the strong collaborations seen between universities and the NHS are rare with local authorities.

"...Not having a connection between universities and local authorities can have many impacts. On the most simple of levels, it means public health practitioners and policy-makers cannot access the evidence often locked away in subscription journals in university libraries. In terms of the bigger picture, research carried out by academics at universities may not address the public health needs of the local authority where the research is being conducted. One of the best ways of tackling this issue is through the co-production of research – an approach in which researchers, practitioners and the public work together to shape a project." **Prof. Chris Whitty, Chief Medical Officer for England and Head of the National Institute for Health Research.** 

Two key challenges in generating evidence for public health and social care interventions are a lack of infrastructure and capacity.<sup>9</sup> Recognising this, and with an ambition to improve integration of the research sector with local authority public health and social care teams, the NIHR has prioritised public health and social care research within the Applied Research Collaborations. The NIHR Public Health Research Programme is funding multiple schemes to support local authority teams with research collaborations, and funding wider research exploring how to develop local government health research systems.<sup>10</sup> The ARC OxTV is working with other ARCs to ensure the outputs of this research informs our approach to working with local authorities in the region.

NIHR Applied Research Collaborations (ARCs) support applied health and care research that responds to, and meets, the needs of local populations and local health and care systems.<sup>11</sup> The ARCs undertake research on priority areas highlighted by the NIHR Futures of Health report<sup>12</sup>including:

- Health and care inequalities
- Prevention, including behavioural risk factors
- Multimorbidity
- Mental health
- Adult social care and social work

The COVID-19 pandemic and its disproportionate impact on communities that face disadvantage, has brought into sharp focus the importance of reducing health and care inequalities and addressing behavioural risk factors that can lead to multimorbidity. We have seen profound impacts on mental health; and together with other responders, Adult Social Care has been at the forefront of fighting the pandemic. The 2019 NIHR ARC priorities therefore remain high on the COVID recovery agenda, and are covered by the ARC OxTV research Themes:

- Changing Behaviours For Better Health And Preventing Disease (Theme 1)
- Helping Patients To Manage Their Own Conditions (Theme2)
- Mental Health Across The Life Course (Theme 3)
- Improving Health And Social Care (Theme 4)
- Applied Digital Health (Theme 5)
- Novel Methods To Aid And Evaluate Implementation (Theme 6)

All of these research areas have relevance to public health and social care practice, and ARC researchers are already working with local authority public health and social care teams and public health agencies. This Strategy sets out how collaborations can be strengthened to ensure research outputs are implemented and research meets the priorities of practitioners of Public Health and Social Care.

#### Strategy development

The priorities and components of a strategy for public health and social care for the ARC OxTV have been determined through discussions with Consultants in Public Health in six local authorities within the Thames Valley; Public Health workforce development leads at Health Education England Thames Valley; Public Health England colleagues; Theme leads and researchers within the ARC OxTV; the ARC core team; Oxford Academic Health Science Network and Oxford Academic Health Partners. Discussions with Public Health leads in the ARC Yorkshire and Humber, ARC West of England, ARC East of England, ARC West Midlands, and ARC Kent, Surrey, Sussex, have also informed the approach.

#### 1. Greater research capacity within Public Health and Social Care

Capacity development for research has been identified as a need within the public health and social care workforce, both nationally<sup>9</sup> and by local stakeholders. Needs may range from developing critical appraisal skills and the ability to draw appropriate conclusions from research studies - through to doctoral or post-doctoral fellowships and academic careers. Health Education England Thames Valley (HEE TV) have programmes of training and development for Public Health Consultants, Specialists, Specialty Registrars, Principles and Practitioners. The Thames Valley Public Health Practitioner Development Scheme and the national Public Health Specialty Training Programme, both contain core competencies around using evidence and/or research (see Appendix 1). Additionally, once qualified as a Practitioner, Specialist or Consultant in Public Health, the professional registers

(UKPHR or GMC) also require registrants to undertake a programme of continuing professional development (CPD) within the key areas of public health competence (as defined by the Faculty of Public Health's Workforce Committee), including: assessing the evidence of effectiveness of interventions, and academic public health.

Likewise, training in Social Work requires study to degree level on an accredited course. Oxford Brookes University; Bucks New University and The Open University run these courses in Thames Valley. All courses have a research component. The professional standards set out by Social Work England also require registered Social Workers to undertake a programme CPD which includes a requirement to use research and evidence to inform practice.

Supporting capacity development for research can not only benefit those receiving training - these professionals bring: 1) skills and insights from their practice, 2) they are a funded resource (i.e. not from research budgets), 3) they may have some well-developed research skills, 4) they may provide a route for greater implementation of research outputs, 5) they bring a different perspective and provide insights on challenges to implementation, and 6) they provide a route to greater dissemination of research findings to the wider workforce.

#### Practitioner development programme

We are working with HEE TV to develop a programme of webinars/seminar sessions and workshops tailored to the needs and interests of public health Practitioners. The HEE TV Public Health Continuing Professional Development Programme consultation report (2020), identified a wide range of training and development needs, including building knowledge and skills in: health economics; statistics and data analysis; research and evaluation skills; ethics and equity. With topic and methodological experts, the ARC OxTV is well placed to provide training and development around these needs. Over the next two years, we will work with the HEE TV workforce steering group and their stakeholders to ensure sessions address specific practical research needs identified by participants. Outcomes will be measured by engagement of Practitioners in the programme and the application of learning and skills to their practice. HEE TV has awarded the ARC OxTV £20,000 to develop this programme of training and development.

#### Social care practitioner development

ARC researchers are currently working with Practitioners of social care through the evaluation of the new model for family safeguarding at Oxfordshire County Council (OCC), and the RESTORE-2 project with care home providers<sup>13</sup>. The evaluation of the family safeguarding model has been co-designed with OCC social care and wider partners, developing skills and knowledge of research methods. Moving forwards, we plan to build on these relationships and further involve practitioners in the outputs of this research.

#### Academic placements

Academic placements which combine local authority work with a research component would be an attractive option for public health registrars and could facilitate the implementation of ARC research. Registrars are fully-funded and trained to at least MSc level, and so could provide a useful additional resource for researchers. In 2020 we held a very well received research themed training day for public health registrars across the Thames Valley (and Wessex), and plan to hold a similar event in 2021. This is one opportunity for engagement between researchers interested in hosting Registrar placements and Registrars interested in research. We are also working with the AHSN and HEE TV

to develop a joint ARC-AHSN public health registrar placement. Taking opportunities presented through working within the regional ICSs to bring greater public health expertise and influence into AHSN and ICS work on understanding and reducing inequalities and prevention.

As we strengthen links with Oxford Brookes University and Bucks New University, we plan to foster collaborations in social care research and further explore opportunities for social work students to work with Theme 4 researchers. We are currently building partnerships with Buckinghamshire Health and Social Care Academy<sup>14</sup>, and will increase the evaluative capacity for social care staff through partnership with Bucks New University.

#### Pre-doctoral, doctoral and post-doctoral training

For those wishing to gain more in-depth research skills, we are working with HEE TV to facilitate the HEE/NIHR Integrated Clinical Academic programme. This programme provides research funding opportunities at all levels (pre-doctoral, doctoral and post-doctoral), for allied health professionals; including non-medical Public Health specialty registrars, Specialists, Consultants, and Social Workers. The ARC OxTV has been awarded £40,000 for two pre/post-doctoral bridging grants over two years. The funding will be available to a range of allied health professionals, and we will work with our public health and social care partners to ensure suitable candidates are aware of the opportunities.

The ARC OxTV is currently supporting new PhD studentships with relevance to public health or social care, investigating:

- Health economic aspects of childhood obesity
- Teachers support for mental health in primary school children
- Local health authorities commissioning of integrated care services, supporting efficient and accountable allocation of resources.
- 2. Further collaboration between Public Health and Social Care workforce, the health and social care infrastructure and Researchers in these fields

In addition to the activities set out in part 1 of this strategy, further collaboration between practitioners and researchers requires that: 1) People working in practice understand the research interests and capacity of ARC researchers, and that: 2) ARC researchers understand the role and remit for public health and social care and the research priorities of local authority professionals. This shared understanding lays the foundations for greater collaboration between local authority public health Consultants / Directors of Social Care, and ARC researchers, to address questions of shared interest.

The high level priorities set out in the 2020 Directors of Public Health reports for Berkshire<sup>15</sup>, Buckinghamshire<sup>16</sup> and Oxfordshire<sup>17</sup> include:

- Addressing obesity at all ages
- Preventing and delaying the development of long-term conditions
- Promoting mental wellbeing for all
- Reducing social isolation and loneliness
- Tackling homelessness, drug, alcohol misuse and domestic violence
- Healthy aging
- Reaping the benefits of digital health solutions

These priorities align well with the five ARC OxTV research Themes.

Additional priorities include: creating a smoke-free county; reducing alcohol harms; promoting physical activity; promoting safe, strong, empowered, supportive communities; improving the health of those with poorest health so the health gap between communities narrows; planning for population growth, an aging population and climate change. Many of these priorities are echoed by the BOB ICS Prevention work stream,<sup>18</sup> and Frimley ICS strategy for creating healthier communities.<sup>19</sup> Addressing these priorities in the context of the impacts of the COVID-19 pandemic, will be a major focus for local public health and social care over the next few years.

#### Addressing these priorities

A broad range of local, national and international work is underway within the ARC OxTV which is addressing these priorities.

- We are working nationally, contributing to the evidence base that is informing national obesity policy<sup>20,21,22</sup>. Other work includes collaboration with a major food retailer to test interventions to encourage healthier food purchasing, and collaboration nationally with Public Health England and NICE Public Health Advisory Committees. The Priorities in Obesity and Weight-related Research (POWER)<sup>23</sup> study has now completed and the priorities and research questions identified. These are being taken forward and funding sought to address the research questions. Work on brief interventions and referrals for weight-management in primary care, is another area of ongoing research.
- Accelerated by adaptations required in response to COVID-19, ARC OxTV researchers are pioneering interventions in secondary prevention for cardiovascular disease, namely a hypertension self-management system. The evaluation of the implementation of this system is underway and will continue over the next two years. Self-monitoring of blood pressure in pregnancy is another area of research; with the intervention rolling out across the UK. Again, the evaluation of this intervention will take place over the coming years. As part of the ARC OxTV strategy for Public Health and Social Care, findings from these evaluations will be disseminated to public health partners with a remit on secondary prevention and cardiovascular disease.
- A key priority identified by all local authority public health teams across the Thames Valley is to better understand school children's mental health and the impact of the pandemic. The ARC OxTV is meeting this need and collaborating with public health teams in Oxfordshire, Buckinghamshire, and Milton Keynes and with CCGs in Berkshire<sup>24</sup>. Research findings are already informing local public health action and their work with schools in Thames Valley. International and national work on mental health is also underway with the Co-SPACE<sup>25</sup> and SPARKLE<sup>26</sup> studies. Mechanisms are in place to ensure Co-SPACE addresses the questions of most importance to; Public Health England, Public Health Scotland, Department for Education, and Department of Health and Social Care, amongst others. Findings from these studies will also be disseminated to our public health stakeholders locally.
- Public health and social care priorities around social isolation, safeguarding (including the impacts of domestic violence, substance misuse and insecure housing), and healthy aging, are being met through the ARC OxTV collaborations with Oxfordshire County Council (OCC), third sector organisations, Oxfordshire CCG and primary care. <sup>27,28,29</sup>. Findings from work with OCC social care will be disseminated across Thames Valley local authorities, to ensure learning can inform practice across the region. A key area to progress as we move out of COVID restrictions is work on social prescribing; focusing on projects concerned with mental and physical wellbeing in older age.

The ARC OxTV is meeting local priorities around digital health with digital interventions under investigation across the research areas (referenced above). Data platforms for surveillance<sup>30,31</sup> and contributions to NICE rapid COVID-19 guidance, have been making huge contributions to the COVID-19 public health response. Moving forwards, we will work with public health colleagues, health service researchers and clinical epidemiologists, to ensure data from these surveillance systems are utilized for maximum public health intelligence and action.

#### Consultation and collaboration with local leaders; supporting local authority research

To build on existing collaborations with local public health and social care leaders, we have brought together a group of public health consultants, representing local authorities across the Thames Valley. In 2021 we will work with these consultants to identify region-wide research priorities on which different local authorities might collaborate. Where priorities align with existing ARC OxTV research, we will ensure research findings are disseminated and can be implemented locally. New proposals identified as a research need by local public health leaders, will be supported to identify sources of funding and/or collaborators. Additionally, drawing from the findings of the NIHR Public Health Research Programme funded work looking at developing local authority research systems (to be published in the coming months)<sup>32</sup> we will seek to support Thames Valley public health leaders as they progress work to develop research infrastructure within their local authorities.

#### Research methods support to local authority evaluations/research projects

In addition to researcher led research, there is a need for more limited research methods input in order that practitioner lead projects can contribute to the evidence-base and findings can be implemented more widely. Statistical support; expertise in health economics; or guidance on qualitative or quantitative methodology, would add value to local authority evaluations of public health and social care interventions in the region. The ARC OxTV plans to expand the capacity within our research methods theme to support this work.

#### A community of practice

Together with the elements from the practitioner development programme, academic placements, internship awards and work with local authority public health and social care teams, we will support the development of a community of practice within the workforce. Combined with efforts within local authorities to develop public health research across the region, we will build a network of public health and social care professionals engaged in research.

#### 3. ARC OxTV Public Health and Social Care research findings are implemented

Strengthening research capacity and fostering greater collaboration between ARC researchers and the public health and social care workforce, should pave the way for greater implementation of research findings into practice.

1. Greater research capacity within Public Health and Social Care

2. Further collaboration between Public Health and Social Care workforce and Researchers in these fields **3. ARC OxTV Public Health and Social** Care research findings are implemented

#### **Dissemination of findings**

In addition to traditional means of disseminating research findings (academic papers, seminars, conferences, contribution to advisory boards, committees and government reports, stakeholder newsletters, social and other news media etc.), we will work with Senior Managers, Directors and Consultants within the public health and social care workforce to identify the most effective routes for dissemination of research findings. Locally, this may be via our group of local authority public health consultants identified above, or via our links to consultants currently within Public Health England who are associated with the Oxford AHSN. We will also work with HEE TV public health workforce development leads, to disseminate relevant research findings to a wide range of public health professionals. We will work with our collaborators in social care and HEIs across the region to disseminate research findings of relevance to social care practice.

#### Research findings inform action for population benefit

ARC OxTV research outputs are already informing action and contributing to health and wellbeing benefits for the population of Thames Valley and beyond.<sup>21,22,24,25,30,33</sup> With our close collaboration with the AHSN, the ARC OxTV is well positioned to support implementation of interventions relevant to public health and social care. Recent examples include the AHSN work with the Association of Directors of Public Health (and others), on guidance for cardiovascular disease prevention during the pandemic,<sup>34</sup> and work with social care providers in Buckinghamshire on the role out of RESTORE2 (a physical deterioration and escalation tool for care/nursing homes).<sup>13,35</sup> Through our joint ARC-AHSN implementation lead, we will ensure implementation plans are part of research proposals from the outset and researchers are supported to address potential barriers to implementation throughout the research process (see the ARC OxTV Implementation Strategy for more detail).

As work progresses and further research outputs are realised, we will work with our stakeholders within the ICSs to ensure outputs can directly inform decision making for population health. Just as Directors of Public Health (DPH) annual reports often look to examples of good practice from across the country<sup>15,16</sup>, we want to see local authorities elsewhere quoting evidence-based innovations developed and/or evaluated in Thames Valley, in their reports. Additionally, just as the AHSN has a key focus on clinical improvement and innovation within the NHS, the ARC OxTV needs to keep abreast of regional local government work on Sector Led Improvement<sup>36</sup>, and identify opportunities for getting research evidence into practice.

We will also work with public heath leads in other ARCs to promote wider awareness and adoption of ARC OxTV interventions. Through taking a lead in the co-design approach, we know that the research outputs will directly inform delivery of children's and adult's social care (as decision makers are involved in the research).

#### Looking forward

The ARC OxTV 2019-2024 coincides with a period of major change for public health, social care and the wider health and social care infrastructure. As described above, the formation of the ICSs as statutory bodies - with the removal of requirements for competition, greater partnership working, collaboration and place-based decision making and spending - presents an opportunity for greater influence within the system and delivery on population level priorities, including addressing widespread, unjust health inequalities. However, concerns remain around how exactly ICSs will work in practice, and the role of local government.<sup>37</sup> The white paper<sup>6</sup> includes some limited targeted changes to public health and social care, but primarily concerns NHS reforms and does not address the promised and long overdue plans to reform adult social care or wider public health reforms.<sup>38</sup> Plans for the reform of adult social care funding are expected later this year.<sup>39</sup>

Additionally, the post-pandemic reorganisation of the public health infrastructure will lead to significant changes to service delivery within the system, with implications for applied public health research. Public Health England is dissolving and the health protection, health improvement and healthcare public health functions will be moved into the newly established UK Health Security Agency, The Office for Health Promotion (Department of Health and Social Care) and into the NHS, respectively. The ARC OxTV and other research infrastructure need to be cognisant of and responsive to these changes to service delivery and capitalise on the stronger role for ICSs to deliver population level priorities. As detailed above, we will work with AHSN colleagues together with NHS, Local Authority and other partners to support implementation of population based ARC OxTV research across the system.

#### **Measuring progress**

Progress will be measured against performance indicators as set out the ARC OxTV Public Health and Social Care action plan.

#### **Reviewing the Strategy**

We will review the strategy in September 2021 and then again annually. Our annual review will include:

- 1) Checking progress against the action plan; reviewing success and identifying areas of concern
- 2) Determining actions to address areas of slow progress
- 3) Inviting feedback from Public Health and Social Care professionals
- 4) Inviting feedback from ARC OxTV researchers
- 5) Updating or amending the strategy as required, based on findings, with approval of the revised strategy by the ARC Executive Group.

#### Appendix 1

Research skills required within Public Health and Social Care training and professional development programmes

Practitioner competencies required for professional accreditation and acceptance onto the United Kingdom Public Health Register (UKPHR) include the ability to:

- Access and appraise appropriate evidence of effectiveness for public health interventions or services
- Apply evidence to plan the delivery of effective public health interventions or services

Academic public health is one of ten key areas of the Faculty of Public Health Specialty Registrar training curriculum. Academic competencies required for qualification as a Consultant and registration with the UKPHR or GMC include the ability to:

- Critically appraise evidence to inform policy and practice
- Apply and interpret appropriate statistical methods and use standard statistical packages
- Formulate questions that will allow a structured approach to retrieving and assessing the evidence to inform research, policy and practice
- Advise on the relative strengths and limitations of different research methods to address a specific public health research question
- Identify research needs based on patient/population needs and in collaboration with relevant partners
- Understand and apply principles of good research governance
- Make a significant contribution to the design and implementation of a study in collaboration with appropriate team and relevant partner (e.g. academic partner)
- Write and submit an article of sufficient quality for publication in a peer review journal
- Deliver education and training activities for academic or service audiences in a wide range of formats including large lecture and small group and online /e learning

Once qualified, continuing professional development (CPD) within the key areas of public health competence (as defined by the Faculty of Public Health's Workforce Committee), include:

- Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations
- Academic public health

Social Work degree training all contain a research component.

The professional standards set out by Social Work England also require registered Social Workers to undertake a programme CPD which includes:

- Use supervision and feedback to critically reflect on, and identify my learning needs, **including** how I use research and evidence to inform my practice.
- Keep my practice up to date and record **how I use research**, **theories and frameworks** to inform my practice and my professional judgement.

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<sup>18</sup> <u>Prevention   BOB STP</u>
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<sup>29</sup> OPAL (Oxford Pain, Activity and Lifestyle) study — Nuffield Department of Orthopaedics, Rheumatology and
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<sup>30</sup> OpenSAFELY: Home
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