PLYMOUTH HEALTH DETERMINANTS RESEARCH COLLABORATION

August 2023



SUMMARY

Plymouth City Council, with its partners University of Plymouth, have applied for and been successful in the award of a grant from the National Institute of Health Research to provide research capacity and capability into the ways in which interventions on the wider determinants of health can support reductions in health inequalities.

The total grant award is for £4,744,469 over the course of 5 years. This funding is ringfenced to that detailed within the grant bid documentation.

BACKGROUND

The health of the public is fundamentally influenced by the wider determinants, or drivers, of health. The work of local government profoundly impacts on these drivers, but there is, to some degree, a paucity of useful evidence around what can impact on these drivers and how to influence them. The National Institute for Health Research (NIHR) have recognised this, and that it is vital that local government is better supported to become more research-active and further build this evidence base.

This is a challenging field of research, because it has to take account of the complexities of people's lives and there is far less scope in this field for the traditional research models that the NIHR would more typically be involved; randomised controlled trials for medicines, for example. In recognition of the challenges faced by local authorities, the NIHR has begun to widen its initiatives aimed at strengthening the research culture within local government, aiming to build and strengthen capacity and capability both within councils and academic institutions.

BID DETAILS

Plymouth City Council with its academic partner the University of Plymouth, submitted a two phase bid in 2022 and were successful in securing the grant. The bid had the aims of;

- Develop the culture and skills to ensure a learning approach informs decision making (to impact positively on the wider determinants of health)
- Produce knowledge for use locally and of value nationally, especially for similar coastal communities

The bid recognised the opportunities around;

- Innovation really understanding whether some of the interventions and approaches that we
 are interested in work, why they work, and whether they would work with other groups of
 people and in other settings
- Evidence how we are developing and using the evidence base to inform decisions, and to influence the decisions of others
- Intelligence are we asking the right questions and using all of our data sources to provide joined up intelligence to support Council processes and to provide evidence.

As well as Plymouth, the following areas were also awarded HDRC funding; Aberdeen, Blackpool, Bradford, Coventry, Doncaster, Gateshead, Islington, Medway, South Tees, Newcastle, Lambeth and Tower Hamlets.

PROGRESS SO FAR

As well as dealing with quite significant amounts of paperwork to enable us to develop the collaboration, we have;

- established a team as per the bid (Ruth Harrell is the Director and Sheena Asthana (UoP) is the academic lead), which includes a number of researchers in Residence who are starting to support different areas of the Council
- established the governance processes, though it is noted that some such as a research ethics
 policy which balances the level of rigour required with an understanding of the types of
 research we might do
- carried out 4 research projects that began slightly before the bid was awarded as pump priming
- delivered training on appreciative enquiry and Human Learning Systems to a wide range of people, many in the Council but also amongst community and voluntary sector total 220. In additional, we have delivered training to a wide range of other stakeholders (>400) from other Councils and national groups.
- We have widened our Appreciative Enquiry learning set within the Council which has continued.

Also, PCC have launched our Compassionate Approach to Health and weight for children and young people; this strategy uses the approaches to complexity that we developed the HDRC around, based on Human Learning Systems and informed by Appreciative Enquiry; trauma informed, non-stigmatizing and recognising the value in everyone (hence why it is not called our obesity strategy). There is national interest in this approach.

NEXT STEPS

We are preparing a survey of Council officer's knowledge, awareness and use of evidence, and where they would like to develop, to help to inform our work areas and to provide a baseline

There is further work to do on the processes and systems that are required for research; for example, university research ethics process is not fit for purpose for the types of research that we may need (especially community research) and there is need for a new policy to be developed. A further example is around how we store, use and connect different data that has been collected, whether this is quantitative or qualitative, then how we analyse that to form intelligence, and how we communicate this. We are starting some steps around using linked data (e.g. the Low Income Family Tracker (PCC) and the health systems PHM database) which will develop our approaches.

We are launching our Directorate engagement from October 2023, this will supplement the work that we have been doing with a few teams and start to widen the engagement. This will include a variety of offers, from a RiR to support with evidence base, to training and support with evaluations, to support with full research proposals (which might also include supported Masters or PhD opportunities for staff who might be carrying out research as part of their work). There is back fill funding for staff who engage with the programme, and also for their manager, reflecting the skills and knowledge that they may need to develop to fully engage with and utilise the research.

APPENDIX I SUMMARY OF BID

Background and rationale

Plymouth has, like many other coastal cities, high mortality rates. The wider determinants of health contribute to both poor quality of life and inequalities. Plymouth City Council (PCC) recognises that tackling the problems related to employment, housing, food, crime and education requires an innovative approach which is outlined in The Plymouth Plan. An HDRC will build on these strengths to ensure that we better understand what works, why and under which circumstances (financial, contextual and organisational) and share this learning.

Aims:

- 1. Develop the culture and skills to ensure a learning approach informs decision making
- 2. Produce knowledge for use locally and of value nationally, especially for similar coastal communities

Objectives:

- Support changes aimed at addressing the wider determinants of health through a cultural change in relation to the use of evidence and evaluation
- Carry out specific prioritised research projects related to The Plymouth Plan's innovations to address the wider determinants of health
- Successfully bid for external research funding
- Build collaborations for sharing knowledge and carrying out research with other HDRCs and similar coastal communities

Methods:

We will set up a joint PCC and University of Plymouth (UoP) research team embedded within the council. Researchers in Residence (RiRs) will work with council Research Champions and Public Partners. The team will work alongside those delivering changes designed to address wider determinants of health and collaborate with specialist university researchers. Public Partnership will be developed though links to existing organisations and the engagement of individuals during specific projects.

Initial work will focus on culture change and wider skills development. We will focus on helping people understand the shift from commissioning based on monitoring delivery to decision making based on understanding complex interactions. Specific research projects likely to have the most impact locally and nationally will be developed.

Informed by a Human Learning Systems philosophy, and building on the existing use of Appreciative Inquiry (AI), the team will use a range of methods suited to understanding complex dynamic systems: evidence synthesis, quantitative analysis of routine data, realist informed observation and interviews and health economics. External funding bids will be developed for calls and based on local priorities and expertise.

A Management Board and an Advisory Group will oversee and support the HDRC.

Timelines

After initial set up and recruitment we will annually prioritise the areas we will be working in. The scale and complexity of the research will grow as our skills and experience do. Within five years we aim to be securing external funding and delivering locally and nationally relevant research.

Dissemination and Impact

Pathways to impact are built into the Plymouth HDRC Model. Local impact will be achieved through general culture change and staged feedback of the results of specific projects, aided by an understanding of context. Building trusting relationships will be prioritised to ensure engagement with setbacks as well as successes.

National impact will be achieved through production of traditional outputs such as reports, research publications, blogs and webinars, as well as using more intensive knowledge mobilisation techniques.