

Summer 2017

Issue 5

The mission of the NIHR CLAHRC NWC is to work collaboratively with Partner organisations and other stakeholders, including members of the public, to co-produce and conduct high quality, leadership enhancing, applied research designed to decrease health inequalities and improve the health of the population of the North West Coast.

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Research and Collaboration Delivering

This past quarter has been another period of progress. We are witnessing a number of collaborative research projects in the Partners' Priority Programme (PPP) Phase I, making headway, through the network of support provided by our Collaborative Implementation Groups (CIGs). Running parallel to these is Phase 2 of PPP, which commenced in July, and attracted 17 NHS and Local Authority organisations in new projects. This is an endorsement of the benefits delivered to our Partners so far in Phase I. We are delighted to have had

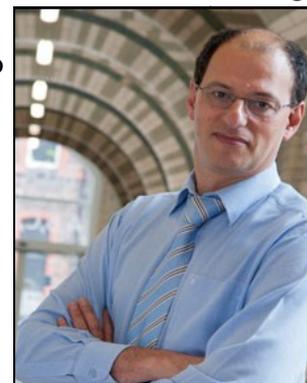
such a positive uptake and look forward to supporting Partners through the Evaluation Workshop process and their projects. A dissemination event, presenting Phase I, is planned for October to showcase their achievements. Additional benefits we are offering to Partners include exclusive training opportunities around public engagement which will be particularly useful for Sustainability and Transformation Partnerships (STPs), and

an offer of an STP round of PPP CIGs in 17/18.

I am delighted to report we are over half way to meeting our minimum academic publication target of 80 by Summer 2018, with 43 now published and a further four in press at the time of writing.

Please visit our website to view the [full Publications Index](#) by Theme.

Mark Gabbay
Director of
CLAHRC NWC



Partners' Priority Programme (PPP) Update

PPP Evaluation Workshops have been ongoing during the summer months.

Workshop 5 for PPP (Phase 1) focused on *Reviewing and Reporting*, including communicating evaluation findings (reports, posters, papers, etc.) A presentation from CLAHRC Greater Manchester: *What it is and how to do it* was provided with an MDT review and project evaluation progress (review and action



planning). Teams are now working towards a dissemination event in October to showcase progress to date.

Workshop 1 (for PPP cycle two) brought 20 participants from 17 organisations to start their journey with us.

The Evaluation Workshops bring together initiatives from across the CLAHRC NWC region where NHS and Local Authority Partners are developing new models of out of hospital treatments and care. The aim is to enable organisations to develop and implement project-level evaluation of initiatives, whilst also enabling a cross-CLAHRC analysis addressing the Partners' Priority Programme question of identifying which initiatives in general are most (cost) effective in reducing health inequalities, improving population health and wellbeing and reducing emergency admission.

During the workshops there are some short presentations, but the majority of the work is undertaken in the Collaborative Implementation Groups (CIGs) supported by CLAHRC NWC facilitators with the emphasis on collaborative co-learning.

The overarching aims of mixing practitioners, commissioners, patients, public and researchers include developing capacity within CLAHRC NWC partners to embed evaluation of service transformation and new models of treatment and care; find, generate and use evidence and data to inform the evaluation process at project and programme level; support teams to plan and implement an evaluation relevant to PPP and maintain a focus on tackling health inequalities.

All materials are available for partner staff, on the CLAHRC NWC website portal (password protected). <http://www.clahrc-nwc.nihr.ac.uk/>

8th NIHR Infrastructure Doctoral Research Training Camp



A Blog by CLAHRC NWC Postgraduate Student Naoimh McMahon

This year the focus of the camp was on communicating research messages. Giles Yeo opened the event with a colourful talk on his experience of working with different media platforms to communicate his research. This was followed by a research showcase from the NIHR trainees.

On Wednesday evening, the NIHR trainees were divided into groups and tasked with developing a communications plan for a single

piece of research that they were assigned. The task included the production of a plain English summary, a press release, a media interview, a detailed communications strategy, and a five minute pitch to the 'Making People Healthier Research Programme' panel. Each team had an experienced NIHR facilitator to guide them through what would be a whirlwind apprentice styled day!

Representing NIHR CLAHRC NWC at the camp were PhD students Naoimh McMahon, Leanne Male and Stephanie Heys. Team Strong, which Naoimh was part of, were awarded 'Best Campaign' for their efforts. The after dinner speaker on Thursday evening was CLAHRC NWC's own Professor Dame Caroline Watkins. Caroline provided some badly needed light entertainment, sharing anecdotes, reflections, and lessons learned during her early career experiences.

The tweets from the event can be found under the hashtag #NIHRCommsCamp or through the @NIHRTrainees twitter account.

How do NHS decision makers choose when, how or if to introduce innovations in health care?

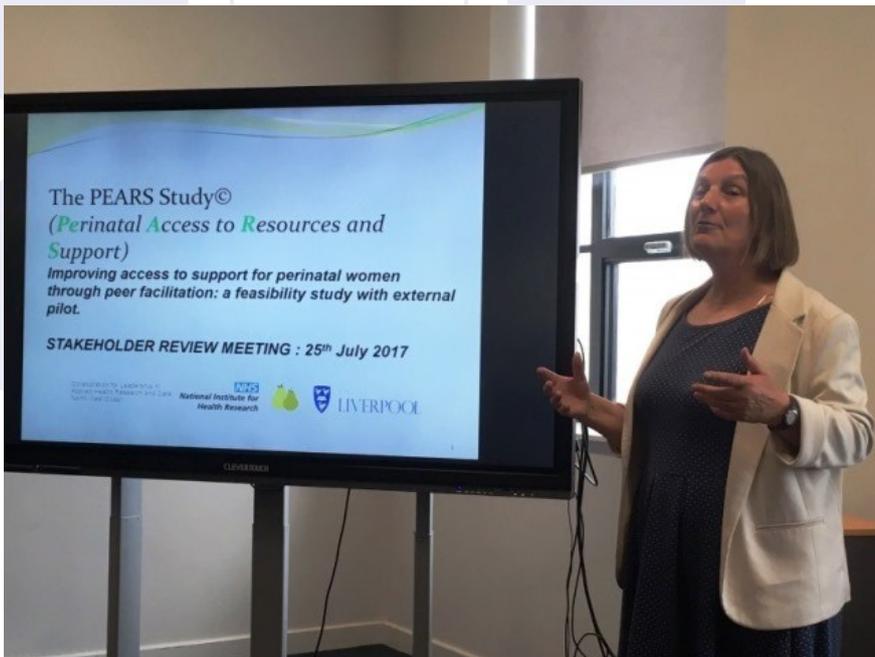
Researchers in CLAHRC North Thames are looking at evidence use in decision-making in the NHS, and decision-makers' preferences for different types of evidence. The aim of the study is to improve both the production and use of evidence in decision-making on introducing innovations.

The study is called DECIDE (Decision in health care to introduce or diffuse innovations using evidence) and is funded by the Health Foundation and led by Dr Simon Turner.

If you would like to find out more [click here](#) or to take part in the study, you can do so [here](#).

The survey should take around 15 minutes and is voluntary. No personal details will be asked of you and published reports about this survey will not contain any personal details. If you have any queries, please contact Nicholas Swart at n.swart@ucl.ac.uk

Research starts to bear fruit



“If we can enhance perinatal mental health we can reduce future health inequalities,” says Professor Pauline Slade (pictured, left), who has led the CLAHRC NWC funded PEARS research into improving access to support for perinatal women through peer facilitation (a feasibility study with external pilot).

Speaking at the final stakeholder review meeting at Liverpool Clinical Commissioning Group on 25th July, the Professor of

Clinical Psychology outlined the progress that had been made and with the study now nearing its completion, hosted a debate on the next steps to capitalise on the successful research completed to date. Annette James, former Head of Children’s Health Improvement (Public Health Liverpool City Council), led the research jointly with Pauline.

Stakeholders in the project included Local Authorities, NHS Trusts, Peer Facilitators and Children’s Centres amongst others. Representatives from these research partners mixed with peer facilitators, statisticians, researchers and public advisers to hear about how the study had set out to reduce health inequalities and enhance perinatal mental health. In summary, the project looked at available health and community resources amongst socially deprived pregnant women and their families. 85% of the participants lived in the most deprived 1% of the UK.

An intervention, combining three elements of evidence based care and adapted to a perinatal setting was made up of the following components: a supportive contact with a non-professional peer; individual signposting to local resources based on women’s own needs and preferences (using an innovative online community resources map specifically designed for the study) and “if-then” planning (a simple way of helping people to put their intentions into action).

Katie Bristow, Research Fellow and Manager of CLAHRC NWC’s Improving Mental Health Theme, said: “Social support is important to people’s health and mental wellbeing, specifically for both the mother and unborn child in this context. Our intervention is about trying to increase women’s social support by identifying the support they need both antenatally and postnatally.”

Research starts to bear fruit (cont....)

Quantitative results suggest a trend for intervention group participants to have more contacts with community services during pregnancy and postnatally.

Amy Mahdi, Research Midwife at Liverpool Women's Hospital was seconded to work on the project. She said: "Helping develop the online community resource map has made me feel really proud to be part of the team and grateful for the skills I'm taking back to my employer. There could be scope to develop the online resource further in partnership with partners and patients and that will be of great benefit to pregnant women in the community in helping provide access to services."

Professor Slade added: "This work could be a precursor to a more advanced and larger study; we know the intervention we created is acceptable to the mothers and staff who participated. It may be that a larger, funded multi-site trial is an option to understand the potential impact on pregnant women's mental health wellbeing on a much larger scale. There are options to move this feasibility study forward, including applications for funding and we are already meeting other CLAHRCs later this year to disseminate findings further and nationally."

Consultant in Public Health at Liverpool City Council, Martin Smith, commented: "This has been a very informative insight into research which touches on some of our key delivery areas. It is a reminder of the importance of a systematic approach in service delivery. As partner of CLAHRC NWC it is good to hear the findings and have the opportunity to take them away to digest and consider them in the context of planning for future service provision."

Presentations of the findings have already featured at numerous conferences and submission of journal articles has also commenced. A [Brokering innovation Through Evidence \(BITE\)](#), which summarises the project, has already been produced and added to the national CLAHRC Partnership Programme website.

Partners:



Partnership working moves forward in Blackburn

CLAHRC's Resident Advisers involved in our public health programme of work in Blackburn's Neighbourhood for Learning (part Wensleyfold and Mill Hill) recently met with representatives from Blackburn with Darwen Council and other local stakeholders. The aim was to share the findings of local enquiries they had conducted and discuss how to move forward in partnership to help build the resilience of people who live and work in the area and of services delivered in the neighbourhood.

Dilwara Ali, local Facilitator for the CLAHRC NWC Community Research and Engagement Network and whom has been co-ordinating the resident advisors, said: "These resident advisors have been on a journey building skills and confidence in listening to the community. Now we want our partners to tap into them as a resource and respond to what they have found out so far." CLAHRC NWC Resident Advisers talked to members of the community and identified low numbers accessing local facilities (e.g. local parks), council facilities and identified a problem with fly tipping in wasteland areas.



Respondents mentioned a lack of confidence and not having someone with whom to discuss barriers to using local resources. Podcasts, presentations and board displays were used to convey these findings and the journey that resident advisors and the other stakeholders are on in the Neighbourhood for Learning. Retired teacher Freda Clayton (pictured) joined the programme as a Resident Adviser after discovering that her local district was one of the most deprived areas in the country and

felt she had to do something. Freda said: "I never thought I'd be doing street interviews, taking photos and presenting findings about my local area but I feel passionate about doing something. We have a huge rubbish dumping problem. I'm enjoying the experience as I feel I am helping make a change."

Ruth Young Public Health Research and Development Manager at Blackburn with Darwen Borough Council, said: "It is important residents are part of a system promoting health and wellbeing with social movement at its heart. It may be that some of our community initiatives including volunteering could be changed and then evaluated for impact. We welcome this opportunity to work together."

Partnership working moves forward in Blackburn (cont....)

Ben Barr, part of the CLAHRC NWC team supporting the Improving Public Health Theme and Senior Clinical Lecturer in Applied Public Health Research, also presented findings from the CLAHRC NWC Household Health Survey. This was conducted in 2016 in ten neighbourhoods across the North West Coast area and highlights some of the social and health inequalities experienced by people living in this area of Blackburn. He commented: “The findings from this survey can help people here today identify something they would like to change in the area, the impact of which can be evaluated”.

It was agreed that a Local Oversight Group involving residents, representatives from the council and people from other sectors should be set up. This group will meet monthly and make a final decision on the issues to be addressed and to oversee the evaluation.

NIHR Knowledge Mobilisation Research Fellowship Programme



The Knowledge Mobilisation Research Fellowships (KMRF) are designed to support a balance of innovative knowledge mobilisation and research into the processes and impacts of such innovation. Through innovative practice and systematic study of that practice KMR Fellows should advance knowledge and understanding about research use, influence and impact.

In order to support partnership working between Higher Education Institutions (HEIs) and publicly funded healthcare bodies (NHS organisations or other publicly funded organisations providing health or social care services, for example social enterprises or local authorities), applications must be supported by organisations from both of these different sectors.

Because applications are welcomed from individuals currently working in either healthcare or academic organisations, the experience and competencies expected of the applicant are dependent on their background. Further details, including full eligibility criteria, can be found in the relevant guidance notes for applicants. Prospective applicants are encouraged to read these guidance notes before contacting NIHR TCC with queries pertaining to the scheme or their application. All applicants must ensure that their proposed research project is compatible with the published [NIHR remit](#).

[How to apply and guidance for applicants](#)

Concerns austerity policies are reversing gains made to reduce health inequalities in England

Got a Story?

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Event



From research idea to funding application

This Research Design Service North West event is for health and social care professionals and researchers in the North West of England who want to develop and submit an application to an NIHR or other national competition peer reviewed research funding stream.

12 October 2017, 9.30am-3.00pm, The Storey Institute, Lancaster

[More](#)

New University of Liverpool research, published in *The BMJ*, highlights that, a cross government strategy in place from 1997 to 2010, appears to have reduced health inequalities between the most deprived areas in England and the rest of the country. However, since the strategy ended with the change of government in 2010, inequalities have started to increase again - and there are now concerns that current policies are potentially reversing these gains, say the researchers.

Between 1997 and 2010, the UK government introduced the English health inequalities strategy - a comprehensive plan to reduce health inequalities between the most deprived areas in England and the rest of the country by increasing social investment particularly in more deprived areas and population groups.

Deprived areas

Health inequalities are defined as the differences in health between groups at different ends of the socio-economic spectrum. For example, between wealthier and less affluent groups. But it was unclear whether it did or did not have an impact on health inequalities. The researchers set out to investigate whether the strategy was associated with a decline in health inequalities, compared with trends before and after the strategy. They analysed the gap in male and female life expectancy between the most deprived fifth of English local authorities and the rest of the country before (1983-2003), during (2004-12), and after (2013-15) the strategy.

Impact of austerity

Deputy Lead of CLAHRC NWC's Improving Public Health Theme, and lead author of the study Benjamin Barr, said: "This is the first study to analyse trends in geographical health inequalities before, during and after the strategy, providing the first evidence that it may have reduced these inequalities, reversing a previously increasing trend."

"The reversal of the trend in health inequalities from 2012 could be related to the delayed effects of the 2008-09 recession. However, it is more likely that this is related to the reductions in public spending that occurred since 2010 as part of the government's austerity programme."

"The strategy may have reduced geographical health inequalities in life expectancy, and future approaches should learn from this experience. The concerns are that current policies are reversing the achievements of the strategy."

The research was supported by CLAHRC NWC. The full paper, entitled 'Investigating the impact of the English Health Inequalities Strategy: a time trend analysis', can be found in [BMJ 2017 \(358\):j3310](#)