

**4 December 2024**

<b>Subject:</b>	National Institute for Health Research: Health Determinants Research Collaboration - Year One Update
<b>Presenting Officer and Organisation</b>  	Dr Lina Martino Consultant in Public Health and Director of National Institute for Health Research (NIHR) Health Determinants Research Collaboration (HDRC) Sandwell
<b>Purpose of Report</b>	Information

## 1. Recommendations

- 1.1 To consider and comment upon the National Institute for Health Research: Health Determinants Research Collaboration - Year One Update

## 2. Links to Workstreams Set out in the Health and Wellbeing Strategy

<b>Healthy Communities</b>	This workstream takes an asset-based approach to improving the wider determinants of health and wellbeing – the conditions in which our residents are born, live, grow, work and age. The HDRC aims to strengthen prevention and wellbeing through ensuring that the services we deliver and commission as a Council are evidence-informed, robustly evaluated, and reflect the needs and values of our local communities.
<b>Integrated Town Teams</b>	This workstream focuses on supporting people to have the best possible lives and reducing health inequalities through

	place-based working. The HDRC can support these objectives by strengthening approaches to information sharing and using local intelligence and evidence to inform decision-making.
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### 3. Context and Key Issues

#### Background

- 3.1 The National Institute for Health Research (NIHR) is the biggest funder of health research in the UK. They have provided funding to 30 local authorities across the UK to establish Health Determinants Research Collaborations (HDRCs) in their local areas. Sandwell Metropolitan Borough Council (SMBC) was awarded approximately £5 million in the second funding round through a competitive bidding process. Our HDRC programme began on 1 January 2024.
- 3.2 Sandwell HDRC (Better Research for Better Health) is a partnership between SMBC, the University of Birmingham (UoB) and the voluntary and community sector (VCS), represented by Sandwell Council of Voluntary Organisations (SCVO) and Sandwell Consortium.
- 3.3 HDRCs aim to boost research capacity and capability within local government to embed a culture of always using evidence when making decisions. HDRCs use research findings to understand how decisions impact on health and health inequalities. They also carry out research where evidence is not already available.
- 3.4 SMBC is the 12th most deprived local authority in England and life expectancy is 2-3 years shorter than the national average. Inequalities have been deepened by the pandemic, austerity and climate change, yet Sandwell's superdiverse communities, industrial heritage and green spaces are key assets. Existing structures and collaborations have shown commitment and potential to be more research active and evidence-informed, but limited capacity to take this forward.

#### HDRC vision, aims and objectives

- 3.5 Sandwell HDRC aligns with the Borough-wide Levelling Up Programme, which aims to improve the wider determinants of health – the conditions

in which we are born, grow, live, work and age - and tackle persistent disadvantage in Sandwell.

3.6 The HDRC vision is for the Council to undertake evidence-informed, robustly evaluated activities that reflect the needs and values of our diverse local communities.

3.7 The HDRC aims to transform SMBC's research culture and infrastructure to:

- Make the best use of evidence to inform decision-making and investment;
- Robustly evaluate services to ensure quality, effectiveness and cost-effectiveness;
- Facilitate research activity with partner organisations and local residents;
- Share learning across the system for wider influence.

3.8 This will be achieved by:

- **Improving the skills of the staff at Sandwell Council and improving how we carry out research.** This includes training on how to carry out new research, identify existing research and establish how good the research is. We will design systems to ensure that any research we do is good quality and meets the guidelines set out by national government.
- **Turning research into action so it makes real change to people's lives.** Planning and delivering services in a way that is informed by the latest research.
- **Working with other organisations to carry out and use research, and creating one system to hold all the information that we collect.** This will allow us to see how one area (e.g. crime) can influence another area (e.g. mental health).
- **Ensuring the research undertaken is informed by our residents and community groups.** This will build upon existing meetings and forums that Sandwell Council hold with a variety of organisations and members of the public. It will also help us to choose the research we focus on so it creates the biggest benefit to Sandwell.

## **Progress to date – key milestones**

3.9 The following key milestones have been met since the programme commenced on 1 January 2024:

- Recruitment of the core staff team has been completed (Programme Manager, Programme Co-Ordinator, 4 x workstream Project Managers and 4 x Project Officers).
- The programme Steering Group and Board have been convened and have met, and Terms of Reference have been agreed.
- The main Partnership Agreement is in draft and currently under review by SMBC's Legal team. An additional agreement with the University of Wolverhampton is also under review.
- The first financial monitoring report was submitted to NIHR in September 2024, which provided assurance that the grant was being spent as planned. This followed the 6-month progress report submitted previously (July 2024), with the 12-month report due in January 2025.

## **Workstream progress and next steps**

3.10 The main focus for all four workstreams at present is to establish baseline measures for key performance indicators and outcome measures. Workstreams 1 and 2 are internally facing, i.e. focused on working across Council directorates; and workstreams 3 and 4 are externally facing, i.e. focused on external partnerships and communities. All team members have attended a range of workshops, events, and meetings to learn from wave 1 HDRCs and share learning from our first year with peers.

### **3.10.1 Capacity and infrastructure (Workstream 1)**

- A dataset and research governance mapping exercise is in development, working with the Service Improvement team to support the development of the corporate Data Strategy.
- Team members have contacted wave 1 HDRCs to learn about their research governance and ethics processes, including intellectual property agreements, to inform our approach.
- A research capacity, culture and needs survey is being developed, along with a plan for communication and dissemination that will use a range of methods to maximise completion.

### **3.10.2 Culture and translating evidence into practice (Workstream 2)**

- An assessment of the current culture around research and evidence is in progress, led by Dr Jason Lowther, Head of Department of Public Administration and Policy at UoB. This explores how senior leaders within the SMBC view research and evidence, and how this is used in the Council; their own involvement in research; and what they see as facilitators and barriers.
- Initial interviews with SMBC's Executive Directors have been carried out and analysed. The next phase will use interviews and focus groups with Assistant Directors and Service Managers to obtain a wider range of insights across directorates. This will inform the culture and capacity survey being developed in workstream 1.
- An audit is in progress to assess the extent to which impact assessment tools (e.g. Equality Impact Assessments, Health Impact Assessments and Environmental Impact Assessments) are undertaken when included in Cabinet reports.

### **3.10.3 Systems and partnerships (Workstream 3)**

- A mapping exercise is being carried out to identify key stakeholders, and existing systems and pathways for collaborating on research.
- Case studies have been produced to demonstrate examples of where research has been carried out within the Council and translated into practice.
- A Research Strategy is being developed (in draft), and initial discussions have taken place around developing a Policy Framework.
- Links have been made with the Levelling Up Programme and Child Friendly Borough initiative.

### **3.10.4 Community participation (Workstream 4)**

- A formal launch event for stakeholders is being held on 27 November 2024.
- A Communications Plan and Public Participation, Involvement and Engagement (PPIE) strategy are being developed (in draft). This includes gaining insights into community perceptions and involvement in research (both formal and informal).
- Previous work to develop a cohort of Community Research Champions is being progressed, drawing on recommendations from the NIHR

PHIRST evaluation of our COVID-19 Community Champions programme presented to the Board in September.

- The HDRC website has been created and will be launched at the stakeholder event.
- A community Roadshow is being planned for spring 2025.

### **Next steps and priorities for Year 2**

- 3.11 **HDRC governance:** The Independent Advisory Group will be convened, aiming to meet in early 2025. Recruitment of public representatives to the HDRC Board and Advisory Group will be a key priority.
- 3.12 **Staffing:** As detailed in the proposal, two embedded researchers will be recruited in Year 2 to develop and co-ordinate related research. They will hold honorary contracts with the University of Birmingham and receive regular supervision from the University academic team. A PhD student will also be recruited to focus on evaluation of the Levelling Up Programme, jointly supervised by SMBC and UoB.
- 3.13 **Training:** It is expected that the baselining activity will be completed by early 2025 and that delivery of training for SMBC staff and members will commence.
- 3.14 **Community engagement:** Work with community groups and forums to expand existing structures for PPIE, and opportunities for involvement in research including access to training.
- 3.15 **Information sharing:** Following completion of the data and research governance mapping exercise, the next stage will focus on exploring facilitators and barriers to information sharing, both internally and with external partners. This will support the development of linked datasets for research.
- 3.16 **Research governance and ethics:** Develop internal guidance for carrying out and participating in research, including gaining ethical approval and applying good research principles to evaluation and consultation.
- 3.17 **Research collaboration:** Work with academic partners to identify opportunities for joint research, ensuring that these align with local priorities and are informed by communities' participation and engagement.
- 3.18 **Communication:** Regular communication of HDRC activities via website, social media, newsletter and community venues and events.

3.19 **Regional and national networks:** Continue to work with regional research leads and the national HDRC network to share learning and influence practice more widely.

#### 4. Engagement

4.1 The initial proposal was informed and shaped by conversations at existing local forums, where residents were keen to share ideas on priorities around the wider determinants of health; engagement with SMBC's elected members, who are representatives of local communities in their towns and wards; and input from the voluntary and community sector (VCS).

4.2 A range of internal and external partners were engaged in developing and endorsing the funding bid, including the UK Health Security Agency (UKHSA), the Office for Health Improvement and Disparities (OHID) and Health Education England West Midlands (HEE WM). They have continued involvement through the HDRC Steering Group, Board, and regional networks.

4.3 Continued VCS involvement through the HDRC Board and Steering Group (SCVO and Sandwell Consortium) supports the development of our approach to community engagement and participation. We are seeking to recruit public representatives to join the Board, including young people.

4.4 The proposal for the programme's aims, objectives and delivery was discussed with Health & Adult Social Care Scrutiny Board in January 2024.

4.5 Workshops were held with voluntary and community groups in March and April 2024 to start conversations and gauge interest. Those who expressed an interest in being involved were invited to attend the launch event, and further discussions have taken place.

4.6 Co-production is embedded throughout the HDRC. Engagement with internal and external stakeholders is part of all of the workstreams, with workstream 4 specifically focused on external communication and involving residents and community groups.

## 5. Implications

<b>Resources:</b>	Sandwell HDRC is a 5-year programme funded via a grant from the National Institute for Health Research.
<b>Legal and Governance:</b>	Approval to draw down the funding was obtained from Cabinet and Strategic Finance prior to programme commencement. The grant is subject to a contract between Sandwell MBC (lead organisation) and the funder (NIHR). A Partnership Agreement between the main co-applicants (SMBC, University of Birmingham, SCVO and Sandwell Consortium) sets out working and funding arrangements between parties. Governance arrangements for the HDRC Board, Steering Group and Independent Advisory Group are set out in the programme Terms of Reference. Successfully implementing the HDRC programme would enhance current governance processes through improving how they are informed by local and research evidence.
<b>Risk:</b>	A risk assessment was carried out and the Risk Register was included in the SIU appraisal documentation and with the report to Cabinet in November 2023. This is periodically reviewed and updated via the HDRC Steering Group, with exception reporting to the Board.
<b>Equality:</b>	An Equality Impact Assessment was completed as part of the submission to Cabinet in November 2023, outlining the equality implications of the HDRC programme. Overall, it is likely that the programme will have benefits across a range of protected characteristics and other marginalised groups through using evidence and research to improve the quality of local services and initiatives focusing on the wider determinants of health and wellbeing, and the emphasis on involving local residents in shaping research priorities.
<b>Health and Wellbeing:</b>	The HDRC will have a positive impact on health and wellbeing and reduce health inequalities through improving the wider determinants of health. It will achieve this through strengthening the use of evidence and evaluation to inform the services and interventions we deliver and commission



	as a Council, thereby enhancing quality and efficiency of investment.
<b>Social Value:</b>	The HDRC aligns to the Levelling Up Programme to ensure that this and related work across Directorates are evidence-informed and robustly evaluated, whilst reflecting the needs and values of local residents. It will therefore enhance the social value of this work over the longer term.
<b>Climate Change:</b>	No direct implications arising from this report. However, the longer-term impact of this work in alignment with the Levelling Up Programme is likely to have beneficial impacts on air quality in the Borough through enhancing decision making processes around improvements to the built environment.
<b>Corporate Parenting:</b>	No direct implications arising from this report. However, the longer-term impact of this work is in alignment with the Levelling Up Programme and likely to have beneficial impacts on care leavers, particularly through enhancing work to improve education, skills and employment opportunities in the population.

## 6. Appendices

None.

## 7. Background Papers

[Sandwell Health Determinants Research Collaboration - Better Research for Better Health - NIHR Funding and Awards](#)