

# Embedded Research - a promising development in closer working across sector boundaries?

11.00am - 3.30pm Monday 15 June 2015 D4.05/06 Darlington Campus, Teesside University, DL1 1JW

Our Speaker - Professor Martin Marshall

Martin Marshall is Professor of Healthcare Improvement at University College London (UCL) and leads Improvement Science London, an initiative to promote and embed the science of improvement across both the health service and academic sectors. Previously he was Director of R&D at the Health Foundation, Deputy Chief Medical Officer and Director General in the Department of Health, and a clinical academic at the University of Manchester.

He has been a GP for 24 years, now serving an inner city community in Newham, East London. He is a fellow of the Royal College of General Practitioners (RCGP), Royal College of



Physicians (RCP) and Faculty of Pharmaceutical Medicine (FPhM), and was a non-executive director of the Care Quality Commission until 2012. He has over 190 publications in the field of quality of care and in 2005 he was awarded a CBE in the Queen's Birthday Honours for Services to Health Care. See 'Moving improvement research closer to practice: the Researcher-in-Residence model', BMJ Qual Saf, 2014; 0: 1 – 5.

#### Aim

To open dialogue and explore what embedded researchers do, how they operate, what issues and opportunities they encounter, and whether this approach offers exciting new possibilities for wider collaboration across practice, policy and academia.

#### **Objectives**

- To draw on the expertise of our national speakers and from embedded researchers from Fuse, the Centre for Translational Research in Public Health
- To stimulate debate about the pros and cons of embedded research
- To write up these experiences for publication
- To establish a network to support embedded research and its evaluation
- To develop a collaborative proposal for embedded research in the North East of England

#### **Target audience**

This event will be of interest to policy and practice partners in public health, Directors of Public Health, Health and Wellbeing Board members, public health commissioners, managers, practitioners, researchers, PhD students, Fuse academics, senior investigators and associate members.

#### What do we mean by embedded research?

The event will offer the opportunity to explore different meanings of, and approaches to, embedded research. *Across the Fuse family different approaches are taking place* including: those who embed themselves in order to do primary research and gather data or to work in co-creation with research

users; or undertake embedded ethnography; or to broker knowledge; or to assist with knowledge flow and help to mobilise the existing evidence—base

Please <u>register here</u> for this event.

### Programme

11.00	Arrivals, registration and refreshments
11.30	Welcome, overview and introductions by Chair Rosemary Rushmer, Professor in Knowledge Exchange & Public Health, and Fuse Translational Research programme lead.
11.45	What is happening across Fuse?
	<ul> <li>5 minute presentations of researcher-in-residence and embedded researcher approaches underway across Fuse followed by discussion and reflections.</li> <li>Sue Lewis (Durham University)         Being embedded: putting ethnography to work in contemporary public health settings</li> <li>Craig Blundred (Public Health Newcastle, Newcastle City Council), Vera Araujo-Soares, Gillian Pepper (Newcastle University)         Evaluating Cycling in the City: The story of a complex natural experiment</li> <li>Grant McGeechan, Gillian O'Neill, Dorothy Newbury-Birch (Teesside University)         A co-production approach to public health evaluations in County Durham</li> <li>Karen McCabe (University of Sunderland)         A model for collaborative working to facilitate knowledge mobilisation in public health</li> <li>Gateshead Public Health team (speaker TBC)         On site and on board: Public Health Gateshead and Fuse working together on wellness</li> </ul>
12.45	Lunch
1.30	Keynote speaker and questions /comments from audience Professor Martin Marshall, Professor of Healthcare Improvement at University College London.  Bringing improvement research closer to practice; the Researcher-in-Residence model.
2.30	Questions and Panel discussion (Presenters <i>plus</i> Eugene Milne (Director of Public Health (DPH) Newcastle and Claire Sullivan (Public Health England)).  Discussing the challenges and opportunities involved. Pragmatic solutions to working closely with practice and policy partners in public health.
3.15	Round up, and next steps to publication, networks and proposals: who, when, what?
3.30	Close

#### **Background Information**

Title: Being embedded: putting ethnography to work in contemporary public health settings Speaker: Sue Lewis (Durham University)

In this presentation, I will introduce what I and a colleague have termed 'embedded ethnography' (Lewis and Russell, 2011) – a 'new' method of putting ethnography to work that others may call collaborative or critically collaborative (Lassiter, 2005; Bhattacharya, 2008). 'Being embedded' is a situationally appropriate way of doing ethnography in contemporary public health settings, being founded on the principles and practice of immersion fieldwork but responsive to working in increasingly complex networks alongside highly skilled, reflexive collaborators and accommodating to contemporary audiences eager for practical forms of ethnographic output.

After outlining how I have developed and applied this approach in two public health settings, I will raise a number of questions for consideration and, perhaps, later discussion. For example, what benefits and challenges arise from this new approach? What new or additional demands does it place on the researcher? And, perhaps most importantly, how might this approach support the objectives of research translation and co-production? Link to published paper: <a href="http://eth.sagepub.com/content/12/3/398">http://eth.sagepub.com/content/12/3/398</a>

Title: Evaluating Cycling in the City: The story of a complex natural experiment

Speakers: Craig Blundred (Public Health Newcastle, Newcastle City Council); Vera Araujo-Soares
and Gillian Pepper (Institute of Health and Society, Newcastle University)

We will jointly present our experience of working together to evaluate a project called *Cycling in the City*. The project was commissioned by Public Health Newcastle to encourage more people to take up cycling, with the aim of improving public health. It focuses on engaging hard-to-reach groups, in order to decrease health inequalities. Project activities include cycle tuition, cycle maintenance training, led rides, and support through cycling champions. These activities are delivered, under the management of Active Newcastle (part of Newcastle City Council), by four different private and charitable providers. Researchers from the Newcastle University Institute of Health and Society (Vera Araujo-Soares and Gillian Pepper) are working in partnership with Public Health Newcastle (Craig Blundred) to evaluate the project. Together, we must not only evaluate a complex health intervention, but we must also tackle a complex organisational challenge. The work is still in its early stages, but we have already discovered some of the benefits and challenges of working across multiple organisational boundaries. Benefits include the ability to draw upon a diverse range of perspectives and expertise, from academic to practitioner. Challenges include the complexities of getting ethical approval and sharing data across organisational boundaries.

Title: A model for collaborative working to facilitate knowledge mobilisation in public health Speaker: Karen McCabe (Sunderland University)

Few studies have explored the affect multidisciplinary service delivery has upon evidence use or whether evidence use can be improved within multidisciplinary partnerships.

We present a model for collaborative working to facilitate knowledge mobilisation in public health that has been developed from the critical reflections of two university researchers who worked collaboratively with public health commissioners and strategic partners to evaluate a portfolio of short-term funded interventions to inform re-commissioning decisions.

Within the model we identify the contextual factors of these multidisciplinary partnerships that influenced the roles we adopted as researchers, what it was possible to achieve within evaluations, the nature of evaluation findings (knowledge) and the ways this knowledge could be mobilised.

This model combines the interactions of the following elements:

- 3 contextual factors of partnerships partnership dynamics, partnership values and interpretation of evidence
- 3 researcher roles negotiator, insider and outsider
- 3 levels of collaboration full, variable and no collaboration
- 3 knowledge mobilisation outcomes intervention related, negotiated, partnership related.

We propose that even when partnerships are specifically developed to foster collaboration and coproduce knowledge, these are not easily achievable or desirable outcomes. Link to published paper: http://www.ingentaconnect.com/content/tpp/ep

### Title: A co-production approach to public health evaluations in County Durham Speakers: Grant McGeechan\*, Gillian O'Neill, Dorothy Newbury-Birch, Teesside University

Public health initiatives tend to be complex and context specific and it is essential they are evaluated to prove effectiveness. However, most evidence informing public health policy tends to be in the form of tightly controlled, intervention trials conducted by universities which raises questions around the transferability of research to 'real world' practice. A co-production approach involving academics and practitioners in all aspects of an evaluation can lead to translational research, benefiting from their differing skill sets and experience. This presentation outlines an on-going co-production evaluation initiative between Teesside University and Public Health County Durham. This model works with a researcher-in-residence framework whereby local authority staff spend time at the university developing research skills, and researchers spend time at the local authority learning about the culture and processes involved in shaping public health policy.

## Title: On site and on board: Public Health Gateshead and Fuse working together on wellness Speaker: (TBC)

The Public Health team in Gateshead will talk about their plans to embed a Fuse researcher on-site within their public health team (60% fte). Initially for one year, and informed by routine quantitative statistics collected from service providers, they will identify where Gateshead's integrated wellness services are working well (and where, or when, they work less well). They will use qualitative methods to explore why there are differences in how the intervention is working in different places or at different times. The aim is to better understand what the key active ingredients in the programme are, and to further refine service provision. The researcher will be on-site, data will be shared iteratively and decision-making will be fully integrated with the normal Public Health team's routines. Fuse senior investigators will provide support for the post holder.