

# Building Capacity for Social Care Research

(Enablers and barriers facing practitioners in Wessex)



**Final Report**  
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## Introduction

### **Aim:**

The National Institute for Health Research (NIHR) has a long history of significant funding for National Health Service (NHS) research and research infrastructure and has pledged to extend support into social care sectors. However, strategies and tactics that are used to support research in the NHS are not so easily transferred to the social care system, and it is important to develop new models which more specifically respond to the needs of the sector.

This report describes findings of a study funded by the Clinical Research Network (CRN) Wessex to develop a better understanding of the challenges of building capacity to undertake social care research in the Wessex region (Dorset, South Wiltshire, Hampshire and the Isle of Wight) and the opportunities for building research engagement and capacity. It focuses on the enablers and barriers to social care research from the perspective of current practitioners within Wessex and Higher Education Institute (HEI) academic staff within Wessex - who regularly interact with the social care sector in their roles, or who have previously worked within the sector.

A partner report, issued simultaneously, focuses on the enablers and barriers facing HEI academic staff in Wessex from the perspective of current academic staff who work in HEIs and who regularly interact with the social care sector. This is due to the quantity of data collected and report length considerations.

### **Context**

#### **The importance of more practice-based evidence**

An effective health service is reliant on an effective social care system, and it is therefore vital that we develop a robust research base for social care, to ensure that local authorities (LAs) and charities provide the most effective services within a wider integrated system of health and social care. Over twenty-five years ago the Department of Health (DH) produced a strategy document - '*The Gilbert Report*' - on research and development in Social Services (DH 1994), which identified weak links between research in a context of evidence-based practice. Building on the themes identified in this report, Marsh and Fisher (2005) highlighted the importance of more practice-based evidence focused on providing practice improvement. This suggested the need for more ground-up and inclusive approaches to research generation and development within local authorities, including by practitioner generated research. This is important as it has been suggested that practitioners often rely on knowledge derived from colleagues, supervisors, and personal experience rather than knowledge from research or other external sources (Iversen and Heggen, 2016).

#### **A solid infrastructure for RCD**

To achieve a growth in practice focused research, social care requires a solid infrastructure including a skilled research workforce, funding and a framework of national, strategic priorities

(Marsh and Fisher, 2005). Building health service research capacity in the UK is viewed as a core function planned through research and development, which support an organisational approach to building research capacity development (RCD) (Whitworth et al. 2012). RCD requires the support and development of sustainable abilities and skills to enable individuals and organisations to perform high quality research. This suggests that a culture of research can be fostered by a strong internal organisational infrastructure, which supports individual career planning and skills development (Gee and Cooke, 2018).

### The challenge

There is currently a lack of a systematic approach to RCD across social care and a paucity of research to illuminate best practice. Social care needs to develop its own system and research infrastructure to develop understanding of what works and why (data and analytics to create new innovations) with improved pathways to impact, demonstrating the value added of good social care (Geoghegan and Fenge, 2022).

In 2020, an NIHR Research Design Service consultation identified three main areas of challenge concerning designing and conducting social care research:

1. The complexity of social care organisations and funding - social care comprises multi-sector organisations that can go through frequent system changes and that work with severe budgetary limitations.
2. Research culture and research readiness - there is less of an infrastructure to support research cultures and research activity in social care compared to health care.
3. Opportunities to undertake and develop social care research - there are limited opportunities to commission social care research, priority-set and translate research for practice.

Another recent study of social work/care staff within a large NHS Foundation Trust (Wakefield et al. 2021) showed a high rating on the relevance of research to professional development (73%), but a low level of actual involvement (10%) and low levels of confidence/knowledge across a range of research skills. Identified barriers included a lack of knowledge on where/how to begin, lack of evidence that it improved practice, the potential to threaten practice and low capacity and time. The report concluded that these findings, in light of other relevant literature on evidence-based practice, show a potential gap between a current drive for social work/care to be more evidence based, and the ability of social work/care to enact this approach. Further work being required to understand more about barriers to engagement (at an individual practitioner and organisational level), and how they may be addressed.

### Helping to address the challenge

The need for a more integrated approach has been recognised by the NIHR, which has already supported the inclusion of social care with new roles and targeted funding streams. Currently a number of NIHR funded projects are in progress to explore the challenge of building research capacity in social care. These include a regional research network for RCD (NIHR F&A, 2022a), embedded researchers (NIHR F&A, 2022b and NIHR F&A, 2022f), research practice partnerships

(NIHR F&A, 2022c), research in practice teams (NIHR F&A, 2022d) and the development of communities of practice (NIHR F&A, 2022e).

## Methodology

The purpose of this study was to generate deeper insights into the challenges of building capacity to undertake social care research across the sector and the opportunities for building research engagement and capacity across HEIs and the social care sector. For this reason, a qualitative approach was undertaken (Mason, 2017).

### Questionnaire Design

Participants were asked complete an online questionnaire with separate surveys being distributed to practitioners and HEI academic staff.

The practitioner questionnaire was designed to address the following areas:

- Workplace research capacity within local authorities
- Views on research
- Experiences of research from a practitioner perspective
- Training opportunities and support
- Access to research materials and evidence
- Past and future reflections on relevance and priority of research to practitioner roles

The HEI questionnaire was designed to address the following areas:

- Workplace research capacity within HEIs
- Views on research
- Experiences of research from an HEI perspective
- Training support
- Access to research materials and evidence
- Past and future reflections on relevance and priority of research and research support to academic/researcher roles (and practitioner roles during interactions with/previous histories of these roles)

To promote awareness of the online survey, the researchers utilised Principal Social Worker (PSW) contacts at local authorities within Wessex, academic and researcher contacts at local HEIs within Wessex and also recruited through online channels. These included posts about the study on the National Centre for Post-Qualifying Social Work website and Twitter feeds and direct approaches to possible participants via LinkedIn. University specific channels were also utilised (via those working in Social Care research and academia).

Two groups were recruited. The first group ( $n=22$ ) were practitioners working in social care within the Wessex region (denoted in quotes as P1xx). The second group ( $n=9$ ) were HEI academic staff working within the Wessex region (denoted in quotes as P2xx).

## Interviews

A subsample ( $n=6$ ) of practitioners (denoted in quotes as P1xx FI) who provided consent were invited for a follow-up interview. A semi-structured interview schedule was constructed to collect positive and negative views of their experiences of research and of using research evidence in their job role.

A subsample ( $n=5$ ) of HEI academic staff (denoted in quotes as P2xx FI) who provided consent were invited for a follow-up interview. A semi-structured interview schedule was constructed to collect positive and negative views of their experiences to date of research and of supporting external research projects and staff in the course of their job.

Interviews were recorded and transcribed verbatim.

## Data Analysis

Quantitative questionnaire data were analysed and summarised using descriptive statistics.

A generic qualitative approach to thematic analysis was used (Caelli et al., 2016) with inter-researcher interpretation. Data analysis was conducted by two members of the research team, with themes and sub-themes identified and coded and then agreed between the two reviewers.

HEI participant data used within this report focuses on the role of practitioners and where the worlds of HEIs and Practitioners cross-over.

## Ethical Approval

Ethical approval was obtained from Bournemouth University (BU) prior to data collection taking place. Approval was sought from the Bournemouth University Social Sciences & Humanities Research Ethics panel in two parts to reflect the development of the materials utilised.

**Stage 1:** Practitioners survey and interviews (data collection from practitioners working in the social care sector within Wessex) – granted 16/02/2022 – Ethics ID 41416

### **Stage 2:**

HEI academic staff survey and interviews (data collection from academics and researchers working in HEIs within Wessex) – granted 22/03/2022 - Ethics ID 42232

## Limitations

This study may have been affected by respondent selection and bias. Participation was on a voluntary basis and respondents were self-selecting, on the basis that people with views they would like to communicate were more likely to agree to participate. The study took place in one region of the UK and thus may not be nationally typical.

## Results

### Demographics

#### Self-reported Descriptives – Practitioners

In total,  $n=22$  practitioners working in social care completed the online survey with  $n=6$  subsequently being interviewed.

Variable	
<b>Sex, n (%)</b>	
Male	6 (27.3%)
Female	16 (72.7%)
<b>Age (years), mean (SD), range</b>	39.2, (9.1), 26-59
<b>Ethnic group or background</b>	
White	20 (91%)
Mixed / Multiple ethnic groups	1 (4.5%)
Prefer not to say	1 (4.5%)
<b>Job Role</b>	
Social Worker	19 (86.5%)
Apprentice Social Worker	1 (4.5%)
Mental Health Nurse	1 (4.5%)
Programme Manager	1 (4.5%)
<b>Work location</b>	
FTE (over 30 hours)	21 (95.5%)
Part Time Work (25 hours)	1 (4.5%)
<b>I am interested in doing research</b>	
No	6 (27.3%)
Yes	16 (72.7%)
<b>I am confident in doing research (of those interested)</b>	
No	9 (56.2%)
Yes	7 (43.8%)



## Self-reported Descriptives – HEI academic staff

In total,  $n=9$  HEI academic staff completed the online survey with  $n=5$  subsequently being interviewed.

Variable	
<b>Sex, n (%)</b>	
Male	3 (33.4%)
Female	5 (55.5%)
Unanswered	1 (11.1%)
<b>Age (years), mean (SD), range</b>	50.7, (9.5), 40-71
<b>Ethnic group or background</b>	
White	7 (77.8%)
Black/African/Caribbean/Black British	1 (11.1%)
Prefer not to say	1 (11.1%)
<b>Job Role</b>	
Social Work Academic	7 (77.8%)
Allied Health Professional Academic	1 (11.1%)
Other – Senior Lecturer	1 (11.1%)
<b>Work location</b>	
FTE (over 30 hours)	8 (88.9%)
Part Time Work	1 (11.1%)
<b>I am interested in doing research</b>	
No	0 (0%)
Yes	9 (100%)
<b>I am confident in doing research (of those interested)</b>	
No	0 (0%)
Yes	9 (100%)

## Overview

Analysis of qualitative data revealed the following key themes as significant factors in participants experience and perceptions of their exposure to research.

Research enablers	Research barriers
Six main themes were identified as enablers: <ul style="list-style-type: none"><li>• Personal</li><li>• Organisational</li><li>• Logistical</li><li>• Research skills</li><li>• Access to research</li><li>• Research support</li></ul>	Seven main themes were identified as barriers: <ul style="list-style-type: none"><li>• Personal</li><li>• Organisational</li><li>• Cultural</li><li>• Logistical</li><li>• Research skills</li><li>• Access to research</li><li>• Research support</li></ul>

## Research enablers

Research enablers are categorised as themes and sub-themes which could help to enable a positive research environment for practitioners working in social care.

### Personal enablers

#### ***Desire to influence research strategy/effect organisational change***

*I believe there is an opportunity to let practitioners develop this pathway within the organisation. And I think that the NIHR LA programmes have been a missed opportunity for the organisation. I believe that you can learn as you go along to develop the governance framework. I do not necessarily agree that the piece of research should come from something that the organisation requires. Much of my research has been conducted because a theme has emerged from what the patients and public have been telling the organisation. [P107]*

*For one particular individual has just emailed me to say that she has stepped into this new role and wanted to change things in her local authority, hence, making contact with me. She was previously a workforce development lead. [P204 FI]*

Practitioners were keen to be able to contribute to and influence the development of research strategy – including subjects which could be researched - within organisations. One participant had previously worked within the NHS in a research friendly environment and was keen to apply these skills and cascade knowledge of the systems and processes of the NIHR within the LA they now worked for. Some participants had come into contact with others who wanted to effect change within their organisation toward embedding research.

#### ***Desire to develop people***

*And I believe, having been a supervisor of quite a big team myself. I developed every single one of those people. When my band two's came in, I said to them: 'I don't expect to see you here in a year. Because I am going to give you so much development and training within this role that you are moving on up to band three,*

*band four. [P107 FI]*

If at an appropriate level, practitioners were keen to be able to contribute to a positive environment for career development (including learning and benefitting from research skills). One participant had previously worked as a manager in the NHS in a research positive environment and was keen to see the same developmental approach adopted in the LA where they now worked.

### ***Desire to research***

*...but other than that, it's very difficult unless I will...I will happily buy a book, because that's something that I will enjoy reading. [P108 FI]*

*...I'll be honest and say I don't know how that would have practically worked as being a student in that course, plus working, because that is something that I, as an individual would fund myself. [P108 FI]*

*I was so frustrated because I've had, I've been very fortunate in my career that every single degree and every single piece of training, I've either got funding for, or scholarships for. [P107 FI]*

*I would welcome my organisation offering opportunities to pursue research activity in relation to service improvement and development. [P101]*

*...we're looking at setting up a sort of wellbeing [area of project], sort of wellbeing project, and it would be really, you know, I think 'Oh that might be useful to measure' in terms of, you know, will it have an impact on people's wellbeing? What are the outcomes that are being achieved? And evaluate that... [P101 FI]*

*I wouldn't necessarily have chosen to do a service improvement project...So effectively, the Masters led to the service improvement project because I had to take that unit to get the last bit of the Masters... [P100 FI]*

*[attitudes to research]*

*I enjoy it but feel it's a privilege in such a busy job role [P112]*

*Incredibly important and can guide policy and procedure going forward. [P105]*

*Research is the tool to help inform decision making, explore impact and evidence outcomes. [P102]*

A desire to research was expressed in a number of different ways. Practitioners might obtain research benefits from an individual subscription (such as to BASW), or from purchasing research materials like books. It might show in their preparation to fund their own research training if required, or in their wish to take up research activity in relation to service improvement if opportunities arose. It might also show in their frustration at the lack of opportunities and funding that LAs seemingly supported, in comparison to previous organisations they had worked for – like the NHS.

Of the ( $n=22$ ) practitioners surveyed, ( $n=16$ ) were interested in research (72.7%). Many ideas were suggested during this study as interesting areas for research. These might have come from HEI projects that they were previously involved with - such as the service improvement project attached to a Masters course - or from their own experiences of working in practice. Those who were interested, felt that individually, conducting and embedding research into

practice could have significant benefits, but was currently viewed as a luxury rather than a priority by LAs at a strategic level.

For those who had a desire to research but no plans to submit a research application or career development application linked to research within the next year - 15 of ( $n=16$ ) practitioners (93.75%) - support requirements which would help them were discussed, These included support from someone who knew how to manage the process; a clear pathway and guidance to follow; education on how and what it would involve; more notification of bids which could be applied for; and more support and awareness from their employers in this area.

### ***Desire to upskill***

#### *[CPD and Post Qualifying]*

*...you have to sort of take that on the chin because if you want to progress it's about you showing a commitment to the local authority and to your profession, and not expecting just to say 'Oh here, have a month off to write an essay' [P108 FI]*

*...and eventually got onto a CPD offer from [university location 3]. The IPOP course – improving person organisation and practice. I was working as a locum at the time in a local authority and I really enjoyed the course. It was reminding me of my love and the joy of research and reading and learning and developing at a different level. So not just training or skills based learning...but gaining knowledge, creating knowledge. [P204 FI]*

*And then as a part of a professional social worker, you undertake CPD anyway, so I've always done learning as I've continued through my career. And then in 2008 maybe? Maybe 2009, I can't quite remember. I did a specialist award here at the [university location 3] at, because I was working locally, and that was a-I think it was a Postgraduate Certificate in a specialist social work related field. [P200 FI]*

*I am always looking to develop myself with my career. One area will be the around improving practice education. [P111]*

#### *[Masters]*

*...so after taking a year out to save money again, went to do my social work Masters in [university location 3]. [P109 FI]*

*...and I pushed to be able to do my Masters in Advance Practice because I really wanted to be able to demonstrate the sort of enhanced level of capability and expertise. That was my kind of motivation for doing it really. [P100 FI]*

*...and with that I then self-funded my Masters, because I'd done the PQ award, I was able to transfer some of those credits into the Masters. [P204 FI]*

#### *[Doctoral]*

*...well I've, I've been wanting to-as soon as I completed my Masters I was always interested in carrying on with a PhD. So I've always sort of had my eye on what's going on out there in the field, and, and I've had my eye on NIHR funding and things for PhDs. [P107 FI]*

*But, if I'm honest, if I had the opportunity to do a research project within my work environment, you know, towards a PhD or something that would be something that would be of interest. [P100 FI]*

*...so me personally and professionally. In an ideal world [interviewer forename] I'd, I'd like to consider looking*

*at the PhD pathway, because I would really love to come into the [university location 3] and teach and, and inspire other people to, to become social workers. Because I absolutely love what I do. [P108 FI]*

*...there wasn't just a simple kind of split between people who are in the profession and people who weren't, people who were in the profession would probably be at all towards the professional doctorate... [P208 FI]*

A desire to upskill academically was seen as a very strong enabler for moving research forward. At a Continuing Professional Development (CPD) and Post-Qualifying level, it was seen as a more integral part of career development from a job role perspective. This made it easier to apply for and obtain study leave, as these qualifications dovetailed more effectively with the demands of a practitioner role, in addition to organisational strategic objectives. Interestingly, working at this level might rekindle an enjoyment for study and research, which could then act as a prompt to seek further HEI education. Similarly, taking a practice education course might also sometimes provoke interest in and later moves into teaching and academia.

At a Masters and a Doctoral level, personal and professional considerations played a part in wanting to pursue this level of upskilling. After graduating from a degree finances might be quite restricted, with a requirement to start work and concentrate on learning and navigating the demands of job initially, before considering further study at a later date. A desire to continue in more advanced education like a Masters might be seen as a way of enhancing career skills or developing academically.

Ideas for PhD research subjects were sometimes seen within their role as opportunities which might also help to improve practice. There are a number of doctoral routes - doctorate, professional doctorate and PhD by publication - each of which have their own particular challenges. Where doctorates had been obtained, this had required a lot of will power to see through to completion and there were few practitioners who had completed one, whilst also working in practice at the same time.

What is notable from the data is that outside of CPD/work based training, it is incredibly difficult currently to state the case to progress with either Masters or PhD study within LAs. Both from a funding and study time perspective. Historically, these qualification routes were able to be undertaken only rarely and often by chance. Opportunities seemed to have occurred at a time when organisational strategy was less rigid and funding rules were less strict. Overall, only those with a really strong desire to progress in these areas had managed to achieve qualifications. A number seemed to have moved on to work elsewhere, away from the original funding LA, once these had been achieved. Most notably moving to HEI posts.

### ***Future organisational inertia***

*Research is key to my role as PSW because I need to be aware of how this feeds into good practice and how we improve standards and provide good developmental opportunities for our social workers. [P100]*

*I hope it continues to build momentum although dealing with day to day pressures is taking all the energy and focus at the moment. [P101]*

*It is on the radar for develop(ing) a research pathway [P105]*

Personally, practitioners are working in an environment that they hope might become more positive towards research in the future, but which they pragmatically acknowledge is going to be difficult, if not impossible to achieve. From a positive perspective this might not affect their belief that they have the power to help affect positive change. They might feel the need or have a strong desire to try and do something in the research sphere, or attempt to influence change in some way from within the organisation – even given the organisational and personal barriers they faced.

## **Organisational enablers**

### **Appraisal**

*So I'd be interested to know. I might just ask it and see what they say actually. Because that kind of reinforces doesn't it, how well research is embedded or not... [P101 FI]*

Appraisals were noted as an opportunity for discussing career development (applicable to research opportunities) although it had not always occurred to the individual to mention this at the time. This suggests that frameworks and structures for career development could definitely be improved regarding research within LAs.

### **Apprenticeships**

*It's apprenticeships at all levels actually. In...that's something that they really support. So it's right across up to all levels, level 7, not just for young social workers, there's all types of apprenticeships that they're supporting. [P101 FI]*

***I - ...is there a drive there from them to be getting more apprenticeships or, or is that more the HEIs driving that?***

*P118 – I think we're driving it, very much locally. It's very much ingrained within our workforce plan, social work specific, we've got a grow your own social work programme which is proving very successful. At the moment.*

*So occupational therapists, social work, and who are maybe unregistered roles as well, we'll be looking at trying to, you know, develop apprenticeship routes in, for those roles as well. [P118 FI]*

Apprenticeships were mentioned by two participants as being supported widely across their LAs and embedded within their workforce plans. These covered social work programmes and were also going to be rolled out into other disciplines, such as Occupational Therapy.

## **COVID-19 - Organisation**

*I think what COVID has done, and alongside the increased demand and the lack of money has forced us to have to really drill down on, on what our workforce needs are...going forward and I know from a national role and from my local role that workforce planning's a key priority. [P118 FI]*

COVID-19 had - in the view of one participant - had a positive organisational effect on driving their LA to identify workforce needs at a much deeper level of requirements than before.

### **Email/Word of mouth**

*Oh Post Graduate Researcher. Yeah. At [university location 3] University as well as working at the council. And so it's her that told me about this research data and insight team. [P107 FI]*

*...the same with our clinical psychologists as well, I find them really helpful. They'll often send me towards research that I wouldn't have usually found otherwise ... [P109 FI]*

Email and word of mouth communication with other people interested in research was seen as a great enabler. This helped to spread the word about opportunities, interesting articles and where research support was located in the labyrinthine structure of some LAs.

### **Evolving organisation**

*Yeah, our teams management has actually been really stable...overall, that's one of the few teams that have experienced that, so that's been a big benefit in our team...yeah. Overall manager and then the assistant managers have all been very consistent. [P109 FI]*

*I think there has to be enough of us in the organisation stressing the importance of locally based research and our interest in it. Managers need to be open to it and give people time to conduct research. I am not sure that it is on the agenda in the formation of the organisation as I have been told they are not ready for it as it has not been fully considered or formalised. [P107]*

*I think, hopefully over time, as an organisation it will happen, because I think that the chief executive is much more outward facing...But I just, I don't see it to the level that it could be. [P101 FI]*

*[Principal Social Worker role]*

*...for example, the role of principal social worker was introduced. And then embedded. And that role has kind of now taken on the support and learning from research, so that local authorities now have principal social workers who will drive that kind of quality of practice that's informed by good evidence and research. [P200 FI]*

*...and I don't think, I mean Principal Social Workers are supportive of research, but they just haven't got the capacity, or the staff to enable that. Certainly my experience anyway. [P201 FI]*

*[policy and guidance]*

*...we have a corporate, corporate policy and guidance. Yep. And there is the governance around how you go about completing research, or how you, how a researcher, engages with us locally, so looking at consent and, and all the governance and parameters around it. So we have that structure corporately... [P118 FI]*

*[business as usual]*

*I think the bit for me is around how do, how firstly, how do you weave research into business as usual?...I know it sounds quite a broad statement, but...I think that would, that would help. [P118 FI]*

*[research benefits]*

*But I think there is the carrot of actually, if the research is specific and benefits either the workforce or the local population that's also very helpful, so the subject is key as well. [P118 FI]*

*[partial research champion]*

*...and the practice lead, who works for me, [practice lead forename], any research that comes into us, requests for research, goes through her. And she's the initial point of contact to, to make that happen... [P118 FI]*

*[researcher in practice idea]*

***I - ...is having a researcher in prac-a researcher actually located on site, to sort of help with sort of research questions, mentor practitioners helping, or wanting to do an application or actually engaging in research projects. Do, do you think that might work where you are?***

*P118 - Yeah def-well that, that actually helps with capacity as well, doesn't it?*

Participants had identified four particular areas of recent evolution within LAs which might help improve the possibility of a positive outlook for pursuing research. A stable team was noted as being beneficial in looking toward a longer term approach, which research might be a possible component of. The PSW was also identified as a key role in helping progress research within an LA (with the caveat that this might not always be possible due to organisational drivers).

Factors which might influence an LA to allow research training opportunities included the need for highlighting tangible outcomes for services and the LA, senior leadership sign up and a strong collective voice from a number of practitioners. Visible, tangible outcomes were also viewed as a 'carrot' for LAs to engage in further research going forward. Finally, some practitioners had noticed an improvement in terms of a positive approach towards research recently in comparison to a few years ago. Highlighted in responses to the Likert question 'People are encouraged to keep their knowledge and sources of research up-to-date' - where 19 practitioners strongly agreed ( $n=8$ ) or agreed ( $n=11$ ) (equating to 86.4%) - and 'People are encouraged to develop evidence-based approaches to decision-making' - where 20 strongly agreed ( $n=10$ ) or agreed ( $n=10$ ) (equating to 90.9%).

Although it was also acknowledged that there was still a long way to go in LAs at the moment. The overall mood was that although research policy and guidance structures were in place within some LAs and the will was there more than before, organisational barriers currently outweighed this will to change. This can be seen in questions of how research could be successfully integrated into business as usual work and in forward thinking ideas - such as research champions and the use of the embedded Researcher in Residence model - which were seen as good ideas, but which weren't currently being utilised to a great extent within LAs.

### ***Examples of research based activity***

*So I don't do direct research with individuals, I'm talking I think there about research as in looking at literature, looking at, you know, government papers, that type of thing and applying...Yeah, so applying that. So about twenty percent, because my role does involve providing a lot of kind of information and training materials so I would say that it's about twenty percent. [P100 FI]*

*...my role is sort of encompassed with a number of areas around our, our corporate and our departmental strategy, our workforce planning, a number of other...bits of research. You know, albeit depends on what you mean by research. So this morning for example, I'm looking at our survey data, staff data, and what that looks like. And some of the themes...so in effect that is sort of quite focused local research... [P118 FI]*



*[Current projects]*

*Dementia Strategy, Oral Health Care, Safeguarding practice [P118]*

*Surveys regarding working hours to inform service development [P119]*

In total, 8 participants had been involved with research, evaluation or service development projects since joining their organisation (equating to 36.4%). The research activity described covered a range of projects, sessions, workshops and identification of fresh literature of interest and training materials.

### **Flexible/Shift working**

*...so actually I can say to colleagues, which I've done a few times, 'I'm on shift, I'm here, but can you leave me alone, send me out last because I just want to try and get three, four hundred words down, I've got a couple of journals to read.' So actually [interviewer forename], I found this time around the shift work has worked in my favour. [P108 FI]*

*[talking about during COVID]*

*I preferred the sort of, you know, flexibility of hours and travel and things like that [P109 FI]*

Planned or accidental flexible working - predominantly due to COVID-19 necessitated changes to working practices - and working on a shift pattern - where demands would vary in intensity during the shift - were both mentioned by participants as having had a beneficial effect. From the point of view of being able to complete aspects of training more successfully. This might also be beneficial should research projects be able to be incorporated more readily into the organisational strategy of LAs.

### **Funding training**

*...was then suggested to me that I might like to go on to do a doctorate. And I was very fortunate to get sponsored by my local authority. And I was working part time, so I was able to do my doctoral studies part time and work part time as a social worker. [P200 FI]*

*...and they are good at supporting people to become practice educators...and have students as a supervisor as well, that's- and obviously for the practice educator course people are going back to uni and doing some different coursework for that... [P109 FI]*

*The AMP training itself is, is a five and a half month - it's full time. So you're taken out of your post...and you're -we're paid a full wage... [P108 FI]*

The experience of funding training within an LA varied. Historically, Masters applications and in one case a Doctoral study had been granted. The general feeling participants conveyed was that applications for shorter CPD units would tend to be funded now - mostly because these applied to the skills they need to perform statutory day-to-day roles. However, longer term academic upskilling (Masters and PhD) or anything outside of the norm, but which practitioners thought might be useful - such as sign language - were not likely be funded.

## **Internal websites**

*It's promoted a lot more within our internal website. That's more about using research to inform practice. So, you know, making it evidence-based. So for example, you know, if you're working with a person, thinking about systems theory or particular models or particular research, that might be useful to consider when working with a particular individual or their family. [P101 FI]*

Intranets (internal Internets) were mentioned by some participants as being another useful tool for locating research relevant information. Although the scarcity of these comments suggest that some LAs are utilising or signposting this method better than others at the moment.

## **Managerial**

*[practice challenges]*

*Whilst it appears to me that there is some senior management sign-up, direct line managers often find themselves in a position where they would like to support their staff doing research but need to focus on service pressures. [P205]*

Managers were seen as a key enabler within an organisation. They might help to support research training opportunities for staff and be research positive, but again faced challenges around supporting this aspect when set against day-to-day service pressures.

## **Secondment**

*[talking about a friend at another LA outside region]*

***I – ...do you sort of compare how you know, the different local authorities approaches are to that particular area informally, at any time?***

*P109 – Yeah, definitely. I know that she's been really supported by her local authority to go and do this project...but she can then obviously come back as a sort of secondment to her current job. They'll have her back whenever she wants to, so she's got that sort of safety net as well.*

In one instance a participant mentioned the experience of a friend who was on secondment from an LA outside of Wessex. This suggests that forward thinking LAs might be able to adopt this approach within Wessex, although no participants who contributed to the study had mentioned this happening locally.

## **Study time**

*Yes, so in our authority basically if you're doing a CPD unit with [university location 3] university because they basically are the people we do all of ours with, I think you get two study days per unit. So, for example, if you were doing like risk and decision making, you'd be entitled to two days study leave. [P100 FI]*

*Before the AMP training, I did two CPD units and we were given two, maybe three days that we could, we could keep safe and you know was secure time...to do that work... [P108 FI]*

*And so our social workers and unregistered workers are encouraged to make sure that they take five days of CPD per year. And very much engage within the evidence based research and training that we have on offer. [P118 FI]*

*[talking about Masters]*

*...because, in that particular local authority I was able to do it within my work time. [P204 FI]*

Study days were given within organisations to align with the length of some training opportunities. Masters study time had tended to be inadequate when historically obtained and was viewed as being much more difficult to apply for and arrange now. The general feeling conveyed was that shorter study time periods for CPD units would be allowable, but longer term academic upskilling (Masters and PhD) and associated study time would not be likely to be granted.

### **Training (via Learning and Development team)**

*I would think that it's probably the learning and development team that have helped drive it... [P101 FI]*

*It just felt much more embedded in the learning and development offer where I previously worked. Research was talked about a lot. [P101 FI]*

*...we have a lot of in-house content that we mostly use. [P109 FI]*

*...and in our team, specifically we have the training hub, which is actually used for the foster carers. But our training officer is very happy to give us a lot in detail if we fancy it and I think, probably a bit cheekily all assign us courses if we really want them...[laughs]...so, you know, I've accessed that quite a few times. That's been helpful for specific topics on pinpointing people in the right direction, usually. [P109 FI]*

*I think it would be worth having a conversation with the learning and development team and just seeing if there was an appetite. I've not done that and I think that, that your survey triggered that, which was really useful. So I will have a conversation with them and see whether there's an appetite for it, or what they've considered or not. Because they may have considered it and I just haven't heard about it. [P101 FI]*

*...we have a staff survey and that is always a question that's asked around, adequate learning and development specific to your role, the quality of it, etc. And that's always consistently a green if you like and very high, highly rated. [P118 FI]*

*I'm on a leadership programme, a 20/20 systems leadership programme at the moment, but, you know, the department's been really good at giving me the opportunities to progress and focus. [P118 FI]*

Internal Learning and Development teams were positively described as a source of training. Although there were variations between different LAs and historic examples from LAs where participants had worked and how their teams functioned, in terms of helping to develop a research culture. Comments pointed to this team being a potentially useful place to perhaps consider as a means of incorporating elements of research training, should the strategy within their LA consider this a good place for it.

### **Training (via other routes)**

*...serious case reviews where there is something that has been identified as a need for the workforce then I will design some, we do reflective practice sessions. So I'll design a reflective practice session on a particular theme and in order to put that together and to enable them to kind of look in more detail at areas if they want to [P100 FI]*

*There was a big programme to train everybody up in strength-based practice...the mental capacity act team run a lot of research based training and I've seen that that's improved and developed over the time that I've been here. [P101 FI]*

*...we've got obviously the workforce development team, who run their own online courses. And they can be anything from sort of the mandatory things, you know, going over safeguarding and things like that or genograms, that sort of stuff. Who encouraging people to brush up on their skills. So I've been able to attend sort of like court statement writing ones, things like that. So that's been helpful. They are pretty good and they, you can email them and say 'Do you have any recommendations?' [P109 FI]*

*[talking about webinars]*

*...so within our organisation they do them as well. So they are interactive but online...so, lots of different ones about kind of assessments, parenting assessments, what skills, writing SWET, yeah, lots of kind of skill-based, trying to upskill people and make them more confident I think, to try different roles. [P109 FI]*

*...and then basically just whatever people find online. [P109 FI]*

*[factors influencing organisation to allow research training opportunities]  
The subject and clearly linking that to improvement. [P116]*

Participants mentioned a variety of other training which they had experienced from a research or work based perspective, or were involved in providing. COVID-19 had impacted on how training was delivered, but comments suggest that research based online modules (where staff were not required to be released for a whole day) would be viewed more favourably by organisations to maintain satisfactory working requirements related to their role. Especially if tangible outcomes for practice and the LA were likely to occur as a result. If the subject of the research training could be linked to improvement, then this was seen as another favourable factor.

### **Workforce planning**

*...so we are effectively working with our HR colleagues in terms of that data and making sure that we succession plan. So if, I think we'll be in a much better position to be able to lobby and be evidence based, in terms of requests for further funding. [P118 FI]*

Workforce and succession planning and working effectively alongside HR departments was described by one participant as being an effective enabler. For providing evidence of the need for further funding, which could then be used for lobbying externally and potentially increasing the ability to perform research. This came with the caveat of having to contend with the current political environment and potential funding restrictions facing all LAs.

### **Logistical enablers**

#### **External assessment and regulatory enablers**

*[Regulatory]*

*...it's something that we need to lift into the space of you know, practitioners that actually, they have a responsibility, in terms of their registration maybe, to be part of research, but also develop and, and lead on their own research where possible. [P118 FI]*

*...the whole, Social Work England, I think, CPD, the requirements around evidence to be registered, there's an opportunity there. [P118 FI]*

*...and actually when we had our recent OFSTED inspection, that was a question that came up, you know, are we doing any research within the authority? [P100 FI]*

*The authority is currently under the watchful eyes of OFSTED due to a bad report. I suspect once we turn a corner, the priority on utilising new research and its priorities will improve. [P111]*

*I don't get that feeling from them that the CQC is involved in anything ...to do with the, to with the council. The only way that the CQC is involved is in inspecting the care homes that the councils work with. And even then...well they come out with the CQC rating of 'Needs Improvement'. That doesn't make any difference particularly to the councils, because there's a need for beds... [P107 FI]*

Regulatory changes and external assessment of LAs were seen as possible enablers for helping to drive embedding research into practice going forward. In the case of regulatory changes, by perhaps including more research positive requirements to annual practitioner registration. In the case of external assessment, by perhaps contributing to a better OFSTED rating. This view tended more towards OFSTED as a driver than the CQC, although this organisation was also mentioned in some interviews.

### **HEI links**

*[lecturers]*

*And I was surrounded by really inspirational lecturers, who had such a depth and breadth of knowledge and yet were able to say 'I don't even know half of it'. I thought actually that's an intellectual level of humbleness I would really like to achieve. [P204 FI]*

*I think I did actually make contact with [university location 2], and it's something that I may need to pick back up in terms of this role, to engage, been re-engaging with HEIs, around maybe doing some sort of lectures, or some, you know, some sessions with them. [P118 FI]*

*[programme links]*

*[talking about relationships with multiple HEIs]*

*...well they're quite separate really. But we approach them yeah, in two different directions. We also link in with [university location 5] as well, in terms of our Social Work programmes for our apprentices here. [P118 FI]*

*Along with drive from HEIs to make sure that, you know, the momentum in research is threaded throughout social work training, are key areas for me. [P118 FI]*

*[students]*

*And the research we do internally, in social team area, is often led by someone who is studying...at uni. So that capacity is sort of there, because of they're within their studies. [P118 FI]*

Relationships with HEIs usually began when the practitioner was studying, prior to working in practice. HEI lecturers were viewed as a source of inspiration, both in terms of where a possible career might lead and also helping practitioners (whether pre-qualifying or post-graduation) to think through potential opportunities to engage in both future teaching and research. A drive to

teach came through from some more strongly than a drive to research and some of these practitioners had subsequently become academics that we interviewed.

Various programme links with HEIs covered social work programmes for Masters, undergraduate, CPD and apprenticeship programmes. These were considered an important driver, which could help to influence and increase the momentum in research within social care training and beyond. Students studying at HEIs might also be encountered whilst in practice, as they were often a major driver for any internal research which was taking place within the LA.

### **Service users**

*I mean, I might be wrong [laughs]. But, you know, obviously if, if all of our services are going to meet the needs of the people that we deliver them for, then, the best way we have is to constantly listen to what they are telling us. And, you know, research would kind of feed into that wouldn't it? [P100 FI]*

*[what does research mean to you?]*

*Understanding what is happening in the community and with the client group I support. This in turn can help not only shape my work but also that of the organisation. I would also like to see more service evaluations with service users take place to judge if we are doing the right thing or not by them as these are currently not in place. [P106]*

*It has really helped to kind of work with carers and understand their perspectives, but, kind of listen to that bit at the same time, tell them what they need to try, what we need to do together and have some confidence in that...[laughs]...rather than just kind of yeah, sharing opinion. It's just really useful to have that sort of backup. [P109 FI]*

*...because we know that the more research we do, the more evidence based we become, the more connected we then become with, with our communities, you know, so, I would like to see, you know, if there could be some more capacity lifted into the system to be able to achieve that would be great. [P118 FI]*

*So that bringing service users to monitor and evaluate, with academic support or not, to monitor and evaluate the way that current services are being provided, yeah. Because I don't think generally social work is as good as it should be at continuously evaluating it's models of practice... [P208 FI]*

Service users were seen a positive enabler for forging deeper links between LAs and their communities and reflecting on, driving forward and inspiring research ideas which could evaluate and ultimately influence and change existing practice. Although this varied depending on different job roles and levels of service user involvement undertaken within each LA.

### **Research skills enablers**

#### **Learning from other local research**

*I suppose it might be things like, you know when...[thinking]...sort of communication has come out or promotion about something, some local research. It would be really useful if that was shared. So, you know, it can sort of make you think about what might be possible where I work. You know, it's just that sort of ideas bouncing isn't it? ...So maybe, you know, that might be helpful. [P101 FI]*

*Yeah. Maybe like an online forum. [P101 FI]*

Participants felt that they were missing out on finding out about what local research was

currently being carried out within the Wessex region. There didn't seem to be either a mechanism or a resource to find out when new research was released or publicised. One possible method suggested for sharing this information was via an online forum or repository.

### **Learning from others**

*I always think that there's an energy that comes from people who have, who are either involved in study at that time or are recently qualified often, there's an energy and you know, I learn a lot from those people as well. [P101 FI]*

*...we did have, well we used to have the service with clinical psychologists...where we were all allowed to kind of-I think it was every two weeks or so, meet. And you could bring different issues to them. And they would offer their perspective and you could get some different sort of information and resources from them. Which was really valuable in like, you know I think we all learnt a lot from them. We could also share ideas ... [P109 FI]*

Participants noted that some of their research skills had been obtained by learning from others since moving into practice. For example, work based learning from others was described by some participants as being particularly valuable in information sharing and getting fresh perspectives on particular issues.

### **Learning from own research**

*...the whole kind of service improvement project allowed me to understand was that, you know, there was a lot of research out there that at that point in my career even though I'd been a social worker by then for about nine years I didn't really understand, you know, the experiences of that group of service users... [P100 FI]*

Participants noted that some of their research skills had been strengthened by learning during the course of their own research projects (whether as a part of a Masters service improvement project or on other projects).

### **Learning over time**

*I think it's sort of a developmental thing really in the sense that you know, when you first go into practice, obviously, you're you know, building relationships with people and you're delivering services... [P100 FI]*

*...although it's now later on that colleagues are going on to think about research and PhD's and stuff. But I think, initially we just all needed to get out and begin working really. [P109 FI]*

Participants noted that some of their research skills had strengthened and developed over a period of time. After qualifying and starting in their first practice post, they weren't immediately prepared or felt ready to start looking at researching or potential doctoral opportunities. Needing a period of time to adjust before reflecting on and looking at these options at a later stage of their career.

### **Online training**

*[talking about best ways of obtaining training support]*

*Yeah, I think online training is kind of the first point of call, but then having someone to follow that up with...so then a chance to discuss it and get people together that might be interested in it. [P109 FI]*

*I think pretty much every social worker I know follows some sort of, kind of online resource forum about social work. So I think that's probably a yeah, a good point of call, forum. Personal stories, blogs, just that sort of idea of sharing. [P109 FI]*

***I - ... the other thing for digital is we asked a couple of questions in the survey about training, research training, if people were interested in particular elements of research training...do you think that would be of interest to, you know, social care practitioners in your LA?***

*P118 - I think it might do. Yeah, I think if the opportunity was there, you may have some people who are keener than others, but I think, yeah, I think it would be good to offer that.*

Online training was described as one method used of obtaining training on research skills, amongst other topics. Online forums were also described positively as being useful as a means of sharing information between practitioners.

### **Organisational learning**

*I think private businesses are quite good at their research aren't they, in gathering data and statistics. Probably quite automated in a sense. Transactional, but they're always asking the questions that inform, different picture. As one of them may be some research they're looking at, for where the business wants to be in ten-years' time. So I think there are, you know, that's the digital aspect of how we collate information to inform research. May be an opportunity for us to be able to, you know, weave it all in so there isn't capacity issues. If that makes sense? [P118 FI]*

Organisational learning was described as another way of obtaining good ideas from others on how to go about improving research skills within LAs. Comparisons were made to private businesses, who were seen as being more effective in integrating research into business objectives and working practices.

### **Training via HEIs**

*[Degree]*

*I did a degree in health and community studies at [university location 3] Uni...years ago now, which involved some research methods. [P101 FI]*

*[Masters]*

*So quite recently and as part of that I did the preparation for service improvement project and service improvement project. [P100 FI]*

*...I had a conversation with somebody the other day who would like to go into sort of commissioning our kind of strategic management roles and you know, and in my current role I actually look back now and I think 'Oh, you know' my service improvement project and some of the skills that I learnt within that unit are really relevant to what I do now...[P100 FI]*

Training from HEIs had occurred at Apprenticeship, Foundation, Degree and Masters levels. The level of exposure to research knowledge varying depending on the course provider and the units taught within programmes. Participants were complimentary of the service improvement



project component of the Masters, which had helped give them a good grounding relevant to the role they were now performing.

## Access to research enablers

### Internal resources

*...and the other thing we also have in [LA location 1], which links in to my role is we have what's called our academy, so it's an online resource and we pull together research and tools etc. on different subjects so for example domestic abuse and relationship based practice – that type of thing – they, our social workers will be able to just go on to the academy and pull up whatever we've got that we think's relevant on that. [P100 FI]*

*Because all I see in the Mental Capacity Act resource area is one person posting, all the time, little things that they've read. But it could be, you know, or latest 39 Essex Street newsletter. Which is, basically, a summary of what's happened in the Court of Protection that month. [P107 FI]*

Internal online resources were mentioned as being utilised within one LA, where research and tools were pulled together on subjects such as domestic abuse and relationship based practice. Organisations might also construct their own databases of practice information. One example mentioned was a database of updates from the Law (although it was debated by a participant about whether this could actually be classed as a research source).

### Own research

*[obtaining research evidence]*

*In my previous role we conducted a lot of research ourselves and used the information coming in from our national surveys, complaints and friend and family test to thematically analyse them based on the CQC domains and as a result inform practice. [P107]*

One participant had been able to utilise their own research, which had been conducted as a part of their role to inform practice (although this was in an NHS health care setting).

### Podcasts

*I generally listened to ones through Research in Practice for Adults. They've got a library of them. So I tended to just look at their, you know, whatever was my topic of interest at the time. And then choose something that related to that. [P101 FI]*

*Also things like the International Social Work. I listen to, you know, whenever there were the conferences, I'd listen to the speakers on that. [P101 FI]*

Podcasts were described as a good way of keeping up to date with current research topics of interest and had been consumed in one case on-the-go, on the commute to and/from work pre-COVID-19.

### Subscriptions (Organisational)

*But our, lots of local authorities are buying into an organisation called Research and Professional Practice. RIPFA. And you can get all sorts of details on that. And some are now, there's, from Community Care Inform, local authorities are buying in to that, which gives you access to research information. [P200 FI]*

*I think, and I kind of understand as well, you know, that people can go off in a tangent and you can end up quoting things that are quite obscure if you're not careful. So, you know, in terms of the organisation, they encourage anything that's, you know, used to be you know, used really from Research in Practice or Community Care... [P100 FI]*

*[changes occurring relevance/priority of research in relation to role]  
They have joined research in practice [P120]*

Research in Practice for Adults (RIPFA) and Community Care Inform were both mentioned as organisational subscriptions which practitioners were encouraged to use (for example, to inform court reports) and were seen as being beneficial, in terms of being able to be utilised in obtaining research information. Their organisation joining RIPFA was viewed by one practitioner as being a positive change, concerning the relevance and priority of research in relation to their role.

### **Subscriptions (Other)**

*NIHR Chain, NICE, RCN bulletin, 39 Essex Chambers [P107]*

*...but in terms of accessing journals, unless you've got a membership to an organisation and I think you can take, because I've just renewed my BASW membership and I think they can give you...you can pay a bit extra to have access to the British Social Work journal, if I remember rightly. [P108 FI]*

*BASW Membership is actually from an individual perspective as opposed to an organisation perspective...one of the reasons I have it is because it offers me liability insurance, public liability insurance, which is something that is recommended for my role. [P108 FI]*

*A safeguarding newsletter [P109]*

A variety of other subscriptions were described, which were beneficial in terms of obtaining research information. Individual BASW membership (used by some practitioners for the liability insurance) could include access to the British Social Work Journal for an additional fee. SCIE, NIHR Chain, 39 Essex Street and NICE were also mentioned individually by participants as subscriptions they utilised.

### **Web sources**

*...so I have to actively, generally, go via Google...to find something that will inform the issue or the topic that I'm thinking about. [P101 FI]*

*When I'm taking part in academic things, obviously I can use research because I can access it all from [university location 3] lovely website... [P108 FI]*

*Yeah, I do use Google Scholar quite a lot actually, because I find it very easy to, and I use Google Scholar in, when I was doing research in, in previous roles. [P107 FI]*

*...university links to Wiley and other research bases [P116]*

Unsurprisingly, Internet searches were one method participants utilised to obtain research evidence from publications, independent research, online briefings and websites. Social Work England, charitable organisations (like The King's Fund) and NHS Digital were amongst those mentioned as web sources. In terms of searching, Google Scholar was particularly referenced, as were the online search facilities available from HEI libraries. Although these were only accessible during the time that a participant was studying or participating in an academic project or educator role (with HEI access rights to materials granted via a user or student account).

### **Web sources – Social media/forums**

*...but there's different ones about that I, you know, social work tutor, social work news, that sort of stuff. And they do share-some of it might just be kind of personal stories and sort of blogs, sort of, that type of thing. But others are research and kind of new developments and ideas people have. There are also some psychology ones that I follow as well. And that's quite a lot of research based ideas that people come up with and I think recently, there was a discussion topic and someone said that, you know, they'd done their, I think they said their PhD in it and I asked them for the link and stuff and they've shared that with me. So I think that's been, you know, really helpful sort of area, and that's a bit broader. So it's not just social workers as well. So I think that helps kind of widen the information they can get... and a bit of perspective. [P109 FI]*

Online forums – some located within social media platforms like Facebook - were identified as another source of research friendly information. This had applied in one instance to sharing details of a doctoral opportunity, which the practitioner had then gone on to investigate further. Forum information might also link out to other useful locations like blogs, research articles/dissertations, grey literature and news stories.

### **Research support enablers**

#### **Awareness of support services**

*P100 – I think it, only in the sense of this study.*

***I - Ok, so you, oh right, so you hadn't heard of them until you saw them...***

*P100 – No.*

***I - And you haven't sort of come across them by accident or...***

*P100 – No.*

*[talking about whether training officer would know about NIHR/CRN Wessex/ARC Wessex]*

*Not, not for staff opportunities. That's not really his role...So I doubt that he would have any awareness of those sort of organisations actually, unfortunately. [P109 FI]*

*...we obviously have commissioning departments...so if somebody decided that they needed to do a piece of research on something, there could well be somebody within our commissioning department who is aware of the Wes- the NI CR Wessex but that isn't something that I would be involved in [P100 FI]*

*[talking about awareness of NIHR/ARC Wessex/CRN Wessex]*

*Yeah. From a national role more. But not from my local role really. If I wasn't engaged as [position], I wouldn't have, wouldn't have bumped into it locally. I doubt it. [P118 FI]*

Of those practitioners who were interested in research, awareness of the NIHR, CRN Wessex

and ARC Wessex was quite low. Only 25% - (n=4) participants - said they were aware of the NIHR and one of these responses was from someone previously working in an NHS role when they had encountered it. Organisational knowledge of these support networks was also not strong. For example, some departments providing internal training might not consider it to be part of their role to know and cascade doctoral research opportunities. This view was also affected by organisational approaches to work based versus research training. One participant thought their commissioning department might be aware but could not confirm. These issues highlight how communication of NIHR opportunities in social care is currently sporadic at an LA level and might get lost along the way to practitioners.

### **Fellowship - NIHR support**

*...I had approached many of the different, NIHR help things. So I'd gone on to the website and I'd asked for help on how to you know, find a supervisor and all this kind of thing. I didn't find their feedback particularly helpful or directive. Or where to go. [P107 FI]*

*...I don't really know the purpose of what some of those teams were for to be honest with you. I mean, I've got the email in...I've got the emails from them. Like research design service and all this. But perhaps that was supposed to be a bit further down the line, maybes, and I was coming at them too early. I don't know. [P107 FI]*

Although easily accessible, NIHR support was described as not being particularly helpful or directive, when looking to locate a possible supervisor by one practitioner. The participant was also confused by some of the terminology concerning emails coming from different teams within the NIHR and whether they were being sent this information at the right time. Consideration of whether a practitioner might be completely clear on the process of research applications and the various teams which might assist with each step of the process, is something to reflect on going forward.

### **Fellowship - Supervisor support**

*And I approached her. And she linked me in with...[thinking]... [potential supervisor name] and [potential supervisor name]. And all were prepared to support me. [P107 FI]*

*I didn't find [potential supervisor forename] 'til very late and that just was by chance, as I say because we- I was in a, some kind of training thing and she was on it as well. [P107 FI]*

*[talking about initial idea on application]*

*I got some good advice from [potential supervisor name] in that she said that, that I only had two chances of getting the funding. And if I put in a rubbishy application that was a bit half-hearted and you know, not very well done by other people...then I would miss out on the opportunity of getting, you know, that's what, what's one strike down and also she said is, is that the, the purpose of the funding was to create researchers within the council and my project was based on exactly what we were talking about. Something that the council's interested in. And she said 'No. Actually the application should be about how you become a researcher and how you become research savvy, and we're creating researchers in the local authority. And that's really what it should be about. Not a project as it were'. [P107 FI]*

*Well, actually, more to the point is that, I was in close contact with someone who was hoping to get a fellowship and went through, we did quite a lot of work together, looking at the NIHR fellowship. [colleague forename], her and I. [P200 FI]*

For one practitioner, finding one supervisor for a Fellowship application had only occurred by chance at an online meeting (suggesting an area which could be improved). The relationship had been very helpful, supportive and positive in terms of the working relationship formed as a result. For example, when feeding back on whether an application was relevant and strong enough for submission, or needed more time in preparation. One HEI participant was also very proactive in supporting and helping practitioners to progress their applications where possible.

### **Fellowship – University support**

*...and then we had a meeting and [university location 3] University said, that at that point they did not have enough time because literally the deadline was like the Tuesday or something and this was the day before. That they didn't have time to do their bit. [P107 FI]*

*So [potential supervisor forename] wanted to work with me. She was incre-I've no, I had nothing but respect and support from [university location 3] University social work department...who really, really wanted to support me. Spent a lot of time in meetings, with my managers with me and trying to help me do this. [P107 FI]*

HEI support for a Fellowship application worked on by one participant was deemed to be very good and had included a lot of support for the participant and engaging with their managers during the process. Although the HEI were not able to progress their portion of the application in time for the original planned submission, as it was quite close to the original deadline. Post application, the bid was not able to be submitted as support was then withdrawn from the LA – due to the changing work environment. This positive, then negative decision within the LA suggests that continued dialogue is essential between all parties - the NIHR, the supervisors involved, the applicant and their LA - to reduce this unfortunate situation from happening.

### **NIHR Charter**

*...they're just finalising the charter details, so I've been involved in that paper, along with a number of other national colleagues. So that charter actually, which is hopefully due to be signed off soon. [P118 FI]*

***I - ...are you sort of hopeful that, that the, when the charter comes out it's actually going to make a positive impact?***

*P118 – I, I hope so. Because there's been quite, you know, a huge amount of effort and energy put into it...but with anything else it, you know, does it address the capacity issues and demands? It probably lists the responsibilities into it, but you know, a better place in terms of an overarching vision for social workers...in research. Does it address the capacity issues? Maybe not. But it gives us the ability to have another conversation I think.*

The NIHR Charter is currently being finalised at the time of writing. One practitioner had been involved in helping to progress this initiative, along with a number of other colleagues. They were hopeful that the charter might help to act as a catalyst for conversation and a positive change in social work research.

## Scholarships

*No, I got a studentship from, what was the HEI, which is HE Access, HI Access, whatever it's called...Advanced, HE Advanced now, isn't it? Higher Education Academy. Yeah, I won a, one of the scholarships, for that. [P201 FI]*

Scholarship opportunities were discussed by one former practitioner now working in an HEI. When they were a student, they had been successful in applying for a scholarship from the HEA, which had proved to be very beneficial.

## Use of support services

*Yes I have used all their services in my previous role as [job role] in an NHS Trust. I have also been in dialogue with them to help submit a funding proposal to NIHR for two schemes specifically aimed at local authorities [P107]*

*[NIHR]*

*I remember using it when I was doing I think, one of the units I did before I did the AMP training. It's not something that I've accessed in recent months or a couple of years. So I wouldn't be able to say exactly when that was. But it is, it is an organisation that I am aware of. [P108 FI]*

*[talking about NIHR funding]*

*It was because I'm on the NIHR email address for that particular topic, the email came to me. So it was me that found that funding. [P107 FI]*

*[talking about NIHR website]*

### **I – Looking for anything in particular when you went there or?**

*P101 – No, just out of curiosity really, just to see, you know, what is available, what, you know, what support might be available. Just out of interest.*

*I mean, I asked if I could therefore apply for the local authority SPARC award, so that I could use that to leverage...because what I said to my managers was: 'I have no time to do the research that's required'. [P107 FI]*

*...so what I asked to do was, to apply for the LA SPARC award. But, you know that one?...that it would have given me time, and what I was asking for was one day every two weeks to go and spend time with [potential supervisor forename], with the [research group name], the things that I was really interested in. [P107 FI]*

*[talking about 'two strikes and out' approach]*

*...I totally accepted that there were two attempts and-because I think, you know, I'm not naïve to how funding works. [P107 FI]*

Where there was an awareness of services, participants had visited and made use of the NIHR website, one had received an email regarding funding opportunities as a result of subscribing to NIHR Chain and had also been in discussions regarding two separate LA funding schemes. One of these – the NIHR Local Authority Short Placement Award for Research Collaboration (LA SPARC) Scheme - was seen by the participant as a potential stepping stone in being able to progress and potentially apply for different funding at a later date. The NIHR Fellowship 'two strikes and out' approach was deemed to be acceptable (and had not put them off from

applying) by the only practitioner who had participated in the application process.

## Research barriers

Research barriers are categorised as themes and sub-themes which might prevent or limit a positive research environment for practitioners working in social care.

## Personal barriers

### Career Change

*I've been in frontline practice for over twenty years and was looking for something different, anyway. And I've always been keen to well I've always been a continuous learner I think and engaged with learning. And I enjoy an academic environment. It was a-is a, was a great privilege to come and do further research. [P200 FI]*

*I think unfortunately, it's just become a difficult place to work. And not very rewarding. Kind of, what they can offer you, compared to the local councils around us...is pretty, pretty poor when you compare properly. I mean people are just tempted away easily, which is a shame because obviously they are very experienced, they have been dedicated to the council and to their job for many years but are at a certain point, they, you know, just aren't gonna put up with it anymore... [P109 FI]*

*Well, at that time, so during that time one of my tutors from [university location 3], was, got me involved in delivering lectures and things at the university, as a part of the family intervention unit. And I did apply for a job at [university location 3] Uni [P100 FI]*

*...but actually the salary in comparison to social work salary at the level was, the job was advertised at wasn't very motivating [smiles as speaking]...or appealing and actually since then I obviously, went for the principal social work job and got that. So, and actually I think it's a better fit. Because I get to kind of still have that real link to teaching and practice and I support the students and the assessed and supported year social workers in my current role. [P100 FI]*

*[reason for moving to academia from practice]*

*...it was the lightbulb moment, that I really enjoyed, I seemed to be able to have the knack of putting it in terms that students, or whatever the point I was trying to get across in student-to students that they would get and...sometimes, and often, students would come to me and say that I'd, you-'So and so's taught us this, that and the other, I don't understand it, could you explain it to me in, in layman's terms?...'And so I found that really rewarding, to be able to have that skill, to unpack things for stud-complex situations, or whatever, with students, and that really sort of motivated me to and inspired me to go for a career in education. [P201 FI]*

Current literature notes a lot of staff movement within the social care sector. Reasons why participants had decided on a career change varied, but included safety issues at their LA preventing them from applying for a similar role internally they had subsequently obtained elsewhere; a poorer working experience than seen at other LAs; and, in one case, a lack of research opportunities. What was perhaps surprising was the number of practitioners who mentioned career change. Some were considering moving or had moved or applied to other local LAs, whilst others were looking at the charity or health service sector as alternatives.

It was notable that some participants working in HEIs had moved from practice into academia.

These reasons included holding a lifelong ambition to move, getting fed up with constant structural reorganisations, and also the need to work somewhere where they were able to research as a part of their role. One practitioner had considered moving across to an HEI at a particular time, but had decided to stay in practice as a PSW, where the salary was better in comparison and the role also included a mix of supporting students and teaching.

### **Demands of the jobs**

*...because people are so busy, you know so for example, I run staff focus groups to try and encourage social workers to have a voice in services and how we can transform things. They're just not well attended. And the reason they're not well attended is because, you know, [smiles as speaks] social work is quite reactive and if something happens you know, you prioritise the child's needs...rather than, the need to, you know, attend a group or do some training or research [P100 FI]*

*I mean, obviously, we've been firefighting for the last couple of years anyway. And I think that that, things like research may be put on the backburner as a consequence of that, because you're just fighting with you know, what's going on, on a day-to-day basis...[P101 FI]*

*[talking about ability to write research publications/engage in research]*

*...but I just wasn't getting the time from, from the – I keep wanting to say trusts, sorry that's NHS coming out...the local authority. The organisation to do...to do any of this [sounding exasperated]. [P107 FI]*

*[why no involvement]*

*...so I, I don't have the time...so in terms of I might use research – Yes. But in terms of developing a piece of research or you know, well thinking a, you know, looking to create a piece of research. No. I'd, I – that isn't something I have the time to do or am encouraged to do. [P108 FI]*

*...and you know, diminished is quite a broad term, in the sense of you know, for a number of reasons, COVID burnout, our demand is getting ever and ever higher. Ever and ever more complex. So being able to pull a piece of resource out when we, when our statutory duty means we need to be you know, safeguarding and making sure that we assess and support the people in our community...you know, the priority is always that bit, rather than actually stepping out and completing a piece of research. Short sighted, I guess...very short sighted, in terms of a system. [P118 FI]*

*[on burnout]*

*And burnout is, is quite high and I think that's because the expectations are, are much greater than they used to be because you've got a smaller workforce. And a higher workload and the consequence is that people, the level of expectation on people is ridiculously high actually I think... [P208 FI]*

*[unrealistic expectations]*

*The assumption was that people would learn skills on the job, you know. That we would make sure whether they understood the law, that they had a degree of research capacity, that they had a knowledge of relevant theories and stuff. There was none of this thing where, you're in court within six weeks of going into the post like, you know, I mean...or something like that. And I think the employers are just being unfairly unrealistic about that.... [P208 FI]*

Participants continually described the demands of the job as affecting their time and energy to engage in research based activities (these comments covered many pages of data). The continuing impact of the Care Crisis, shortages of experienced staff, COVID-19 and the need to firefight all affected opportunities and impacted on the time available for spending on training or research. This situation was not viewed as changing in the near future.



### ***Desire to research (interested but not pursuing)***

*I am not academically minded enough to feel confident in undertaking a piece of research (although the opportunity to do it would be fantastic). [P108]*

*No time. [P109]*

*I would not know how to go about this. I do not know that we have capacity within the teams to do this. [P100]*

*Haven't seen anything relevant and available [P110]*

*Realistically this would always go to the First Class students as is advertised. [P108]*

Participants who expressed an interest in research were asked whether they had future plans to submit a research application or career development application linked to research within the next year. It is notable that only 1 of ( $n=16$ ) practitioners (6.25%) interested in research had plans in this area. These participants mentioned a lack of confidence in undertaking research, a lack of knowledge about the process and of research itself, a lack of available time, seeing nothing which might be targeted specifically at them and other reasons related to their career (such as maternity leave).

### ***Desire to research (not currently interested)***

*I prefer hands on - getting job done - I am more pragmatic than reflective. [P104]*

*I think that those who were interested in research, were always interested in research. Those who weren't, weren't. And I think it was all the time, I think it was always considered the icing on the cake. [P200 FI]*

*[How do you obtain research evidence?]*

*I don't [P112]*

*[anything which might help encourage you to carry out research in the future?]*

*Protected time and reduced caseload [P103]*

*If this was paid, within my working hours and part of the job then it would interest me. Otherwise it would not. [P113]*

*Dedicated time to really look and think about what I'm reading or watching [P115]*

*I am less keen on academic reading and writing and find it difficult to concentrate on it [P121]*

Just over a quarter (27.2%) of practitioners ( $n=6$ ) were not interested in doing research. Some participant comments reflected a lack of research inquisitiveness, and an indifference to wanting to improve research skills and/or engage in future research projects. Reasons given included not being keen on this topic, favouring practical rather than reflective work and also including research as a part of their current job role - so not wanting to work on this outside of core time. Additionally, one practitioner stated when asked how they obtained research evidence that they didn't, although they weren't specific about why this was.

What might encourage those who were not currently interested in researching? Answers included protected or dedicated time allocated for it within a standard working week (rather than at weekends or outside of core time), a reduced caseload, staff being brought in to cover tasks the participant usually worked on to free them up and in one case, provision of a research mentor.

### **Desire to upskill**

*...and I know there are a couple of other people that would like to do PhD's...but I don't think they're actually kind of progressing with that, or if they've got a specific area in mind... [P109 FI]*

*And that is probably the biggest barrier. If I would have done this PhD research ten years ago, with much younger children, well I couldn't do it, because my children were younger and because of that, we had significant expenses around child care and I wouldn't have been able to drop my hours and do a PhD part-time at that stage. So, it's just not financially feasible for, I'd say, most people. Who have to pay bills. [P204 FI]*

At a doctoral level, the financial constraints of funding a PhD had prevented one participant from pursuing this route until they had moved across to an HEI role. The other constraints noted in practice for not trying to upskill were mainly due to the demands of the job and also being at an early stage of a career - where the desire to work overtook the desire to carry on with further study at that point in time.

### **Future organisational inertia**

*It is extremely difficult to say. I know my role will be changing with the introduction of new legislation, but the paper has only just gone out for consultation. I cannot see the organisation changing concerning the relevance and priority of research as I have been told that other programmes of work take priority over research. [P107]*

*Absolutely none. Nothing is changing in [LA location 3] [P109]*

*I hope that lack of capacity and resource within social care won't impact the time and space people need to complete research [P110]*

*I think we're approaching the stage where both practice and the academy are stretched too thinly to meaningfully take part in research, due to a lack of qualified personnel and funding. [P201]*

Personally, practitioners are working in an environment that they hope might become more positive towards research in the future, but which they pragmatically acknowledge is going to be difficult, if not impossible to achieve. From a negative perspective this might make them feel that this is not really in their own power to affect. This organisational inertia towards research can also affect them negatively in terms of any future plans they might have in this area.

## **Organisational barriers**

### **Communication and politics**

*So, if there is a research team or is there...if there is research practice going on. Why hasn't anybody pointed it*

*in my direction? Because I can't find it. I certainly can't find it. I can't find it on the website. The internal website. I can't find it on the Teams chats. [P107 FI]*

***I - Yeah, direct from NIHR. Did the- so the council email, was that someone that's involved with research or a research champion?***

*P107 – Not that. No. Not that I'm aware of.*

*Unaware of any research opportunities that existed ever. [P109]*

*Now this team manager has been told that she can't go onto a course because the internal process for the application hadn't been initiated for that particular course, because apparently the local authority didn't know about it, when I emailed them...several times. And they, yeah, chose not to read those emails or newsletters, which then had a direct impact on this, this manager who wanted to progress her MA. [P204 FI]*

Communication channels in the council for research opportunities varied in different LAs, but participants had reported instances of confusion in this area, with difficulties in receiving cascaded information on potential opportunities, unless they sought them out themselves. Certain information only went to certain people within the organisation and there was a dearth of identifiable research champions available to cascade information. These factors highlighted that potential external opportunities (sent from organisations including the NIHR) might not be getting through to practitioners who might be interested in them.

Similarly, communication back up organisational channels to discuss potential funding opportunities was described as difficult in one instance. This also applied to effective contact with administrative teams to progress research applications and also to external contacts - such as HEI academic staff - being unable to effectively communicate with the right contacts within an LA.

## **COVID-19**

*Training opportunities did exist but COVID also stopped many of them. [P109]*

*And so I know, several people who have sort of gone: 'No thanks! I'm done. I'm gonna go and do something else'...and so they have unfortunately - whether permanently or not - but they have sort of stepped away from the profession to...[thinking]...to do something else... [P108 FI]*

*[talking about impact of COVID on health and social care practice and leadership in particular]*

*Yeah, you've literally had the trauma in your own home, very often in the bedroom, and that-that had significant emotional mental impact on, on staff. And that's I think is the same for, yeah frontline workers as much as their, their managers because as a manager you, you hear the same stories and you get the same amount of abuse shouted at you. [P204 FI]*

*Sorry [interviewer forename], it has made everything a lot worse. [P118 FI]*

Three particular impacts of COVID-19 were noted by participants. Firstly, training opportunities were reduced. Secondly, there were many additional stresses and strains placed on staff during this time, with priorities shifting, team structures becoming more unstable due to sickness, impacts on practitioner mental health and relentless pressure being placed upon them. Some of these effects were being seen in staff leaving the sector. Thirdly, the change to working from

home from being based in an office environment also had an impact. Some staff had felt more isolated and less supported in terms of being able to decompress with someone in an office environment after a difficult call. Space and privacy issues inherent with some locations used for homeworking had caused a bleed into family areas, which was problematic. Commuting opportunities to listen to research materials to/from work had been lost in one case. Maintaining good mental health in this environment was noted as being particularly challenging.

## **Engagement**

*...staff engagement's poor in the council. [P107 FI]*

*Our team manager runs groups to improve our work life where we bring ideas and discussion. But then they aren't acted upon so it now feels pointless. [P109]*

*[talking about academic into practice scheme issues]*

*But...practitioners were too...[thinking]...busy and discouraged to even reach out but just to, yeah, tick the box. Do the visit, write it up and move on to the next. [P204 FI]*

Opportunities to engage with the organisation to affect positive change were limited. This had the effect of potentially dampening down enthusiasm to participate in surveys (including our study) and research initiatives they might hear about, or negatively influence them away from seeking opportunities available through some communication channels.

## **Financial**

*I think there's a financial restraint in terms of people's time to do it. And that because local authorities and the health service have such tight budget implications. They don't have the resources to kind of give that to, you know, I think there's been so much of a squeeze that they need to kind of go 'Is that a priority for us financially?' [P108 FI]*

*[talking about practice educator training]*

*...and obviously there was a big benefit of the fact that you've got [university location 3] uni, so close by, so...You know, they get paid for that...[laughs]...so...there's a big push for that, quite often. [P109 FI]*

*[talking about practitioner challenges to research]*

*time, resources, funding and respect [P207]*

*[main challenges to research activity within your organisation going forward]*

*Need to be planned and included in the budget [P117]*

*[talking about role development with a research element]*

*...I think that is something that if we were going to and I know there is some national work going on in this space, but it requires money to be able to deliver it. [P118 FI]*

*[gap between public care going to university – UK vs abroad]*

*I think it's partly lack of resource, It's also an ongoing lack of, a lack of investment in training for the social care workforce more than the social work workforce... [P208 FI]*

The impact of austerity and pre-planned budgetary constraints on LAs was noted. This included

the negative financial implications of freeing up staff to work on research - such as replacement staff, set up costs, patient and public involvement, time for data analysis and unplanned budgetary expenditure - and cost concerns focused on 'business as usual' rather than research focused roles. Participants highlighted how reductions in LA expenditure had negatively impacted on CPD and research opportunities and prompted some managers to try and discourage some from continuing with academic studies.

### **Journal access**

*I mean one of my frustrations, which you can't do anything about, but is that obviously when you're studying with [university location 3] University you get access to their library...and when you're not studying with them you don't, and as a practice educator I find that really you know, difficult because I really like to be able to look at the research. [P100 FI]*

*...where I've worked previously, we've had access to online research catalogues. So...you could type in a keyword and the research, the scholarly research would come up. And that was always really, really useful to help you think through the wider development issues, service development issue or something like that. That doesn't feel like that's available in...where I work and I think I would know, probably know if it did... [P101 FI]*

*[talking about open access journals]*

*Yeah, I actually have noticed that there are a few, and I can't tell you which ones, but I have noticed actually that I've kind of come across papers that I've wanted to read that I can access...that you know, more I'd say more readily than there would have been previously. [P100 FI]*

Participants noted that journal access outside of those subscriptions they and their workplace subscribed to, left a lot of articles unavailable to them. This compared very poorly to the experience when they were able to access HEI funded routes to research and also to one participant who compared their experience of working previously within the NHS. Open access offered a partial solution to this issue (and access had been better during the pandemic, when some journals opened up free access for a limited time period). However, there still remains a tremendous pool of research knowledge – for example, recently published embargoed articles - currently off limits to practitioners.

### **Lack of an embedded research culture**

*But, say for example, they're looking at the strategic direction of the services. You know, of adult social care. It feels like there's not much reference to national research that could inform the local picture. [P101 FI]*

*I think research for us is not about creating the research, it would be about using a piece of research to inform practice. So we, it would be seen in a different way. Because, I think there is a culture that conducting research, creating something is, is an academic role and not a local authority role. [P108 FI]*

*I'm just not aware of any policies about how to access it and how to use it. I don't know if that exists. It's not something I've seen on any of the sort of like, the training pages...I've had a look at. Yeah. I'm just not aware of it. [P109 FI]*

*[talking about doctoral versus work mix]*

*Not exactly. They were very separate actually. So my experiences that my work environment had absolutely zero interest in my research. There was no curiosity. Or very little curiosity about what I was doing, or why, or*

*what it might bring, it was seen as something that I did in my spare time. [P200 FI]*

*[practice challenges]*

*How to embed any evidence generated into practice and influence policy. [P203]*

*[talking about embedding research into practice]*

*...and so there's a bit of a, you know, it's obviously, it's getting better all the time but it's certainly not to the extent that other professions have. [P201 FI]*

*...but completing our own research, is again an area of weakness for us. [P118 FI]*

Participants noted a lack of tangible organisational policy and guidance around how and when staff could access and use research evidence. Research pathways and governance frameworks had not been fully developed in some LAs. This is highlighted by responses to the Likert question 'Our organisation has a policy/guidance on how and when staff can access and use research evidence' where only 9 practitioners strongly agreed ( $n=5$ ) or agreed ( $n=4$ ) (equating to 40.9%).

Unlike the research culture within the NHS - where research is viewed more as a part of everyday practice - the perceived cultural view within LAs tended toward pragmatic learning, which was functional and job related, as opposed to theoretical and investigating new evidence – viewed as an academic area. A lack of research culture could also be viewed in the discouragement of some by managers from continuation of academic studies and a disinterest in those staff who had managed to progress to doctoral studies within a practice role. In some LAs, where research use was encouraged, it came from larger communities rather than being developed locally. Appositely, other LAs utilised local research knowledge on local areas, but did not link this in to national research, which might have been beneficial.

Comments also pointed to a gap in current knowledge concerning organisational approaches to embedding research into practice, which would help to influence policy, improve services and influence the organisational approach to provision of research training. Responses to the Likert question 'Our organisation uses research evidence to inform policy and practice' where 17 practitioners strongly agreed ( $n=8$ ) or agreed ( $n=9$ ) (equating to 77.2%), suggest that this situation could definitely be improved in some LAs.

### ***Lack of dedicated research time***

*So, I spent this whole bank holiday weekend writing out all my bit, that I was interested in following up within the, and what I wanted to base my PhD research on... [P107 FI]*

The research time allowable was typically below half a day within a five day working week. Figures ranged from 0% ( $n=6$ ), 2% ( $n=1$ ), 5% ( $n=6$ ) and 10% ( $n=6$ ). Only 3 participants had more time allocated – 20% ( $n=2$ ) and 40% ( $n=1$ ). One of those who estimated 20% was a PSW, with the other two practitioner job role levels undisclosed. The mean time allocated (not actual) across all participants equated to 7.9% of a working week (equating to just under 3 hours of a

37 hour week). As with a lack of study time, this had the impact of forcing research specific work, such as applications for funding opportunities, to be carried out in free-time.

### **Lack of/Loss of study time**

*[talking about study time being eaten into]*

*So yes, it did get eaten into, so there was extra time, there was that extra commitment. [P108 FI]*

*...doing the AMP itself was funded by the local authority so it's, it's a given that you know, you're never going to get as much as you really need... [P108 FI]*

*[talking about Masters]*

*I was actively discouraged to continue my studies. I had to take annual leave...[thinking]... and had to pay for it as well. Although I was a permanent member of staff. [P204 FI]*

Where practitioners had been able to arrange training opportunities (whether at Masters level or on other courses, like the Advanced Mental Health Professional qualification), there were issues described with being able to take study time allocated. This had resulted in some having to use weekends and evenings and in some cases annual leave, to ensure they could meet deadlines for hand-in dates.

### **Lack of research contact or champion**

*I – ... and is [practice lead forename], is she sort of like the 'research champion' for your LA then would you say? Or is that a, a sort of, not a role that, it's not something that's part of a job role but not as a sort of, an identified, what we'd say is a research champion?*

*P118 – Yeah. No, champion in the loose term...she is bolted on to a very busy practice*

Research champions were in a large percentage of responses either unknown, or not in place. Responses to the question 'Is there a named 'champion' for research at a senior level in your organisation?' where only  $n=4$  practitioners said yes (equating to 18.1%) suggest that this situation is severely lacking at the moment.

### **Managerial**

*...we've had a lot of changes in senior leadership and we've got quite a lot of short, shorter term contracts or interim or consultants in. And...I think that you get a different approach if you have that type of senior leadership team. And if you've got something a bit more consistent or permanent, then they, they look, they look into a longer horizon. [P101 FI]*

*...and it, it can be quite hit and miss depending on who your manager is as well. So...one manager might have more of a kind of open view of letting you go off, even if it's just to shadow another team, which one of my manager(s) let me do for a week. And saw that as a benefit to kind of my development and future career and things, whereas another manager was much more likely to decline that because actually, it's not going to benefit you in their opinion right now. [P109 FI]*

*[talking about research funding application]*

*...what I found difficult was getting anyone to take any interest in it. [P107 FI]*

Management in LAs were identified as a barrier to being able to progress research opportunities. Some LAs had experienced a changing leadership over a short time period, which led to a perceived lack of cohesion and an inwardly looking, short term approach from those at the top, with a subsequent lack of commitment and wish to sign up to research based activities. Where managers were more research positive, service pressures and organisational priorities meant that goodwill in this area might not stretch to actual positive changes within this area. The differences in managerial approaches within different teams in a single LA, also highlighted a lack of overall equality in how staff were treated in this respect.

### **Organisational strategy, priorities and readiness**

*[why no involvement]*

*In some ways I feel we are told how to work depending on the resources we have available to us as opposed to research what might be the best way for the person to achieve their outcomes. [P108]*

*It will be in exactly the same position as it is now. There's absolutely no timeframe for it. As they said, the priorities are far bigger in other areas than research. And...I don't know what those priorities are, to be honest with you. [P107 FI]*

*I think when I first started there was more of a(n) investment in the you know, the staff members...and not necessarily saying you know, 'We need a specific measurable benefit from you for it'...whereas now, it feels like it's much more difficult to sort of argue people's point that they should go on this specific training or have these different opportunities. It feels like the priority is a, well to be honest, much more focused on kind of day-to-day survival now. [P109 FI]*

*And it's the...[thinking]...status of social care is really very low-down, and there's, there's all sorts of reasons for that. And I think, so, which means that local authorities have had to really concentrate on their statutory duties. They have no choice. [P200 FI]*

*They can't do the quality of life stuff that actually means people live, as opposed to people survive. And so, but because of the way the law is structured and what have you, that they can't perhaps be they can't raise the eligibility criteria in such an overt way, but it's just meant that things are very tight and priorities have to be on those key deliverables that get measured and you know, you're given your-in terms of adult social care for you know, your marks on. [P200 FI]*

Unlike in health care organisations, within some LAs research based activities and training in social care were viewed as low priority organisationally in the view of many participants. This might mean that research policy and pathways had not been developed and a top-down approach ignoring research as an option to utilise. Statutory duties, the effects of COVID-19 and day-to-day survival with smaller resources and bigger time pressures meaning research undoubtedly taking more of a backseat than previously.

The biggest hurdles in being able to utilise research seemed to be the ability to see tangible outcomes and benefits within a short time period. Many participants felt that the LA they currently worked for was less positive toward research recently. A major part of this caused by service pressures, resulting in priorities being focused on day-to-day responsibilities rather than what was viewed as 'extra-curricular' research.



## **Recruitment challenges**

*But there are always, you know, some recruitment issues in social work and I think that's the difficulty. It's kind of getting, having the capacity to recruit more people so that you can enable some people to do research projects. [P101 FI]*

*...and I think people who are, who were looking at working in this field may not do so because of the past couple of years and the pressure and the focus it's had. Especially when hospitality and other retail providers are maybe more competitive in terms of their salary and you know, their pay offer and benefits offer than we are. [P118 FI]*

*...we were trying to do something with an LA around social work resilience. Social workers resilience, sorry, immediately prior to the...to COVID, and that just hasn't, it's not been possible to pick that up again...since. Because of the lack of practitioners, available practitioners doing the jobs. [P201 FI]*

*...my last student that I supervised as a practice educator, last year, in her hundred day placement, she had three different team managers and three different service managers. [P204 FI]*

Workforce and recruitment challenges were reflected in the study. Vacancies are difficult to fill and there is currently a large churn of existing skilled staff moving on, with knock on effects concerning the capacity to allow research to take place within the wider organisation. Constant workforce churn might contribute to difficulties in reviewing career pathways to be more inclusive of research opportunities, as covering front-line tasks is always a priority.

## **Size and structure of organisation**

*So when I joined [LA location 1] in 2015 – it seems like a very long time ago now – about six weeks after I started there was a massive restructure was launched. And they cut half of the qualified posts and made them unqualified roles. [P108 FI]*

*[talking about historical departments]*

*So there was a research department within the local authority and there was a library that they maintained but I don't know whether that's still there. Or whether it's kind of been absorbed. [P200 FI]*

*[talking about hierarchy]*

*...and I'm quite a creative person. And that sort of doesn't really work for me. But they want to keep it all closed in, all the time to...you know, everyone in their own bubble. Everybody in their own team. And never, don't think about trying to develop within the organisation, using research or anything interesting like that. [P107 FI]*

*I've never, I did work in a collective, but I-so I've never understood why social services departments need to be as hierarchical as they are, you know, it's kind of, yeah, it seems to go against all the evidence of organisational theory, which is that people work better when there's less hierarchy than they do if-when there's more, you know...Social work's a long way outside that at the moment, certainly. [P208 FI]*

Restructures within LAs were reported by a number of participants. Sometimes this had resulted in research elements within a council disappearing. This also had the knock on effect of changing the landscape of the workforce with qualified posts being lost, which in some instances added to workload. The hierarchy of this structure and in some cases 'Silo' mentality – individual departments working separate of each other - made it very difficult. Both in

seeking out the right people to contact when seeking approval and also to effect any changes from the bottom up. The size and rurality of some LAs and different departmental structures resulted in differing connectivity levels across organisational hierarchies.

### **Supporting research projects**

*...and we've been trying to support that project locally. But again, and it's been really difficult to you know, a researcher arrives, wants to engage some focus groups with a number of staff...or co-ordinating and making that happen on top of the day job's been really challenging. [P118 FI]*

Finding the capacity to initiate and/or support research projects was noted as challenging due to the strategic demands of the organisation. This pressure only increasing if project demands were made at short notice.

### **Targeted Funding**

*But it's all the training that You want as a council. It's not necessarily what, the feedback or any, any kind of things that are happening in local authorities are telling us to research. It's just you want people to fulfil posts. That's it. So you'll release them to do that sort of training, but you won't release them for anything else. [P107 FI]*

*So there's, they're still spending money, but they're just doing it in a different way, because it's got a better outcome for the local authority. [P108 FI]*

*It's cheaper for the local authority than a traditional university, over the you know, eight or nine months of the two semesters and they can do it on an apprenticeship basis. So it, they get funding in from central government to support the costs for that. So, where there is an outcome for the local authority and this is really cynical [interviewer forename] and I...[laughs]...it's...I don't want to be negative about it but what they've had to do is they've had to say 'We still want to promote qual-social workers or staff being qualified and we want to support them to be qualified but if we can do it in a cheaper way for us, we can still maintain doing it and then we can, if we then pay for their education we can then tie them in to a job for two or three years afterwards'...which is what they do. [P108 FI]*

*And it really is the sort of thing that you need to do in person. I think a lot of the courses aren't as good...[chuckles]...online, so that's been a real barrier for everyone. [P109 FI]*

Participants suggested that when considering what training LAs will decide to fund, targeted funding constraints mean that opportunities with a research element were not always available as options for staff to consider or request. In comparison to shorter, more cost effective, work based training.

Apprenticeships were noted as a cheaper alternative in comparison to degree courses (and participants were unsure of the research elements taught within current apprenticeship training provision). Online training at a distance was viewed by some LAs as a more preferable and cheaper route than face-to-face HEI options, without the difficulty of releasing staff. The quality of this online offer was in one case described unfavourably to an equivalent face-to-face HEI offering. The effects of targeted funding are a short term erosion of opportunities for adding research skills to an employee profile and a longer term erosion of workforce research

capacity (as experienced staff with research skills leave the sector to be replaced by newer non-research literate staff).

### **Training issues**

*[talking about being encouraged to develop research skills and knowledge]*

*Yeah. I don't think it's, it's certainly not something you know, that no, it is evident really I don't think within the organisation you know, or is offered, or supported at the moment you know. [P100 FI]*

*I don't think people are getting the same opportunities to do that now...[laughs]...unfortunately, but I was, I was lucky with the time I joined. [P109 FI]*

*[talking about being discouraged to undertake PhD]*

*I would go even further. That apart from one, all local authorities that I've worked in are actively discouraging thinking...there is a risk once you start studying and you are, you start raising questions about knowledge and that is not what local authorities want. You're not, I was told that I'm not there to do thinking or critical thinking in particular. I was there to move cases through and not question decision making. [P204 FI]*

*They appear to support programmes of work which are not new and others have done already that they feel comfortable with as they know what to expect. [P107]*

Participants reported four areas of concern around training. Firstly, the lack of a framework for encouraging the development of research skills and knowledge (see also *Organisational enablers – Appraisal*). This is also shown in Likert responses to 'People are encouraged to develop their research skills and knowledge' where only just over half of practitioners strongly agreed ( $n=6$ ) or agreed ( $n=6$ ). Secondly, opportunities for training might be denied for some new starters due to concerns that they may not stay in their role for long. Also, in some instances, managers were actively discouraging practitioners from completing a Masters CPD programme or starting on a PhD pathway. Thirdly, online training is viewed as a cost-effective solution, although was not viewed as having the same quality or long term impact of face-to-face HEI alternatives. Finally, organisations were very conservative in their approach to the CPD they supported. This attitude was based more on limited funding, rather than the added value to the individual and the organisation.

### **Unwilling to buy out staff time**

*...when you say 'My time', you know, maybe certain people's time. I can't say whether I would be supported to do it in my role [P100 FI]*

*[factors influencing organisation to allow research training opportunities]*

*My work to be covered whilst I'm off so I don't return to chaos. Funding agreement. [P109]*

*Now I've done backfill as a, as a lead of a team...And had people, you know, and I was just like, it's not that complex, you know what I mean? It's like everything was being made from [LA location 3] council point of view a bit of a mountain out of a molehill. [P107 FI]*

Particular reference was made by participants to a lack of confidence in the willingness of the

organisation to provide a replacement for them – freeing them up to work on a research project – even if financial payment was available to cover them.

### **Unwilling to support external funding applications**

*...and they just, they turned me down. And I was very frustrated the man-my, my managers turned me down for it. Said they wouldn't release me. And I just felt really angry about it... [P107 FI]*

***I - And you've got no guarantee that the [award] application, if you put it in again might not get pushed back because of funding issues further down the line, I suppose...***

*P107 - Or, or, because of their lack of...*

***I - Strategy.***

*P107 - Research pathway...Strategy, wanting to release me. And all the rest of it.*

*...we did quite a lot of work together, looking at the NIHR fellowship. [colleague forename], her and I. And then had to abandon it, because the local authority weren't gonna play ball. [P200 FI]*

One participant had not been supported by the LA that they worked for in their attempt to submit an application to the NIHR Local Authority Short Placement Award for Research Collaboration (LA SPARC) Scheme. This is a pilot scheme designed to support short placements for individuals to move between practice and the NIHR, in order to enhance their careers by developing their skills, knowledge and expertise to work at the interface between LAs and HEIs. This had led to them feeling angry and frustrated at what they considered a missed opportunity. One HEI participant mentioned working with a practitioner who was not able to apply for an NIHR Fellowship, because their LA would not support them. One practitioner Fellowship application, which had not been able to be originally submitted in time, was not able to be resubmitted as support was subsequently withdrawn by their LA.

### **Cultural barriers**

#### **Approach to research question**

*I think that they're very much stuck in a 'What are the statistics telling us?' and 'What do we do about it?' and then not asking the 'Why?' And actually that's what, I think that's what actually, you know, going back to the statistics and saying 'Well why is this happening?' What they're saying is the questions they, they're asking is 'What's happening and how do we deal with it?' not 'Well, why is that actually happening?' So, they use, I think they use those statistics, the data that we produce about what we've done to inform what we need to do our job at this time, this point next year, or the year after. And that is and that's where that sort of research, do you know what I mean? If you like in terms of analysing that data, I think that's the only level at which that's...which that's used. [P108 FI]*

*...we do have a research team and it's called 'Data and Insight'. Apparently. But it gives the impression that all one needs in order to have insight is data. And this does seem to and she- this is what she says, so this does seem to be what the council thinks. [P107 FI]*

Participants noted that the statutory nature of their job in relation to current governmental and therefore LA drivers and what they were required to monitor, was a barrier to certain areas they might wish to research and how LAs viewed the nature of research in terms of their strategies –

a very narrow range. This links to comments concerning the lack of an embedded research culture (see also *Organisational barriers - Lack of an embedded research culture*).

### **Historical workforce culture**

*...and an underestimation of the, what you'd need to be able to have to work in those sectors, you know. You need empathy, you need to be able to hear what people are saying and you know, a number of times you go to adult residential institutions or, children's residential institutions and you hear the interactions between staff and residents and you think 'Well this isn't why I came into social work', you know. These are, these are quite stereotypical, occasionally aggressive inter-interactions which aren't promoting performance and practice, which are beneficial to people using those services, yeah. And I think that's still a problem. But I think it always has been a problem to be honest, you know. Thirty years ago that was a problem... [P208 FI]*

*Well I think that different way of relating to people I think that's part of that, you know...it's kind of to break down the power dynamic which, you know, I've still got good friends who are working as social workers and sometimes I, you know, I have to say something to them. And say well, you know, aren't you building a stereotype around the person receiving the service there? Because it is almost a kind of a distrust of their capacity, you know, it's kind of, and I think we need, we need to rebuild social work to promote the idea of listening and encouraging people to promote voice... [P208 FI]*

A factor highlighted by one participant was the continuing negative culture (lack of empathy, not listening, not promoting marginalised voices, negative behaviours and power dynamics) within some parts of adult and child services. Also with some social workers in their attitudes to the people receiving the services, which they considered had still not been satisfactorily addressed in the years since they had starting working as a practitioner before moving to academia. These issues impacting negatively on the ability to encourage a positive research culture.

### **Social care versus academic**

*[talking about developing professional practice programme]  
'Cos the title of the course, it's put on by [university location 3] University, but the title of the course is very misleading. [P107 FI]*

*[talking about general wording]  
...what it doesn't say is 'Give us a call if you'd like to do a piece of research or like to be involved'. Do you know what I mean? [P108 FI]*

*[talking about wording on application]  
Maybe it is. But I, certainly, the last one I looked at, it was looking for...I can't remember the wording it said it about Masters level, but even I – maybe it is my confidence and the wording is a bit... [P108 FI]*

Participants had noted how some LAs viewed research as an academic activity, rather than a social care one (see also *Organisational barriers: Lack of an embedded research culture*). This has perhaps led to a perception of a research positive attitude being considered as not as important or relevant in an LA environment. Resulting in an eroding lack of confidence, an inferiority complex even - in practitioners wishing to investigate research based opportunities in collaboration with HEIs. One participant had been discouraged from applying for a doctoral opportunity after looking at some of the job role wording and expectations. This suggests that

wording could be changed on some opportunities to make them more encouraging, or looking at ways of encouraging some practitioners to feel more able to approach HEI academic staff directly to find out more details. Another participant felt that changing some of the terminology on particular training opportunities would make them less confusing.

### **Social care versus health**

*[Health research culture more embedded]*

*Otherwise you would, you're just going to flounder around in it for too long and not move the research element forward. Like our NHS colleagues always sort of seem to do better at than us. [P118 FI]*

*And so there is that power – it's a common - I'm giving you this information to sort of say there is that kind of power indifference. In that we all want to be working very much. And we do predominantly, we do work alongside really, really well, but there are some times where, if they say no, it's No. [P108 FI]*

*...but I think that's why I've always felt [interviewer forename] that, not always, but for some time that until NHS and Social care are one thing and seen as, as, as a joint endeavour I think it will always be a bit of them and us. So actually, in terms of developing research and you know, collaboratively coming together to sort of answer questions that are being raised – I don't know that that is ever gonna change. [P108 FI]*

*Yeah, and I think perhaps that's to do with the evidence base, to a certain extent. I mean, it's a crude example to give would be, you know, that you've cleared somebody of cancer, you can't say, you know, it's not as clear cut in social care. Because you're dealing with personas, personalities, emotions, different aspects of, you know, people's lives, environments and all the rest of it, where healthcare is, you know, pat-not patching people up, but I hope you know what I mean...And then you can see the res-an instant result from that. [P201 FI]*

Participants made reference to a power indifference between health research and social care research, both in terms of the working relationships between the two specialities and in attitudes to research. Historically the culture and funding for research in health (well-funded and embedded) is more advanced than social care (underfunded by comparison and not as embedded). Occasionally challenging working relationships between the two areas were highlighted by practitioners who worked near the crossover area. Although they worked hard at maintaining a good, cohesive relationship with health partners, at certain pinch points they felt that their side was effectively seen as the secondary partner, rather than being on an equal footing.

One participant had been put off researching a particularly interesting Mental health issue as a research topic, as they felt it stepped over the demarcation line between what was classified as social care research as opposed to health research and could therefore pose awkward questions within the health service and consequently impact on their working relationships with health colleagues.

## **Societal and political**

*I think pre-COVID we've faced since you know, 2012, 2013, annual, you know, an annual requirement to make savings and make cuts...across the service. So we've always been in that, we need to be, we need to be focused on savings, as well as trying to meet our statutory duties and meet the increased demand. [P118 FI]*

*Will we get further funding to be able to you know, prop up the workforce more consistently going forward is a big question mark for every authority at the moment, I think. Especially with the political environment we're in as well. [P118 FI]*

*And it's, the...[thinking]...status of social care is really very low-down and there's all sorts of reasons for that. And I think, so, which means that local authorities have had to really concentrate on their statutory duties. They have no choice. [P200 FI]*

*So, thinking more about social care...we know that there's been twelve years of austerity policies, ten years plus, two years of COVID, which has had a profound impact on health and social care and on funding and opportunities and prioritising etc. And it is not a social priority. Social care never has been. [P200 FI]*

*...what I've realised is that in the UK, Social Work is very much seen as 'Statutory' Social Work. In [country 1], Social Work and Social Pedagogy are far wider and broader and allow practitioners to have a lot more freedom in their practice. Develop their practice. Be creative and here 'Statutory' Social Work is about processes...[thinking]...to enable safeguarding. If I use my words carefully. It is ticking boxes. There is very little creativity allowed. [P204 FI]*

*I mean when you look at the way that social work, care has been cut back over the last fourteen years since 2008... [P208 FI]*

*[University entry]*

*I think that, you know, we have a notoriously low level of qualification in state adult and state child care, yeah. And it's, yeah, I think if you look at other countries, you know, it's kind of, I think one of the stats I remember is that in Germany, if you're in public care as a young person, you have a sixty-five percent chance of going to university...after you've been in public care and it's, it was at times six percent in the UK. I mean it's, that's just ridiculous... [P208 FI]*

Societal impressions (impacted by media and political discussions around issues like Brexit – with a significant anti-expert thread running through debates) were thought by some HEI participants to have filtered through and negatively impacted on the overall priority that research was given within an LA environment. Notably, both HEI participants who discussed this had previously worked in LAs. This was not considered to be a new development, but had been endemic for many years, in terms of the impact of austerity measures and also the continuing impacts of what key deliverables were required to be measured in adult social care.

Social care as one participant said was not a social priority and never had been. Mention was also made of the very low level of qualification in state adult and state child care, with the German percentage chance of going to university if someone was in public care (at around 65%) being a lot higher than in the UK (around 6%).

## **Mental Health - research funding and stigmatisation**

*...but I think there are in some parts, you know, of our society, there's that kind of negative connotation of mental health, so I don't like using...for me, I don't like using the word 'patient' [P108 FI]*

*Although I think the narrative around that is changing, but it will take quite a long time for that to be reflected in the research evidence. [P200 FI]*

*We've I think, compassion is quite...[thinking]...easy to, to have and to feel, but I still think there's a long way to go in terms of culturally seeing that sometimes our mind doesn't work the way we want it to and we need help for that. I like to say to people that everybody has mental health, because we are a mental being as well as a physical being... [P108 FI]*

*I think also, you know, Mental health is the black sheep of the research family as well. You know, it's not, we know it's the most significantly underfunded in comparison to physical health problems. [P108 FI]*

*And there was something in there about I think it was for the PhD pathway, or something like that, and it was about-you don't often get things that come up about Mental Health... [P108 FI]*

*...certainly in-terms of central government funding, you know, central government, I imagine that...[thinking]...they-obviously they're funding a health service so that we can keep going, they're not necessarily interested in our mental health, or, you know, relationships, or anything like that. That's really up to, you know, is what or how I perceive it. So, you know, it's, it's a bare framework...to keep us alive and working...[laughs] [P201 FI]*

In some cases, particular research interest areas might be deemed less attractive to research than others. As an example, Mental health was highlighted as being a culturally difficult topic to research in the current environment – even given that positive steps had been made in changing the narrative around this topic in recent years. The difficulties of highlighting the benefits of researching an invisible condition in comparison to physical conditions were discussed, in relation to both research funding and the practice benefits of wanting to research within this area.

Stigmatisation also had an impact on what areas were funded for research - Mental health was particularly singled out as being underfunded. For example, one participant had noted very few doctoral opportunities for them to look at in this area.

## **Occupational Therapy - research funding**

***I - ...you know, you've worked in practice. Do you think there are any other reasons why that's not funded particularly well for research generally?***

*P206 – I think it's to an extent, it is the profession that is actually growing if you want to look at it.*

In some cases, particular research interest areas might be deemed less attractive to fund research in than others. OT funding in practice was identified by one HEI participant as being unable to keep up with the growth in the profession. These decisions might also be affected by cultural, political and societal imperatives.



## Logistical barriers

### Ethical challenges

*I would've loved to have captured the voice of the children and families that we were working with, but that wasn't really something that we're encouraged to do or, you know, we were told that ethical approval would be you know, basically a logistical nightmare and therefore we wouldn't be able to do it [laughs]...so that's one aspect of it... [P100 FI]*

*[talking about mental health research]*

*I think for the sort of yeah, how you can then talk to a young person about that. It's much more difficult. You don't want to trigger them. You don't want to look, open a lid and not be able to put the lid back on afterwards. So...the support that people need around talking about mental health and getting their opinions on it, it's, it doesn't stop as soon as you've finished your, you know, questionnaire or interview. So that's-I think that's quite big issues there of how to, then the sort of aftercare that someone might need. [P109 FI]*

Ethical considerations could prevent particularly interesting topics from being investigated. During study, Masters project timelines for service improvement topics (when considering the time required for seeking ethical approval) had prevented some interesting areas from being researched. For practitioners interested in research, some of these areas – like researching children and families and mental health topics - might help to transform services but there might be an element of power imbalance, if researching people who were also dependent on the researcher for services; or a particular time when it was not considered appropriate to research; or, when longer aftercare for some participants might need to be considered if the research caused or triggered certain thoughts, feelings or behaviours in participants after completing a questionnaire or interview.

### HEI challenges

*[apprenticeship numbers]*

*...[university location 2] someone told me earlier this week that they'd only supported two people onto the apprenticeship pathway in post docs yeah, and when you think of it's, you know, young qualified new child and adult social care workforce, that's actually poor really isn't it? You know, it's like...so it's all very well having these pathways but if people can't access them.... [P208 FI]*

*[HEI links (and lack of)]*

*Although I do know of colleagues that are at-have actually got really good relationships still with some of their tutors through university. [P109 FI]*

*...where I've worked previously maybe we've worked in partnership with the university or with another organisation like [organisation name] or something, where we've been able to properly plan, identify what the research will be, what the outcomes, you know what we hope to achieve. And measure it in a much more...[thinking]...you know, in a much more analytical way...and accurate way. [P101 FI]*

*...where I've previously worked is that some of the university researchers – and I know it's more difficult now because so many people are working from home – but there was more of an sort of almost like an outreach presence. And so discussions were held in the workplace that made it sort of more of a focus at work. [P101 FI]*

Three particular impacts of a lack of HEI links were noted by participants. Forming post qualification links with lecturers could formulate and encourage research positive attitudes

once a student practitioner had graduated. Less so, if these links were not maintained. Secondly, in current roles where working in partnership with HEIs was not occurring, this made it more difficult to plan projects without experienced guidance and therefore measure and highlight any outcomes of success or failure in an accurate way. Thirdly, a lack of an outreach presence, which one participant had previously benefited from - where researchers from an HEI connected with an LA in a previous role to help form a research friendly relationship - had proved a stumbling block in comparison when this did not occur.

Concerns were also raised by one participant about the low number of apprenticeships supported at the previous HEI where they worked, raising questions about how accessible these routes actually were in practice.

### **Procedural challenges**

*...maybe it's not understanding what the process would be ...to actually start that. To actually really consider it. I suppose as well it would be, at who would I sit? I don't know who I would sit down with to say whose responsibility or who would benefit from knowing this? [P108 FI]*

For some practitioners new to research or not experienced in research, knowledge of the procedures and policies concerning how a project was initiated; who to obtain sign off from on particular aspects of research projects; the ethics requirements needing to be met; how funding was obtained; and how the potential values of the research results could be measured and communicated within a LA environment were not easily accessible (see also *Organisational barriers - Lack of an embedded research culture*). The grey area where healthcare met social care, was one place where this might particularly apply.

### **Project complexity**

*I mean I don't know if some of what we were you know, encouraged to do or discouraged to do related to the time that we had to do our projects. You know...that may have been, so it might be that if I had a greater understanding, it, you know it might be possible. [P100 FI]*

During study, Masters project timelines for service improvement topics (when considering the complexity and logistics of some research topics) had prevented some interesting areas from being researched. In some cases, academics might encourage or discourage certain avenues for this reason. Equally, when in practice the need to hit quick deadlines for proving research project value might preclude weightier issues from being considered initially, if at all.

### **Service users**

*[practice challenges]*

*I think the only aspect is gaining access to vulnerable groups for research purposes, whilst protecting their health and wellbeing. [P202]*

*...and I think we tend to bring in service users to facilitate, stuff after the event yeah...and to say 'Oh yeah, we're talking to service users', but actually I think they should be involved in the design and of innovative*

services... [P208 FI]

Patient and public involvement barriers included being able to obtain access to vulnerable groups for research purposes – such as those with capacity issues or obtaining a reasonable sample of participants due to unreliability in some cases. Additionally, the low numbers of research projects involving service users which were currently running and some of those not involving service users at an early enough stage of the project. Responses to the question ‘Does your organisation employ service users or unpaid caregivers as researchers or to help with research activities?’ where only  $n=5$  practitioners said yes (equating to 22.7%), suggest that this situation could be improved.

## Research skill barriers

### Confidence level

*I think I've thought about that...it would...about what the outcome would be for me, sort of, you know professionally and personally. I think had I of been able to have felt more confident at post grad level then maybe I'd view it a bit differently [P108 FI]*

***I - So, the clear path you took to get to your current position, you haven't really done any research, as a part of academic work to get to a Masters level.***

*P109 – No, no. It was just yeah, that and the qualifications and the interviews and things...at the, you know, more research parts of that.*

*I think it's needing those whole basics about, you know, just introduction of what research is and what you can do. And you know, what you're allowed to do. The ethics, all that sort of things. And, you know, the ethics of it interests me anyway, so yeah, it's just needing all those basic areas before I think any of us can actually think about specific topics. [P109 FI]*

*[erosion since graduation]*

*Once you then step out of there and into your role, if you're not approached, or if you're not an individual who has a real keen eye on research, I think, you know, I don't think it's as prominent as it could be. Because how do you take that, how do you continue that journey and that prioritisation of research being part of your role? [P118 FI]*

*[Lack of confidence to pursue further HEI Training]*

*I had hoped that I would be able to go on and complete a full Masters...but with all the will in the world, I am not as academically brilliant as I'd like to think I am [interviewer forename]...[laughs]...So I didn't feel strong enough academically to sort of take on the independent study element, which is what you have to sort of bolt on to, to the post graduate diploma in order to make it a Masters in I think it's Advanced Mental Health Practice. [P108 FI]*

Confidence in individual research abilities varied in participants with 43.8% of those participants interested in research ( $n=16$ ), confident in doing research ( $n=7$ ). Reasons for this lack of personal confidence included the past qualification pathway they had undertaken - where a lack of exposure to elements of research training precluded them from feeling confident. Or a lack of skills usage in this area since starting work in an LA and the need for

revisiting certain aspects of research knowledge prior to initiating projects. A suggestion to address this was for the creation of a research skill module which could be used as a refresher.

Pursuit of further HEI training (at a Masters and Doctoral level) was sometimes discouraged by the individuals own view of their academic skills (see also *Cultural barriers – Social care versus academic*). This might apply if they had only just passed at a Degree level and therefore viewed a step up in level as one step too far. Research wording on some academic level opportunities (such as doctoral opportunities) was also suggested as being off-putting, if potential applicants weren't particularly confident in their own research abilities.

### **Lack of mentorship**

***I - ...but at the same time they're not really in a position to know who to, you know, talk to, to maybe get that...***

*P200 – Yeah.*

***I - ...you know, get that mentor figure...***

*[Mentoring]*

***I - ...you'd said you'd be quite happy to maybe mentor others, you know, in terms of offering support for them...***

*P200 – Hmm.*

***I - ...for projects in Wessex.***

*P200 – Hmm.*

*[doctoral]*

*I have extensive experience of supervising PhD students to completion and acting as an internal/external examiner to Doctoral students and would wish to offer this to people within the Wessex research community.*

*[P208]*

*[What would encourage future research]*

*Research mentor [P121]*

A lack of mentorship once a student had moved into practice after graduation was identified as a barrier by one HEI participant. Of the 8 (of  $n=22$ ) practitioners who were interested in helping to support and promote research within the Wessex region, ( $n=2$ ) were interested in acting as a mentor (equating to 25% of those interested in supporting research and 9% total participants). However, our study uncovered no examples of mentorship actually taking place by experienced practitioners.

Similarly no HEI academic staff were currently supporting any Wessex based practitioners who required support/supervision, although they were supporting doctoral students elsewhere in the country. In addition to time constraints and existing demands on their role, another barrier noted in terms of ability to provide support or mentorship was that an academic might be at too early a stage of their career to consider this. Of the 7 (of  $n=9$ ) HEI participants who were interested in helping to support and promote research within the Wessex region, ( $n=3$ ) were interested in acting as a mentor (equating to 42.8% of those interested in supporting research and 33.3% of the total HEI participants surveyed). Only 3 (of  $n=9$ ) HEI participants (33.3%) said

they had previously provided support for research projects and/or staff within the Wessex region since joining their organisation.

Both areas highlight a disconnect between the ability to link Wessex HEIs and experienced practitioners who want to mentor with practitioners who might require their support/supervision.

### **Knowledge of research (career pathway gaps)**

*...I think they should give, you know, some sort of module on what training methods are, in the ethics of training. Research, sorry. And you know, give people the chance to sort of discuss that and what they would like to see in the future, because obviously, it's just very focused on doing the job and understandably...but some ideas of maybe, what people might want to do in the future and how they go about that, especially once they are in work. How would you then access some sort of research grant, job, whatever it is? [P109 FI]*

**I – ...if you go back to sort of like your previous qualifications did you, did you have any research elements in those?**

*P109 – No, that would have all just been academic essays and things like that...really...*

**I – And I suppose it's possible, that part of that is because if, if say you've done a, a particular BA or BSc course, that might have a research element, so maybe when you're coming to the Masters level, they might think 'Oh you might have already had that'...**

*P109 – Yeah, yeah, which a lot of them did. So many of them had come...from psychology courses.*

Participant routes to get to their current role might not always have included a pathway that included exposure to research training – sometimes due to taking different subjects at Degree level like Law or Psychology, before then transferring into social care. Therefore one barrier inexperienced practitioners might come up against was if their knowledge of research wasn't strong enough to give them confidence in this area. One suggestion to address this was the creation of a research skill module used for basic skills training.

### **Knowledge of research (HEI training gaps)**

*[Curriculum development]*

*...it's nothing to do with me, I came in as an Associate lecturer at [university location 4]...with a course already designed. You know, so I haven't really had much input in that. [P208 FI]*

*...I said one of my interests is social pedagogy, yeah. Which it, does exist in the UK, but is marginalised really, yeah. And one of the things that if you introduce social pedagogy into adult social care, which hasn't really been introduced to, is that you would release the skill level of the workforce, yeah. And would annually give them a pathway toward qualification, which is quite difficult to achieve, you know, even with apprenticeship degrees now... [P208 FI]*

*[apprenticeships]*

**I - ...the apprenticeships, is there, is it all around practice or is there any research based element to the training that they receive? Do you know?**

*P118 – It's...[thinking]...it's an area I, I would say we really do need to work with HEIs on...and be a bit more specific around lifting research into the space of, of, of social work training, as an equal to practice. So I would say it's a weakness, but I don't think it's a weakness just for [locality 3], I think it's a weakness why we're talking today actually isn't it?*

*[talking about research element]*

*But it does boil down to, having the capacity and the resources to be able to effectively engage with research. Part of it is, part of it could be built into the training, the apprenticeship, the social work training programme, I think, to really lift it into a space where it's recognised and have a responsibility. But the other element of it in terms of 'How do we continue that?' is about having capacity within the system to be able to deliver it. [P118 FI]*

*[talking about degree undertaken]*

*But it was part of the dissertation, which was quite useful actually, so it was built in, and I think I was encouraged to, more and more to focus on that which I'm not sure you get within the apprenticeship [interviewer forename] do you? I don't think you get the opportunity to do, as an in depth piece of work as what you might have done. [P118 FI]*

*[foundation]*

*...but I do think that I notice like a real difference between so we have an- like I'm saying this as somebody who did my kind of foundation with the [training provider]...but what I do notice is that the courses that the [training provider] run and we actually have our in-house programme is an [training provider] one, to enable our family workers to progress to being social workers if they want to. But I think within [training provider], they provide all the research materials. So I do think that in terms of kind of actually finding research that is current, that's applicable, you know there are some skills gaps sometimes there with certain cohorts of social workers. [P100 FI]*

*[Degree]*

*...so I think that there is you know, a lack of skill, because social- you know obviously you're social work degree, you know, you might run some surveys or do things like that but it's not really, I don't think it's you know, research based in, in terms of actually, you know completing research and designing research and questionnaires and all of that type of thing. It wasn't when I you know, did social work. I don't think it's probably changed that much. [P100 FI]*

*...it's the one unit were we've had a lot of comments, concerns raised that our qualifying degree social work students don't necessarily have the basic knowledge of the what are called 'bread and butter' pieces of legislation for social work [P204 FI]*

*...certainly at the beginning of our third year when we were preparing for our special interest study we had lots, I wouldn't say lots, I would say several sessions, because I think we only had eight weeks of learning in our third year, as in classroom learning...kind of about how to analyse research, the, we, you know, the development of a piece of research, but our role in terms of producing that piece of work wasn't to devise our own piece of research. It was to critically analyse other people's research, so I mean I suppose it, it maybe, you know, one and the same thing but it felt like it, it was a critical analysis of research. As opposed to then, finding a gap or creating a different, you know, hypothesis and then developing a piece of research from then. [P108 FI]*

*I think if it's not, it's something that needs to be lifted back into that maybe final year space, there's some opportunities there really, to focus on local, local need, local research. And sort of try and plug that into specific topic, research studies on that final year for students maybe. [P118 FI]*

*[talking about degree undertaken]*

*...thinking back and you know, this is what fifteen, eighteen years ago, but you made-you commented on it then and I was straight back to looking at my dissertation in my mind then and I really did, I really did, you know, absorb myself in it and enjoyed it. And, you know, it's made me question whether that is part of any studies now. I don't think it is... [P118 FI]*

*I think that's uneven to be honest. It depends on the university, I think one of the issues for [university location 4] is that final year research unit is based on a poster presentation and a two-two thousand word literature review. And personally, I don't think that's enough to develop their research skills... [P208 FI]*

*[Masters]*

*No, we didn't, we had- our dissertations were just literature reviews...which, you know, a lot of us were disappointed about. We had been expecting to do some sort of research but, but it wasn't. It was just a basic literature review. [P109 FI]*

*[talking about dissertation length – not enough]*

*...and for the Masters it was eight to ten thousand... [P208 FI]*

*...it...the research aspect of it as in all of the reading, was something that I'm kind of used to doing so I don't think that that was a struggle. The struggle was having the time to get my head around new concepts, so, you know, for example, as a part of the service improvement, you had to do things like GANTT charts... [P100 FI]*

*I think before I started the – my AMP training which we- so we did the post graduate diploma. It was five and a half months. Pretty intense. Both in the classroom and in practice. I think prior to that [P108 FI]*

*It's got a different umbrella term, but there's a specific, I think it's a sixty credit unit. Yeah, two thirty credit units and you know, on reflection, I was really glad that I passed my AMP training. But, I only just passed. And I'm happy with that. Because actually it doesn't matter in Practice. It doesn't matter what marks you get. [P108 FI]*

*[any other comments concerning research capacity and your experience of research]*

*The universities should educate us more on it whilst completing our BA/MA [P109]*

*...so there is something I think we need to do nationally around that Advanced Practitioner role and you could even have an element of research built into that. [P118 FI]*

Discussions from participants around routes to progress to current roles included the many potential gaps in research skills which they had noticed via HEI routes (whether by structured or ad hoc pathways). It is noticeable that many practitioners might have progressed to senior positions with no exposure or limited exposure to research due to their historical qualification route.

Pre developed curriculum could have a negative impact in the view of participants if it did not contain certain key elements of learning – which might include a low research percentage, or contain a lack of innovative research positive methodologies – like social pedagogy.

At an Apprenticeship level, the depth of research skills included as a part of the structure of current apprenticeship training was queried. Or, whether this element could be successfully incorporated in the future. This was seen as one way in which research approaches and skills could start to be embedded at the ground level of social care staff within an LA. At a Foundation level, one participant thought the standard of research skills taught online was lacking in comparison to face-to-face HEI equivalents, regarding applicable current research in the area.

At a Degree level, some participants felt the research skills components taught were quite light touch – perhaps due to their brevity - in terms of knowledge transfer. Another gap in knowledge was described by one HEI participant, who noted that qualifying degree social work students were short on knowledge of ‘bread and butter’ legislation.

There were also comments that more research elements would have been helpful at a Masters level, as students had been disappointed with the length of this taught aspect due to the condensed nature of the course. One participant suggested that the Advanced Practitioner role could have an element of research built into it. Challenges at a Masters level were also mentioned in relation to the steepness of the change from previous levels of learning and the levels of intensity of some types of the training (like the Masters in Advanced Mental Health Practice) over a shorter period of time. Also, the service improvement aspects which were taught and unfamiliar in concept, were more complicated to understand when compared with other previously taught topics.

Ceasing HEI training before the final top up unit to obtain a Masters was taken - which could contain a research element, like a service improvement project - was another potential gap in obtaining research skills. This meant that knowledge of research might not therefore be strong enough to give them confidence to pursue research opportunities or applications at a later date.

As with career pathway gaps, a suggestion to address HEI training gaps was the creation of a research skill module which could be used for basic training or as a skills refresher.

### Access to research barriers

#### **Subscriptions (Other)**

*[No Membership]*

*No [P112]*

*No [P114]*

A variety of other subscriptions were described, but some practitioners interested in research did not currently subscribe to any mailing lists.

### Research support barriers

#### **Application barriers**

*[two strikes]*

*...if somebody hasn't got the goods to pull it together in two attempts then I don't know that they are gonna be able to do it in a third attempt... [P107 FI]*

*[Needs more development before submitting]*

*So...I didn't put in an application in the end. [P107 FI]*

*P107 -I didn't miss the deadline, I was advised not to put...*

***I - to wait***

*P107 - to wait. Yeah*



*[Effect of COVID-19 on ability to apply]*

*What was disappointing was that, it was kind of agreed that for the following year we would have all these meetings and it would be set up so that I could apply the next year. Well of course COVID happened. Yes I, that to me shouldn't have stopped the process. And it didn't particularly. [P107 FI]*

*[Reliance on others during application process]*

*I did the full application my-all the bits that I could do. [P107 FI]*

*[LA delays - Managerial]*

*...I had to keep pushing it with my, with the local authority and my managers. My managers were all 'Oh, we're so jealous. We'd like to do a PhD as well. Well done!'. But then wouldn't kind of take it forward within the, the council itself. So I didn't get the nod to go ahead and do an application from them 'til very late. [P107 FI]*

*[LA delays - Administrative]*

*Also, [LA location 3] council hadn't looked-got, got in contact with the finance people to make sure that that backfill would work. [P107 FI]*

Four particular research application barriers were described. Although the NIHR Fellowship 'two strikes and out' approach was deemed to be an acceptable risk (and had not put them off from applying) by the only practitioner who had participated in the application process, they conceded this might be a barrier to application for some. Both from the limited applications which could be made and the necessity of spending a long time in producing a quality application. Secondly, COVID-19 had impacted on the ability to apply in a timely manner and subsequently the support coming from their organisation to pursue the application post-COVID-19. Thirdly, time outside of core time was required to be able to submit an application as this couldn't be achieved during working hours. Finally, reliance on others within the organisation had impacted on the ability to proceed with submitting an application and had caused frustrations and required a lot of internal chasing, at both a managerial and administrative level.

## Discussion

The aim of this evaluation was to develop a better understanding of the challenges of building capacity to undertake social care research in the Wessex region and the opportunities for building research engagement and capacity.

Data paints a picture of practitioners who might be positive towards research facing many hurdles to influence or help build research strategy, advance their research skills and embed research into practice. Opportunities for development might not be reaching them unless they look in the right places or hear about something through the grapevine. Service pressures, COVID-19, societal and political imperatives, the view of social care against the view of health as a poor relation - in terms of research funding, access to journals and perceived research support as examples - and a less defined career pathway - in both becoming a practitioner and frameworks within LAs to develop as a research friendly practitioner - are just some of the obstacles. This picture is further muddled by autonomous LAs whom have seemingly different

approaches to strategies around policy and research versus maintaining day-to-day services in a severely restrictive financial climate.

In the short term there are five areas where resources could be focused on helping to improve the current picture:

### **Contact**

*In an incredibly busy and stressful environment practitioners might not be in receipt of information or opportunities which are sent through traditional internal email systems or reside on static websites. These messages do not always get through to reach them.*

Even in terms of publicising the surveys for this project, the research team encountered many difficulties in actually being able to contact the people whom we needed to complete the survey and be interviewed. Innovative methods of direct contact – such as connecting through LinkedIn for study recruitment (see also Stokes et al., 2019) - proved much more effective as a recruitment tool than via email, blog and twitter posts about the study. In addition to contacting participants about research, this method of online forum or social media platform offers positive opportunities to form and maintain more direct channels of communication with those looking for information, inspiration or support.

### **Encouragement**

*LAs and senior management need to be encouraged to view research as an essential integral part of the social care sector. This includes supporting pathways for career development, allowing time for research and promoting embedding research into practice. Research should not just be seen as a solely academic pursuit or luxury.*

Factors which might influence an LA to allow research training opportunities included the need for tangible outcomes for services and the LA, senior leadership sign up and a strong collective voice from numbers of practitioners. The PSW was identified as a key role in progressing research within an LA (with the caveat that this might not always be possible due to organisational drivers). We should proactively look at ways of influencing these areas, by engaging at all levels of the LA network. This could include providing training and sponsoring visible 'research champions' within LAs and/or making more use of the embedded Researcher in Residence model (Marshall et al., 2014), by either sponsoring or co-funding positions within LAs. Utilising these methods for promoting existing good practice seen in other research positive LAs and highlighting the tangible benefits of embedding research into practice could help to improve the research culture, alongside support from research active HEI academic staff.

## **Support (Applications)**

*Practitioners interested in Fellowship/LA SPARC applications would benefit from more support before and during the process (NIHR Research Design Service Blog, 2020).*

Practitioners might be interested in making Fellowship applications if they can link up with mentors for the process who might be able to encourage them (if they doubted their own abilities), or potential supervisors at an early opportunity. Mentors/Supervisors might also need to positively encourage practitioner management in LAs to support and engage in this process, explaining the tangible benefits to the organisation.

## **Support (General)**

*Research positive practitioners exist at all levels in LAs and would benefit from more support.*

A strong theme running through the data is that there are many practitioners who are interested in research, in progressing through Masters and Doctoral study and who have valid, useful ideas about projects which would directly benefit practice, but who are having trouble negotiating the barriers which currently exist where they work. Also, unlike neighbouring disciplines such as sociology, psychology and social policy, there are still no professional bodies in the field of social work in the UK that provide support for doctoral students or early career researchers (Morriss, 2018). Research positive practitioners need to be nurtured and there also needs to be some way of keeping them from immediately moving on to an academic career once they achieve the highest level of qualification. Churn in the social care sector is well known and this makes the picture even more complicated. Indeed, many participants to the Skills for Care overview last year (2021) noted that recruitment and retention was now more difficult than before the pandemic.

## **Improvements to practitioner research training**

*Practitioners who had not been sufficiently educated about research might not have an appreciation of its value to their practice and lack knowledge and skills to conduct research in practice.*

This could lead to a lack of confidence and be the reason for a reluctance to engage in research in the practice setting (Goel, 2018). In order to fully bridge the research-practice gap there is a need to facilitate new partnerships between HEIs and LAs with a view to strengthening research capacity (Vincent and Hamilton, 2021). One area highlighted in this study is that more collaborative work could be undertaken in mapping research elements across the numerous different training pathways which social care practitioners access. This would help to identify where more research components could be added or existing components revised and expanded upon. Another suggestion was for the creation of a research skill module (used for basic training, or as a refresher), which could be accessed remotely or face-to-face.

Regulatory changes were seen as enablers for helping to embed research into practice. This might include more research positive requirements within annual practitioner registration. For

2022, to meet CPD requirements for re-registration, social workers must record a minimum of two pieces of CPD (Social Work England, 2022), including at least one with a peer reflection during the current registration year. For CPD this means describing what they have learnt from doing a CPD activity and reflecting on and describing the positive impact the CPD activity has had (or will have) on their practice and the people they work with. For peer reflection, this means describing what they have learnt from discussing the CPD activity with a peer. Lobbying for and eventually making changes to these areas to include more focus on actively embedding research into practice, would be one way of addressing the research skills issue. Albeit there would be huge logistical and procedural challenges in effectively moving this forward.

## Conclusion and Recommendations

For practitioners, the barriers currently outweigh the enablers in effectively building social care research capacity within Wessex.

### Recommendations - Contact

- Consider the current use of social media by the NIHR (such as Facebook, LinkedIn) to raise awareness of Wessex wide research funding opportunities and scholarships via direct contact with social care staff (in addition to traditional email pathways), which might provide alternative channels for reaching intended targets.

### Recommendations – Encouragement

- Consider sponsoring interested research champions within LAs at not just a PSW level but also with ground level practitioners to start to build a cohesive collaborative research voice.
- Consider offering to sponsor or co-fund embedded Researchers in Residence to support and promote the development of a research culture within LAs.
- Engaging with senior LA management about how they can benefit from a positive research environment and explain why research is not a luxury but an essential component.
- Sharing good practice of UK wide examples, where embedding social care research into practice has made a difference.

### Recommendations – Support (Applications)

- Consider creating regular opportunities for interested practitioners to meet up with potential mentors or supervisors for Fellowship applications in an online environment (whether by online meeting, forum or questions posed via email, which can then be answered in a podcast or other recorded response).
- Consider innovative ways of promotion to ensure a wide variety of practitioners are aware of the opportunities.
- Mentors/Supervisors/LA Research Champions/NIHR Representatives engaging more/interceding with senior LA management on behalf of practitioner applicants to explain tangible benefits of supporting staff members during the application process.

### Recommendations – Support (General)

- Consider whether the NIHR can fund temporary access to research journals currently locked off from LAs to see if this is one way of increasing interest in research articles.
- Alternatively investigate options for the NIHR to host an open access journal focusing on a range of new and existing social care research.

- Consider creating regular opportunities for interested practitioners to meet with researchers and other research positive practitioners in Wessex in an online environment (whether by online meeting, forum or questions posed via email, which can then be answered in a podcast or other recorded response).

### **Recommendations – Improvements to practitioner research training**

- Investigate regional HEI and non-HEI training provision and elements of research included (at Apprenticeship, Foundation, Degree, Masters levels) to see if when mapped they need to be revised or can be expanded.
- Lobby for more research elements to be included in annual professional registration for social workers and other health care professionals working in the social care sector going forward.
- Initiate scoping and development of social care research skills modules by HEIs which can be used for basic training, or as a refresher (online or face-to-face).

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