Improving the quality of life of people receiving health and social care services through applied research

The National Institute for Health Research (NIHR) is the nation’s largest funder of health and care research and provides the people, facilities and technology that enables research to thrive. Applied Research Collaborations (ARCs) support applied health and care research that responds to, and meets, the needs of local populations and local health and care systems.

The NIHR ARC Kent Surrey Sussex (ARC KSS) is one of 15 ARCs across England, part of a £135 million investment by the NIHR to improve the health and care of patients and the public. Led by Sussex Partnership NHS Foundation Trust and Professor Stephen Peckham at the University of Kent, the ARC KSS will focus on regional challenges including:

- Significant social deprivation, mainly located in our coastal towns
- Numerous GP practice closures resulting in a high GP to patient ratio
- Higher than average children in care, unaccompanied asylum-seeking children, and young people with self-harm and emotional problems
- A higher proportion of older people
- The highest concentration of people with dementia in the UK

Each NIHR ARC is made up of local providers of NHS services, local providers of care services, NHS commissioners, local authorities, universities, private companies, charities and the public. These collaborations work together to conduct high quality, generalizable, applied health and care research that addresses the specific health or care issues in their region. NIHR ARCs also act to close the second translational gap and increase the rate of which research findings are implemented into practice.

Message from the Director, Professor Stephen Peckham

“As Director, I am delighted to work with researchers from across our partner health and social care organisations and universities to develop much needed research to help improve services and train the next generation of health and social care researchers.”
**Our Research Programme**

### Social care: Person-centred, community-based social care

The demand for social care is rising as the population ages, whilst public funding has fallen in real terms. Demand for social care in children’s services has also increased, especially looked-after children in KSS.

The current evidence on the efficacy and cost-effectiveness of social care, and on care system organisation and funding, shows substantial scope for development. ARC KSS is also awarded national leadership for the ARCs in social care.

**Our Aim:** To undertake research on social care, and on how changes in service provision impacts on service users, their families, carers and others.

### Starting Well: Early detection and intervention of mental health problems in children and young people

Providing effective support for children and young people involves adopting practices that are right for the needs of local populations. New services and interventions are needed for young people with mental illness, yet available evidence is lacking.

There is a need to work across various agencies—NHS and social care services, schools and third sector providers—as a universal, one size fits all approach to intervention is unlikely to be successful.

**Our Aim:** To inform the early detection and intervention of mental health problems of young people through screening, providing the right support, and developing new, appropriate interventions

### Primary and Community Services: Sustainable and integrated care

The ARC KSS region has rapidly growing numbers of individuals with multiple complex conditions and faces social challenges, including homelessness and deprivation in coastal areas.

This places significant strains on GP practices and community services, exacerbated by problems of recruitment and retention of staff, with a high proportion of GPs and nurses due to retire within 10 years, high patient to GP ratios and surgery closures.

**Our Aim:** To provide sustainable care through service redesign and integrated care so people are supported to live well, manage complex multiple health conditions and reduce health inequalities.

### Dementia: Living well with dementia

KSS has a higher proportion of older people which is growing faster than the national average. The region also has a higher proportion of people with dementia. This places significant demands on primary and community services, as well as social care services and secondary care.

People with dementia are more at risk of preventable co-morbidities. This presents significant challenges when developing care services that combine prevention - from a health and social care perspective – with appropriate community-based care, treatment and support.

**Our Aim:** To advance dementia research through building research capacity and enhancing collaborations among researchers, and to translate findings to help people live well with dementia

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**CORE RESEARCH THEMES**

**Social care**

**Starting Well**

**Primary and Community Services**

**Dementia**
Our Research Programme

**Co-production:** Involving and working with patients and the public to co-produce and implement research

The NHS Five Year Forward View recognised the vital contribution of people and communities in shaping services. Co-production in health and social care involves service users co-designing services, interventions, or being actively involved in their own care.

**Our Aim:** To focus on the inclusion of patients and the public to co-design research to benefit:

1. **Health & well-being** including self-management, shared decision-making, innovation co-design
2. **Health and social care services** including governance and commissioning

**Public Health:** Improving health among older patients with multiple conditions and younger people at time of transition

We will prioritise local interventions to improve health and reduce service needs among older adults with co-morbidity, and younger people at times of transition.

Coastal communities of Kent and Sussex experience markedly worse health and wellbeing than other parts of our region, with high rates of mental health problems, obesity, smoking, alcohol and recreational substance use. Looked after children and unaccompanied migrant minors also form a substantial vulnerable population, particularly in Kent. These challenges predominate in areas relatively isolated by geography and are economic consequences of high unemployment, alongside very elderly populations vulnerable to isolation.

**Our Aim:** To produce new interventions and evidence that prevent adverse health outcomes in early, adult and later life.

**Digital Innovation:** Harnessing digital technology to help create a sustainable health and social care system

Digital innovations are required to address an ageing population’s health challenges. Out of hospital, they will require care from technology enhanced social and primary care services whose workforces and services are facing unprecedented pressures; digital innovation may be the only route for sustainable services.

**Our Aim:** To harness digital innovations in order to create a sustainable health system.

**Health and Social Care Economics:** Using best practice to fund efficient health and social care services of benefit to patients

Health and Social Care Economics research is a major ARC KSS strength. It supports commissioning and decision making within services, providing evidence to show effects and beneficiaries in different projects, costs and value for money. It will contribute to the dissemination of findings to policy makers locally and nationally, so that best practice can be adopted and funds allocated efficiently, benefitting service users and the public.

**Our Aim:** To ensure that Health and Social Economics is embedded in each of the ARC themes.
The ARC KSS Board is independently chaired by Prof Sir Nick Black. Members include higher education institutes, sustainable transformation partnerships, Academic Health Science Network, Clinical Research Network, primary care networks, public health, local authorities, NHS.

The Board meets 3 times per year ‘in public’. The next ARC KSS Board Meeting is on Thursday 6th February 1-4pm at the University of Surrey. Please contact us for more information if you are a member of the public wishing to attend.

The ARC KSS is funded by an NIHR grant to develop an infrastructure around our 8 research themes. Many NHS Trusts, health and social care providers, third sector organisations, emergency services, higher education institutes and charities have also committed to co-funding the ARC KSS to support applied health and social care research and/or implementation within the communities that they serve.

In addition the ARCs work collaboratively to address national research priorities, with individual ARCs providing national leadership in their areas of expertise. ARC KSS is the national lead for social care. This means that we are committed to delivering national impact in social care through strategic direction, driving collaborative work across NIHR ARCs in England and maximising efficiency and impact for the benefit of patients and the public, health and care services and broader economic gain.

Core activities

1. **Capacity building in health and social care research**
   To build and grow a sustainable research workforce with expertise, within both clinical and academic environments, that will inform and enable the implementation of research evidence into practice and the transformation of service delivery.

2. **Supporting research**
   To develop core and cross-cutting research themes, undertake research and support research initiatives across the region and act as leverage for additional research funding.

3. **Implementation**
   To embed implementation into all aspects of the ARC’s activities to ensure evidence is translated into practice.

Alongside this, we will provide support to ensure all our research engages with local communities, patients and the wider public.