

Report to Health and Adult Social Care Scrutiny Board

22 January 2024

Subject:	National Institute for Health Research - Health
	Determinants Research Collaboration Sandwell
Director:	Liann Brookes-Smith, Director of Public Health
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1 Recommendations

1.1 That the Board considers and comments upon the Business Plan for NIHR (National Institute for Health Research) Health Determinants Research Collaboration (HDRC) Sandwell to support the aim to strengthen research culture and infrastructure within the Council to improve the wider determinants of health and wellbeing.

2 Reasons for Recommendations

2.1 This funding provides us with a unique opportunity to progress our ambitions to use information and intelligence in a more strategic way to improve outcomes for Sandwell residents and reduce health inequalities over the longer term. The HDRC proposal has been supported by Senior Leadership Team and the Chief Executive, who was a co-applicant to the bid, and was approved by Strategic Finance and Cabinet.

3 How does this deliver objectives of the Corporate Plan?

3.1 The HDRC will align to our Borough-wide Levelling Up Programme (LUP), which will invest in affordable homes, improved skills infrastructure, better leisure facilities, an improved public realm, active



















travel infrastructure, social value and local spend, and local employment opportunities. The HDRC gives us the means to ensure that the LUP and related work across the Council is informed by evidence and robustly evaluated.

- 3.2 Meeting the objectives of the proposed HRDC programme will lead to higher quality of the services we deliver and commission, and more efficient investment to improve Sandwell as a place, including education, skills, employment, community cohesion, transport, housing, economy and the built environment which are the wider determinants of health, and the objectives of the Corporate Plan. Over the longer term this will lead to improved health outcomes and reduced inequalities in both physical and mental health across the life course, contributing to the Vision 2030 of a thriving, optimistic and resilient community.
- 3.3 The HDRC will therefore have potential benefits across all Corporate Plan priority areas (best start in life for children and young people; people live well and age well; strong resilient communities; quality homes in thriving neighbourhoods; strong and inclusive economy; and connected and accessible Sandwell) throughout the programme and beyond.

4 Context and Key Issues

Background

- 4.1 The National Institute for Health Research (NIHR) is the biggest funder of health research in the UK. They are providing up to £5 million of funding to a number of local authorities to establish Health Determinants Research Collaborations (HDRCs) in their local areas. Sandwell Metropolitan Borough Council (SMBC) was successful in the second funding round and our HDRC programme commenced on 1 January 2024, with a funding envelope of just over £5 million.
- 4.2 HDRCs aim to boost research capacity and capability within local government to embed a culture of always using evidence when making



















decisions. HDRCs use research findings to understand how decisions impact on health and health inequalities. They also carry out research where evidence isn't already available.

- 4.3 SMBC is the 12th most deprived local authority in England and life expectancy is 2-3 years shorter than the national average. Inequalities have been deepened by the pandemic, austerity and climate change, yet Sandwell's superdiverse communities, industrial heritage and green spaces are key assets. A research needs analysis in 2021 found a strong culture of evidence-based decision making in the Public Health directorate, but this was weaker across the wider Council. Existing structures and collaborations show commitment and potential to be more research active and evidence-informed, but limited capacity to take this forward.
- 4.4 Our proposal to form the HDRC (Better Research for Better Health) was developed in partnership with the University of Birmingham and the voluntary and community sector (VCS), represented by Sandwell Council of Voluntary Organisations (SCVO) and Sandwell Consortium. A range of internal and external partners were engaged in developing and endorsing the proposal, including the UK Health Security Agency (UKHSA), the Office for Health Improvement and Disparities (OHID) and Health Education England West Midlands (HEEWM). We underwent a competitive bidding process and received very positive feedback from peer review.
- 4.5 Our HDRC was one of 11 to be funded in this round, with a further 6 awarded development funding to become full HDRCs by January 2025. As of 1 January 2024 there were 24 live HDRCs nationally, including Coventry. There is an expectation that the total cohort will grow to 30 HDRCs, with an annual recurring investment of £30 million. We are committed to working with Coventry regionally and with other HDRCs nationally to share learning and maximise the benefits of our approach.

















HDRC vision, aims and objectives

- 4.6 The Sandwell HDRC will be based on the theme of Poverty and Cost of Living, aligning with the LUP to address the wider determinants of health and tackle systemic disadvantage in the Borough. A detailed Business Plan is attached (Appendix 1), with a plain English summary (Appendix 2).
- 4.7 The HDRC vision is to undertake evidence-informed, robustly evaluated activities that reflect the needs and values of our diverse local communities.
- 4.8 The HDRC aims to transform SMBC's research culture and infrastructure to:
 - Make the best use of empirical evidence to inform decision-making and investment
 - Robustly evaluate services to ensure quality, effectiveness and cost-effectiveness
 - Facilitate research activity with partner organisations and local residents
 - Effectively disseminate research outputs for wider influence
- 4.9 This will be achieved by:
 - Strengthening research and development capacity, resources and infrastructure
 - Embedding a strong research culture for evidence-informed decision-making
 - Developing robust systems and partnerships for cultural and knowledge exchange
 - Creating a community-led research culture

















HDRC workstreams, key deliverables and timelines

- 4.10 HDRC objectives will be delivered via four parallel workstreams:
 - Build capacity and infrastructure through workforce development and training; data science infrastructure for information sharing and evaluation; and research governance structures and processes
 - Embed research culture and evidence-informed practice by supporting translation of evidence into practice; embedding needs assessment and evaluation; and increasing use of evidence in decision-making
 - Strengthen systems and partnerships through academic collaborations for research and learning; structures and processes for wider system partnerships; and effective information sharing
 - Promote community participation through expanding PPIE structures; widening participation and representation in research; and facilitating engagement

The attached Logic Model (Appendix 3) shows how the workstreams will deliver the specified objectives and contribute to the Corporate Plan over the longer term.

- 4.11 The HDRC has a 5-year phased approach (see Gantt chart, Appendix 4):
 - Year 1: programme establishment and planning, setting baselines and training
 - Year 2: full programme commencement
 - Year 3: dissemination, review and growth, including first publications
 - Year 4: review and consolidate learning
 - Year 5: sustainability through designing and implementing an ongoing programme of activity

Collaborations and partnerships

4.12 The HDRC is a core partnership between SMBC, University of Birmingham and the voluntary sector, supported by wider collaboration and engagement. Partnership with Sandwell Council of Voluntary



















Organisations and Sandwell Consortium will ensure that local residents and community groups are represented and involved.

HDRC staffing and governance

- 4.13 The HDRC is a collaboration with UoB and the VCS, working with local and regional partners, and a pan-Council unit working across departments. The HDRC Board will provide strategic oversight, reporting to SMBC's Health & Wellbeing Board, Full Council and Cabinet via SMBC Leadership Team to provide updates, seek endorsement of key decisions and secure high-level strategic engagement.
- 4.14 A total of 12 full-time staff will be recruited to support delivery of the HDRC from the programme funding. Strategic leads from SMBC and UoB are existing staff members who have jointly developed the HDRC delivery plan and will lead on the development of the HDRC from the programme start. For new staff there will be flexibility in how and who we appoint, within the content of appropriate partnership arrangements as necessary. The attached Organogram (Appendix 5) shows how the HDRC will be embedded into the existing structure.

5 Implications

Resources:	Resource implications are contained within the main body of the report and in more detail in the Business Plan (Appendix 1). There are no requirements to match or continue any funding received for this programme.
Legal and Governance:	No direct legal implications arising from the recommendations. Successfully implementing the proposed HDRC programme would enhance current governance processes through improving how they are informed by local and research evidence.
Risk:	A risk assessment has been carried out and the Risk Register (Appendix 6) was included in the SIU appraisal documentation and with the report to



















Cabinet in November 2023. Key risks identified were failure to convene leadership groups and recruit new staff; insufficient capacity of internal leads to support the programme; low uptake of training and engagement activity; breaches of GDPR, ethical protocols; and safeguarding (linked to community engagement activity). Mitigations of these potential risks are covered in the HDRC business plan, including: continued engagement of key partners and stakeholders; dedicated budget for backfilling SMBC staff time, with early planning of recruitment campaigns; and timely development of processes and protocols for partnership working, research governance and ethical approval. **Equality:** An Equality Impact Assessment is attached (Appendix 7) outlining the equality implications of the HDRC programme. Overall it is likely that the programme will have benefits across a range of protected characteristics and other marginalised groups through using evidence and research to improve the quality of local services and initiatives focusing on the wider determinants of health and wellbeing, and the emphasis on involving local residents in shaping research priorities. Health and The HDRC will have a positive impact on health and Wellbeing: wellbeing and reduce health inequalities through improving the wider determinants of health – the conditions in which our residents are born, live, grow, work and age. It will achieve this through strengthening the use of evidence and evaluation to inform the services and interventions we deliver and commission as a Council, therefore enhancing quality and efficiency of investment. The HDRC will align to the Levelling- Up Programme Social Value: to ensure that this and related work across Directorates are evidence-informed and robustly



















evaluated, and reflect the needs and values of local
residents. It will therefore enhance the social value of
this work over the longer term.
No direct implications arising from the
recommendations. However, the longer- term impact
of this work in alignment with the Levelling Up
Programme is likely to have beneficial impacts on air
quality in the Borough through enhancing decision
making processes around improvements to the built
environment.
No direct implications arising from the
recommendations. However, the longer- term impact
of this work in alignment with the Levelling Up
Programme is likely to have beneficial impacts on
care leavers, particularly through enhancing work to
improve education, skills and employment
opportunities in the population.

6 Appendices

Appendix 1 - HDRC Detailed Business Plan

Appendix 2 - HDRC Summary

Appendix 3 - HDRC Logic Model

Appendix 4 - HDRC Gantt Chart

Appendix 5 - HDRC Organogram

Appendix 6 - HDRC Risk Register

Appendix 7 - HDRC Equality Impact Assessment

7. Background Papers

None

















