

Local prevention initiatives

Outline of a research project
funded by the NIHR School
for Social Care Research



Improving the evidence base for
adult social care practice

What works best in prevention at a local level and does robust evidence exist for the outcomes and benefits?

Recent government policy has emphasised a more preventive approach to adult social care. This aims to delay or postpone the need for more intensive care by providing support to people before a major crisis occurs. However, policy makers and local leaders have found it difficult to know how to do this in practice. Decisions about shifting spending towards prevention and the promotion of well-being have been hampered by a lack of formal evidence about what works best and which interventions are most cost-effective. As a result, authorities often make investment decisions locally, with little guidance on how to invest strategically.

Generating robust evidence about prevention is challenging and more bottom-up research is needed at a local level. In the current financial context, and faced with the significant demographic challenges ahead, there is an urgent need for good information. Local authorities will then be better equipped to reform their approaches and invest scarce resources to maximum effect.

This project

- will draw on practice-based evidence to explore local approaches to prevention and what impact these are having.

It aims to

- investigate the prevention investments made by local authorities, the rationales for their choices, and what outcome measures are used
- review the three most popular and well thought of service interventions in the light of existing literature and the local evidence
- contribute to a fuller understanding of local prevention services, their outcomes, sustainability and the processes underpinning this activity, including how investments are selected, monitored and reviewed for cost effectiveness.

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WHAT IS THE CONTEXT?

Prevention is a key feature of government policy in adult social care and beyond. Faced with a series of demographic, social and technological changes, the adult social care system has been asked to develop a more preventive approach as part of national policy agendas such as Putting People First and the previous proposal to develop a 'national care service'. Similar aspirations also led to earlier initiatives such as Health Action Zones, LinkAgePlus and Partnerships for Older People projects (POPPs). However, despite these policy developments, it has still been difficult to generate sufficient evidence around prevention.

Proving that something has been prevented is difficult in research terms, and the potential impact of preventive projects rarely fits political timescales. As a result, there is a lack of formal evidence about the efficacy and cost-effectiveness of preventive interventions.

Knowledge in the broad and complex area of prevention is much more fragmented and under-developed than it might be for a more focused and longer-standing area of policy and practice. Many Directors of Adult Social Services are therefore forced to develop their own approaches and to generate evidence locally.

Against this background, the project seeks to answer the question "What works best in prevention?". It focuses specifically on practice-based experiences of local authorities in the West Midlands, building on what findings do exist from earlier national pilot studies and initiatives. Rather than considering what local authorities should be doing (or arguing that there is insufficient evidence to act), this study looks at what authorities are already doing and what impact this is having.

This practical investigation of what is happening on the ground, and what outcomes data exists, will expand the evidence base about the experiences and decision-making about prevention within adult social care.

Evidence on prevention – the challenges

There are a number of reasons why it has proved difficult over time to establish a firm evidence base around 'what works' in prevention:

- some changes take a long time to become apparent (for example, the longer term impact of diet or exercise)
- it can be difficult to attribute causality especially over time given the range of other policy and practice changes underway all at once
- research evidence rarely addresses the counterfactual – what would have happened without the preventive intervention and would problems have been avoided in any case?
- there appears to be a bias in the research literature towards interventions that promote physical health, with less attention paid to the impact of social contact, involvement and engagement, and the opportunity to make a contribution to society.

HOW WILL THE PROJECT WORK?

The research will focus on the 14 local authorities within a region, which includes an appropriate mix of rural and urban areas.

STAGE 1: Evidence collection

The first phase of the project covers primary data collection and analysis. This initial research will capture both quantitative and qualitative aspects of local processes and practice using surveys and interviews. Questions to be answered include: How do local authorities approach and measure these prevention investments in terms of cost-effectiveness and sustainability? Are there other incentives for specific preventive investments? How do local authorities engage with partners to implement preventive activities?

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An initial survey will be undertaken with the 14 Directors of Adult Social Services to establish their approach to prevention and what interventions are well thought of. Up to three follow-up interviews will be carried out each time with individuals who plan and oversee preventive services, whether as local authority employees or within closely allied organisations (meaning up to 42 interviews in total). The interviews will focus on:

- the role of the interviewee in relation to the specified intervention(s)
- analytical tools used to measure the performance of interventions
- other influences on the popularity of particular interventions (for example, relevant national policies, availability of services locally or specific local user-group needs and/or preferences)
- the collection of existing local evidence around the intervention(s), including on cost effectiveness and outcomes for service users
- what other agencies/organisations are involved and how agencies work together to collect evidence and make investment decisions
- how and to what extent users and carers are directly and indirectly involved in the development of local prevention services, and what barriers exist to such involvement.

The follow-up interviews ensure that relevant local economic data can be collected, and provide the opportunity for further clarification of practices and rationales for investment decisions. The researchers will also gain detailed information on how local authorities are analysing the cost-effectiveness of preventive interventions, monitoring outcomes and addressing the need for sustainability.

This phase of the project will identify the most widely used and well thought of interventions, and select the three most popular ones. Common themes associated with planning and implementing preventive approaches will emerge during the analysis of the data. These themes will cover practices, difficulties and beliefs, and as they begin to emerge, they will be constantly re-tested against the evidence

available in the current literature in order to ensure that they provide a satisfactory explanation of the empirical data.

STAGE 2: Analysis of top three interventions

The analytical phase of the project will carry out a formal review of the three interventions, identified in Stage 1.

The published and grey literature from the UK on each of the three most popular interventions will be reviewed and synthesised with the new locally-collected data. Different types of evidence will be included, from peer-reviewed academic papers to material by practitioners and service users. Specifically the review will aim to explore and draw conclusions regarding:

- the extent of investment
- the extent of evaluation and monitoring activity
- the existing evidence of cost-effectiveness, user outcomes and sustainability.

The main focus of the research is the activity around prevention within local authorities. However, the question of how prevention investment decisions are informed by, and involve, service users and carers will also form a key theme. This includes the extent to which users and carers are directly and indirectly involved in the development of local prevention services, and what barriers to such involvement exist

Project publications

The project will produce an administrative report, two peer-reviewed papers, a note on methods and a findings document. The final report will be launched at a national event for social care researchers and managers, and abstracts of the research reports will be submitted to relevant professional and academic conferences. Accessible summaries of the research and findings will be made available to collaborating partners for wider dissemination, and the team will produce articles for the trade and academic press.

The project is also working with the national Social Care Institute for Excellence (SCIE) on ways of disseminating the research findings.

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HOW DOES THE PROJECT FIT THE AIMS OF THE SCHOOL FOR SOCIAL CARE RESEARCH?

The research will work towards preventing and reducing the need for adult social care by creating a fuller understanding of local prevention services, their outcomes and the processes underpinning this activity and evidence (how investments are selected, reviewed for cost effectiveness and monitored). The study has a clear aim of influencing and improving practice in adult social care through dissemination of new findings among established networks of policy and service planners.

In addition, and as suggested by peer-reviewers, the project team aims to submit a future and larger bid to the appropriate Research Council and/or charitable funders in order to develop this initial study. The intention is to build on this research to consider the outcome and impact of the most promising preventive approaches and hence contribute to the evidence around what works in adult social care. In this way, the project hopes to be used as a springboard for future research.

The Research Team

The Health Services Management Centre has a strong track record in delivering research with practical applications within adult social care. The Director, Professor Jon Glasby, will lead the research team for the project, with support from Dr Kerry Allen (research fellow) and Robin Miller (senior fellow). While Kerry is from a research background with expertise around preventative services for older people, Robin is a former senior social care and NHS manager with experience of managing services and implementing government policy.

The West Midlands Joint Improvement Partnership (JIP) will act as the advisory panel for the project, providing links and expertise in social care service improvement in the West Midlands. In particular, JIP will help provide access to relevant data. Denise Porter, the Deputy Regional Director of Social Care, is the national lead for prevention and early intervention and will contribute to the project in an advisory capacity.

Jennifer Francis at the Social Care Institute for Excellence (SCIE) will also support the project in an advisory capacity, including on the modelling.

Project title:
Local evidence of prevention investments, outcomes and sustainability

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Budget:
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