Est.	YORK
1841	ST JOHN
	UNIVERSITY

Green, Matthew ORCID logoORCID: https://orcid.org/0000-0002-8065-0446, Baker, Sarah ORCID logoORCID: https://orcid.org/0000-0003-4196-8950, Smith, Natalie and Laver Fawcett, Alison ORCID logoORCID: https://orcid.org/0000-0002-9924-1319 (2022) Supporting Health Improvement in North Yorkshire: Research Needs, Barriers, and Challenges of Local Authority Staff. Project Report. York St John University. (Unpublished)

Downloaded from: https://ray.yorksj.ac.uk/id/eprint/7139/

The version presented here may differ from the published version or version of record. If you intend to cite from the work you are advised to consult the publisher's version:

Research at York St John (RaY) is an institutional repository. It supports the principles of open access by making the research outputs of the University available in digital form. Copyright of the items stored in RaY reside with the authors and/or other copyright owners. Users may access full text items free of charge, and may download a copy for private study or non-commercial research. For further reuse terms, see licence terms governing individual outputs. Institutional Repository Policy Statement

# RaY

Research at the University of York St John For more information please contact RaY at <u>ray@yorksj.ac.uk</u>



# Supporting Health Improvement in North Yorkshire: Research Needs, Barriers, and Challenges of Local Authority Staff

Matthew Green<sup>1</sup>, Dr Sarah Baker<sup>1</sup>, Natalie Smith<sup>2</sup>, Professor Alison Laver-Fawcett<sup>1</sup>

<sup>1</sup>York St John University, School of Science, Technology and Health, York, YO317EX <sup>2</sup>North Yorkshire County Council, Public Health, Health and Adult Services, County Hall, Northallerton, DL7 8DD

# Contents

Introduction	5
What does the literature say?	6
Importance of research	6
Barriers to research	7
Research facilitators	8
COVID-19 impact	9
Research training needs	9
The Research Process	10
Research Methods	10
Ethical approval	10
Data analysis	10
Demographic Information	10
Key Findings	12
Frequency of research activity	12
Research skills	12
Research interests	13
Factors impacting research activity levels	14
The Impact of the COVID-19 Pandemic	14
Barriers to research activity	15
Facilitators to research activity	16
Future training requirements	16
<b>Opportunities for Development</b>	17
Overview of the findings	18
References	19
Ethical Approval	20
Author Statement	20
Funding Statement	20

# **Executive Summary**

This report was produced through a collaboration between North Yorkshire County Council (NYCC) and York St John University, to ascertain the research experience and interest of local authority (LA) employees. The aim was to explore the extent to which the LA workforce engage in research and to better understand what facilitates their involvement and what barriers and/or challenges they encounter. This research was an important scoping exercise for NYCC to gain valuable feedback from LA employees on the current research landscape and to help identify areas for future developments.

Existing literature suggests that engagement in research and evidence-based practice is beneficial for local authorities (Brownson, Fielding, & Maylahn, 2009; Lockwood & Walters, 2018). Research activity provides an opportunity to critically appraise localised issues faced by multi-sectoral organisations and promotes the implementation of innovative policies and practices (Brownson, Fielding, & Maylahn, 2009). Evidence suggests that co-production of research between LAs and academics enables localised public health policies and initiatives to be developed and implemented (Lockwood & Walters, 2018; McGee et al. 2020). Such collaborations are important and have the potential to produce empirically grounded locally relevant evidence to guide public health initiatives (Whitty, 2015). However, several barriers have been identified in the research literature that limit research activity. Key challenges cited by LA employees include time pressures, availability of and access to relevant literature, lack of organisational capacity and expertise, and financial constraints (Atkins, 2019; Curtis, Fulton, & Brown, 2018; Fynn et al. 2021a).

A mixed-methods case study design was utilised to capture both quantitative and qualitative data from LA employees via an online survey. The online questionnaire provided practitioners an opportunity to evaluate and reflect on their research experience as well as time to consider how NYCC could better promote research activity. Survey responses were analysed using descriptive statistics and content analysis for quantitative and qualitative data respectively.

Key findings from the current study reflect those identified in the existing literature, that despite there being interest among LA employees in becoming research active, the opportunities to do so whilst working in a multi-sectoral publicly funded organisation are limited. The LA workforce cited several barriers that prevented their involvement in research. These included lack of time, an organisational culture that does not prioritise research, and a perceived lack of research applicable to their practice. Notwithstanding these barriers, several research enablers were identified including collaboration with Universities on research projects. Such collaborations were found to provide greater access to funding, research literature, and the training required to develop the necessary skills to undertake research.

# Introduction

In England, local authorities (LAs) are positioned as the municipal networks for managing the delivery of essential public services for specific geographical locations (Fynn, Jones, & Jones, 2021). In 2013, LAs were granted responsibility for monitoring, maintaining, and improving the public health of their communities (Fynn et al. 2021). Responsibility for public health decision-making was handed to LAs following the introduction of the Health and Social Care Act (2012), with responsibility previously residing with National Health Service (NHS) Primary Care Trusts (South & Lorenc, 2020). Funding for monitoring and delivery of LAs' public health services is provided by an annual public health grant from the Department of Health and Social Care (DHSC) (McGee et al. 2020). Following the reform to public health decision-making, LAs have become responsible for commissioning and promoting public health service improvement initiatives (Buck, 2020). One such initiative involved facilitating opportunities to work across departments and directorates to address local population health needs and key determinants of public health (Jenkins et al. 2016). However, several challenges have been identified concerning how best to monitor public health interventions acknowledging that local reliable evidence is required to guide future public health policy and initiatives (Dorling et al. 2015).

Employing research and evidence-based practice to support public health policy decision making is widely recommended and provides an opportunity to better understand issues through critical appraisal ahead of implementation (Brownson, Fielding, & Maylahn, 2009). An emerging trend in public health research is the co-production of knowledge between LAs and academia, often facilitated through embedding academics in LAs to support research (McGee et al. 2020). Moreover, the co-production of public health research has been cited as a particularly useful springboard upon which localised public health policies and actions can be developed (Lockwood & Walters, 2018). However, despite widespread agreement that empirically based evidence and academic involvement is beneficial to public health officials (Whitty, 2015), a recent scoping review suggested it is being underutilised by LAs, citing its global nature and failure to address localised issues (Kneale et al. 2017).

Consequently, LA decision-makers seek alternative guidance, including expert opinions, anecdotal evidence, and local evaluations of unknown quality and reliability (Kneale et al. 2017). Further barriers to research activity in LAs include time pressure and constraints, access to and availability of relevant literature, lack of capacity and expertise amongst the LA workforce and a lack of ring-fenced budget for research (Atkins et al. 2019; Curtis, Fulton & Brown, 2018; Fynn et al. 2021a). Notwithstanding these challenges, there remains enthusiasm for drawing on research evidence to guide public health decisions within LAs (Atkins et al. 2019; Kneale et al. 2017). This study contributes to our understanding of the research landscape, relationships and processes that underpin the accessibility, utilisation, and generation of research within a LA in the North of England. More specifically, the project will explore what barriers, challenges, or facilitators LA staff encounter in their research endeavours to monitor and improve public health.

# What does the literature say?

Published research in the field of LAs have largely focused on a few broad factors effecting public health, of which research activity is one subtheme. Having adopted a collaborative participatory action research approach to explore research activity in a LA in the South-East of England, Fynn and colleagues (2021a) concluded that there were clear benefits for LAs and similar organisations as a result of the initiation and embedment of research practices. Benefits included: making better use of stakeholders' transferable skills, addressing previously missed opportunities for knowledge exchange and greater efficiency in collaborative practices (Fynn et al. 2021a). Nevertheless, despite the importance placed on public health in the United Kingdom (UK) (Fynn et al. 2021), there is a dearth of literature that explores LA employees' experience of and involvement in research. Existing evidence highlights several key factors associated with research activity in LAs, each are considered in turn:

- Importance of research
- Barriers to research
- Research facilitators
- COVID-19 impact
- Training needs

### Importance of research

In recent years, our understanding and appreciation of how factors such as resources, individual capacity, organisational capacity, and organisational structure can act as a barrier or facilitator to research activity has grown (Fynn, Hardeman, Milton, & Jones, 2021b). Further consideration of the extent to which research practices are embedded within an organisation and the development of a 'culture of evaluation' or 'research cultures' is an area of research garnering academic interest (Schwarzman et al. 2018). A project to explore research culture in a LA in England undertaken by Fynn and colleagues (2021a) discovered that key stakeholders within the organisation emphasised the importance of research with regards to the development of public health outputs. Examples of outputs developed because of LA research evidence include, service improvement and development plans, public consultations and practice evaluations (Fynn et al. 2021a). Fynn and colleagues (2021a) also indicate there is strong evidence pointing to the embedment of evidence-informed service delivery among research active organisations. Similarly, South and Lorenc (2020) cite the importance of research in LAs, in particular the importance placed on systematic reviews in public health decision-making. Systematic reviews are considered an important source of evidence for public health practice as they synthesise existing research and, in doing so, provide a more reliable synopsis of intervention effectiveness (Kite et al. 2015). Public Health Practitioners (PHPs) in South and Lorenc's (2020) study strongly advocated the use of research evidence to guide public health interventions. The utilisation of systematic reviews is valuable for PHPs. However, the extent to which the LA workforce have the necessary skills to access and understand the information contained within is uncertain (South & Lorenc, 2020).

#### **Barriers to research**

Despite consensus that research is beneficial for LAs to improve public health, there remain several challenges and barriers to research participation that LA employees face when planning, conducting, and disseminating research. One such challenge faced by LA staff is multi-sectoral working, often leading to missed opportunities for shared working because of differing departmental objectives (Fynn et al. 2021a; McGee et al. 2020). Having explored key stakeholders' thoughts through semistructured interviews, Fynn and colleagues (2021a) assert that LA employees encounter challenges in utilising transferable research skills across project teams and departments. Fynn and colleagues (2021a) further explain that such challenges often led to missed opportunities for shared learning and arguably contributed to discrepancies in knowledge and research acumen across the organisation. Furthermore, PHPs highlighted a lack of awareness when considering the research activities of other departments thus highlighting missed opportunities for collaboration (Fynn et al. 2021a). Such challenges are considered typical of large multi-sectoral and resource-limited organisations (Fynn et al. 2021a). The conclusions drawn by Fynn et al. (2021a) mirror those identified by Nyström et al. (2018) whose project explored public health services in Sweden. Nyström and colleagues (2018) found that collaborative research between departments was considered an asset by PHPs, yet team members faced challenges accessing the benefits of interdisciplinary research (Nyström et al. 2018). Differences of opinion across departments concerning the organisation and management of collaborative research was found to be the biggest challenge, one that hindered learning (Nyström et al. 2018). Other challenges to collaborative research identified by Nyström and colleagues (2018) included competing organisational activities, economic decisions, and organisational changes.

Lack of time and finances are widely cited barriers to research and evidence-based practice amongst LA employees. To this end, McGee and colleagues (2020) emphasised the struggles public health departments experience when trying to access funding solely for research purposes. Lack of a ring-fenced research budget in conjunction with time constraints and mismatched research and policy development timescales contribute to the difficulties faced by LAs when looking to undertake research projects (McGee et al. 2020). Likewise, Fynn et al. (2021a) suggest that the nature of public sector funding will continue to limit research activity and future projects will need to be realised within short-term timescales. A study by Sabey et al. (2019) echoes these findings, highlighting a lack of time and uncertainties regarding resources as the most common barriers to evidence-based practice.

# **Research facilitators**

Notwithstanding the aforementioned barriers and challenges faced by LAs undertaking research, the literature highlights several facilitators that enable public health research engagement within LAs. The most widely cited facilitator is the collaboration between individuals within LAs and those across organisational boundaries, for example, between LAs and Universities (Barratt & Fulop, 2016; Fynn et al. 2021a; Fynn et al. 2021b). In this regard, McGee et al. (2020), indicate that collaborations between academic researchers and PHPs are crucial to creating evidence for health needs. Barratt and Fulop (2016) suggest LAs relationships with academic researchers facilitate improved access to existing evidence, increased training in research methods, and guidance when applying for research funding. The benefits of LAs working alongside academics is further reported by Fynn and colleagues (2021a) who found that relationships between stakeholders and Universities promoted and embedded a research culture within LAs through the provision of research opportunities and developing research capacity. A further suggestion is provided by Schwarzman and colleagues (2018) who recommend developing research-practice partnerships to expand LAs' capacity to undertake research and promote a research culture within their teams. As such, the value of working relationships and collaborations between PHPs and academics is considered a significant facilitator through which organisational capacity and a research active culture can be developed.

Closely associated to research relationships with Universities, is access to academic literature and research evidence that can further facilitate research in LAs by directing decision-making and engaging employees in topics of interest (South & Lorenc, 2020). South and Lorenc (2020) propose that systematic reviews provide a valuable resource for LA staff that appraise and summarise relevant literature. Further benefits of utilising systematic reviews have been identified by PHPs themselves and include time saved by not having to search for evidence in the literature (South & Lorenc, 2020). Time saving is considered vital due to time being limited for PHPs working in LAs (Fynn et al. 2021a). The benefits of having access to research literature was further highlighted by McGee and colleagues (2020) who assert that evidence from academic journals enabled LA practitioners to formulate and evaluate research questions. However, McGee et al. (2020) also underline the importance of additional support for LA employees in their application of evidence, stating that access to publications is unlikely to improve their use of evidence without additional expert support.

# **COVID-19 impact**

An unforeseen global phenomenon that has influenced the undertaking of research in public health LAs is the COVID-19 pandemic. Fynn and colleagues (2021a) explained how the COVID-19 pandemic transformed working relationship and led to the initiation of effective working practices that once established better facilitated the sharing of data and evidence across departments and organisations. In particular, the increased use of online technologies that broadened the opportunities for multisectoral working (Fynn et al. 2021a). Similarly, McGee and colleagues (2020) discovered that disruptions to established ways of working and communication enabled LA workforces to collaborate using innovative methods. To this end, McGee et al. (2020) indicate that stakeholders' perspectives of the value of research increased during the COVID-19 pandemic whilst also acknowledging that research participation remains time limited and requires appropriate levels of funding (McGee et al. 2020). Further research is required to better understand the impact of the COVID-19 pandemic on research activity in LAs.

#### **Research training needs**

Taking into consideration the facilitators, barriers and challenges LA employees encounter with regards to their involvement in research activity, several recommendations have been highlighted in the literature. Amongst the studies that have focused on LA research activity development, the need for research network partnerships involving academics, public health staff and LA stakeholders are considered vital (Fynn et al. 2021a; McGee et al. 2020). Focusing on relationships between LAs and Universities evidence points to PHPs' understanding of research being unlikely to improve without additional support from those with research experience (Barratt & Fulop, 2016; McGee et al. 2020). Although there is widespread agreement that research partnerships may further promote research activity in LAs, the most effective way of implementing such collaborations continues to be debated. A number of recommendations have been made including: utilising librarians as gatekeepers to research evidence (Sabey et al. 2019), delivering continuous professional development training sessions in research methods (Barratt & Fulop, 2016), and joint appointments for new research roles embedded within LAs (McGee et al. 2020). From a local authority perspective, it is important to understand the benefits of research, how it can be utilised to improve productivity, health services and to deliver public health benefits (Fynn et al. 2021a). Consideration is required as to how LAs should best promote research activity, and how research could inform a framework of short-, medium-, and long-term strategies (Fynn et al. 2021a). A review of the literature has highlighted the importance of developing working relationships between LAs and academics to collaborate on projects and to embed a research culture within LAs (Barratt & Fulop, 2016). This project explored the research landscape within NYCC and in doing so helped identify any barriers, challenges and research facilitators encountered by the local workforce.

# The Research Process

### **Research Methods**

A self-administered online survey was used to explore the research landscape across the multi-sectoral LA. This approach was chosen to elicit a high volume of feedback in a short timeframe (Bryman, 2015). Web-based software, Qualtrics (2020), was used to collect the survey data from a convenience sample. The survey was designed in collaboration with NYCC organisational priorities and key themes were drawn from the existing literature. After a process of refinement, the survey consisted of three sections which focused on demographic information, a series of Likert-type scales, and finally, three open-ended free text questions. Email invites were sent to key contacts (Gatekeepers) at NYCC who then further disseminated the survey information to eligible participants within the organisation. Information was provided to potential participants as to the aim of the project highlighting that the outcome of the survey would inform future training opportunities and organisational developments among the public health workforce. The survey remained open for six weeks with reminder emails sent out to staff every two weeks. In total, 57 responses were received, of these, 32 completed the survey fully (56%). Data from the survey was exported into a Microsoft Excel file for cleaning and data management purposes.

# **Ethical approval**

The project was granted ethical approval by the York St John University Research Ethics Committee in May 2022 prior the distribution of the survey. Further ethical approval was not required because the study only involved survey methods to collect non-sensitive, anonymous information from participants who were not defined as vulnerable. Nonetheless, participants were informed of their right to withdraw from the study within 28 days of completing the survey.

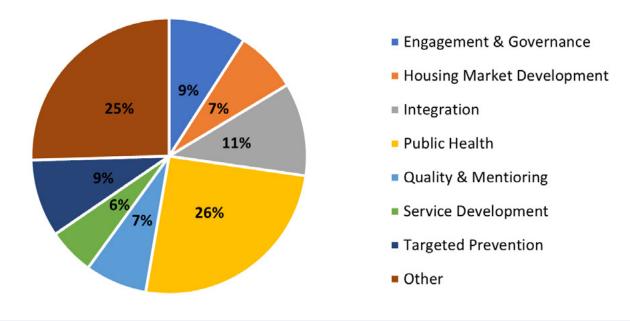
### Data analysis

Survey data was analysed through a combination of descriptive statistics and gualitative content analysis. These analyses were selected due to the non-parametric approach utilised throughout the survey, which include several Likert-type scales and open-ended questions. Section one of the survey was designed to capture demographic data and information pertaining to NYCC employees' departments, job roles and level of educational attainment. The second section of the survey utilised a series of Likert-scales with which participants were asked to rate their own research competence and the level of importance they attributed to research activity (Jamieson, 2004). The final section comprised three open-ended free text data questions to identify participants' perceived research training needs, barriers, and facilitators to research. Through content analysis, free text comments were examined and following a process of refinement were grouped together according to their similarities as prevailing themes.

# **Demographic Information**

Survey data was gathered from several different departments within NYCC; Engagement & Governance (n=5), Housing Market Development (n=4), Integration (n=6), Public Health (n=14), Quality & Mentoring (n=4), Service Development (n=3), Targeted Prevention (n=5), and other practice led departments (n=14) (see Figure 1).

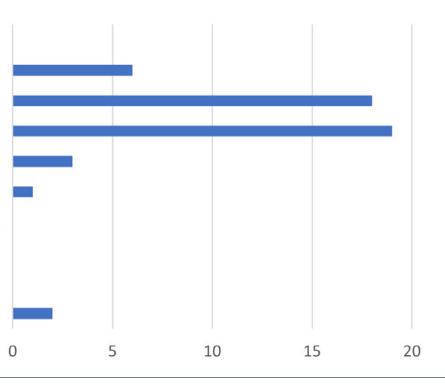
Figure 2 illustrates the educational attainment levels of the workforce. Further information of educational attainment levels can be accessed from: https://www. gov.uk/what-different-qualification-levels-mean/listof-qualification-levels



#### Figure 1: Number of participants taking part in the survey across NYCC Departments

Figure 2: Educational attainment levels of participants taking part in the survey

Level 8: PhD or Equivalent Level 7: Masters or Equivalent Level 6: Degree or Equivalent Level 5:Level NVQ or Equivalent Level 4: Level 4 NVQ or Equivalent Level 3: A Levels, Level 3 NVQ Level 2: 5 GCSE (A\*-C/9-4) Level 1: GCSE (D-G/3-1) Prefer not to say



# Key Findings

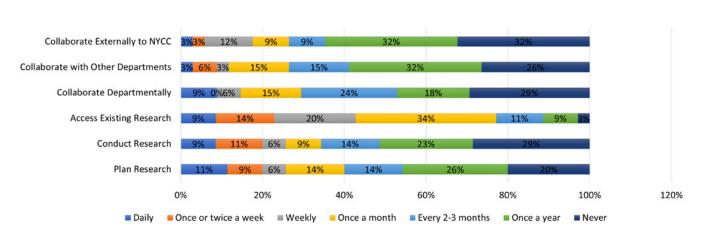
In this section, we describe participants' assessment of their engagement and competence in research activities, we present the findings of the content analysis and subsequently highlight potential areas for future development.

# Frequency of research activity

Participants were asked to rate the extent to which they were involved in the following research related activities: Planning research; conducting research; accessing existing literature; collaborating departmentally; collaborating with other internal departments; and collaborating externally to NYCC. The frequency of research involvement ranged from daily (minimum score = 1) to never (maximum score = 7). Of the six research involvement options, participants indicated accessing research (mean = 3.63) as the activity which takes place most often, with collaborating both internally (mean = 5.35) and externally (mean = 5.44) the activities which take place least often. However, planning, conducting, and collaborating departmentally also had mean scores of greater than 4.65, which indicates that research activities at NYCC only take place every two or three months on average (see Table 2).

### **Research skills**

Participants were asked to rate their research competence in relation to several research skills on a scale ranging from strongly agree (minimum score = 1) to strongly disagree (maximum score = 5). Accessing existing literature was the activity which participants scored most favourably (mean = 1.93, median = 2). However, participants also rated themselves as 'Somewhat agree' competent in planning, conducting, interpreting, and collaborating internally with 35% of responses failing under this category. The area in which the respondents felt least competent was 'publishing research' (mean = 3.17).



#### Figure 3: Frequency of research involvement according to type.

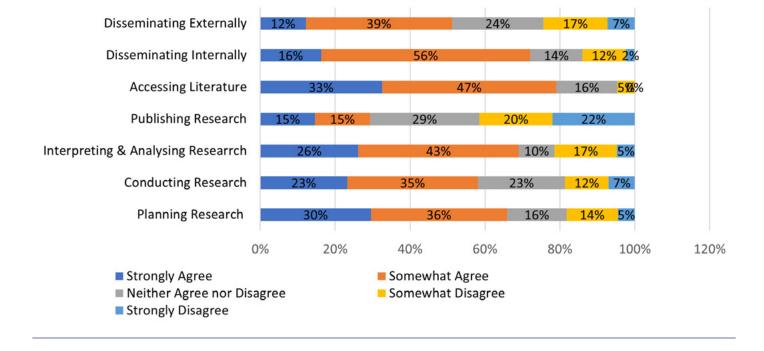
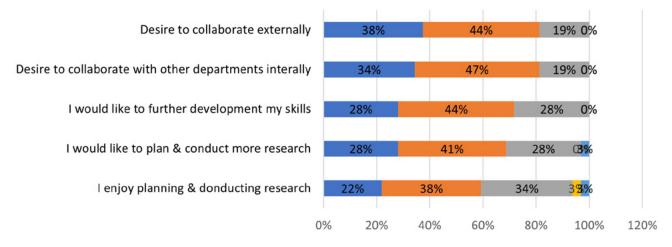


Figure 4: Perceived competence in undertaking various research activities.

### **Research interests**

Participants were asked to rate their interest in research related activities on a scale ranging from 'Strongly agree' (minimum score =1) to 'Strongly disagree' (maximum score = 5). Key factors participants were asked to consider included: enjoyment in terms of planning and conducting research, desire to plan and conduct more research, desire to further develop research skills, desire to collaborate internally, and desire to collaborate with other institutions. The results indicate that participants would like to collaborate more often on internal projects (mean = 1.84) and external projects (mean = 1.81), the median for both these variables also fell under the 'Somewhat agree' rating. Participants also responded positively concerning enjoyment of research (mean = 2.28), desire to plan and conduct more research (mean = 2.09), and desire to further develop research skills (mean = 2.00). Only one individual indicated that they did not enjoy nor wish to become more involved in planning and conducting research.

Figure 5: Participant interest in research-related activities.



Strongly Agree Somewhat Agree Neither Agree nor Disagree Somewhat Disagree Strongly Disagree

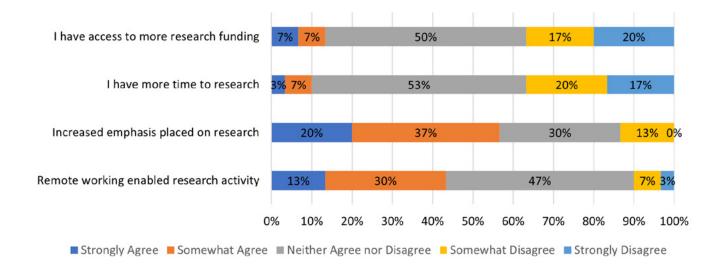
#### Factors impacting research activity levels

Again using a Likert-scale ranging from 'Strongly agree' (minimum score = 1) to 'Strongly disagree' (maximum score =5), participants were asked to rate the extent to which they have the opportunity and appropriate resources to plan and conduct research: adequate time, relevant skills, access adequate funding, have adequate support, access to relevant research literature, opportunity to collaborate departmentally, and opportunity to collaborate with academics from local Universities. Of these variables, there was somewhat agreement that participants feel able to access relevant existing literature (mean = 2.28, median = 2) and have the relevant skills to conduct and plan research (mean = 2.58, median = 2). However, there was somewhat disagreement that participants had adequate support to plan and conduct research (mean = 3.28, median = 4), and had access to adequate funding to be research active (mean = 3.56, median = 4). Responses indicated that there was neither agreement nor disagreement with regards to planning and conducting research (median = 3), opportunity to conduct departmental research (median = 3) and having adequate time to be research active (median = 3).

# The Impact of the COVID-19 Pandemic

A question was included that examined participants' perceptions of the impact of COVID-19 on research activity at NYCC. Participants rated their level of agreement ranging from 'Strongly agree' (minimum score = 1) to 'Strongly disagree' (maximum score = 5) when asked to consider the following: remote working enabled me to become research active, there is increased emphasis placed on research as a result of the pandemic. I have more time to research as a result of the pandemic, I have more access to research funding since the start of the pandemic. Of the 32 respondents, the most common rating was 'Neither agreement nor disagreement' that the COVID-19 pandemic had impacted on the time available to research (n = 16), benefits of remote working (n = 14), and access to funding (n = 15). The only weighted response was shown in response to the increased emphasis placed on research since the start of the COVID-19 pandemic (mean = 2.28, median = 2), with 17 respondents selecting either 'Strongly agree' or 'Somewhat agree'.

#### Figure 6: Participant responses to the impact of COVID-19 pandemic.



The next section of the report presents key findings drawn from the qualitative data. Here, participant comments are grouped together according to the prevailing themes identified through the content analysis process. Key themes include barriers to research activity, facilitators to research activity and further training requirements.

### **Barriers to research activity**

Participants were invited to describe any challenges or barriers they face in utilising or conducting research in their current role. In total, 18 comments were provided regarding barriers or challenges faced by the LA employees in becoming research active. Comments related to organisational culture, access to relevant resources and time factors. Concerning organisational culture, several employees (n = 4) across a number of departments (Health & Adult Services, Engagement & Governance, Service Development, and Integration) described research being undervalued within the organisation and not formally recognised in current job specifications. This could also be associated with some of the challenges that were highlighted in relation to time, whereby, employees suggested that there was no time allocated to conduct research in the current organisational schedule. An example of this barrier is provided by a member of the Public Health team who stated: "there is no time or funding allocated to conducting research". Furthermore, availability and access to resources for research activity was also considered a barrier to research, in particular, practice-based research evidence which has been incorporated into practice, this was highlighted by a member of the Public Health department: "We need to have real world 'practice-based' research and not academic research which doesn't apply". Further responses from Target Prevent, Public Health, and Housing Market Development staff also suggest it is difficult to access practice-based research and that often academic literature is not transferable to the 'real-world'.

# Facilitators to research activity

Participants were also asked to describe factors that assist, enable or facilitate their involvement in research. In total, 16 responses were provided and again three clear themes emerged. The first, and most widely suggested theme, relates to the importance of collaborations between the LA and Universities/ academics. Responses from employees across five departments described how having the opportunity to collaborate with academic partners or colleagues with an academic background enabled them to become more involved in research activity. Two further themes emerged as direct comparisons to those identified as barriers to research activity, namely allocated time, and organisational support. Participants stressed the importance of protected time to conduct research, whilst also acknowledging that there is a need for support and encouragement from their senior colleagues in providing not only time to conduct research but also time to reflect on the research process. This sentiment is highlighted by the response of a member of the Public Health Department who stated: "Encouragement and support is required from a line manager and senior colleagues... allocation of time is important".

# Future training requirements

Participants were invited to identify any further research training or continued professional development (CPD) opportunities that they felt would be beneficial in terms of increasing their research activity at NYCC. To this end, four themes emerged. The most common suggestion related to the need for annualised training courses. Employees identified the importance of annual training on research methods relevant to role, suggesting that skills can be lost when only conducting research occasionally. The requirement for refresher research methods training was suggested by members of the Integration and Targeted Prevention departments evident in the follow exert "Annual training on how to search for existing literature and data within our roles. . . key skills that aren't used can be lost" and "reminders of the process of planning and carrying out research. It is often some time before I do it". The opportunity to access higher education and developmental training opportunities was also considered important. This included access to both formal postgraduate degrees to enhance their skills sets and less formal, collaborative research sessions with Universities.

# **Opportunities for Development**

#### 1. Research engagement

The survey data indicates that there is currently a low percentage of the LA workforce who are research active on a regular basis. Except for accessing existing literature, the responses show most employees are only research active once a year, if at all. This is identified as an area for development with 69% (n=22) of respondents agreeing that they would like to further develop their research skills and in doing so become more research active.

#### 2. Access to resources and organisational support

Local authority employees suggested that the availability of research funding, provision of research dedicated time, and organisational support were both barriers and facilitators to research activity. Participants outlined how current organisational structure does not provide adequate time or support for the workforce to be involved in research. Furthermore, responses also suggest that employees viewed allocated time and organisational support as key facilitators to ensure engagement in research activity. Therefore, allowing protected time and support from the LAs senior officials may enable the workforce to become more engaged in research activity.

#### 3. Collaborations with universities

The area which is perhaps most in need of further development is promoting research project collaborations with Universities and academics. The survey responses illustrated how external collaborations rarely take place with 65% of participants indicating that they only collaborate with external partners annually (n=11) or never (n=11). These statistics taken alongside the finding that 59% (n=19) of employees felt that working with academics would improve their research skills highlights an opportunity for development.

# Overview of the findings

Local authorities are responsible for the management and delivery of essential public health initiatives and public services across the United Kingdom. Such multi-sectoral organisations are faced with local challenges in addressing the needs of the communities in which they serve (Jenkins et al. 2016). Consequently, there is an increasing requirement for local reliable evidence to guide future public health policies and initiatives (Dorling et al. 2015). The need for local research has been acknowledged by NYCC and this report acts as a scoping review for the organisation to better understand the level of research activity across all directorates and to help identify ways in which to support research activity.

The descriptive statistics drawn from the survey data indicate that LA employees rarely take part in research activity. The statistics show that on average the workforce very rarely (annually or never) collaborate on research projects with their department or other external departments. However, the findings also indicate that employees only access existing literature monthly. Focusing on employees' interests in becoming more involved in research activity, the statistics point to a desire to become more involved and to further develop their research skills. Finally, the findings suggest that the COVID-19 pandemic has had no significant impact on research activity across the organisation.

Using content analysis, this report has identified several barriers and challenges that LA employees encounter in actively engaging in research activity. Echoing McGee et al. (2020), participant responses highlight a lack of dedicated time to conduct research as a major barrier to involvement across the organisation. This is unsurprising due the nature of LA objectives, with targets that must be achieved within limited timescales and on a restricted budget (Sabey et al. 2019). A further barrier to research engagement expressed by participants included organisational culture with current schedules and role specifications not conducive to engagement in research activity. This challenge is not unique to NYCC, Fynn and colleagues (2021a) concluded that such barriers are typical or large multi-sectoral and resource limited organisations. The report findings also provide examples of factors which enable research activity across the LA. Collaboration and support provided by Universities and those with academic acumen were identified as key enabler to research across the organisation. This is supported by Barratt and Fulop (2016), who also found collaborations between LA and academics to facilitate the creation of localised evidence. A further factor found to facilitate involvement in research across the LA is support from senior colleagues. To this end, as much as the organisation culture can restrict research activity, those members who felt encouraged to engage in research appreciated the opportunity to do so. Finally, the findings also uncover several training requirements that the LA workforce deemed necessary for them to become research active. Annual research methods workshops and continued support from academic partners were described as the most sought after development opportunities.

Considering future developments, increased importance should be placed on research activity with organisations providing protected time and support for their employees. Providing the LA workforce with improved resources is likely to result in positive changes to the policies and practices that will improve the health of the communities that they serve. Furthermore, collaborations with Universities are seen to enable research activity in LAs, through the provision of expert-led training and access to the latest literature.

# References

Atkins, L.M., Kelly, C., Littleford, C., Leng, G and Michie, S. (2019). From the National Health Service to local government: perceptions of public health transition in England. *Public Health*, *174*, pp.11-17.

Barratt, H. and Fulop, N. J. (2016). Building capacity touse and undertake research in health organisations: a survey of training needs and priorities among staff. *BMJ*.

Brownson, R. C., Fielding, J. E. and Maylahn, C. M. (2009) Evidence-based public health: a fundamental concept for public health practice. *Annual Review for Public Health, 30* (1), pp. 175-201.

Buck, D. (2020). *The English local government public health reforms: an independent assessment*. The King's Fund. [Online]. Available at: https://www.kingsfund.org.uk/sites/default/files/2020-01/LGA%20PH%20reforms%20-%20final.pdf

Curtis, K., Fulton, E. and Brown, K. (2018). Factors influencing application of behavioural science evidence by public health decision-makers and practitioners. Preventive Medicine Reports,12,pp. 106-115.

Dorling, H., Cook, A., Ollerhead, L. and Westmore, M. (2015) The NIHR Public Health Research Programme: responding to local authority research needs in the United Kingdom. *Health Research Policy Systematic, 13*, pp. 77-86.

Fynn, K., Hardeman, W., Milton, K., and Jones, A. P. (2021b). A scoping review of evaluation frameworks and their applicability to real-world physical activity and dietary change programme evaluation. *BMC Public Health, 20* (1), p. 1-16.

Fynn. J. F., Jones, J. and Jones, A. (2021a). A systems approach to the exploration of research activity and relationships within a local authority. *Health Research Policy and Systems*, 19 (1), pp. 137-150. Jamieson, S. (2004). Likert scales, how to (ab)use them. *Med Educ,* 38 (12), pp.1217-1218.

Kneale, D., Rojas-Garcia, A., Raine, A. and Thomas, J. (2017). The use of evidence in English local public health decision-making: A systematic scoping review. *Implement Sci, 12* (1), pp. 61-74.

Kite, J., Indig, D., Mihrshahi, S., Milat, A. and Bauman, A. (2015). Assessing the usefulness of systematic reviews for policymakers in public health: a case study of overweight and obesity prevention interventions. *Preventative Medicine*, *81*, pp. 99-107.

Lockwood, A. and Walters, H. (2018). Making the most of public health research. *Journal of Public Health, 40* (4), pp.673-674.

McGee, C., Barlow-Pay, M., Vassilev, I., Baird, J., Fenge, L.A., Chase, D. and Parkes, J. (2020). *Supporting and enabling health research in a local authority (SERLA): an explanatory study.* 

Nyström, M. E., Karltun, J., Keller, C. and Gäre, B.A. (2018). Collaborative and partnership research for improvement of health and social services: researcher's experiences from 20 projects. *Health Research Policy Syst, 16* (1), pp.1-17.

Qualtrics (2020). Provo, Utah, USA. [Online]. Available at: https://www.qualtrics.com

Sabey, A., Bray, I. and Gray, S. (2019). Building capacity to use and undertake applied health research: establishing a training programme for the health workforce in the West of England. *Public Health, 167* (1), pp.62-69.

South, E. and Lorenc, T. (2020). Use and value of systematic reviews in English local authority public health: a qualitative study. *BMC Public Health, 20* (1), pp.100-111.

Whitty, C. (2015). What makes an academic paper useful for health policy? *BMC Med*, *13*, pp. 301-308.

### **Ethical Approval**

This project was granted ethical approval by the York St John University Ethics Committee in May 2022.

#### **Author Statement**

The authors of this report were, Matthew Green, Sarah Baker, and Natalie Smith. For more information on the report please contact Sarah Baker s.baker1@yorksj.ac.uk

# **Funding Statement**

This project received no external funding.

