

# NIHR Applied Research Collaboration Wessex

How we're making  
a difference



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## Our partners

We are proud to work with a wide range of partners across Wessex and beyond.

### Thank you to our partners:

NHS Hampshire and Isle of Wight Integrated Care Board  
NHS Dorset Integrated Care Board

Hampshire Hospitals NHS Foundation Trust  
Isle of Wight NHS Trust  
Portsmouth Hospitals University NHS Trust  
Solent NHS Trust  
Southern Health NHS Foundation Trust  
University Hospital Southampton NHS Foundation Trust

Salisbury NHS Foundation Trust

Dorset County Hospital NHS Foundation Trust  
Dorset Healthcare University NHS Foundation Trust  
University Hospitals Dorset NHS Foundation Trust

Bournemouth University  
University of Portsmouth  
University of Southampton  
University of Winchester

Hampshire County Council  
Portsmouth City Council  
Southampton City Council  
Bournemouth, Christchurch and Poole Council  
Dorset County Council

We also work with charitable, voluntary, community and social enterprise organisations.

This report is funded by the National Institute for Health and Care Research (NIHR) Applied Research Collaboration Wessex (ARC Wessex), the views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care.

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# Foreword



**Welcome to this brief review of achievements from the NIHR Applied Research Collaboration (ARC) Wessex. ARC Wessex is an evolution of an approach to building applied health and care research across the country, first developed through the NIHR CLAHRC scheme (Collaborations for Leadership in Applied Health Research and Care).**

The shape of ARC Wessex links directly to the health and care needs of our region, one which stretches across rural, and coastal communities including cities with diverse populations facing their own challenges. It is down to our strong partnerships with the local health and care services, universities, councils, voluntary sector, industry and importantly public and patients – that we have been able to shape research that reflects all our needs.

We have some of the UK’s best researchers, supported by centres of research excellence based in Wessex and strong networks that stretch across the UK and beyond that allow us to do some amazing research. Our four research

themes: Ageing and Dementia, Long-Term Conditions, Healthy Communities, Workforce and Health Systems have in time developed to include the Mental Health Hub and Social Care. It is a testament to the huge team who helped build the ARC that these themes still feel right.

Importantly, none of our research happens in silos –all of our work involves patients, the public or service users as well as system partners in some level of co-production. Our Public and Community Involvement and Engagement (PCIE) team does a huge amount of work to ensure we listen to the people and communities in Wessex and bring them with us, and our Academic Career Development team has ensured that we build research capacity across the Wessex region to do more, even better research in the future.

I am proud to lead ARC Wessex; working with a talented team of people who are committed to making a difference.

**Professor Alison Richardson**  
Director NIHR ARC Wessex

# Our vision

**It is our mission to improve the health & well-being of people of Wessex across the life course targeting quality, safety, effectiveness & efficiency of health & care services. Through conduct, application and dissemination of applied research for patient, service user, community & population benefit.**

ARC Wessex is one of 15 ARCs in England, who all look to achieve the same things – each of us driven by the health and care needs of our communities.

## We do this by

Bringing together public & community, expert researchers from a wide range of disciplines, clinical leaders and other stakeholders.

We work across Wessex to ensure local reach and national impact.

## Our approach





# Making a difference to our communities

## Our collaborations

- We have established the ARC Wessex Partnership Board with six-monthly meetings, attended by our member organisations including partner NHS trusts, local councils and public health representatives and members of the public.
- We have set up a joint Public and Community Involvement and Engagement team across the NIHR in our region working closely with regional voluntary, community and social enterprise organisations.
- We have embedded four research fellows within our region's councils (Portsmouth City Council, Southampton City Council, Dorset-based councils and Hampshire County Council). They are working to respond to the needs of their population.
- We have been leading a national series of online seminars on Social Care led by Professor Deborah Sturdy, England's Chief Nurse for Adult Social Care which regularly attracts 300 participants.
- We are the lead for the National Priorities Programme on Ageing, Dementia and Frailty with 10 ARCs across England working together to improve care and lives for older people.

in teaching nursing students at the University of Southampton and researchers are exploring where else they might be used to teach healthcare staff. They also feature in research designing changes to health and care services with patients and care staff. Further funding looks to follow the care of people with learning disabilities in hospitals, to try to understand why care between wards varies so much.

We have been working with people with neurological conditions to help to codesign guidance for digital health services. This has involved surveys, focus groups and workshops with people with a range of conditions including, stroke, Parkinson's and epilepsy. This work will directly influence the NHS digital health systems available to people and any adaptations needed for this group.

## Our co-produced research

Our INVOLVER project co-created a set of short films, Good Care For Me Is... involving people with learning disabilities, stroke survivors and people living with Alzheimer's Disease. The funding for this series of films came from the University of Southampton's Public Engagement with Research unit (PERu) Development Funding Call. These short films have been used



# Making a difference to our communities

## Developing capacity to do and use research

Working alongside our NIHR colleagues, Southampton Academy of Research (SOAR), NHS England, The Florence Nightingale Foundation, Alzheimer's Society, and many other organisations we have brought more funding and combined strength to building research capacity across Hampshire, the Isle of Wight, Dorset, and South Wiltshire.

This effort has stretched beyond the ARC Wessex region and our researchers have gone on to develop their careers across the country.

We have supported and trained clinicians, practitioners and academic staff from early investigation work to fellowships and advanced fellowship awards.

Working closely with our NHS partners we have been able to offer internships and enhancement awards, creating resources, guidance and support for clinicians and practitioners wanting to explore research in practice.

## Stimulating new research funding for partnerships

We have been instrumental in supporting Southampton City Council's successful bid to host a Health Determinants Research Collaboration (HDRC). This £5 million award from the NIHR will develop the council's research infrastructure to enable it to be more research active and make better use of research evidence when making decisions on the wider determinants of health.

ARC Wessex senior researcher Professor Janis Baird, Professor of Public Health & Epidemiology, University of Southampton, said:

"This funding award will enable Southampton City Council and its partners to improve the health of the population by strengthening evidence-based practice. Building expertise and capacity in the council team is a vital part of this, and University of Southampton is delighted to be a partner in this work."

ARC Wessex has already funded a researcher in residence at the council looking at evaluating domestic abuse support services in Southampton.

This is part of a wider investment in creating research capacity in social care. As a result we have researchers looking at issues of recruitment, training and staffing based in Portsmouth and Hampshire local authorities, and another based in Dorset.

ARC Wessex also supported Portsmouth's bid to form an HDRC starting in 2025.

We are proud to have Professor Samuel Cortese working with us as part of his NIHR Professorship Award of £2 million. His work with our mental health research hub will examine the early identification and treatment of children with Attention Deficit Hyperactivity Disorder (ADHD) as part of a national and international project.

Dr Stephen Lim our theme lead for Ageing and Dementia has also been awarded an NIHR Advanced Fellowship which adds £1 million investment to research on improving physical activity for older people in hospital. Dr Lim began as a PhD trainee in 2014 and through CLAHRC and later ARC funding we have supported his career development for almost a decade.

## Influencing policy and other stakeholders

Our workforce research has led to updated guidance from the NHS on nursing and patient safety.

Professor Peter Griffiths and Dr Christina Saville discovered the Safer Nursing Care Tool (SNCT) – a yardstick used widely in the NHS for setting staffing levels - needs to be refined in certain circumstances.

The tool needs to take account of differences in workload between mornings and evenings - and those wards with a high throughput of patients. In addition to get a fair picture of the nurse staffing needs in some wards, assessments have to be over a six month period, not the current 3 weeks.

All these valuable learning points have been incorporated into new guidance with NHS England and its resources for senior nursing staff.

During the pandemic of 2020 we worked with Hampshire Hospitals NHS Foundation Trust to develop a computer algorithm to help monitor COVID-19 patients at home safely. The algorithm and predictive system helped target care to the most vulnerable and reduce readmissions to acute care. The Covid-Oximetry at Home programme was recommended by NHS England for all eligible patients in November 2020, helping to reduce pressures on acute hospital wards.

At a local authority level ARC research has been able to evaluate existing council services and support innovation. Research at Southampton City Council has been looking at the effectiveness of domestic abuse services in the city and listening to people using those services. As a result we have put forward a number of recommendations.



**Dr Caroline Bate, Southampton**

Dr Caroline Bate Domestic Abuse Service Coordinator for Southampton City Council said:

***"It's been incredibly valuable to have this project happening, because it has allowed us to reflect as individual agencies but also as a multi-agency partnership on the work that we do."***

***By bringing in the voice of the survivors and the experiences they have using the domestic abuse pathways is more valuable than anything else because it allows us, as practitioners and leaders to be thinking about what these journeys through to support a like for those people that are using them."***

***And it is giving us that space to reflect and to have an evidence base with which we can look at how we change things to improve them for, for all victims."***

ARC Wessex is continuing its work on domestic abuse in the city, having examined innovative approaches to tackling offending involving Hampshire Police and domestic abuse charities.

In the collaborations and the way we work, research from ARC Wessex has a direct influence at a national level and also on the ground in our communities with some of the most vulnerable people in society.



## OUR RESEARCH IN NUMBERS

From October 2019 to March 2024.

# £23m

in additional research funding (on top of ARC Wessex funding) leveraged for Wessex region

**235**  
academic papers  
published

**106** applied health and  
care projects co-  
developed with  
our partners

We work with  
**120** organisations

Participants  
in research

**36,000**

**2000+**

members working with us to  
support research and researchers



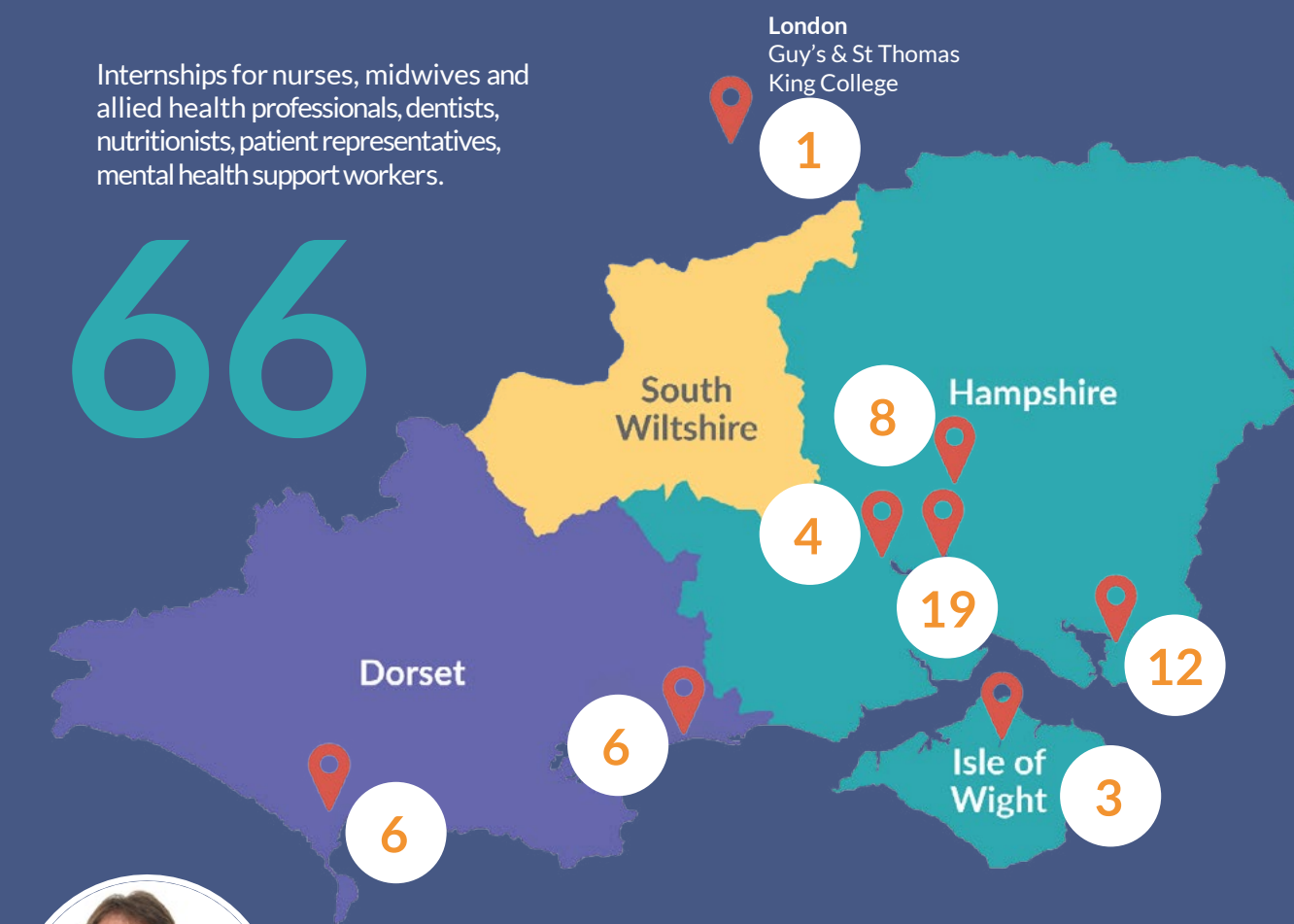
Helen Sloan supports projects by the Mental Health Research Hub and cared for her mum who had dementia and paranoid schizophrenia

"My family has received a great deal of support from mental health services over the years, and I have seen treatments and approaches change over four decades, many because of findings from research. It is my privilege to be part of ARC Wessex Mental Health Hub to learn about current research and to contribute to and help shape future mental health research."

## WHERE WE HAVE BUILT RESEARCH CAPACITY

Internships for nurses, midwives and allied health professionals, dentists, nutritionists, patient representatives, mental health support workers.

**66**



Mark Green- Heart Failure Nurse at University Hospital Portsmouth NHS Foundation Trust

"I was very fortunate. I work in an area that I love. You look at practice and think sometimes you can produce ideas about ways in which you can change it, but it's proving that it would work.

With the Internship I've got so much out of it because I can prove now how we can change our practice. I've got research behind my back now and lots of answers now it's a case of just taking it further and applying it into the job."

**8**

PhD Studentships

**4**

Post Doctoral Fellows

# Collaboration to make research happen

## Public, community involvement and engagement

The people and communities of Wessex are at the heart of our research, at every stage. Their voices help shape what research we do, and how we share the results. We work together, at project, theme, and ARC-wide levels across the Wessex region.

We work closely with other NIHR partner organisations in Wessex to coordinate public and patient involvement, alongside the Hampshire and Isle of Wight Integrated Care Board's Raising Voices in Research initiative.

We work at a regional level, but also a local level, tailoring our research with local communities. Over time we have refined and codesigned the way we work with the public and patients and created the ARC Public Involvement Forum - Wessex. Academic staff specifically work with public contributors in each theme and work area. That way public contributors have a regular point of contact for support, training, and practical arrangements. Each of our research themes as well as social care and mental health have direct links with patient and public contributors.



## Engaging with local communities

Community engagement works across the NIHR in our region. We build relationships with our communities through Community Action Hampshire and lead on key collaborations including projects with Integrated Care Boards like Raising Voices in Research. This gives voice to our region's diverse communities in the ARC's work, and builds ongoing relationships.

Our research puts us in touch with a wide range of voluntary organisations like Hampton Trust, Society of St James and Off The Record. They work with us in helping to guide and share findings and interventions. We have worked across NHS, care, voluntary and charity organisations to seek a way to overcome some of the challenges facing our disadvantaged communities. These have included the homeless, deprived neighbourhoods and vulnerable groups.

Engaging through partnerships built in this way, it is possible to have a real impact 'on the ground' and evaluate interventions in the communities we serve.

## Growing research capacity

Our primary goal has been to create a strong community of clinical and academic researchers in applied health and care research. We aim to leave a legacy for future generations in our region and have invested over £1.5 million in training programmes, including pre-doctoral, doctoral, and post-doctoral fellowships across Wessex.

Inclusivity is central to our work. When granting awards, we follow the principles of



# Collaboration to make research happen

the 'Concordat' – a national framework that promotes good research conduct and integrity. We also offer flexible and part-time work arrangements, supporting individuals at all career stages.

Our strategy has brought together over 200 faculty members. We have created an environment that balances senior leadership with opportunities for early and mid-career researchers. They benefit from mentorship and supervision by experienced methodologists, health and care practitioners, and national leaders.

We're proud of our successes:

- Our internship programme has supported over 60 interns and development awards in partnership with NHS England and NIHR Clinical Research Network Wessex. Award holders have made a positive impact on health services within their organisations. Some have secured additional funding to continue their research journey. To encourage applications from diverse disciplines, we have created specific funding calls for internships in social care, mental health, data science, and statistics.
- We've supported 8 PhD students from various partner organisations. These students have made significant contributions to knowledge creation and exchange. They have also engaged with key stakeholders in their field and shared their findings with the public, clinicians, academics, and policy makers.
- We've supported 10 post-doctoral researchers through a Leadership Programme in collaboration with the Florence Nightingale Foundation. This programme helped them develop into leaders in applied health research and as a result, they received

promotions and secured funding to lead their own research.

- We collaborate with NIHR Clinical Research Network (CRN) Wessex and the Research Support Service to conduct listening exercises with stakeholders to map current research activities related to social care. Based on this, we've co-designed a pilot programme consisting of 4 projects to generate evidence that addresses the needs and challenges of social care while supporting research-related capacity.

## Addressing health inequalities



**New Forest Foodbank**

Health inequalities exist right across the Wessex region. Our diverse communities stretch across rural villages as well as cities and coastal towns. Each faces their own health and care challenges.

In Wessex researchers have been able to map the risks of food insecurity in very different settings. Work by Dr Dianna Smith has shown that in areas like the New Forest high housing

costs, lack of transport and local work risks poorer food options and higher prices. On the other side of the county deprived communities in Havant have historic inequalities that can lie behind ill-health and poor diets. The mapping tool has enabled local authorities and charities to target food pantries and food banks supporting people in need more effectively. This mapping work alongside tools to reduce and counter obesity in pre-school children through health visitors have helped focus services run locally.

Our mental health research hub has been looking at the impact of cost of living pressures on the mental health of families in Hampshire. The MyBills project has been working with charities like Solent Mind, local NHS mental health services, councils and people with experiences of mental health conditions and debt. Its report will shed a light on the links, if any, between the burden of increased living costs and people's mental health and make recommendations.

Our work on the CoPower project linked researchers around England to look at how to increase the wellbeing and resilience for people from Black, Asian and Minority Ethnic Families and Communities. It also examined challenges to some communities at all ages including policing, child welfare, caring and physical activity and nutrition. As a result the consortium of research leaders has co-produced and co-designed materials and recommendations to support local communities.

## Supporting innovation

ARC Wessex has helped stimulate innovation in health and care, working with computer engineers, modellers and mathematicians to create new ways of scheduling care in the community and in hospital settings. The PROCED project aimed to improve complex hospital discharge by using computer algorithms to support the way community and social care services are planned for patients fit to leave hospital. The goal was to avoid patients staying in hospital longer than needed when they are well enough to be discharged. This research has now gone on to create another project named PUNDIT which aims to create a virtual or digital twin for a hospital to model bed occupancy and test various scenarios used to reduce bed occupancy. This innovation could help hospitals to be proactive in predicting bed occupancy, improving safety and outcomes for patients.

ARC Wessex has made a joint appointment with Health Innovation Wessex for the post of ARC Implementation Lead. That role seeks to increase the uptake of research evidence and research interventions within health and care services in the region.

The implementation team connects the priorities of the Integrated Care Boards with the research outputs from ARC Wessex research teams, it also has been working to develop a Workforce Evaluation Toolkit to support health and care providers to self-assess the impact of workforce interventions.

The team will soon be recruiting implementation and knowledge mobilisation research fellows to help speed up adoption of evidence and identify valuable research.



# What we've been doing

Our themes cover four priority areas, including: Ageing and Dementia, Healthy Communities, Long-Term Conditions and Workforce and Health Systems. In addition, we have Mental Health and Social Care teams.

Here are a handful of examples of our work, out of the 100+ research projects we are involved with...

## Ageing and Dementia

**Improving physical activity for older people in the community.**

### Short summary

Reports suggest older people aren't active enough which increases their risks of illness and falls. We helped create online and in person fitness groups to engage with older people attending community social clubs stay more active.

### What we did

Working with a large care home company, Brendoncare, we set about training volunteers to lead gentle exercise classes for older people attending community social clubs. Due to the limitations imposed by COVID-19 these volunteers were trained using exercise videos created by a physiotherapist, an exercise instructor and a consultant in geriatrics. Trained volunteers then led classes of chair-based exercises, some using resistance bands, for older adults. Once restrictions were lifted, these took place in person, rather than on a video call. We then asked older adults taking part in the classes, volunteers, and Brendoncare staff what they thought about them.

### What was the impact

Fifteen volunteers were trained and ran over 180 weekly classes. At six months, we found that the older adults who took part in group exercise had improved physical activity levels per week. Growing by an average of 50 minutes per week.

Brendoncare has now employed an activity coordinator to continue to train volunteers and support volunteer-led exercise groups within its community social clubs.

### What next

We have collaborated with researchers from the NIHR Southampton Biomedical Research Centre and Bournemouth University to further develop this volunteer-led online intervention.

Further funding from University Hospital Southampton will extend this work to engage with older people living with frailty who have been discharged from hospital, to stay active and eat well.



# What we've been doing

## Healthy Communities

**Testing the effects of food product placement on customers' visual attention and intended product purchases.**

### Short summary

Unhealthy diets can lead to health problems for adults and children. We tried to understand why some people choose unhealthy foods when they shop at supermarkets.

### What we did

The team used virtual supermarkets and neuroscience techniques like eye-tracking to understand how product placement influences shoppers' attention and purchase intentions. We found differences in visual attention and intended purchase of healthy, unhealthy, and non-food products placed in prominent in-store locations.

We discovered women shoppers may show greater interest in unhealthy products in places other than store checkouts. However, they show more intention to buy healthier or non-food items. Using eye-tracking technology we found that women paid more attention to healthy foods than unhealthy or non-food products.

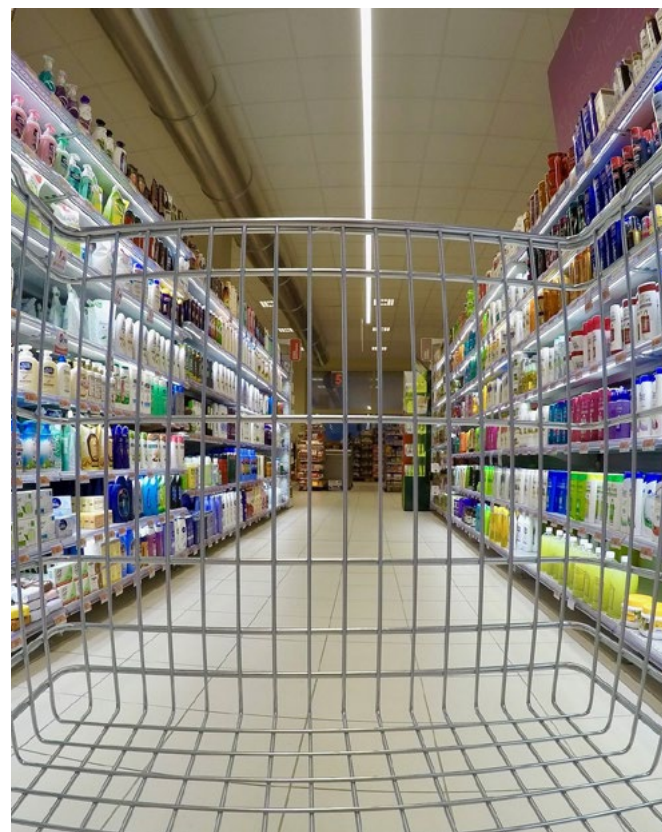
When we spoke to our participants, they told us that they would prefer healthier items in noticeable places in supermarkets. One woman told us "I would prefer to see more healthy things, for example, at the checkouts simply because I stand there, and I wait for someone to finish scanning their shopping and I know that if there is chocolate or crisps I might just go forward and grab it as it's just there in front of me".

### What was the impact

Since 2022, UK policy has banned the placement of some unhealthy foods at noticeable places in supermarkets. This research found evidence that customers likely support this policy as they would like to buy healthy and non-food items from these locations. This work shows that it is possible to support healthier food choices, contributing to the UK government's efforts to improve health equality.

### What next

The team are now working with members of the public, who were involved in the study, to develop ways of sharing the results more widely with the public and with policy makers and health professionals.



## Long Term Conditions

**Using the WASP tool to design and implement system wide improvements in self-management support for people with long-term conditions.**

### Short summary

This research aims to help people with long term conditions to manage their health and improve the support they get. It uses a tool called WASP (Wessex Academy for Skills in Personalised Care).

### What we did

The Wessex Academy for Skills in Personalised Care (WASP) Tool has been developed to help health teams understand where they could do more to help people to manage their condition more actively. The tool can be used by people who use services and people who plan, manage, and deliver care. It asks about behaviour- What people do, and why they do (or don't do) certain things. The answers can help health teams decide how to improve their service. The findings of this work showed differences between the things managers say their service does to support self-management, and what is experienced by front line staff (such as nurses and doctors) and people with long-term conditions themselves. The WASP personalised care work is being used across the Wessex region to help improve support for people managing a long-term condition.



### What was the impact

The research team has its own WASP website and offers personalised assessments, and accredited training and online courses to help health services personalise care and support for patients. In all, 32 services have taken part in the WASP programme and more than 900 health professionals have developed their knowledge and skills with the team. The programme has support from the Hampshire and Isle of Wight NHS (ICB) and partners with NHS Trusts across the region.

### What next

The team is reviewing how the coaching and support works and how it can be improved. More research is planned to collect further evidence on WASP impact.



# What we've been doing

## Workforce and Health Systems

### Safer Nursing Care Tool and nurse staffing requirements

This research addresses the complex issue of determining safe staffing levels in hospital wards.

#### What we did

We assessed how well the Safer Nursing Care Tool (SNCT) predicts staffing requirements on different hospital wards. We asked nursing managers to use their professional judgement to suggest why the tool fits less well for some wards. Potential reasons included high turnover, older patients, high levels of 1-to-1 specialising, cancer care, small ward size and high within-day variation in demand. We found that sole reliance on the SNCT could lead to unsafe staffing levels in some wards. The research emphasises the importance of professional judgement and triangulation in revising staff numbers calculated by tools.



#### What was the impact

The researchers developed a 'Professional Judgement Framework' in collaboration with experienced nurses. This can guide staffing decisions by considering important factors alongside the output from a staffing tool. The goal is to ensure safe and adequate staffing in hospital wards.

This framework has been endorsed by the National Quality Board and is being used in the NHS England Safer Staffing Fellowship programme.

#### What next

The next step is to conduct research around predicting demand for nursing staff which we plan will also lead to tools and resources to guide decision-making around staffing.

### Health Systems: Using data and computer modelling to optimise scheduling of community nursing.

#### Short summary

Improving patient care and community nurse visits using data and computer modelling.

#### What we did

We developed algorithms that automatically create efficient routes and schedules for district nurses. These algorithms were able to factor in the skills of individual nurses and the needs of patients. For example, a nurse with specialist skills in diabetes being assigned to a patient with the condition. The system was also able to react to changes in patient need during the day, so if a nurse had to re-route to a patient with a higher priority need – it could be done. The system was successfully tested with a nursing team in Southampton who currently organise their

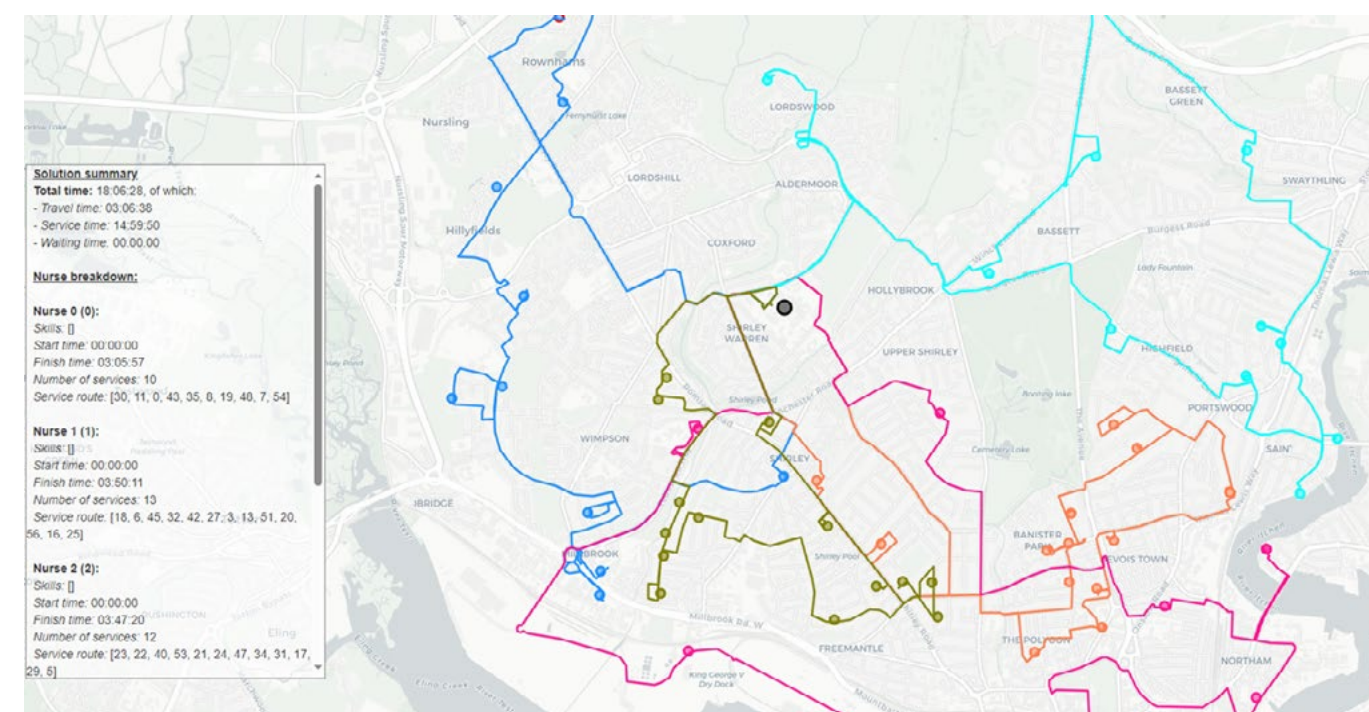
workload manually. This method of designing rosters saves planning time and reduces extra time spent on the road, which can then be used to provide more tailored patient care.

#### What was the impact

Patients will benefit from a more efficient workforce and better-planned visits. Care providers can plan their workload more efficiently, save operational costs, and reduce nurse burnout from manual planning. Policy makers can use these tools to simulate and test hypothetical scenarios when designing care services.

#### What next?

Our team continues to improve the algorithms and liaise with social care companies to test how they work in real life. They are also exploring the integration of these tools in other relevant problems, such as complex hospital discharge.





# What we've been doing

## Mental Health

**We have established a Mental Health Research Hub with £750,000 of additional funding by the NIHR to enable research-led mental health services across the lifespan in pressing areas of mental health linked to substantial health inequalities in our region.**

Eight cross-theme research projects have been created and four post-doctoral research fellows form part of the team lead by Sam Chamberlain a Professor of Psychiatry at the University of Southampton and an Honorary Consultant Psychiatrist at Southern Health NHS Foundation Trust.

Our research includes:

- The promotion of healthy ageing by looking at ways to address alcohol use disorder, loneliness, and isolation in older people.
- Examining ways to identify young people at risk of mental health conditions, including addictions to alcohol and gambling. In addition to this, we have been looking to promote early intervention to support younger people in care and how to improve treatments for children under-5 with ADHD.
- How to support people with long term mental health disorders, like treatment-resistant anxiety and depression, as well as how community support can increase their resilience and the use of social prescribing.
- How to promote mental health, wellbeing and resilience in health and care professionals providing care and treatment to people with mental health problems.



As part of this initiative, we awarded 6 mental health internships to individuals including awards to Solent Mind and a former service user. The research projects include support for ex-military veterans, person centred care for people with enduring mental illness, peer led crisis support services and perinatal mental health.

The Mental Health Research Hub aims to work collaboratively across a wide range of public and charity organisations to increase the amount of mental health research being carried out and to improve mental health services.

## Social Care

**An effective health service is reliant on an effective social care system. We have been developing a robust research base for social care, to ensure that local authorities (LAs) and third sector organisations provide the most effective services within a wider integrated system of health and social care.**

In Southampton we have been supporting the council's successful bid to host to establish the Health Determinants Research Collaborations, bringing £5 million of research investment.

The NIHR Health Determinants Research Collaboration Southampton will be hosted by the council, working with universities and Southampton Voluntary Services to combine expertise in the wider determinants of health. Bringing together local government and community knowledge with research skills from the academic field, the aim is to improve the evidence base on which policy decisions are made in important areas that impact on health and health inequalities.

In conjunction with NIHR CRN Wessex and four universities we have been working with local authorities in Hampshire, Dorset and in Portsmouth and Southampton. Researchers are embedded within council social care services to look at a wide range of issues and to encourage the uptake of research among social workers.

Projects include measuring how effective engagement workers are in dealing with men at high risk of committing domestic violence in Southampton. In Dorset the project is trying to understand the reasons behind the shortage of social workers in local councils. It has been examining the training, development,

recruitment, and retention of social workers by speaking to undergraduates, trainees, and more experienced staff. This aims to help local councils improve staff retention and recruitment and to run social services effectively and safely.

In Portsmouth the city council is working with the University of Portsmouth to co-produce a research programme that will establish a learning partnership to help support social services with the latest research evidence and provide professional development for social workers. Our post-doctoral fellow from the University of Winchester is working with Hampshire County Council to explore how the two organisations can co-operate in adult social care research.





# What we've been doing

## Leading Nationally

**We lead on the Ageing, Dementia and Frailty National Priorities Programme with ARCs across England. We have been working to coordinate the uptake of tried and tested methods to improve the lives of older people in England.**

The four year programme has seen work across ten ARCs working together to expand and improve care for older people in care homes and the community.

ARC Wessex coordinates and facilitates a learning community for 60 dementia researchers (DEM-COMM). Through a programme of events, we promote development, enable networking, and support the advancement of Chief Investigator skills and knowledge across the cohort.

The DEM-COMM programme moves from strength to strength with additional NIHR and Alzheimer's Society funding to extend the work of the cohort and offer internship awards.



## Public and community involvement and engagement

**Support for our work with public and patients is shared across the regions' NIHR partners. It creates a common front door to help shape a wide range of research. It makes best use of our funding, with joint roles, resources, and activities; and it links more people, partners, and creates opportunities through shared interests.**

Together we have built an ever-growing pool of public partners, bringing diverse viewpoints, from across our region and beyond. We host community events, talk regularly and channel specific opportunities to people with relevant interests or lived experience.

We work to reflect our communities' voice in our work, and we have been able to put people's experiences and views at the heart of our ageing and dementia work, and our mental health research projects.

We have piloted and evolved public involvement in the ARC. Public partners are part of our strategic Partnership Board as well as at a theme level influencing the direction and running of our research themes. The learning approach is now shaping public governance in other local NIHR organisations.

We work with Hampshire and Isle of Wight Integrated Care Board (ICB) and an alliance of voluntary, community and social enterprise (VCSE) organisations. The ICB secured two rounds of NHS England funding for the Raising Voices in Research (RViR) initiative to ensure more diverse representation in research.



Raising Voices in Research has:

- Established the Hampshire and Isle of Wight Research Collaborative. This brings together those active in research or engagement committed to giving voice to diverse communities.
- Produced a Local Plan for Research, a pledge for good and meaningful involvement of communities in research, and a co-produced training package for researchers. These are all based on communities' recommendations and needs.
- Communications Toolkit was developed to support further engagement by VCSEs.
- Developed a Research Adaptation Programme (RAP) where we have supported VCSE's and researchers in putting the Local Plan into practice and in promoting 'community approved' research opportunities to their wider communities together.

Evaluation from Phase 1 of RViR project reported that **80.5% having never taken part in a research study before.**



# What we've been doing

## Community links

We are working with faith-based groups and small and informal community groups to grow networks in our communities. This way we have been reaching further into marginalised communities and groups underserved by research.

## Examples of what we have achieved

ARC Wessex has supported the appointment of a Community Engagement Officer to help work with our partners to bring researchers and public contributors closer together.

## What happened?

We have worked to identify communities that do not take part in research and have worked with them to create ways to increase their involvement.

We have also been taking research into the community - going where the people are and bringing the researchers to them.



This is what they have had to say:

***Thank you so much for attending Basingstoke Hindu Society Maintaining Mental Health talk at Carnival Hall Community Centre. We had 53 people registered and attending the talk. Mixture of people with different backgrounds... Community engagement was really good; you did a fantastic job. Great to see a welcoming face, smiling and so well engaged with the community. Please continue to engage with the community it really helps to make the strong links with people. Well done, keep it up.***

***Thank you for all the research opportunities you have introduced us to. We are grateful.***

***What a great experience! Most people now want to be involved. Great outcome.***

***I didn't know young people can take part in research too.***

***Thank you for this. It has worked beautifully, and I have received interest from seven people today.***





# Looking ahead

**We are pleased that the NIHR has extended the work of ARC Wessex for 18 months, allowing the ARC to continue to develop its research addressing ongoing health and care challenges in Wessex into 2026.**

The award, of more than £3 million, will extend work in our four research areas: Ageing and Dementia, Long Term Conditions, Healthy Communities, and Workforce and Health Systems.

There is also additional funding for applied research in social care and dementia.

The new projects across our themes include:

- **Ageing and Dementia:** A new research project looking at how paramedics and emergency services can support patients at home and prevent hospital admission a priority.
- Our four post-doctoral researchers (part of the national **DEM-COMM programme** coordinated by ARC Wessex) will have the opportunity to extend their Fellowships and offer opportunities for health and care staff to be engaged and exposed to applied dementia research through dedicated internships. More than £500,000 in additional funding has been made available for this programme.
- We will expand our work on personalised care and self-management for people living with **long term conditions**, a priority for the NHS in the Wessex region and nationally.

- Clinics are being set up to help detect liver disease in more remote and disadvantaged communities in Portsmouth and the Isle of Wight. Researchers working in the **Healthy Communities** research theme will measure how effective these are.
- Our **Workforce and Health Systems** research team will look at how to use data tools to plan for and manage demand for health and care services. This proactive approach can help balance staffing and patient needs to improve care.



# Strategic Vision and Next Steps



## Strategic Vision and Next Steps

To build on this we recognise the importance of engaging with a wide range of stakeholders, and the vital role positive and proactive relationships have in the success of ARC Wessex. It is important that new partnerships continue to be fostered alongside strengthening existing partnerships, both regionally and nationally to maximise our reach

### Our focus will include

**Strengthening Collaborations:** Building on our partnerships across academic institutions, health and care providers, and community organisations to foster multidisciplinary approaches with a strong emphasis on applied health research. We will maximise opportunities for sharing good practice with other ARCs sharing outcomes of projects from other parts of the country that address local need, as well as promoting the excellent research carried out in Wessex.

**Expanding Impact:** Extending the reach of our research findings to influence health policies and practices locally and nationally. This will involve continuing to translate applied health research and mobilise knowledge into practical strategies that improve health services and outcomes.

**Innovating Solutions:** Pioneering the development of new methodologies and technologies that address critical challenges in health and social care, with a particular focus on applied health research that can be directly implemented in clinical and community settings.

## Enhancing Training and Development:

Continuing to invest in the next generation of researchers and healthcare professionals through expanding our training programs and internship opportunities. This includes specialised training in applied health research to equip professionals with the skills to effectively translate research findings into practice.

Through this strategic vision we will ensure that ARC Wessex not only continues its vital role continuing to integrate and embed research in our health and care systems but also sets new benchmarks in health and care innovation. We look forward to working with you all to ensure our future research responds to, and meets, a wide range of health and social care needs and the communities we serve.

**Professor Catherine Bowen,**  
ARC Wessex Deputy Director

**We are proud to champion applied health research across the Wessex region. A recent independent review of what we do well and what we should focus on going forward identified the strengths in our culture and positive and inclusive environment. Our leadership is seen as approachable and supportive, providing an open and transparent environment to work in. There is also respect for our high-quality research and the work we do to integrate research into real-world applications - enhancing patient care and community health outcomes.**