

<p>Institution: University of Hertfordshire</p>
<p>Unit of Assessment: Panel A(3B): Allied Health Professions and Nursing</p>
<p>a. Overview</p> <p>The Allied Health Professions and Nursing unit, part of the School of Health and Social Work, is incorporated into the Health and Human Sciences Research Institute (HHSRI), which provides the wider organisational structure and support for research and is one of the university's three research institutes. The HHSRI ensures interdisciplinary collaboration by bringing together Nursing and the Allied Health Professions with health services researchers working in the Centre for Research in Primary and Community Care (CRIPACC), the Research Design Service and the Clinical Trials Support Network. The research groups are subdivided into strategically focused research programme themes, each with dedicated research teams. These are: Adolescent and Child and Family Health; Older Peoples' Health and Complex Conditions; Patient Experience and Public Involvement; Evidence Based Practice; and Mental Health and Social Care. This submission consists of 13.9 fte researchers including five professors, two readers and two senior research fellows. With their postdoctoral researchers, doctoral students and research assistants, they lead, manage and develop the research programmes and sub-groups.</p>
<p>b. Research strategy</p> <p>The university's overarching Research Strategy 2011–15 aims to achieve research excellence in specific areas that demonstrate the capability to create a dynamic culture and environment, raise the university's international profile, excel in impact, exploitation and dissemination, and develop the next generation of researchers. Our research strategy has been shaped by these aims. Since 2008, investment by the university from the QR allocation (in excess of £2m) has been specifically identified to support our research against an agreed research delivery plan, including staff costs. In addition, centrally funded small grants have been provided to support the development of impact evidence, publications in open access journals, research workshops, and procurement of equipment and software. Highlights of achievements against our research plan since 2008 include:</p> <ul style="list-style-type: none"> • Extension of international research through collaboration with the EU, the World Health Organization and international nursing organisations. The Adolescent and Child Health research group is now part of the WHO Collaborating Centre through the Health Behaviour of School-aged Children (HBSC) study and has generated over £1m in grant awards from the Departments of Health/Education and DeFRA to support the work. • Growth in the field of older age and dementia, leading to grant awards totalling £4.43m from NIHR, MRC and charities. • Recognition of CRIPPAC as an international centre of research excellence, as evidenced by externally funded overseas PhD students, funded international study tours by academics, and invitations to advise foreign research councils and governments on community nursing, long-term care and adolescent health issues. • Demonstrable impact of research on policy and practice, as discussed in the impact statement and impact case studies. • Growth in doctoral research students by approximately 25% and 19 PhD completions, supported by the UH Doctoral College. • Recognition as a centre for research training, as evidenced by the award from NIHR/CNO to provide the Masters in Clinical Research programme for Nurses, Midwives and Allied Health Professionals 2009–12 and the award to provide the NIHR/CNO Mentorship Programme for Clinical Academic Researchers in Nursing, Midwifery and Allied Health Professions and Healthcare scientists 2012–15. • Established a leading role in Patient and Public Involvement in Research with linked NIHR funding, and membership of INVOLVE, a national advisory group that supports greater public involvement in NHS, public health and social care research. • Founding strategic partner in the Eastern Academic Health Science Network (EAHSN) and partner in the Collaboration for Leadership and Applied Research in Health and Care (CLAHRC East of England).

Future strategic aims and goals. Our aim is to increase the maturity, quality, impact and reach of our research through the achievement of a number of objectives over the next five years. These objectives are informed by national and international priorities and initiatives:

1. To grow new research themes in response to the Francis Report and the DH agenda for health care integration in the community, drawing on Improvement Science methods. Improvement in health care delivery and outcomes will be achieved by working in partnership with the **Eastern Academic Health Science Network (EAHSN)** and the **Collaboration for Leadership in Applied Health Research and Care (CLAHRC) East of England**. Our proposal to develop a strategy for Patient and Public Involvement (PPI) across the CLAHRC has already been accepted, led by **Wilson** with the University of East Anglia, as has a network-wide proposal led by **Goodman** on dementia and patient safety supported by **Williams**. We plan to extend engagement with industry by developing the application of research to clinical problems such as dementia and pre-hospital care through investigating novel approaches to assisted living with the Department of Computer Science's adaptive systems group. Improvement Science is the focus of a European nursing group from six countries led by **Kendall** that is extending these ideas to develop innovative nursing interventions and outcomes.
2. To extend the theoretical model of Assets for Health derived from the HBSC study into our programmes and to test the emerging components more widely across the age groups.
3. To extend international collaboration. **Brooks** is engaging with EuroCHILD and UNICEF on a European project on child wellbeing. **Kendall** is co-ordinating an application for an EU Cooperation in Science and Technology (COST) grant to fund a Centre of Excellence in Nursing Science across six European countries. This has resulted from the growth of research relationships with nurse researchers as a direct outcome of a series of international conferences on community health nursing that have been convened by **Kendall** and **Goodman** since 1997 ([ICCHNR](#)). These events continue, with the next international conference planned for 2015 in Seoul in collaboration with the Korean Academy of Community Nursing. **Ramon** and colleagues have made significant contributions to international research in mental health and management of violence that will continue through EU awards and the international masters programme in social work. International collaborations will also continue in relation to **Wills'** development of visual methodology in New Zealand, **Wilson's** work on the Expert Patient in North America and **Williams'** collaborations with Monash University in Victoria and Queensland University of Technology as Associate Professor Paramedic Science, where she is developing grant applications around the internationalisation of paramedic roles and the ambulance services.
4. To continue to recruit high-quality students through NIHR and other funding streams, increasing home student registrations by 10% and international registrations from the current two full-time students by a factor of one per year. **Kendall** is a Visiting Professor and advisor to the University of Genoa on their doctoral programme, attracting visiting PhD students from Europe through Erasmus agreements. We plan to extend international postgraduates to our MCLinRes and doctoral programmes as a result of such international activity. An international PhD student conference is currently planned for spring 2014 at the University of Genoa and will become the first in a series across six countries.
5. To continue a strategy of enhancing the impact and reach of research through improved use of a range of media. Dissemination of research has increased since the last RAE, with a total output of 428 peer-reviewed publications and books, and use of mixed media such as DVDs (e.g., OPTIMAL), interactive websites (e.g., [Community of Practice for Health Visitors](#)) and social media (e.g., CRIPACC Facebook page and Twitter) to achieve maximum reach. Use of internal funding and grant funds will enable researchers across all groups to increase their reach and impact by at least 30% in the next five years, as measured by contacts, citations in non-academic media, evidence of use of research findings and outcomes.

Research programmes and groups

- (i) **The Patient Experience and Public Involvement in Research** (PPI, led by **Wilson**). This group has led developments in strategy and methodology in PPI and, through **Wilson's** appointment to INVOLVE and **Goodman's** work with Dementias and Neurodegenerative Disease Research Network ([DENDRoN](#)), has influenced local and national approaches to

public engagement in research, particularly with the very vulnerable. Research covers studies that concern the patient experience of chronic illness, quality of life and urgent care, including NIHR–RfPB-funded studies on self-management of chronic illness (**Wilson**); cohort studies of people with rheumatoid arthritis (**Young**); and patient experience of pre-hospital care (**Williams**). Appointing Professor Jose Miguel Morales as Visiting Professor from the University of Malaga has strengthened the international focus on the patient experience in the field of chronic illness. The **Public Involvement in Research Group (PIRG)** ensures that the priorities and concerns of children, young people, families, patients and carers are integrated into grant applications, study design management and dissemination, joint authorship of papers and grant applications.

- (ii) **Evidence synthesis and knowledge transfer** (led by **Bunn**). All programmes are underpinned by the work of expert methodologists in evidence synthesis (**Bunn, Trivedi**). A Cochrane editor, **Bunn** has led the group providing expertise in systematic reviews that have resulted in successful NIHR RfPB and HD-SR grant submissions in the dementia and older people's health areas. Evidence dissemination into the NHS and social care has been aided by two research interest groups initiated by CRIPACC: AGEnet for older people, and REACH for adolescent and child health. Translation of this work into the NHS is being continued through the CLAHRC–East of England and Eastern Academic Health Science Network.
- (iii) **Adolescent, Child and Family Health** (led by **Brooks**). The work from this programme is aimed at changing how the health of children and young people is defined and addressed through the development of Assets Theory, an approach to reviewing the strengths and resilience of young people rather than deficits. The research has attracted funding from the DH/DfE, ESRC, DeFRA and Food Standards Agency (FSA). **Brooks'** work on the Health Behaviour in School-aged Children (HBSC), led in collaboration with St Andrews University/WHO Collaborating Centre and involving 43 countries, has contributed to international theory development in this field. The appointment of Professor Antony Morgan as a Visiting Professor from NICE public health department has contributed to the theoretical development of the Assets Based approach to health promotion, which is also informing our work around older people's health. **Wills'** work (ESRC-funded) on parents' and teenagers' conceptions of diet in collaboration with the University of Edinburgh is directly relevant to the inequalities in health agenda. This in turn has led to CRIPACC becoming a preferred provider for Food Standards Authority (FSA) research. An FSA-funded study (**Wills and Dickinson**) on food hygiene and kitchen practices in collaboration with the University of Newcastle has recently been published as *Kitchen Life*, with its novel approach to visual methodology. As part of our appointments strategy, Mark Whiting has joined us as the WellChild Visiting Professor of Community Children's Nursing, which will enable us to develop further areas of research in relation to children with complex needs.
- (iv) **Older People's Health and Complex Conditions** (led by **Goodman**). This programme represents a range of externally funded work that has focused on people at risk of falls, inter-professional working for older people living at home, evaluation of different models of nurse-led case management, and a series of care home-based studies on health care delivery and support of people with dementia from diagnosis to end of life. Linked to the dementia research and the work on frail older people is a programme of research funded by the NIHR which has tested and compared how the NHS works with care homes (**Goodman, Dickinson**). This work has informed the Care Quality Commission survey on evaluation of health care delivery to care homes and was incorporated into the British Geriatrics Society recommendations on health care for this population. It has also resulted in an invitation from the deputy High Commission for India to visit Mumbai to brief a working group on standardisation and regulation of care homes. **Goodman** is a founder member of the Enabling Research in Care Homes (**ENRICH**) initiative that arose from a briefing meeting with the Department of Health on the need to create a research infrastructure for care homes.
- (v) **Mental Health and Social Care** (led by **Ramon**). Since 2008, research in this programme area has been driven by policy and practice initiatives to reduce inequalities in health care and to ensure services are delivered in partnership with users of services. It brings together researchers from mental health, psychiatry, social work and criminal justice and is underpinned by engagement with service users.

Research culture. A vibrant research culture within the HHSRI and CRIPACC is characterised by a monthly seminar series and two research interest groups at which we encourage internal and external speakers. Speakers have included John Freeman, Queens University (Canada), 'Bullying: How do Canada and England compare?'; Erik Klein Wolterink (Amsterdam), 'The value and practice of using visual methods in research'; Professor Chris Bonell, Oxford University, 'The effects of the school environment on student health'; and Dr Lisa Hinton, Oxford University, 'Life-threatening illnesses in childbirth: The long term burden for mothers and families'. These seminars are well attended by staff and students across the health spectrum.

We also run a writing group for early career researchers; a tutorial group for PhD students; an annual research student conference; and Action Learning Sets for emerging researchers, which involve mentorship from experienced researchers based on learning objectives in small groups. Evaluation by participants has shown growth in confidence and in outputs, particularly journal papers.

c. People, including:

i. Staffing strategy and staff development

Our strategy has been to appoint staff directly to senior positions alongside a promotions policy that allows recognition of research excellence through appointments to Reader and Professor. To support our programmes, we have appointed visiting professors within specific areas of expertise from the NHS (**Whiting, Young**), NICE (**Morgan**) and internationally (**Morales**). Internal and external income has been used for lecturer and postdoctoral researcher recruitment and in assisting new researchers to join teams and take up PhD research development opportunities.

The university launched the [Concordat to support the career development of researchers](#) in April 2010, and later in the same year was one of the first universities given the European Council HR Excellence in Research Award, which was subsequently re-approved after its two-year external review. The Concordat provides the framework for the university's approach to researcher development, which is cascaded down to each unit. Research staff are required to attend both central and local induction and training and have two appraisal meetings a year, with challenging but achievable research targets. All staff are encouraged and enabled to take advantage of the university's staff development opportunities, which include the Generic Training for Researchers programme and other programmes provided centrally. This includes CPD courses in career management, leadership and management, personal effectiveness, specialist research skills and techniques, doctoral student supervision, and public engagement. At the local level, strategies including the appointment of research leaders for professional groups, a regular writing group, and a series of Action Learning Sets for research have enabled staff to increase their confidence and ability in authorship on publications; become co-applicants on grant applications; undertake mentorship of new researchers; work in partnership with the Patient and Public Involvement in Research group; participate on groups and committees; undertake international conference presentations; and achieve PhD completion. The university participated in the 2010, 2011 and 2013 Careers in Research Online Survey (CROS). The 2013 results show that in 12 out of 18 categories UH responses are above or more positive than the national average. The survey provides valuable feedback to the unit on its staff development strategy.

In 2010–11 a HEFCE-funded grant enabled the university to improve leadership development for researchers, in which all professional research leads are invited to take part. The school, supported by CRIPACC and the UH Centre for Mentorship, secured the mentorship contract for NIHR/CNO-funded research fellows in collaboration with other partners for 2012–15 (<http://www.healthresearchmentor.org.uk>). This high level of mentorship from UK-wide senior researchers and leaders is enabling early career researchers and post-doctoral researchers to join a national network that will form a community of practice of clinical academic career researchers.

The unit fully supports the university's equality and diversity principles, and all new staff to the university, including researchers, receive mandatory training in this area as part of their induction to ensure that we deliver considerate and inclusive services. In developing its approach to staffing and staff recruitment, the unit is supported by the university's [Equality Office](#) and Disability Services which advise on legal issues surrounding equality and disability, and on best practices. As an example, one visually impaired person has been provided with appropriate enhancing

computer equipment. The university promotes 'family friendly' policies such as flexible working, has an on-site children's nursery and offers support for staff with caring responsibilities. The university is a member of the Athena Swan Charter and a Stonewall Diversity Champion.

ii. Research students

We are committed to the growth of the next generation of researchers, in part facilitated through our flexible and responsive PhD and professional doctorate programmes. Research training is coordinated by the [Doctoral College](#), which oversees quality assurance and training for all key milestones of the research degree process. It provides a comprehensive programme of [Generic Training for Researchers](#) (GTR), informed by RCUK guidelines and designed to provide the knowledge and skills to help students progress successfully through research degrees and into research careers. The programme is open to all staff and research students.

Experienced staff are expected to supervise up to the equivalent of three full-time PhD/DHRes students. Supervision teams comprise at least two academic staff and meet regularly. Progression vivas involving assessors external to the team and annual monitoring are part of a formal schedule to facilitate successful completions. The school has a Research Tutor supported by an Institute Head of Research Degrees. The Doctoral College, through the Research Degrees Board, monitors students' progress and oversees both progression and examination. Research students participate in an annual research student conference, where they can present papers and posters. They are encouraged to take full benefit of the wide range of courses available within the GTR, which covers a variety of areas of supporting studies, including the process of research degrees, personal development, employability and information technology. There is also a GTR Summer School run each year for part-time research students. The university achieves consistently good results in the Postgraduate Research Experience Survey (PRES), with above average scores. This trend has continued in 2013, with supervision and research skills being particularly highly rated.

The professional [Doctorate in Health Research](#) (DHRes) runs as a cohort-based residential programme. It is tailored for multi-disciplinary clinical and service-based researchers to enable them to develop and provide applied research that meets the needs of the users of health and social care. The programme provides a range of learning opportunities that are also available to PhD and masters students as required. In 2009 we were one of only seven universities in England who received almost £2m in funding to support the first round of the NIHR/CNO funded Masters in Clinical Research (MCLinRes) contract which has so far enabled us to award grants to 39 NHS-based Masters students.

d. Income, infrastructure and facilities

Since January 2008 we have secured grant awards in excess of £10m from a wide range of sources. For example:

Research Councils: Over £0.25m from ESRC to investigate recovery from illness from the patient perspective, in collaboration with HealthTalk Online.

Medical Research Council: £69,000 to look at wellbeing in older people, in collaboration with UCL (**Goodman**).

National Institute for Health Research: £9.2m on a range of studies, notably in older people's care, patient and public involvement, and family and child health, all in collaboration with partners in the NHS and universities including UCL, LSHTM, Cambridge, Newcastle and Warwick (**Goodman, Wilson, Kendall, Bunn, Trivedi**).

European Union: €1m EU Daphne project (**Ramon**).

Other: The Prime Minister's national dementia funding call. Three projects of the 11 awarded grants are based at the university, two led by **Bunn** and **Trivedi**; and one, with **Goodman** as a collaborator with Newcastle, on end of life care. **Goodman** has been awarded two years' funding by the education commissioner to develop and evaluate a Hertfordshire-wide community of practice for dementia champions as a model for innovation across clinical settings.

The £6m Health Research Building co-locates research across the HHSRI, including pharmacy, pharmacology, psychology and health services research. This has enabled research synergies

across nursing, social care, allied health professions and health services research. For example, **Trivedi** led a randomised controlled trial on the effects of simvastatin on erectile dysfunction in older men with the Centre for Lifespan and Chronic Illness Research (CLiCIR). **Wilson** is collaborating with clinicians from CLiCIR on a RfPB study to investigate self-management strategies in patients on haemodialysis (SELFMADE); and **Rennie**, based in CLiCIR, collaborates with **Wills** on nutrition-related work, including a new grant to FSA. The Clinical Trials Support Network has been pivotal to the developments within the university on the governance of clinical trials and has resulted in the production of Standard Operating Procedures for clinical research, including appropriate indemnity arrangements and the overseeing of clinical research. To respond to recent RCUK and EU data management requirements, Information Hertfordshire, which provides the university's information services, information technology and learning resources, collaborated with the HHSRI in two successful JISC grants in 2012 to run a series of mini-projects, including two from this submission, with staff to develop competencies in data management.

The university's Research Information System manages and publishes research outputs and web-related information. Allocation of research funding has been used to provide core support for senior researchers in health and social care research and to fund small projects, research administration, co-ordination of research management and finance. The university also offers state-of-the-art library and IT provision through Information Hertfordshire. This includes StudyNet, a virtual learning environment, through which researchers and research students can access online research resources. Research students have access to study space within the Learning Resource Centre and the school. A local research co-ordinator supports post-awards and contracts, with further central support from the [Research Grants Team](#), who advise on grant costing, application and administration as well as on research ethics. The Intellectual Property and Contracts team produce and monitor all research contracts and associated IP issues. The university is a full member of the RCUK Research Integrity Office and has approval processes for studies involving human participants and potentially problematic ethical issues relating to research. In relation to NHS Research Sponsorship, the university is a 'recognised sponsor'.

On research governance, the HHSRI is the foundation of the organisational infrastructure supporting research. It facilitates research in its constituent areas by operating a number of schemes and policies to support the research environment, such as an annual small grant scheme to provide seed-corn funding for research projects. Another example is the compulsory 'second reader' system in which experienced researchers share their knowledge of what strong grant applications require. The UH Research Committee of the Academic Board meets three times annually to review institutional strategies and priorities concerning infrastructure. We are represented on the committee by the research institute's Director of Research and the school's Associate Dean for Research (**Kendall** and **Williams**). The university's Research Degrees Board also reports to the Academic Board on all matters concerning quality and the award of research degrees and research student support.

e. Collaboration or contribution to the discipline or research base

Collaborations: The unit has put in place a total of 48 formal national and international partnership agreements for research since 2008, including six bi-lateral Erasmus agreements to support the mobility of research students and provide PhD training. The Health Behaviour of School-aged Children (HBSC) study collaborates with 43 partners from health and social science disciplines; resulting in joint conferences in Cambridge, Istanbul and London, as well as co-authored outputs and PhD opportunities. Collaboration with six nursing schools at European universities (Linköping, Genoa, Rome, Malaga, E. Finland, Turkey) culminated in an EU COST+ programme application to establish a network in Nursing Science to take forward improvements in the discipline.

Journal editorial boards and scholarly contributions to the research base

Brooks	<i>Primary Health Care Research & Development</i> (PHCRD); Associate Editor <i>Health and Social Care in the Community</i>
Bunn	Editor for the Cochrane Injuries Group and editor of evidence digests for the Institute of Health Visiting
Goodman	<i>Journal of Health and Social Policy</i> , International Expert reviewer Norwegian Research Council, Invited expert panel member for review of end of life research

	for the Belgian Science Policy Office Brussels
Kendall	Editor in Chief, <i>Primary Health Care Research & Development</i>
Trivedi	Cochrane Nursing Group, Cochrane Summary Reviews; editor PHCRD
Williams	<i>Journal of Paramedic Practice</i>
Wills	Sociological Research Online editorial board
Wilson	<i>Journal of Cancer Survivorship, British Journal of Community Nursing</i>

Highlights of participation in committees, peer-review and other community service

Brooks	NIHR-RfPB East of England panel until 2011, Vice Chair of Association for Young People's Health, member of the Public Health Board, Hertfordshire.
Bunn	NIHR-RfPB East of England panel
Goodman	Project Board and founder member of the Enabling Research in Care Homes initiative, DeNDRoN Primary Care clinical Study group; invited contributor to the MRC/EU Joint Priority Setting exercise in Neurodegenerative Disease (JPND). Briefings to HM treasury on long term care needs and related workforce demands. Member of the NIHR Health Service Delivery and Research Commissioning Board; Alzheimer's Society Public Health Committee and Care services and public health Grant Advisory Board 2013; NIHR Age and Ageing speciality group lead for Essex and Hertfordshire and member of national board since 2009; Honorary Advisor to the Board of Royal Surgical Aid Society.
Kendall	NIHR-CAT panel; German Health and Medical Research Council committee, 2010; Irish Health Board panel 2013; member of DH Health Visiting Taskforce group; Trustee of Institute of Health Visiting; Co-convenor International Collaboration for Community Health Nursing Research; member of Herts node of the EAHSN; member of the Joanna Briggs Institute (University of Adelaide) advisory group on community nursing.
Williams	Chair, the Research and Audit Committee, College of Paramedics; member, National Ambulance Research Steering group; member, 999 Research Forum.
Wills	Member of the Expert Panel, Government Office for Science for the Science Review of the Food Standards Agency 2008–9. Food Standards Agency Social Science Research Committee from 2008–11. ESRC's peer review college (since 2010), expert evaluator for the European Commission's 7th Framework Programme (since 2007).
Wilson	Member of the Management Executive Group, East of England Primary Care Research Network; Member of the East of England NIHR Research Design Service Patient and Public Involvement Working group, NIHR-RfPB East of England; expert member of the EPP CIC (now called Self Management UK) National Advisory Panel; member of NIHR INVOLVE and member of the Hertfordshire NHS Ethics Committee until 2011.

Honours and awards

Goodman	Fellow of the Queens Nursing Institute, NIHR School for Social Care Fellow 2010, NIHR Senior Leader programme, Essex and Hertfordshire CLRN Award Outstanding Clinical Research Professional Category 2012.
Kendall	Fellow of the Queens Nursing Institute, Academic Professor of the Royal Society of Public Health.
Williams	Honorary Fellow of the College of Paramedics.
Wills	Research Council UK Fellowship 2005–10.
Wilson	East of England Senior Clinical Academic Award 2009–2012, Essex and Hertfordshire CLRN Award Outstanding Clinical Research Professional Category 2012.