



Putting the person into the provision: A Service Provider's perspective on using research

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Three main themes I will cover:

- 1. The Service Provision**
- 2. Research**
- 3. The Older Person (the User)**

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The Service Provider

1. Commissions or provides services or projects.
2. Is resource, time and budget limited.
3. Often has to make reductions in services without obviously decreasing quality of service provision.

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The Service Provision

1. Has to justify all overt expenditure – *'value for money'*.
2. Outcome focused!
3. Enablement and promoting independence.
4. Provision as part of a long or short term plan.

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Service Provision and Research

1. How does Research influence Service Provision?
2. How do Service Providers use research?

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Service Provision and Research

- 1. How does Research influence Service Provision?**
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How does Research influence Service Provision?

- Research acts in three ways:
 - It can **set the agenda / evidence for** service provision.
 - It can be **responsive to and evidence the benefits of** service provision.
 - It **can ignore** the immediate service **priorities** but play a useful part through adding new information to support **future** service provision.

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Service Provision and Research

1. How does Research influence Service Provision?

2. How do Service Providers use research?

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How do Service Providers use Research?

1. To **inform** decisions.
2. To **justify** resources / expenditure or lack of expenditure on specific services.
3. To inform and **add weight** to business cases and in business planning.
4. To Inform **planning future** service priorities.

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Research – *the issues*

1. Service Providers rarely have **access to** research directly.
2. Do service providers have the capacity to **judge** research?
3. Service providers do not know **source of** the research?



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What Service Providers want from Research

1. Must be quotable.
2. Clear and concise.
3. Have clear tables with numbers.
4. Realistic outcomes and recommendations.
5. Evidence based and quantitative
6. Applicable to working practice.
7. Does the research work with current procedures and protocols – fit work patterns.
8. Research findings and work priorities – alignment with.

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Difficulties with research

- Reluctance from participants to get involved.
- Often the **same** people will be used repeatedly for different projects.
- Difficulty if research produces **increased demand for a service** (cost implications).

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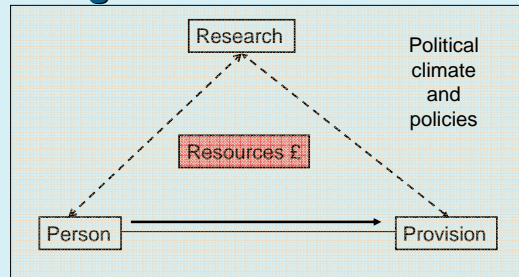
Commissioning

- Academic research plays second fiddle to Govt publications and other service providers.
- If a service is considered a **high priority** then resources **are made available**, if it isn't then it is unlikely to obtain any backing.

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The reality of the Research triangle



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How can Research benefit services?

- Defining research objectives – extensive overlapping of funded research.
- Tailoring research to real world practice.
- Emphasising similarity to other research and making explicit the uniqueness of the research.
- Working with older people as an inclusive partnership.

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Older people

- The voice of older people can be mediated through key groups, often voluntary which are funded by councils.
- Many committees have the same older people on them.
- Older people can be reluctant to join these committees.

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The older person

- As a consequence the needs of many older people are not met.
- The agenda of some service providers has changed, for example, from "supporting the vulnerable" to "promoting independence". Surely both these should be on the agenda.



Research should lead to enabling people without over complicating their lives is essential

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The Research Agenda

- Research with older people tends to focus on immobility, impairment and frail older people.
- Research should be concerned with promoting the healthy and maintaining wellness.
- Not Complicating lives.



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Final thoughts



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Older people adapt to and enjoy new technology but must engage in and with research and researchers for change to happen

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