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## The importance of research for practice – drop into SCEiP’s evidence clinic at #ncasc13 to find out more

Blog Editor

*Research evidence is essential in making robust defensible decisions about social care services. We understand the barriers, but we know the need for – and value of – research, especially at a time when resources are scarce and demand is increasing. Our **Evidence Clinic** at [#NCASC13](#) aims to bring research evidence to those in practice. We’ll be there to hear about delegates’ research evidence needs and requirements and tell them about the support we might be able to provide. We’re also on the lookout for any innovative methods that could be used to engage with practice and research, and if we find them we might just fund them!*

- Local authorities are looking for evidence that will give them a better understanding of what they need to do to improve outcomes and to achieve value; 90% of research studies are addressing questions that policy makers/practitioners want answers to, such as how best to target resources, how to coordinate service delivery, how to fund services and how to measure outcomes.
- Local authorities have experience on the ground about the day-to-day realities and knowledge of current priorities; researchers have a different perspective, with knowledge of the evidence from related areas, from other countries or from the past.
- Local authorities hold by far the best sources of evidence and data; researchers can provide robust analysis and interpretation of that evidence.
- Practice evidence can come from anecdotes. The value of anecdotes comes when there are many of them, and they are saying similar things; research can be seen as ‘the accumulation, aggregation and analysis of individual anecdotes’.
- Evidence-informed practice can lead to better decision making, improved outcomes for individuals, greater confidence when making long-term investments and planning decisions (such as housing with care schemes), and stronger leadership and management. There are significant ways in which research and practice can work collaboratively to improve outcomes for social care.

These are just some of the key messages that emerged from an event we held in July with Sandie Keene (ADASS), the Department of Health and various others, which [Martin Knapp summarised recently](#). We know about the barriers to engaging with research: the timescale of studies that collect new data and that follow people over time is often too long to be useful for practitioners, and publication of final research reports can be outside the policy timescale. Practitioners may see research as a luxury, feeling they do not have time to consult researchers, or not feeling confident in how to use research evidence.

But there are a number of opportunities. For example, the Care Bill 2013, the emphasis on integrated working, and the personalisation of services are together bringing major changes to health and social care in England. Each generates a need for research evidence to support the accompanying practice changes. For practitioners to feel confident and competent “[they need to know what works ... and to be able to justify their decisions](#)”, and this will be increasingly important as new developments take effect.

We all need to work together: researchers to be more accessible, share their work and communicate it effectively; local authorities, commissioners, providers to commit themselves to creating the right environment for learning and co-producing or contributing to research projects; and practitioners to be aware that the sources for evidence-based learning are many and varied, and to know how to use each appropriately.

### The Evidence Clinic

Through the SCEiP project we have been working to bring research and practice closer together. Work on a prevention evaluation framework which started with local authority partners in the West Midlands, mini projects with four local authorities on various practice issues (use of direct payments with a carer, quality of life measures, proving prevention methodologies),

and exploration of the best methods for increasing communication between research and practice are just some examples. As we develop plans for the coming 10 months there is plenty of scope to engage with the project.

Our team will be at NCASC this year hosting an **Evidence Clinic at Stand L1**. We’re available to delegates and others (post comments, tweet [@LSE\\_SCEIP](#), [email us](#)) to hear about research needs and requirements – we’ll endeavour to provide what support we can and signpost to relevant evidence; to collate suggestions about what SCEiP could do next; and share learning and evidence.

We’re also keen to hear how other’s engage with research, and on the lookout for innovative methods to engage with research and/or practice. See you at NCASC!

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