

Manchester Health and Wellbeing Board Report for Resolution

Report to: Manchester Health and Wellbeing Board – 20 November 2024

Subject: Health Determinants Research Collaboration (HDRC)

Report of: Director of Public Health and Assistant Chief Executive

Summary

Health Determinants Research Collaborations (HDRCs) are funded by the National Institute for Health Research (NIHR) to boost research capacity and capability within local government and embed a culture of using evidence to improve decision making on health and health inequalities. Each HDRC is hosted by a local authority which works with university partners to build the necessary collaborative infrastructure to plan and undertake research, bringing together local government knowledge and research skills from the academic community with the aim of improving health and securing better outcomes for the public.

In 2023, Manchester City Council, working in partnership with the University of Manchester, Macc and Manchester Patient and Public Advisory Group (PPAG), successfully applied for funding to establish an HDRC in Manchester (officially referred to as 'HDRC Manchester'). Manchester was one of several local authorities awarded development funding to trail and test some of the new ways of working envisaged in its HDRC application over the course of 2024 as a precursor to becoming a 'full', 5 year, HDRC on 1 January 2025.

This report provides an update on the progress of HDRC Manchester to date. It describes the aims and objectives of the HDRC, the work that has taken place as part of the HDRC development year in 2024 and the current priorities for the 'full' HDRC over the 5-year period 2025-2029.

Recommendations

The Board is asked to:

1. Note the work that has taken place as part of the HDRC development year in 2024.
 2. Support the initial priorities and continued delivery of HDRC Manchester over the 5-year period 2025-2029.
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Our Manchester Outcomes Framework

Our Manchester Strategy outcomes	Summary of how this report aligns to the OMS/Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Each of the Our Manchester Strategy outcomes is associated with a key determinant of health.
A highly skilled city: world class and home-grown talent sustaining the city's economic success	This report describes how HDRC Manchester will seek to improve our understanding of these determinants of health by reimagining the way that local communities are involved in driving the design and delivery of research and, through that, giving them an opportunity to inform and influence the way that decisions are made with the aim of improving health and securing better outcomes for the public .
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	It also describes how the HDRC will work with university partners to build the necessary collaborative infrastructure to plan and undertake research in a way that brings together local government knowledge with research skills from the academic community.
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

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Background documents (available for public inspection): None

1. Background

- 1.1. The COVID-19 pandemic illustrated and amplified the effects of health inequalities across the UK and has led to increased efforts at all levels of government to better understand and address these inequalities. The social, economic and environmental factors underpinning these inequalities - often referred to as the wider determinants of health - are influenced heavily by the work done by local government.
- 1.2. The National Institute for Health and Social Care Research (NIHR) - an arms' length body of the Department for Health and Social Care - identified a gap in local authorities nationally around co-produced research and the routine use of evidence. A report for Sir Chris Whitty, the Chief Medical Officer for England and Wales, showed that, whilst local government has '*a unique ability to take a trans-disciplinary approach to the wider determinants of health*' coupled with an understanding of the value and the willingness to use and create research, the research infrastructure commonplace in the NHS does not exist. Also, local government does not typically have the ability to fund research activity.
- 1.3. In response to these findings, the NIHR established a dedicated funding stream to enable local authorities to become more research active through the creation of Health Determinants Research Collaborations (HDRCs). HDRCs are funded by the NIHR to boost capacity and capability within local government to undertake research and use the findings to improve the quality of the evidence used when making decisions around health and health inequalities. The stated purpose of HDRCs is to help create an evidence-informed culture within local government and set up the infrastructure that enables researchers and local authorities to collaborate and use evidence when it comes to making decisions. This approach will help improve health and secure better outcomes for the public.
- 1.4. Each HDRC is hosted by a single local authority which works with universities to bring together local government knowledge with research skills from academic partners. To date, 30 HDRCs have been established across the UK over two funding waves (see Appendix 1). Funding has been awarded on either a full or development year basis. Development year funding provides HDRCs with a preparatory year to concentrate on establishing the administrative, logistical and enabling elements of ambitious HDRC programmes.

2. HDRC Manchester

- 2.1. The work to develop a funding application to the NIHR to establish a HDRC in Manchester was led by a core partnership group containing representatives from Manchester City Council (Public Health and PRI), the University of Manchester, Macc (representing the VCFSE sector) and the Manchester Patient and Public Advisory Group (PPAG). Key to our thinking when preparing the HDRC funding application was the strong overlap between the focus of the national HDRC programme and the key themes of the Making Manchester Fairer (MMF) action plan, both of which stem from a determination to address inequalities linked to the wider determinants of health. The outputs from research generated through a

successful HDRC could be key to informing the ongoing development and delivery of MMF.

- 2.2. From the outset, the work to develop the aims and priorities of HDRC Manchester has taken a strongly community-focused approach. Rather than investing heavily in a centralised research or analysis function with the City Council, the HDRC proposals are designed to put communities at the heart of local policy through the creation of new systems and activities aimed at generating a *neighbourhood and community-led research culture* across the city.
- 2.3. Too often, communities are ‘consulted’ on pre-set solutions that they do not relate to. The HDRC will help local people to make their own important priorities the subject of joint research and allow them to see its impact on local decisions. Local researchers will be funded to undertake work with communities experiencing inequality, to develop and carry out research linked to health determinants in partnership with residents. In this way, the HDRC will support those living and working in local areas to decide their own research priorities and produce and share their findings through the HDRC’s university links.
- 2.4. Through its work, the HDRC will enable local residents to directly influence decisions about their area and/or community through greater control and influence over research activities and by gaining new skills and experience. In turn, this will improve the impact of research activities across the City Council and partner organisations by increasing the exposure of policy makers to the outcomes local, community-driven research.
- 2.5. On 25 October 2023, the HDRC Manchester team was informed by the NIHR that the HDRC Assessment Committee had recommended its application for funding. Manchester was one of a small number of areas that the NIHR said it would like to see undertake some further development work from 1 January 2024 in order to demonstrate its readiness to become a full HDRC by 1 January 2025.

3. Development Year activities (2024)

Vision and governance

- 3.1. Over the course of 2024, significant progress has been made in refining the vision for HDRC Manchester, including a new vision statement emphasising local involvement in research and decision-making. This was informed by the outputs from a series of engagement events with wider stakeholders, including sessions with the City Council’s Senior Management Team and Senior Leadership Group, to gather feedback on the vision, aims and objectives for HDRC Manchester as set out in our original funding application. The HDRC team has engaged extensively with operational teams delivering services to residents, including both Council and NHS-led neighbourhood teams as well as other enabling functions such as policy, strategy, transformation, data analysis and intelligence.
- 3.2. The strapline for the programme remains “**Putting Communities at the Heart of Policy**”. Based on the feedback from our engagement activities, the HDRC team has refined and simplified the vision for HDRC Manchester programme to “**Giving**

local people an equal say in research and the decisions made from that research, using both real-life experiences and building on current ways of doing things, to make sure the benefits last long after the programme ends”.

- 3.3. Based on the feedback and to support the revised vision, the HDRC team has developed six objectives for HDRC Manchester to achieve by the end of the 5-year full HDRC programme:
- i. Local residents are more able to directly influence decisions about their area, through greater control and influence over research activities and learning new skills and experience.
 - ii. Improved decision making and impact across the City Council and partner organisations, through officer and member engagement and clear governance arrangements.
 - iii. Investment will turbo-charge what we are already doing so that it becomes more consistent and more impactful.
 - iv. Better and more ‘real life’ research, improving our understanding of the wider determinants of health at a local level.
 - v. Dissemination of learning through external partners in Manchester, Core Cities, Greater Manchester, Government, academia, VCSEF sector and elsewhere
 - vi. Sustainable legacy of working in this way beyond the investment
- 3.4. Considerable effort has been made to establish the logistical and administrative elements of HDRC Manchester that are needed to monitor and administer a large-scale funding programme, involving officers from Finance, City Policy, HROD, Democratic Services, Neighbourhoods, Public Health, and Performance, Research and Intelligence (PRI).
- 3.5. Governance arrangements for the HDRC have been established during the development year. A new HDRC Manchester Steering Group has been formed and includes members of the HDRC project team, co-applicants and external stakeholder groups. An Expert Reference Group (ERG) has also been convened. The inaugural meeting of the ERG was held on 22 July 2024 as part of the International Festival of Public Health.
- 3.6. The HDRC Manchester programme has a direct line of reporting into the Making Manchester Fairer (MMF) Programme Board, co-chaired by the Deputy Leader and Executive Member for Health and Well Being and involving senior officers from partners and community representatives. This avoids the need for a separate HDRC Executive and will ensure close alignment of the HDRC and MMF programmes.

Collaboration, community involvement and co-production

- 3.7. One of the major successes of the HDRC team during the development year is to have developed and signed off a formal Collaboration Agreement between Manchester City Council (MCC) and the University of Manchester (UoM). The fact that it was able to do so is a testament to the pre-existing strength of the

relationship between the City Council and local academic institutions, including the University of Manchester (co-applicant to our HDRC bid).

- 3.8. The HDRC team has worked closely with Macc, neighbourhood teams and the local NHS Patient and Public Advisory Group (PPAG) to co-produce a Community and Resident Involvement Protocol for the HDRC. This Protocol describes the core principles for community involvement and our approach to involving communities. Collaboration on this document has been useful in helping to ensure buy-in from the key stakeholders needed to initiate the steps to involve communities in meaningful ways. Co-production has also meant that these steps are acceptable and can be practically implemented alongside colleagues who are already working on the ground with communities, thus allowing the HDRC to take advantage of existing assets and networks. The lead for the Communities and Power theme for MMF sits on the HDRC steering group providing connectivity for the programmes of work.

Training needs and strengths-based assessment

- 3.9. The HDRC team has undertaken an initial Training Needs Assessment (TNA) to identify existing research skills and competencies, determine gaps in research skills, establish training needs and assess the preferred formats and delivery methods. Over 400 people from the City Council were asked to complete the survey and a total of 153 responses were received. Further assessments will be undertaken with the wider Council workforce during the remainder of the Development Year and into 2025.
- 3.10. The first wave of responses showed that staff responding to the TNA have a good, general level of research knowledge and skills. However, this could be improved by providing more advanced training and access to tools and software to support more advanced work.

Stakeholder engagement

- 3.11. HDRC Manchester is committed to ensuring active and continuous engagement with a wide range of stakeholders. Over the course of 2024, the HDRC team has engaged with over forty services and organisations who work on the frontline in communities in order to raise awareness and understanding of the HDRC and how they can be involved. These include:
- Community-based and grass roots VCFSE organisations working in specific neighbourhoods and place-based communities in Manchester.
 - Groups supporting communities of identity comprising residents across the city and the wider region of Greater Manchester and the North West, for example, the Village Action Group, providing support for LGTBQ+ people based in Manchester City Centre.
 - Services of the City Council and public sector partners, including the Manchester Local Care Organisation, the City Council's Neighbourhood Teams, registered housing providers with a strong footprint in the city and primary care services in the city.

- 3.12. These engagement activities have given the HDRC team valuable insight into the priority issues of different organisations and the communities they work with, the services they offer, how they currently engage and where there are opportunities for working differently through the HDRC. The team has identified a set of named contacts from each of these services who will provide a link into, and are willing to support, the work of the full HDRC.
- 3.13. A comprehensive engagement plan will be developed and start to be delivered during the first year of a full HDRC. This will involve engaging with a much broader and more diverse range of organisations in the city, drawing on the extensive sector knowledge and networks of the VCFSE infrastructure organisation Macc and the City Council's own VCS funding team. There will also be broader and deeper engagement with services run by key partners and other parts of the Council as well as with residents directly.

Monitoring and evaluation

- 3.14. HDRC Manchester is committed to ensuring active and continuous monitoring of key activities to ensure that it is compliant with principles of equity, diversity and inclusion (EDI) and to ensure co-production of needs-based packages of training and compliance with policies and procedures. To do this, HDRC Manchester will observe and report on the progress in line with the EDI strategy, training, policies and procedures, and monitor protected characteristics, engagement from staff and public contributors and, to ensure all activities are in line with EDI strategies.
- 3.15. As part of its work during the Development Year, the HDRC team has completed an Equity Impact Assessment (EIA) and made recommendations for the monitoring of protected characteristics and community engagement activities, including a collaboration audit. The team has also produced a training needs and strengths-based assessment (TNA), co-produced a dissemination strategy and agreed processes for monitoring the embedding of staff between organisations.
- 3.16. HDRC Manchester is committed to ensuring active and continuous evaluation of all its activities. The aims of this evaluation are to:
 - i. evaluate the activities of the HDRC Manchester using quantitative, qualitative and economic evaluation methodologies;
 - ii. demonstrate the advantages and limitations through exemplar projects within Manchester that focus on the wider determinants;
 - iii. demonstrate the co-production of research questions with all stakeholders, especially public contributors and community members are important to the success of the HDRC.
- 3.17. Throughout programme, the evaluation will seek to understand and demonstrate the 'value added' by the HDRC i.e. to identify the specific changes in practice, procedure and policy which have been engendered through HDRC Manchester.
- 3.18. The evaluation will also seek to understand better the mechanisms which promote and encourage change in research culture across Manchester City

Council and the extent to which a changed research culture manifests itself at various levels of the workforce.

- 3.19. The focus of the team's work during the Development Year has been on reviewing different evaluation methodologies and agreeing the most appropriate approach to adopt over the lifespan of the HDRC. After discussion with public contributors, members of the HDRC Steering Group and other stakeholders, including the chair of the Expert Reference Group, the team has adopted a Rapid Cycle Evaluation (RCE) approach that will generate evidence to allow the HDRC to 'fail fast' and 'disseminate quick'. This approach will be built on a co-produced protocol for quantitative, qualitative and economic evaluation of the HDRC.

4. Initial priorities for 'full' HDRC 2025-2029

- 4.1. Given HDRC Manchester's ambition to put communities at the heart of policy, the focus of work during the Development Year has been on generating research ideas/questions from local communities, drawing on the views on those who know best and exploring how the HDRC can enable this to have greater impact.
- 4.2. The HDRC team has engaged with stakeholders who represent the different communities within the city via a set of learning day workshops and has also reached out to organisational leaders and networks to ensure that there is a synergy around the emerging priorities for the Year 1 HDRC. The organisational priorities of the City Council, Local Care Organisation, VCSEF sector and other partners have also been reviewed.
- 4.3. Based on these stakeholder-led engagement and refinement exercises, three suggested initial priority themes for 2025 were identified. These are:
- Racially and Culturally Marginalised Communities
 - Housing
 - Young People's Mental Health and Wellbeing
- 4.4. Over the remainder of the Development Year, the team will continue with its engagement and co-production activities and literature reviews/analysis to refine the priority themes for the full HDRC and develop the themes into research questions. However, the Year 1 plans are just the start of a programme of deeper collaboration to develop and refine priorities, identify opportunities, and develop the activities that will enable research and change to happen.

5. Next steps

- 5.1. The NIHR has stated that it will inform HDRC Manchester of its future funding status (i.e. whether it achieves full HDRC status) in mid-November. This decision will follow a review of the 7-month Progress Report which was submitted to NIHR in August 2024.
- 5.2. Whilst we await communication from NIHR, HDRC Manchester will continue its planned programme of activities, and the delivery of key milestones as set out to NIHR. The key milestones were developed around core enabling themes and

activities for our full HDRC, concentrating on cementing the foundations for a strong and successful programme in 2025.

- 5.3. Specifically, HDRC Manchester will concentrate on the development and refinement of initial research questions for 2025 within each of the three broad themes of Racially and Culturally Marginalised Communities; Housing; and Young People's Mental Health and Wellbeing. This aligns with HDRC Manchester's ethos of *putting communities at the heart of policy* and will involve discussion with internal and external stakeholders from across the public sector, VCSEF partners and organisations and local communities and residents as part of a continued programme of community engagement.
- 5.4. The HDRC Steering Group will continue to meet and develop the formal structure of the full HDRC Manchester Team and its alignment with existing internal team structures across key services (Neighbourhood Services, Public Health and PRI), so that we are ready to mobilise rapidly should HDRC Manchester be awarded full HDRC status.
- 5.5. HDRC Manchester will also continue to establish and strengthen the cross and inter organisational links with the University of Manchester, Macc and wider VCFSE partners, concentrating on shared strategic priorities and ambitions.
- 5.6. The City Council already has strong links with HDRCs across the UK (see Appendix 1) through its membership of existing regional and Core Cities networks. The HDRC Manchester team has been sharing knowledge across these networks and will continue to do so, contributing to the wider value obtained by being part of a national HDRC network.
- 5.7. The final Complete Summary Progress Report for activities undertaken during the whole of 2024 will be submitted to the NIHR in December 2024.