0-19 Research Network - Clinical Research Network (Yorkshire and Humber) Project Report and Evaluation

March 2024

Project Team

The development of this report has been supported with input from the whole project team, which comprises:

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Acknowledgements

Executive Summary

This report outlines and evaluates the 0-19 Research Network (Yorkshire and Humber) Project which aimed to:

- Support and increase the participation and recruitment of children and families in public health research, with a focus on those underserved populations (research delivery).
- Increase research engagement and capacity of public health professionals working with the 0-19 age group (research capacity building).

The 2021 NHS Making Research Matter[1] – set out the NHS England Chief Nursing Officer's (CNO) ambitions for research. It aimed to "create a people-centred research environment that empowers nurses to lead, participate in, and deliver research, where research is fully embedded in practice and professional decision-making, for public benefit". Key enablers included developing nurse leaders in research, providing opportunities to participate and a focus on building capacity and capability to deliver research.

The 0-19 Research Network (Yorkshire and Humber) was established in 2013. Its initial aim was to strengthen the Specialist Community Public Health Nursing (SCPHN) knowledge base and improve health outcomes by bringing together practitioners and academics engaged or wanting to become engaged in research. Through its work, the 0-19 Research Network (Yorkshire and Humber) has helped to raise awareness about the importance of research and evidence within SCPHN practice.

In 2022, the 0-19 Research Network was granted project funding from the Clinical Research Network (CRN) (Yorkshire & Humber), to enhance the work of the network in support of the CNO ambitions. The project aimed to address geographical inequity by creating a programme to support individual practitioners to develop as 0-19 Community of Research Practice (CoRP) Champions who would take a lead role in establishing four new CoRPs.

A mixed method evaluation was employed to consider the key learning and enablers. Outlined in the table below is the key learning, enablers and outcomes:

	Project deliverable	Key learning	Key enablers	Outcome/impact
1.	Create 0-19 Research Champion (Y&H) roles that develop the Champions as CoRP Leads, whilst concurrently establishing their respective local CoRP. A CoRP development programme will be devised to support this process.	• Overwhelming positive feedback on all parts of the programme - taught sessions and peer support. • All Champions reported increased confidence and skills in research. • All have established a Community of Research Practice (CoRP), and the programme has supported embedding research in local areas.	• Leadership and management support. • Personal drive and motivation of Champions. • Time and capacity. • Approach of the facilitators. • Peer support. • Networking opportunities.	✓ Programme designed and successfully delivered. ✓ 6 champions recruited from across Yorkshire and Humber. ✓ 100% of Champions reported an increase in research. ✓ 100% of Champions reported an increase in knowledge and understanding of research. ✓ 6 new local CoRP established, meaning a total of 8 CoRPs across region.

2.	Facilitate events that create networking opportunities between professionals to enable collaborations to be established, to co-produce research and to discuss priorities with a focus on 0-19 public health research.	• Previous experience in research and formal training was limited before the project.
		• The network has been seen as a vehicle to support research engagement and build capacity.
		• Engagement in SCPHN research increased during the project.
		• The events, both face-to-face and virtual, supported networking, shared learning and engagement in research.
		• The network has impacted on both individuals and service engagement in research.
		• The main barrier to engagement in the network was reported as capacity.
			• Management support.
			• Local leadership.
			• National policy drivers.
			• Personal support.
				✓ Bi-monthly virtual networking meetings delivered.
				✓ 3 face-to-face networking events delivered.
				✓ Expert speaker and 0-19 public health researchers presented at all events.
				✓ A self-reported increase in attendance to research interest groups, completion of research applications and leading audits, between the initial and repeat surveys.
				✓ Positive shift in confidence, knowledge and understanding of research.
				✓ 92% of respondents report they now know where to go and who to talk to about being involved in research/evaluation.
				✓ Two associate Principle Investigator (PI) places achieved.
				✓ 5 Principal Investigators on studies.
				✓ Delivery of studies:
				  • 3 Surviving Crying sites
				  • 1 COMBAT (Community-based Behavioural Activation Training for depression in adolescents) site
				  • 1 Alarm Distress Baby Scale (ADBB) site
				  • 1 HARMONIE (RSV study - respiratory syncytial virus) site
				  • 1 ICON (I Can Cope - when babies cry) site
				  • And additional 0-19 researcher roles and expert advice.
				
				Continued below

	Project deliverable	Key learning	Key enablers	Outcome/impact
				✓ Research co-applicants • 1 CHESS (Childrens Early Self-care Support for children with Neurodisability) site • 1 research for patient benefit (RfPB) obesity site • 1 physical activity site, findings currently being written up. ✓ Research discussions & Born and Bread in Doncaster (BaBiD) partnership meeting attendance. ✓ 1 Health Education England (HEE)/NIHR integrated clinical academic (ICA) Internship applications (1 successful). ✓ 5 First Steps into Research places, plus mentorship from within the Network. ✓ 1 Chief Nurse & Allied Health Professions (AHP) Fellowship Programme place.
3.	Engage regionally with Higher Education Institutes (HEIs) with a focus on two goals: a. to engage with students to help raise the profile of 0-19 public health research with a view to developing early career researchers; b. to establish links with potential academic supervisors/researchers for research-interested practitioners to engage/ collaborate with (e.g. post graduate study, co-applicants on a bid etc.).	• Developing and delivering a bespoke training session to SCPHN students in HEI settings inspires students to engage in research.	• Engagement of HEIs, student health visitors and school nurses.	**a.** ✓ Training sessions delivered to 2 cohorts of students in the 2022/23 academic year. ✓ HEI training sessions delivered to 3 further cohorts in the 2023/24 academic year. ✓ 65% of training session participants said they would join the 0-19 Research Network. **b.** ✓ Communication established with all HEIs in Yorkshire and Humber.

Continued below

	Project deliverable	Key learning	Key enablers	Outcome/impact
4.	Develop a sustainable prototype model for the CRN in Yorkshire and Humber (and other regions) to develop other successful 0-19 research networks, based on an evaluation of whether the model has been effective in its processes and in achieving its outcomes.	Wider external activity and national achievements. • There were unexpected benefits of an increased presence in Yorkshire and Humber leading to presenting at national conferences and award nominations.	• Increasing the reach of the 0-19 Research Network. • Expanded national reach raising the profile.	✓ 0-19 CoRP Champion programme was successfully developed and delivered. ✓ 0-19 Research Network established and embedded in the Yorkshire and Humber region. ✓ Membership increased from 85 to 280 members. ✓ Interest from other areas and national organisations. ✓ Shortlisted for the Nursing Times Awards. ✓ Won NIHR Clinical Research Network Yorkshire & Humber Research Awards 2023 – Best Contribution in a non-NHS Setting. ✓ 4 Quarterly Newsletters created and disseminated. ✓ NHSE Matron's Toolkit video on the network ✓ Presented at five regional/national conferences
5.	Develop a web presence to increase our visibility, to disseminate information, to ensure the sharing of timely research opportunities, to signpost and facilitate connections, increasing reach.	• Mix-methods of communication are needed for wider connections. • Quarterly newsletters and emails are considered the best way to stay involved and connected. • A bespoke website is wanted as a central place to get information and updates.	• Mixed communication methods.	✓ Website developed. ✓ X (formerly Twitter) presence established with a 0-19 Research profile @019ResearchNet.
6.	Further develop the project planning group of core members to operationalise the project deliverables regionally.	• Having a dedicated group of people with a variety of roles and expertise was vital to the success of the project. • There was an underestimation of the time requirements for some aspects of the project. • Need to include space for the core team to reflect and consider their own development.	• Cohesive team.	✓ Steering Group established. ✓ Governance of project upheld.

Next steps and recommendations

The project has demonstrated clear benefits for both individuals and the services engaged in the network and its activities. The evaluation provides evidence for this being an effective model to increase research capacity within the 0-19 workforce, which is a key ambition of the CNO.

The learning from the project could inform other CRN areas to adopt a similar approach. It is clear however, that without investment, both in time and people, the network would not have been able to deliver the outcomes achieved. In summary, the network is therefore regarded not just as a vehicle to support research engagement, but also a mechanism from which participants have gained in confidence and knowledge, as well as exposure and opportunities.

To fully realise the CNO ambitions, we encourage consideration of the following national recommendations:

1. **Aligning nurse-led research with public need**
   - Seek funding and support to establish James Lind Alliance Priority Setting Partnership for 0-19 research to identify priorities and ensure that future 0-19 research is aligned to public need.

2. **Building the best research system**
   - A national Chair in 0-19 public health nursing research is needed to take a strategic lead in shaping professional practice, teaching and research in 0-19 public health nursing at a local, national, and international level, and to work closely with the CNO England team to deliver the aspirations of the Research Strategy to this currently under-resourced area of nursing.

The following table provides a summary of the recommendations:

Ongoing funding and stakeholder engagement	• Future investment is required to:
	  » Maintain and develop the 0-19 Research Network (Yorkshire and Humber), and the additional resources created during the project, into the future.
	  » Lead the Regional 0-19 Research Network (Yorkshire and Humber) facilitating bi-monthly virtual and face-to-face events – **Research Connections**.
	  » Consolidate the researcher connections that have been developed and to collaborate jointly on grant calls/funding bids – **Research Studies**.
	  » Focus on improved ways of engagement of school nursing.
	  » Run an additional Regional 0-19 Research Leads CoRP (Community of Research Practice) – **Research Leadership**.
	  » Support the newly formed CoRPs to recruit to studies – Research Delivery.
	  » Increase Patient and Public Involvement and Engagement (PPIE) and EDI ways of working within research.
	  » Review and update resources and the webpages.
	  » Maintain communication methods.
	  » Maintain CoRP support meetings and build in reflection/peer support for project leads.
	  » Expand the CoRP Champions programme into all areas of Yorkshire and Humber.
	• Ongoing support from iHV and SAPHNA to give expert knowledge and experience, as well as support national dissemination/networking.

Ongoing project management support	• Dedicated administration to support:
	  » The management of the 0-19 Research Network (Yorkshire and Humber).
	  » Formatting of the newsletter and additional resources.
	  » Management of the 0-19 Research Network (Yorkshire and Humber) social media.
	  » Management of delivery of face-to-face/virtual events.
	  » Coordination of CoRP Champions training/peer support.
	  » Coordination of Project Team meetings.

Maintenance of communication	Promotion of understanding and engagement with the network through:
	• Continuation of:
	  » Regular updates and opportunities via direct email.
	  » Bi-monthly networking sessions.
	  » Bi-annual face-to-face networking events.
	  » Quarterly newsletter.
	  » Annual HEI sessions.
	• Further development of:
	  » X (formerly Twitter) presence.
	  » Webpages to reflect the 0-19 Research Network (Yorkshire and Humber) outputs and wider 0-19 public health research opportunities.
	• Consider expanding to other social media platforms.

CoRP Champion Programme	• Run further CoRP Champions programme:
	  » to give opportunities to organisations in areas without CoRP Champions.
	  » to strengthen areas currently with a CoRP Champion and mitigate against sickness and vacancies.

Personal development	• Establish regular supervision sessions for 0-19 Research Network (Yorkshire and Humber) leads. • Submit journal articles about the project and the 0-19 Research Network (Yorkshire and Humber). • Share learning at local and national conferences/events.

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Chapter 1: Introduction and background

1. Context - NHS National Research Strategy for Nursing

In 2021, NHS Making Research Matter[1] set out the NHS England Chief Nursing Officer's ambitions for research. The strategy aimed to "create a people-centred research environment that empowers nurses to lead, participate in, and deliver research, where research is fully embedded in practice and professional decision-making, for public benefit". To achieve this, key enablers are needed - these include developing nurse leaders in research, providing opportunities to participate, and a focus on building capacity and capability to deliver research.

The strategy highlights five key themes:

i.   Aligning nurse-led research with public need
ii.   Releasing nurses' research potential
iii.   Building the best research system
iv.   Developing future nurse leaders of research
v.   Digitally enabling nurse research

Within 0-19 SCPHN practice (health visiting and school nursing), a growing number of practitioners are participating in "close to practice" public health research and recognising the positive health outcomes this can have for babies, children, young people, families and communities. Research and evidence are the foundations of excellence in care and clinical practice. The National Institute of Health and Care Research (NIHR), established in 2006, has driven the Department of Health and Social Care's research agenda, with a "mission to improve the health and wealth of the nation through research". SCPHNs have undertaken a postgraduate qualification and are well placed to lead, deliver and participate in research. However, it is an area of practice where research capacity and capability needs to be built. The breadth of research activity that 0-19 practitioners could undertake is not fully recognised within the profession and it is imperative that research voices are strengthened.

This project describes a regional Research Network and its aims and ambition to align with the CNO's strategic plan for research. Developing a Network supports a collective approach, bringing together research-interested individuals in the 0-19 public health space.

In 2022, the Network was invited to 'think big' and propose further objectives to enable continued growth and development. The five key themes from the CNO strategy helped to steer the project plan, resulting in a 2-year funded project outlining aspirational aims and objectives.

The strategy highlights five key themes:

Aligning nurse-led research with public need

Our population group (babies, children, young people and families) are underrepresented within public health research. There is a lack of research studies currently that have the potential to benefit our communities. This 0-19 Research Network will enable 0-19 SCPHN services to become confident to engage in research studies for public benefit. It will encourage 0-19 SCPHN practitioners to develop their own research and work with researchers to design research that aligns with the priorities of 0-19 public health care delivery.

Releasing nurses' research potential

The 0-19 Research Network will continue to signpost, connect with and support 0-19 SCPHN practitioners to undertake research opportunities that help build capacity and capability for the individual and the organisations they represent. The 0-19 Research Network believes in the potential that individuals have, to champion the value of nursing research.

Building the best research system

The 0-19 Research Network provides some necessary infrastructure to facilitate access to a supportive learning environment, enabling excellence to thrive within community settings.

Developing future nurse leaders of research

The 0-19 Research Network is dedicated in the pursuit to support the development of research leadership in 0-19 SCPHN Services - by recognising the value of building research capacity and capability and the need to support the development of our clinical academics of the future.

Digitally enabling nurse research

The 0-19 Research Network will continue to use digital technology to collect data around membership, impacts, and to identify research priorities. 0-19 services generate huge data sets of information and there is a long-term ambition to better utilise this data for research purposes.

Throughout the report, the 0-19 Research Network (Yorkshire and Humber) will be referred to as the 0-19 Research Network.

2. Background to the 0-19 Research Network

The 0-19 Research Network is a pioneering initiative, established in 2013 by academics from Sheffield Hallam University and the University of Central Lancashire, known as the North of England Health Visitor Research Forum. Its initial aim was to strengthen the health visitor knowledge base and improve health outcomes by bringing together practitioners and academics engaged or wanting to become engaged in research. From the outset, increasing research capacity and capability through building confidence and skills, enabling collaborations and providing research leadership, were seen as key factors for success.

In 2016, a transition to the 0-19 Research Network facilitated increased reach to school nurses, managers, commissioners, researchers and CRN staff; this in turn led to an additional aim around research delivery and an emphasis on recruiting babies, children, young people and their families into studies. In December 2020, following a successful funding application supported by a founding member, Sheffield Children's NHS Foundation Trust relaunched the 0-19 Research Network, hosted within 0-19 Services.

Since then, the 0-19 Research Network has helped to raise awareness about the importance of research and evidence within 0-19 SCPHN practice. Achievements have been made in members applying for integrated clinical academic (ICA) Health Education England (HEE)/NIHR Internships, First Steps into Research Programme, postgraduate study and PhDs. However, the greatest success in building research capacity and capability has been seen in two geographical areas - Sheffield and Rotherham, Doncaster and South Humber (RDaSH). Both areas have an identified lead for capacity building and an established local Community of Research Practice (CoRP).

Members within these two areas have had the opportunity for the most personal growth and learning within the domain of research, both delivering research and opportunity to undertake a local PI (Principal Investigator) role in research projects.

3. The NIHR Clinical Research Network 2-year Funded Project

This project was developed to address geographical inequity by creating a programme to support individual practitioners to develop as 0-19 CoRP Champions who would take a lead role in establishing four new CoRPs. These new and already established CoRPs would operate under the umbrella of the 0-19 Research Network. It was envisaged that this project would support the two core aims, which are:

- To support and increase the participation and recruitment of children and families in public health research, with a focus on those underserved populations (research delivery).

- To increase research engagement and capacity of public health professionals working with the 0-19 age group (research capacity building).

These aims were to be supported through delivery of the following objectives as part of the project:

1. Create 0-19 Research Champion (Y&H) roles that develop the Champions as CoRP Leads, whilst concurrently establishing their respective local CoRP. A CoRP development programme will be devised to support this process.

2. Facilitate events that create networking opportunities between professionals to enable collaborations to be established, to co-produce research and to discuss priorities with a focus on 0-19 public health research.

3. Engage regionally with Higher Education Institutes (HEIs) with a focus on two goals:
   a. to engage with students to help raise the profile of 0-19 public health research with a view to developing early career researchers.
   b. to establish links with potential academic supervisors/researchers for research-interested practitioners to engage/collaborate with (e.g. postgraduate study, co-applicants on a bid etc.).

4. Develop a sustainable prototype model for the CRN in Yorkshire and Humber (and other regions) to develop other successful networks, based on an evaluation of whether the model has been effective in its processes and in achieving its outcomes.

5. Develop a web presence to increase our visibility, to disseminate information, to ensure the sharing of timely research opportunities, to signpost and facilitate connections, increasing reach.

6. Develop further the project planning group of core members to operationalise the project deliverables regionally.

4. Evaluation approach

The purpose of the evaluation was to provide evidence as to whether a tailored training programme to develop 0-19 CoRP Champions and local CoRP can achieve the core aims of the Network. This would then support the achievement of objectives 4 and 6, specifically to inform a sustainable prototype for the CRN in Yorkshire and Humber and other national networks, by providing evidence of what works, barriers and enablers.

To help consider the most appropriate methods for evaluating the project, a logic model was developed and can be viewed in the Appendix.

4.1. Methodology

A mixed methods evaluation was employed, using both qualitative and quantitative data to address the six project objectives and two overarching aims.

The evaluation was separated into three interlocking phases:

*   Phase 1: Initial scoping and baseline data collection

*   Phase 2: Data collection on project deliverables

*   Phase 3: Final analysis and reporting

The proposed methods support the nature and purpose of this evaluation, as they accommodate the differences in the pace and scale of the developments of the CoRPs and project inputs.

Throughout all phases of the project, the same data collection platforms and methods were used to distribute surveys and evaluation forms.

For the baseline survey and end-of-project survey, the electronic platform Survey Monkey was utilised. The survey was co-developed with the steering group to gather baseline information to enable the project team to gain a greater understanding of network participants and to explore their knowledge of, and participation in, research within their school nursing and health visiting practice.

The survey was disseminated through the 0-19 Research Network members and SCPHN Service Leads to maximise reach. The aims of the survey were:

*   To gather baseline information on current understanding of research.

*   To gather the self-reported levels of knowledge, confidence and capability of practitioners to engage with research.

*   To consider previous training, development and participation in research.

*   To identify areas that practitioners felt they needed to engage further with research.

For the evaluation of the Champions and network events, the online survey platform JISC was employed. This platform permits individual respondents to be tracked, allowing the evaluation team to monitor completion rates and to remind those who had not responded. This helped ensure a high response rate for networking events and a 100% response rate from the Champion sessions.

4.2. Governance and ethical approval

Project governance was provided through the project steering group. The project received ethical approval from Leeds Beckett University on 13/01/2023, application ref: 102422.

4.3. Project timeline

4.3.1. Phase 1: Initial scoping and baseline data collection October – December 2022

This phase focused on gathering baseline data to allow comparisons to be made following the project deliverables (interventions) that had taken place. The baseline data sought to scope current research engagement and activity across Yorkshire and Humber, to inform the development of the programme and project activities, and allow consideration of the gaps to address.

Several methods were employed to gather the data:

i. **Baseline survey of current 0-19 practitioners:** SCPHNs employed in the Yorkshire and Humber area. The distribution included all those who are part of the 0-19 Network and CoRPs. The survey explored the three key themes from Making Research Matter[1] alongside barriers and enablers to research engagement.

ii. **Delivery:** An exploration of confidence in research delivery, capacity to run a research project, PI or co-applicant, current research activity*, supporting recruitment, site development, and understanding of research and development (R&D) governance.

iii. **Leadership:** Current confidence, awareness of research, confidence and leadership of service evaluation, implement evidence into practice, confidence to role model others, confidence to set up a CoRP, undertake research training, and develop research knowledge.

iv. **Supporting/participating:** Current engagement, willingness to participate, participate as a recruit, champion research through attending a CoRP.

It was important to capture the current numbers of practitioners who are being supported in fellowship/First Steps Programme/ICAs etc., to ensure we can quantify any increase during the project. This information was collected using the baseline survey and through engagement with NIHR, including clarification of SCPHNs who have enrolled on or completed those programmes.

4.3.2. Exploration of the knowledge and confidence of new research champions

During this phase, the knowledge and confidence of the Champions was explored and measured. This started with a baseline questionnaire which provided an understanding of their research experience and any gaps that need to be considered within the proposed programme. This questionnaire mirrored parts of the practitioners' scoping survey but had a greater emphasis on research capability and understanding of methodology/CoRP development and leadership of research.

4.4. Phase 2: Data collection on project deliverables - October 2022 to December 2023

This phase focused on the collection of data on achievements against the deliverables of the project and the outcomes as outlined in the logic model (Appendix 1).

4.4.1. 0-19 Research Network

A post-event survey was sent to all who attended the network events. These were collated to elicit central and key themes to inform the next events programme and inform the final evaluation.

A focus group of a self-selected sample of attendees in the final quarter of the project to explore learning and future development.

Repeat of the baseline scoping in phase 1 to explore the wider 0-19 practitioners' engagement and overall project impact.

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*Current engagement/funded research in the area

4.4.2. 0-19 CoRP Champions

To capture the learning journey and future needs, the 0-19 CoRP Champions completed a short reflective journal, at three time points throughout the programme. At the start of the programme, at the end of the taught session, and halfway through their peer support sessions.

Semi-structured interviews were undertaken to further explore the Champion's experiences, at the end of the programme.

4.4.3. Virtual presence

Once a web and social media presence has been established, platform interactions will be recorded quarterly. Targeted communications will aim to increase this throughout the project.

4.5. Phase 3: Final analysis and reporting

Recommendations for next steps and future development of networks and CoRP in other areas will be made.

Chapter 2: Research engagement and the role of the 0-19 Research Network

Summary of the chapter

This chapter collates feedback from a range of data. This includes surveys of the 0-19 workforce to understand their engagement in research at two time points during the project: post-networking event questionnaires; and key themes from focus groups with participants in the events.

Key learning
✓ Members of the network have increased from 85 at the start of the project to 280 at the end.
✓ Previous experience of research and formal training was limited before the project.
✓ The network has been seen as a vehicle to support research engagement and build capacity.
✓ Engagement in SCPHN research increased during the project.
✓ The events, both face-to-face and in-person, supported networking, shared learning and engagement in research.
✓ The network has impacted on both individuals and service engagement in research.
✓ The main barrier to engagement in the network was reported as capacity.

✓ Key enablers:
  • Management support
  • Leadership
  • National policy drivers
  • Personal support

1. Introduction

The project aimed to support the growth and development of the 0-19 Research Network, to meet the overarching aims of increasing research delivery, engagement and building capacity. This aim was supported by facilitating events that created networking opportunities between professionals to enable collaborations to be established, to co-produce research, and to discuss priorities with a focus on 0-19 public health research.

This chapter presents the feedback from the evaluation of the 0-19 Research Network and its activities.

2. Background

As discussed in Chapter 1: Introduction and background, the 0-19 Research Network was active before the funded project. This project aimed to strengthen the network and its reach through a series of events and engagement activities.

Table 1 (below) provides an overview of the events delivered by the project team during the funded project.

Table 1: Summary of network events and attendees.

Date of event	Mode of delivery	Number attended	Event content
11th May 2022	Virtual	31	Presenters Networking
5th July 2022	Virtual	28	Presenters Networking
21st September 2022	Virtual	33	Presenters Networking
10th November 2022	Face-to-face	50	Making Research Matter – Making it Real in Yorkshire and Humber
18th Jan 2023	Virtual	33	Presenters Networking
22nd March 2023	Virtual	26	Presenters Networking
16th May 2023	Face-to-face	60	Connecting Our Research Community
4th July 2023	Virtual	28	Presenters Networking
28th September 2023	Virtual	30	Presenters Networking
20th November 2023	Face-to-face	70	Developing 0-19 Research in Practice
24th January 2024	Virtual	40	Presenters Networking
21st March 2024	Virtual		Celebratory event Presenters Networking

3. Data collection

3.1. Surveys

To explore engagement in research, we distributed two surveys to the 0-19 workforce in the Yorkshire and Humber region.

- The initial survey ran from 22/08/2022 to 24/10/2022, with a total of 139 professionals responding to the survey.
- The survey was repeated from 01/09/2023 to 20/11/2023, with a total of 62 professionals responding to the survey.

It is unclear why there was a lower response rate for the repeat survey, given it was distributed at a similar time in the year and via the same networks. However, it has been noted by partners and wider stakeholders that this experience is similar to other projects and services, where there is a feeling of "survey fatigue" by practitioners.

Despite wide circulation across the network, both surveys represent a small proportion of 0-19 practitioners in the region, and therefore caution needs to be given to the generalisation of the responses to all practitioners working in the region. The data does however provide useful insights to inform the project and future recommendations.

3.1.1. Who completed the surveys?

Both surveys had representation from across the Yorkshire and Humber area and from a variety of roles. However, in the repeat survey, the participants were from more senior roles or research-based roles compared to the initial survey, see Graph 1.

Graph 1: Job role of participants
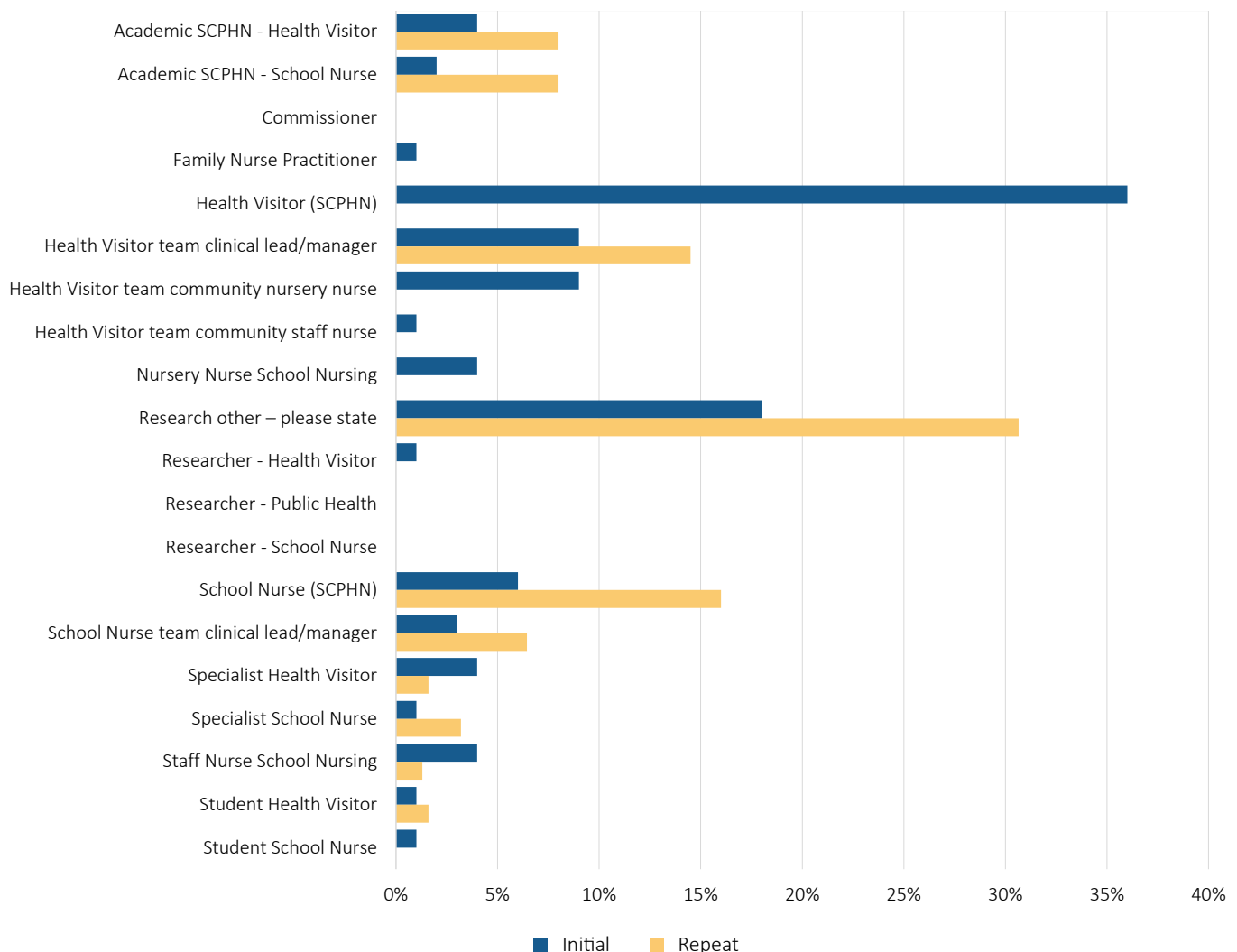
In the initial survey, health visitors made up the largest proportion of respondents (36%), with a much smaller number of school nurses (6%) responding.

Whilst school nursing has a much smaller workforce than health visiting, it was important to consider the engagement of school nurses as the project progressed.

In the repeat survey, 16% of respondents were school nurses and there was a shift to health visitors who were in specialist, academic or leadership roles, with 27% health visiting and 34% working in school nursing. Although there was an increase in engagement from school nurses, it may be of value in the future to consider the different engagement from each professional group and what is needed to support school nurses to attend and engage with the 0-19 Research Network.

3.2. Focus groups

Four online focus groups were facilitated with attendees of the 0-19 Research Network. A total of 16 participants attended.

✓ The participants were from a range of backgrounds – newly qualified health visitors, practice educators, service leads and those in research leadership roles. Unfortunately, no school nurses attended.

✓ The participants' exposure to the network varied, with some reporting this was their first meeting, to others having attended since the start of the network.

The participants were asked a series of semi-structured questions to explore their experiences with the network.

3.3. Data analysis and discussion

The surveys sought to explore the respondents' understanding and engagement in research, before considering their current and future engagement in the network.

3.3.1. Engagement and training in research

It was important to understand the level of engagement, research and training, to consider if the project had any impact on this. Therefore, the respondents were asked about previous training and experience of being involved in research, Graph 2 shows that more respondents had had formal training in the repeat survey. In both surveys, the most common format to have received training in was "Completed a research module as part of my post-qualification training". With the percentage of respondents who identified no training dropping from 14% to 8%, this may reflect that the respondents in the repeat survey are in roles at a higher level, i.e. management or research.

Graph 2: Training received on research and/or evaluation
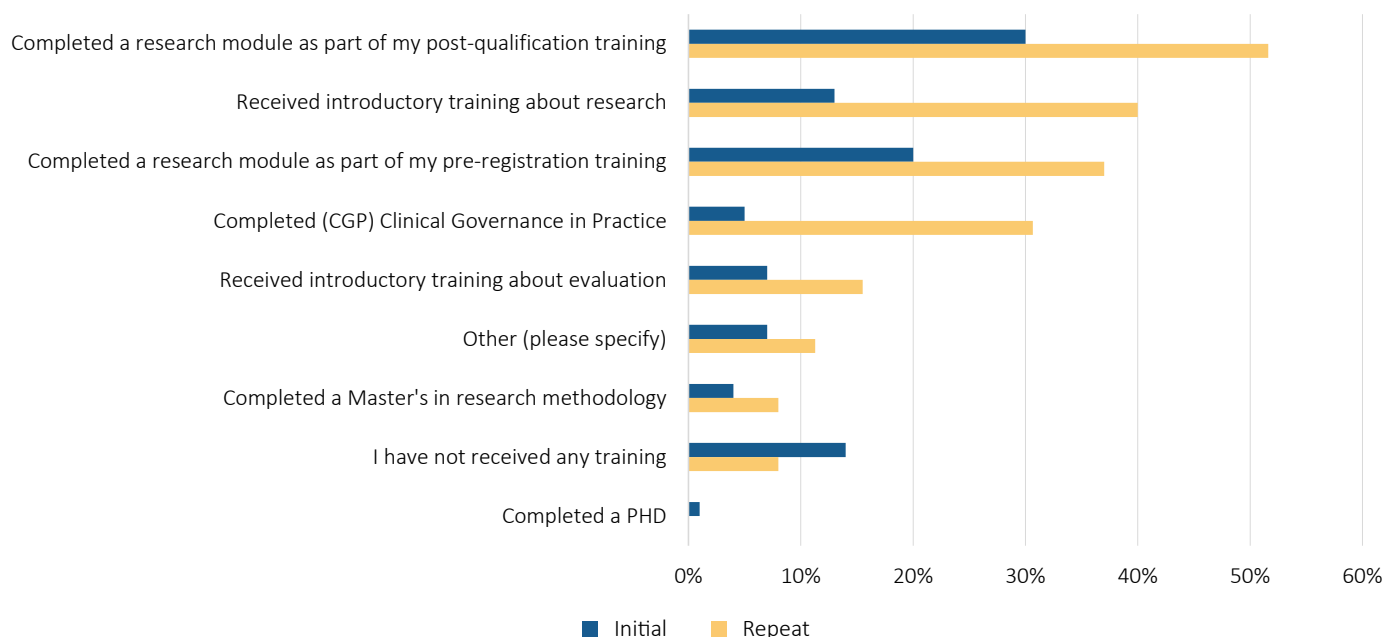
3.3.2. Involvement in research

There was mixed experience in involvement with research. Aside from training, the most frequent way that SCPHNs stated they were involved in research was using it to support practice, as seen in Table 2 which shows the ways that SCPHN report they use or are involved with research.

There was a significant shift for the repeat survey with more respondents being actively involved with research, with over half completing research applications. This again may be reflective of the different groups of professionals who completed the repeat survey.

Table 2: Use of research in practice

Example of research	% of SCPHNs engaging	
	Initial	Repeat
Achieved a personal award to undertake research	1%	6%
Attended research interest groups (network, community of practice)	**8%**	**39%**
A co-applicant in a study	1%	6%
A PI for a study	3%	6%
Involved as a participant (interviewed, focus group, completed survey)	**12%**	**39%**
Carried out a research project as part of a PhD	1%	2%
Carried out a research project as part of Master's study	**5%**	**27%**
Completed research applications	**2%**	**53%**
Led on a service evaluation	**5%**	**23%**
Led on an audit	**6%**	**45%**
Proposed/identified an evaluation/research study	**7%**	**35%**
Supported a service evaluation	**9%**	**21%**
Supported audit	12%	5%
Written an article on my research	**3%**	**18%**
Other (please specify)	2%	8%

Initial:
- *"Did research project as part of my degree".*
- *"NB have not completed Master's, but have carried out a research project".*
- *"Achieved an award for Master's but declined in the pandemic (home life too busy home schooling, service capacity at work etc)".*
- *"Worked as a research nurse for 20 months".*
- *"Collaborated with University colleagues in their Research Proposals to ensure they were in line with care pathways".*
- *"Carried out Action Research project as part of PGDip Health Care Education".*

Repeat:
- *"Directly involved in running paediatric research as part of my job role".*
- *"Co-author on research paper".*
- *"Currently involved in research".*

3.3.3. Confidence and Knowledge in Practice

The surveys explored confidence and knowledge of research and evaluation in practice. It is reassuring to see that there is a similar level of confidence and knowledge in research and evaluation, both in the initial and repeat survey - see Graphs 3 and 4. Importantly there was a shift in improved confidence in knowledge and understanding in the repeat survey.

Graph 3: How confident are you in your own knowledge and understanding of research?
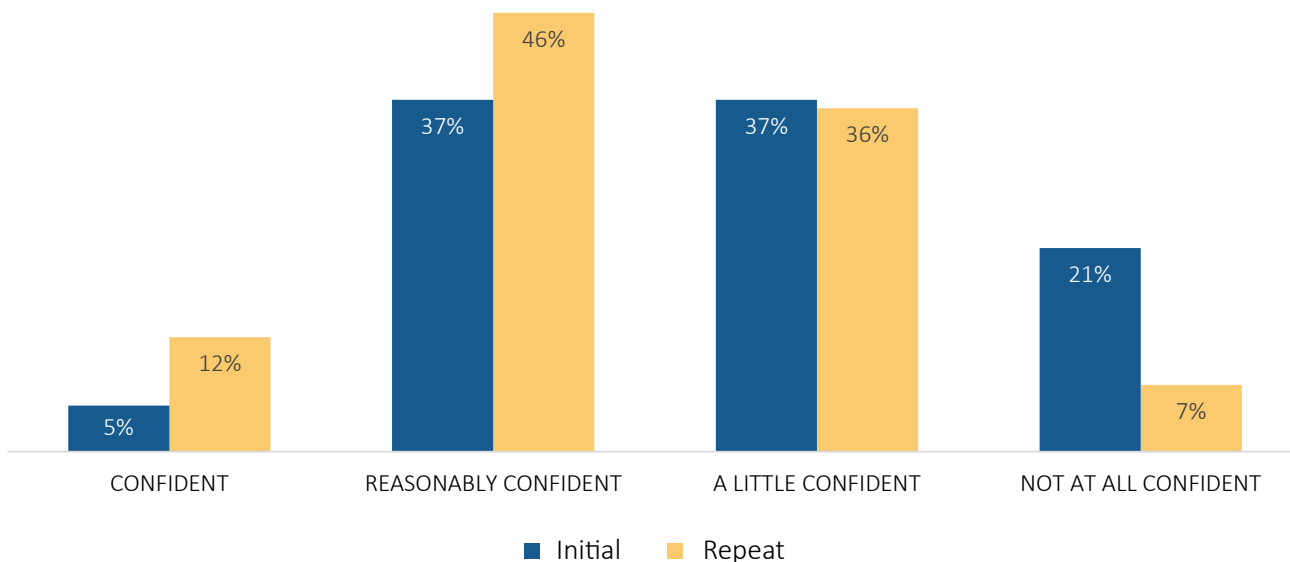
Graph 4: How confident are you in your own knowledge and understanding of evaluation?
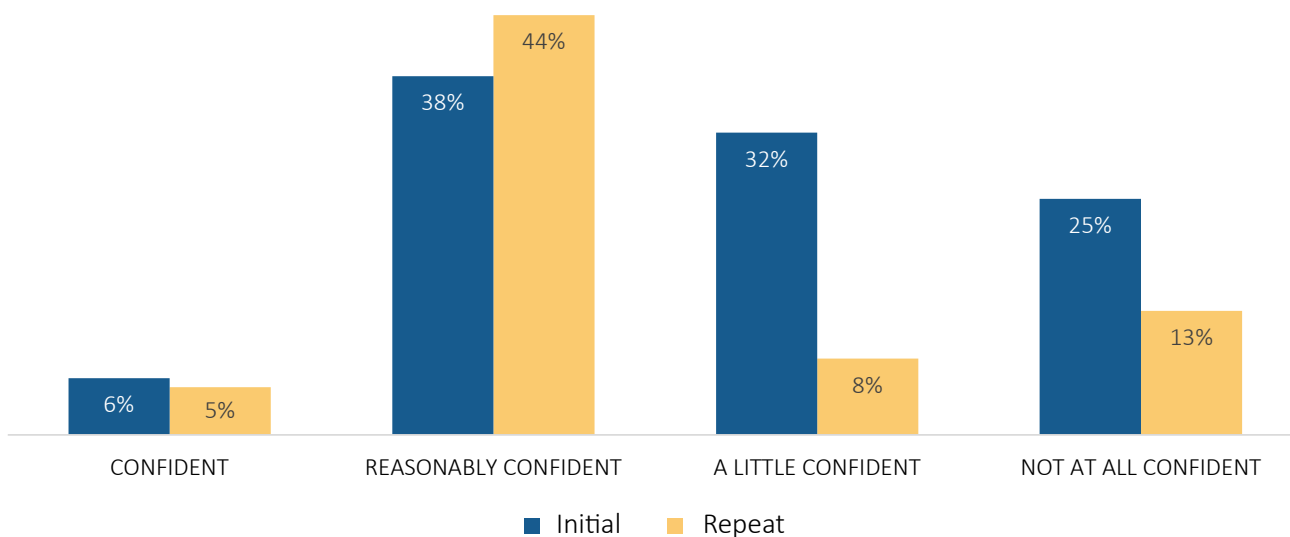
This is interesting, as in the initial survey confidence in knowledge and understanding did not then appear to translate into actual in-practice engagement or delivery of research. However, in the repeat survey, the respondents were also confident in their research and evaluation skills - see Graphs 5 and 6. This again may be reflective of the respondents in the repeat survey working in different roles than the respondents of the initial survey.

Graph 5: How confident are you in your own research skills?
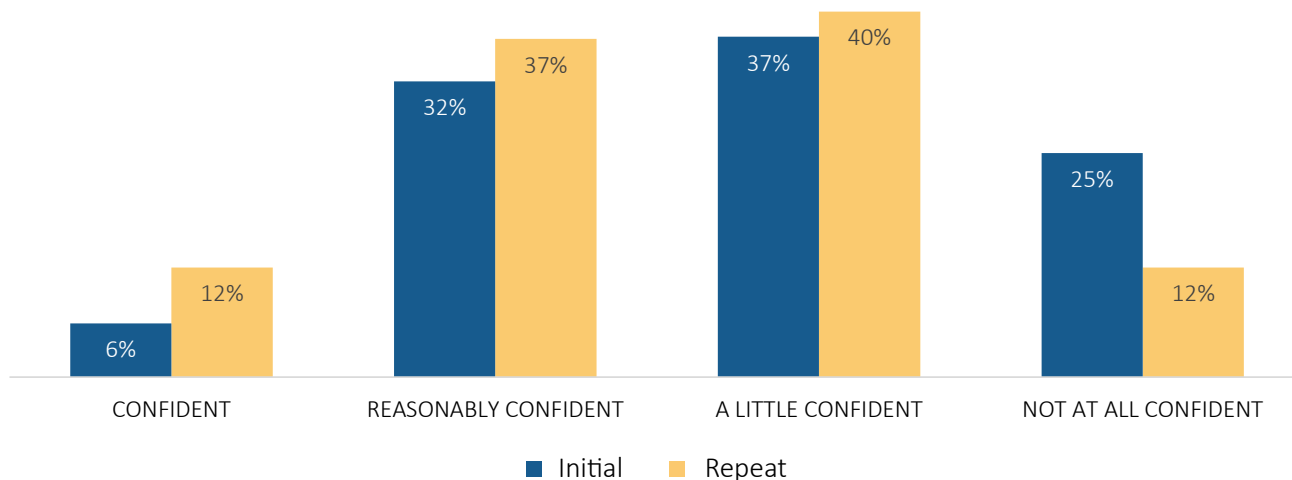
Graph 6: How confident are you in your own evaluation skills?
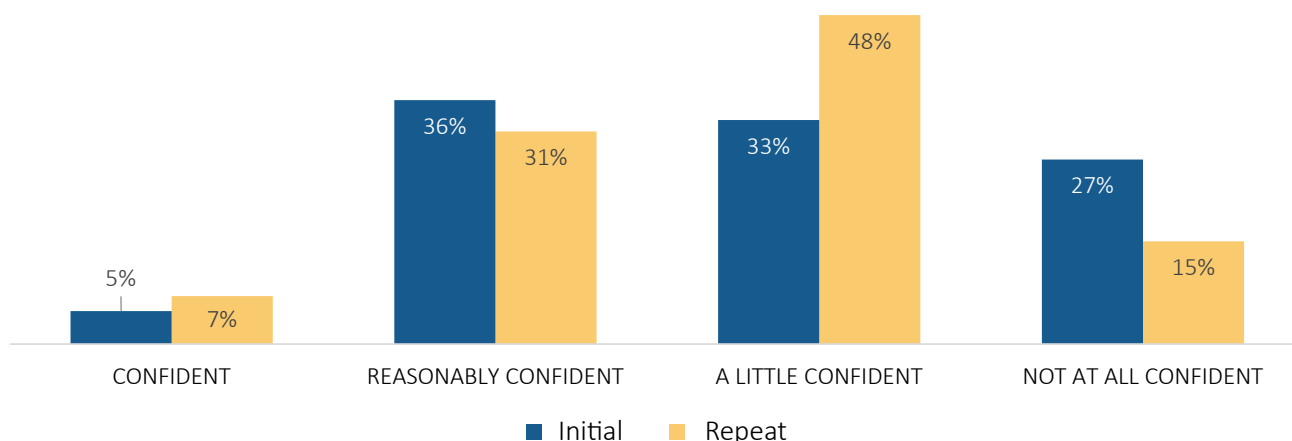
As can be seen in Graphs 5 and 6, there was an increase in individuals' perspectives of their own research and evaluation skills. And, when compared to Table 3, it shows how this corresponds to a reported increase of having confidence in prompting research and evaluation skills, as well as knowing who to talk to about being involved (Table 4).

The survey asked participants about their confidence in exploring research/evaluation opportunities.

Table 3: Confidence in who to talk to about research and where to go for funding.

Area	Initial survey	Repeat survey
Confidence in knowing who to talk to about being involved in research/evaluation	58%	92%
Knowing how to apply for funding	35%	61%

It is reassuring to see that there appears to be some shift in being able to access support to engage in research. This was reiterated in the focus groups:

> " *I would say like I wouldn't probably be here. It always sounds cheesy. So, but I wouldn't be here where I am at the moment and being engaged in all these conversations without the network.*

> " *Helped me to push forward and give me ideas. So, the internship was there, there was a presentation about the internship in November last year and conversation after that I decided to apply.*

> " *So, I think having this group kind of bolsters that and gives me the confidence, but also equips me with bits of information.*

> " *Allowed me to kind of find out about local little studies and to actually introduce one.*

However, it is important to note that there were still a significant number (39%) of respondents who were unsure about where to access funding. There remains a need to support practitioners to access information and opportunities to support their engagement in research and to understand the restraints and barriers to applying for funding.

To support a deeper understanding of this, respondents of the surveys were asked to state where they look for information, see Graph 7. In the repeat survey, there is a clear increase in knowledge of the NIHR opportunities. However, respondents indicated that they expect relevant information to be within their local networks or websites related to their professional registration.

Graph 7: If you were looking for research opportunities/developments, or trying to connect with colleagues engaged in 0-19 research where would you look?

Category	Initial	Repeat
NIHR main website	21%	55%
iHV website	45%	60%
SAPHNA website	18%	39%
Local university website	32%	32%
I don't access this information currently as it's too difficult to find	9%	3%
I don't access this as information as I don't need to	31%	11%
Other (please specify)	13%	24%
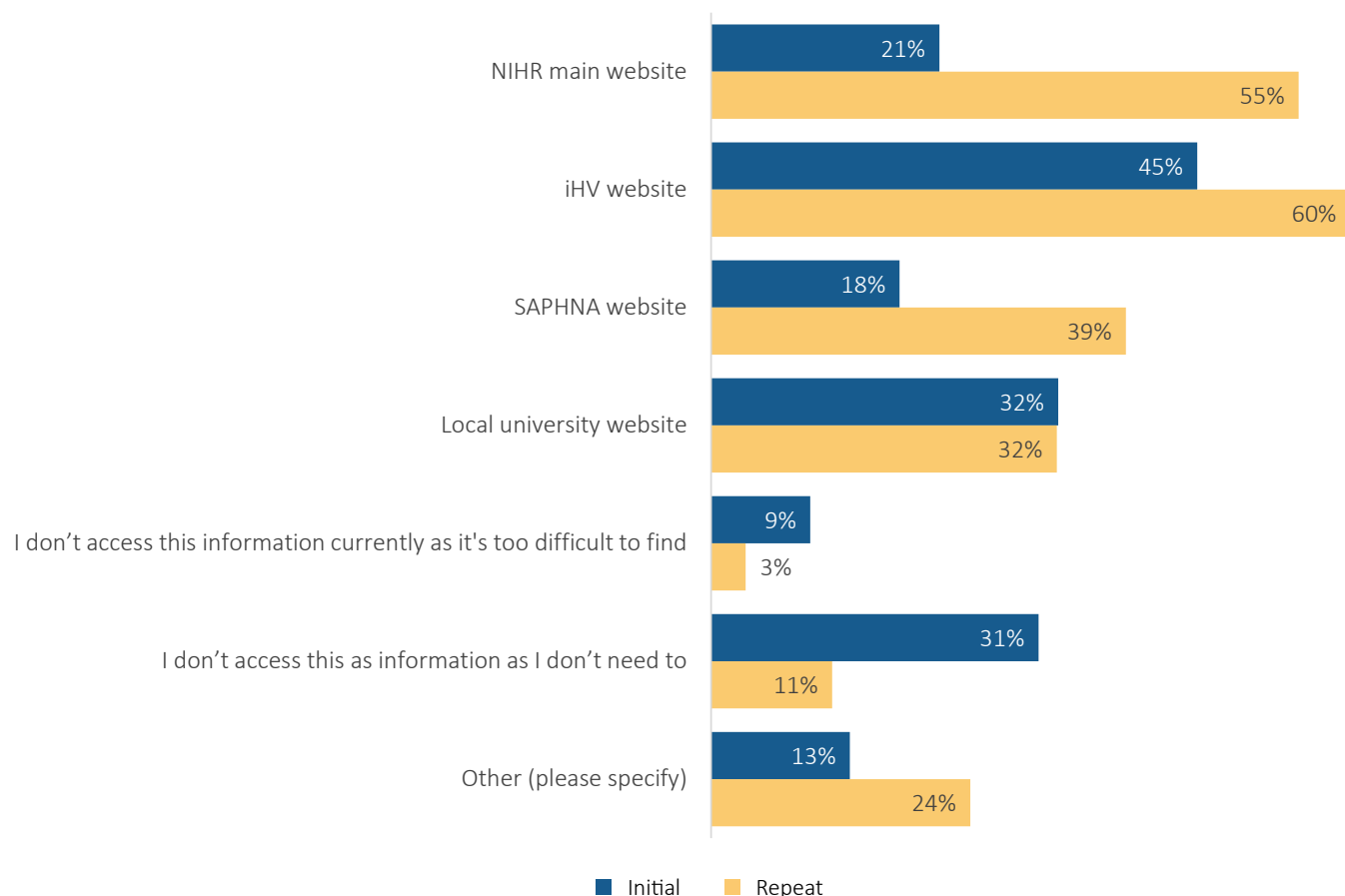
■ Initial   ■ Repeat

3.3.4. Facilitators to engagement with research

The surveys explored the facilitators to being engaged in research. As anticipated, there was little shift between the initial and repeat surveys. The feedback from the focus group participants highlighted similar areas that supported engagement, therefore the results have been combined into one chart.

The survey asked participants the areas they felt supported them to engage - as can be seen in Graph 8.

Graph 8: What would support you to be more engaged with research?

Legend:
- Protected time
- Training
- Supervision
- Peer support
- Networking
- Other (please specify)
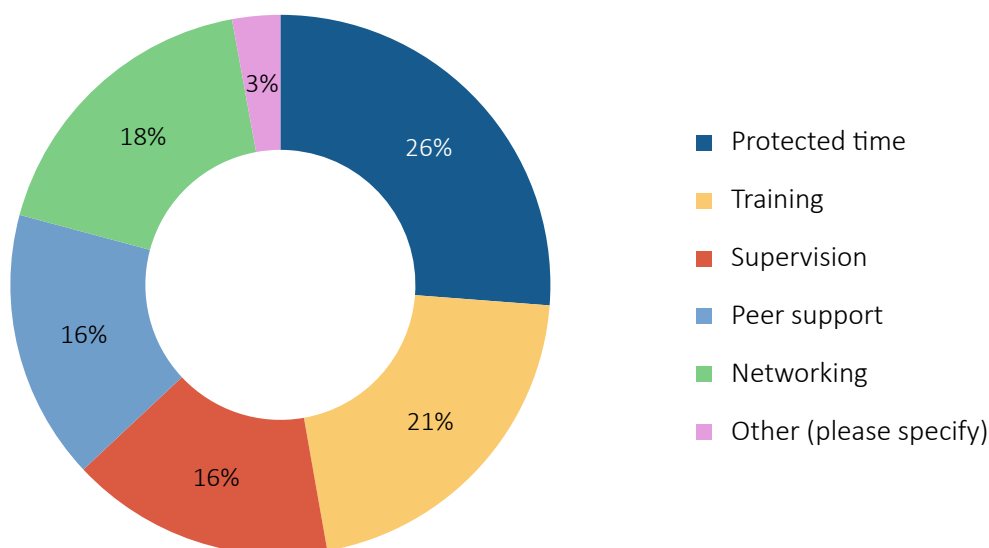
> " *All of the above but important that we now have a research lead who can take more opportunities forward.*

Protected time, networking and training in research were highlighted as important issues identified throughout the survey, However, it is important to note that when combined, supervision and peer support were also really important and respondents were clear that a range of mechanisms would support them in practice:

Narrative comments from individuals highlighted that they felt that research is not prioritised in their organisation and that having defined roles and time may be important to embed research into respondents' roles.

> " *All of these please. Just concerned it is not on staff or managers radars as service is so busy and we are short staffed with current recruitment difficulties.*

> " *I think that sometimes we keep research a little bit under the radar in our organisations because it is not something that we feel massively confident around and so, we kind of think well, I will do what I can, and I think if we build our confidence.*

> " *Job opportunities and paid appropriately for the role.*

> " *Designated research role.*

Gaps in knowledge and confidence, and a need to be connected to a wider, research-active workforce were identified alongside growing engagement with the 0-19 Research Network. This was explored in greater depth to understand the current and ongoing relationship between the network and its members.

4. 0-19 Research Network events

As detailed at the start of this chapter in Table 1, we offered a number of events during the project. It was important to capture the impact of these events to inform future delivery. This section focuses on the feedback on the events and also explores enablers and barriers to attendance/engagement.

4.1 Participants at events

During the project, attendance at the 0-19 Research Network increased, see Table 4.

Table 4: How many have attended a 0-19 Research Network event.

Area	Initial survey	Repeat survey
Attended a network session	14%	64%

Graph 9 shows that the 0-19 Research Network session attendees came from a range of backgrounds, with 20% having a specific research role. 11% of attendees were not SCPHNs and over half (56%) had been qualified for over 5 years.

It will be important in future to consider how we engage all 0-19 practitioners with a focus on understanding how to engage school nurses.

Graph 9: Job role of those completing the survey

Role	Percentage
Academic SCPHN Health Visitor	5%
Academic SCPHN School Nurse	4%
Researcher Health Visitor	0%
Researcher School Nurse	0%
Researcher Public Health	0%
Health Visitor (SCPHN)	31%
School Nurse (SCPHN)	8%
Family Nurse Practitioner	1%
Specialist Health Visitor	3%
Specialist School Nurse	2%
Health Visitor team clinical lead/manager	10%
School Nurse team clinical lead/manager	4%
Student Health Visitor	1%
Student School Nurse	0%
Health Visitor team community staff nurse	0%
Health Visitor team community nursery nurse	5%
Commissioner	0%
Staff Nurse School Nursing	3%
Nursery Nurse School Nursing	3%
Research other – please state	20%

4.2. Mode of delivery for the network meetings

As can be seen in Table 5, initially the most popular method of delivery was a mix between virtual and face-to-face at 56% and no one opting for all meetings to be face-to-face. And, although in the repeat survey, a mixture of delivery methods was the highest and had increased to 75%, there was also a small percentage (6%) who thought all face-to-face would be most favourable.

Table 5: How would you prefer the meetings to be delivered?

Mode of delivery	Initial	Repeat
All face-to-face	0%	6%
All virtual	44%	19%
A mix of face-to-face and virtual	56%	75%

Of those who had attended at least one 0-19 Research Network session, they were asked if they were confident in explaining the role and aim of the 0-19 Research Network to colleagues - the confidence levels have changed very little between the initial survey and the repeat, see Graph 10. This is important to consider and how the network is promoted in the future, to support members to articulate clearly the role and aims of the 0-19 Research Network.

Graph 10: How confident are you in explaining the role and aim of the 0-19 research network to colleagues?
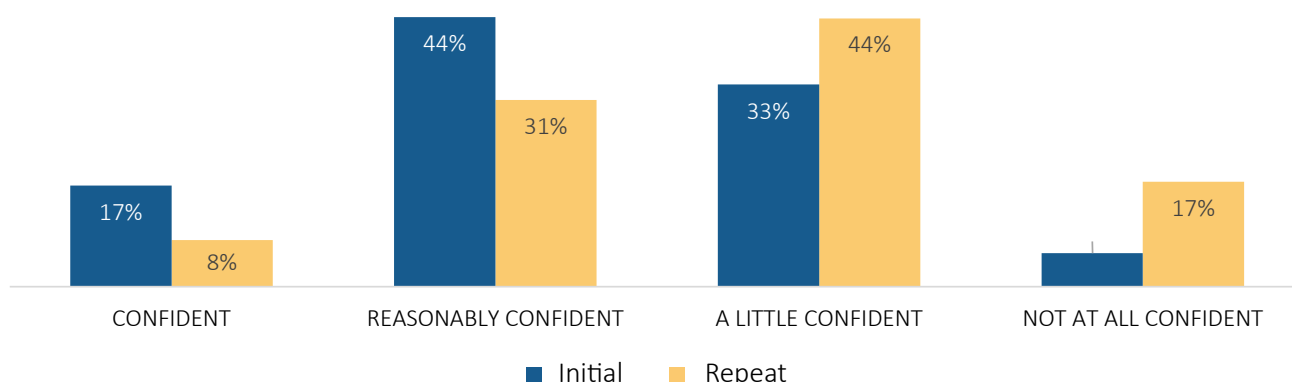
4.3. Barriers and enablers to attendance

The word cloud in Figure 1 shows the themes of why people said they did not attend - these were the same across both surveys and, therefore, have been combined.

Figure 1: Why do you not attend the 0-19 Research Network session?

The main reasons for not attending the 0-19 Research Network were reported as: not knowing about the network, workload capacity, and time. In addition, in the initial survey, some respondents did not feel they needed to join as they felt it was not relevant to their role. This changed in the repeat survey to the main reasons for not attending the 0-19 Research Network still being workload, however, several people stated that they were new in post or had only just joined.

Initial

" Not interested enough.

" I'm not paid to be involved.

" Only senior team members are invited.

Repeat

" New registrant, November will be my first event.

" Too busy!

" But I attended in my own time to support our research champion.

Barriers and enablers to attending summary

Barriers to attending	Evidence
Capacity	"It's still challenged by capacity and availability."
Time	"Basically, there's no capacity and time for people to be able to come, and I've asked, you know."
Confidence	"I definitely wouldn't have had the confidence to be moving forward."
	"And in actually the confidence is growing in actually sort of asking for help or saying, oh gosh, I don't know. Whereas before I may have just kept it quite quiet."

Enablers to attending	Evidence
Leadership and management support	"I think it's the support from the high management is like the line manager sometimes understanding and that that's where you need to go with your drivers and likely said OK."
	"The network has had a real impact in the Yorkshire Humber region you know, in this region and I think there are people that are potentially going to be interested from wider so, I think it could you know, it's a model that people are interested in across the UK and so, I think there is capacity and there is growth, there is room for growth of the network beyond the geographical area we are currently in and, the network is a bit of trailblazer really in terms of showing what can be done, what can be achieved, how we can build research capacity and that is something that we should celebrate and the network shouldn't keep it to themselves."
Professional guidance and regulation	"Because I had the capacity and the interest and working with students of course, to kind of, think actually, at least we need to try and get this off the ground and move it forwards."
	"It's useful to embed research principles into services and support services."
Personal drive	"I feel really passionate about this network, not just that it's something that we deliver, we facilitate, but actually what it means to people who attend, and I know that they take time out of the practice to attend that."
	"I love research."

4.4. Feedback on the sessions

Value of the network

Theme	Evidence
Gaining new information	*"The presentations were fantastic, I was able to have lengthy discussions with colleagues about the content on the day and further to that I sat with a group of people who I had never met and was able to have discussions about what their service is delivering, which allowed me to have conversations with leadership in regards to sharing good practice and look at how this might be useful and fit with our service."*
	"Learnt about other work happening in the region."
	"I was introduced to ways of getting into research."
	"Excited about research and understand the importance of why it's necessary in day-to-day practice and I think it's just really good to hear about what is actually going on across the board"
Opportunity to network	*"Great to meet people with the same interests."*
	"I was able to network with colleagues from my organisation, colleagues on my table from other organisations, guest speakers and the facilitators."
	"It was great to be able to share innovative research practice and be part of the 'buzz' of the event."
Building upon skills and knowledge	*"Some of the information was new, some was a recap from the Champion's programme. Having participated in 3/4 Champion sessions this was now making good sense to me and made the conference completely relevant to me. I wouldn't change a thing you got it totally right - it was perfect, a huge well done and thank you."*
Contribution to the network	*"Discussions and debates were very relevant. It sparked ideas for own service as well as ideas for in-house projects that should be shared."*
	"More time could have been allocated for networking."
	"I had chance to talk one colleague, who was sat next to me, as we chatted between the presentations, but I would have liked to have had more time to network with other people and to look at the posters etc." "Gain insight into "grey area" ideas. Intricacies with the planning, preparation & implementation of research. Great opportunity to network."
	"Was so interesting to hear the work other areas and people are researching."

Impact of the network

The virtual and face-to-face events reflected a clear impact on the motivation of respondents to influence research practice. Participants of both the focus groups and surveys were called to action to say what they would do next, and the themes that emerged were organised as follows:

Theme	Evidence
Engagement with the network	"An awareness of the importance of research and how I may want to engage in the future."
	"A network like this is inspiring."
	"Fabulous because I love the networking side of it. The fact that you can kind of connect with different people in different areas and organisations."
Professional development	"Enquiring re Next Steps course and would like to find out options for my dissertation so I can complete my master."
	"I am going to arrange a meeting with my service manager to talk through all of the things learned and ideas I have for the Community of Research Practice to be set up within our organisation."
	"Help me to push forward and give me ideas. So, there was a presentation about the internship in November last year and conversation after that I decided to apply."
Keeping connected	"Making links with academic representatives for our CoRP."
	"I am pursuing how to support a SN colleague who would like to undertake her PhD."
	"Finding research projects to be a part of."
	"So, getting these opportunities to not only network and show ideas but actually listen to other people's, you know their learning and what they're doing out there it kind of bolsters that CPD side of it as well."
Attend future events	"I will aim to attend future meetings."
	"Prioritise more events facilitated by the 0-19 Research Network and recommend to colleagues."
	"So, I joined the research network as a student health visitor. And so, I've been going for just over three years, and I really enjoyed going."
Sharing learning	"… share learning with colleagues as part of my new 0-19 Research Champion role."
	"Continue to support my colleagues and embed research culture within 0-19 service and across the Trust. Raise the profile of our good practices & it's impact on children, young people & families."
	"I have got lots of information to help me develop my learning and understanding of future learning opportunities and to be able to network with relevant professionals."
	"Escalate discussions for more research capacity. Make contact with colleagues from neighbouring areas."
	"I think what you get from coming to these types of meetings is you get that confidence and that it's a massive, massive confidence boost to be able to go back into your service and share what you've learned."

Theme	Evidence
Developing research skills	*"Finding research projects to be a part of."*
	"Look at training opportunities."
	"I will be more thoughtful about research in my day-to-day practice and be more aware about how I can contribute. It doesn't feel as daunting."
	"Considering why we do what we do without research."
	"To take away some of that fear that some people have when you talk about research and looking at it from academically to looking at actually at how it works in practice."
	"It's potentially not as complex as what we think. I mean. Obviously, it is. There are some complexities to it, but it's it doesn't need to be as scary as what people think it is."
	"Basically, you're seeing families and you're the bread and butter, to add research into visits would be simple."
	"Improved understanding of the importance of participating in the 0-19 network. My love of research has been reignited."
	"Research is part of everyday practice and not stand alone."
	"It's important that all staff have an awareness of the need for research."
	"I will be more thoughtful about research in my day-to-day practice and be more aware about how I can contribute. It doesn't feel as daunting."
	"Research matters! Nurses can research!"
	"Roles are important in organisations and buy-in of certain experts in services. Research is an important part of advanced practice; it is one of the pillars it would be great to have one in 0-19 services."

4.5. Future engagement

The final part of the survey sought to explore future engagement in the network. Graph 11 highlights that there is an increase in likelihood of attendees recommending the 0-19 Research Network to colleagues. A small number of respondents in the repeat survey (8%) stated that they would not recommend the network, but they did not state the reasons why. However, it is noteworthy that all respondents who stated that they would not recommend the 0-19 Research Network had not attended a session and, therefore, may feel they are unable to recommend something when they have not attended.

Graph 11: How likely would you be to recommend attending a 0-19 Network meeting to a colleague in the future?
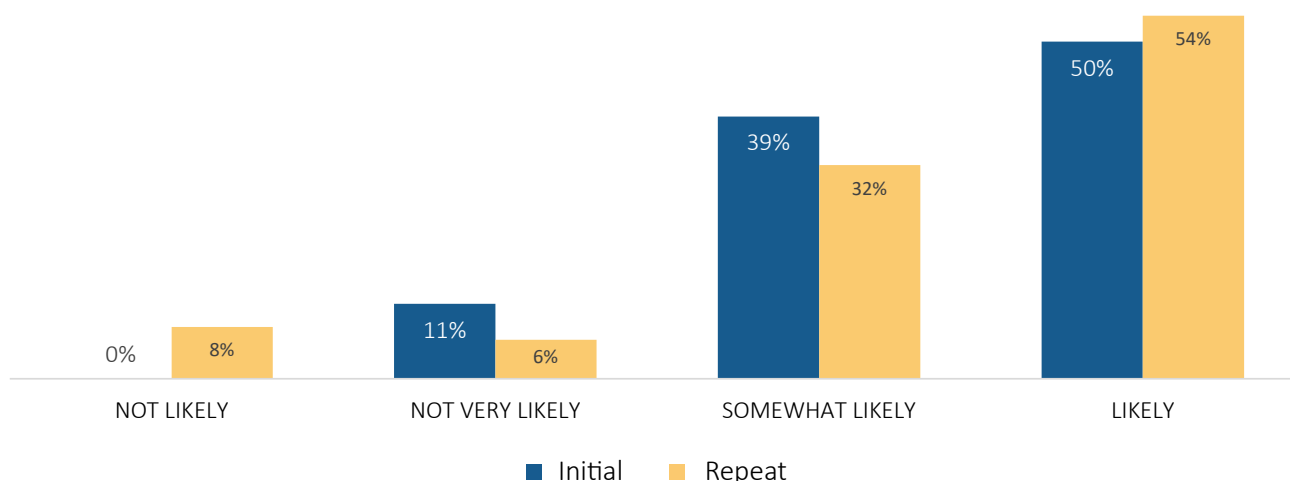
Finally, respondents were asked to leave suggestions on what they would like to see covered in future 0-19 Research Network sessions. Their suggestions can be categorised in to 2 areas: professional and organisational development, and professional issues.

Professional and Organisational Development	Evidence
• Research – generic • Research - results/process • Update on research covered in previous 0-19 Network meetings • Where to find funding/ideas for research/writing publications • How to engage colleagues • Sharing of local research projects/what's going on in Local Community Research Network (LCRN) • Role development in research • Raising the profile of research and being a research active service • Study opportunities with academic colleagues • Supporting colleagues who are research active • Trust research activity • Staff retention and attrition • Peer support – buddy systems • Writing for publication	*"More results from research studies. Really liked to see how they were being implemented into practice, but some more info about the research process itself."* *"Possibly a section of the available funding for research."* *"More face-to-face events as the networking you can do at these is invaluable."* *"Maybe some support in initial project proposal writing."* *"So I wonder if that's something to link in with practice teaching network."* *"Think definitely getting service managers on board and team leaders because then … you understand the importance and how it is beneficial in the long term."*
Professional Issues	**Evidence**
• Special needs topics • Special education need and disability (SEND) • Minoritised ethnic groups • Mental health • Looked After Children • School nurse priorities and how to work smarter to engage young people • Subjects relating to health visiting and proving its value; service delivery (e.g. skill mix) • Ethnic minorities • Leadership	*"More school nurse related research discussions."* *"SEND and early identification."* *"Research with non-English speaking clients."*

End-of-day evaluations also helped to gather some final thoughts on impact and developing the face-to-face events in future:

Excellent event and thank you for organising.

It was an amazing day. Professional and informative but also fun. In my opinion, the day was perfect and could not have been planned any better.

May need to consider reducing the number of speakers. Fantastic event, well done to all involved.

More time for questions or networking would have helped.

5. Conclusion

By combining the views of network members at different stages of their engagement with the 0-19 Research Network, it has been possible to explore and understand the research journey of 0-19 practitioners, from early preparation and knowledge, to exposure, and from engagement to appraisal and future planning.

In the initial survey, very low numbers of respondents reported early career or sustained engagement in research. However, engagement was reported to be higher after direct engagement and following networking sessions. The network is therefore regarded not just as a vehicle to support research engagement, but also a mechanism from which participants have gained in confidence and knowledge, as well as exposure and opportunities. This transition underpins research capacity and capability building among the survey participants, with an emphasis on shared learning, and a supported environment for networking.

The capacity and capability of individuals and teams to engage in research in any capacity has been repeatedly cited as a major barrier. One of the key enablers to practitioner engagement cited within this evaluation, and in line with national policy drivers, is the support from peers and managers, capacity to engage in the network, and the support of the network alongside leadership, both locally and nationally.

Chapter 3: Developing and supporting Research Champions

Summary of the chapter

This chapter provides feedback from the data collected on the Champion's programme.

Key Learning
✓   Programme designed and successfully delivered to 6 Champions.
✓   Overwhelming positive feedback on all parts of the programme - taught sessions and peer support.
✓   All Champions reported increased confidence and skills in research.
✓   All have established a Community of Research Practice (CoRP) and the programme has supported embedding research in local areas.
Key enablers include: •   leadership and management support •   personal drive and motivation of Champions •   time and capacity •   approach of the facilitators •   peer support •   and networking opportunities.

1. Introduction

A key objective of the project was to support the development of 0-19 Community of Research Practice (CoRP) Champions across Yorkshire & Humber and that these CoRP Champions then establish local CoRPs. To support this, a Champions training programme was developed and delivered by the project team.

This chapter presents the feedback from the evaluation of the Champions programme.

2. Background

As part of the project design, it was recognised that the creation of CoRP Champions role would need to be funded to enable protected time for individuals to commit to the programme. It was agreed that four posts would be funded for half a day a week at a Band 7 level for one year. The project team agreed on a programme of work to be designed and developed for the CoRP Champions programme. This included the following milestones:

i.   Recruitment plan including expression of interests.

ii.   Role description of the CoRP Champions role.

iii. Champions were recruited from across the Yorkshire & Humber region.

iv.   Links made with the CoRP Champions' respective services and their managers to ensure understanding and commitment to the programme, through online information sessions.

v.   A written training programme including external speakers to support the content.

vi.   Session delivery by members of the project team and self-directed sessions.

vii. A continuum of peer support through both planned sessions throughout the project and linking with the project members as needed by the Champions outside of the planned sessions.

In total, two cohorts were recruited as follows:

Cohort 1	Cohort 2
• August 2022 - Recruitment took place.	• December 2022 ✓ Recruitment took place. ✓ 3 Champions recruited.
• September 2022 - 4 Champions recruited.	
• October 2022 - Training programme commenced. ✓ Sessions 1 & 2 delivered.	• January 2023 - the training programme commenced. ✓ Sessions 1, 2 & 3 delivered.
• November 2022 - 1 Champion withdrew due to personal circumstances. ✓ Sessions 3 & 4 delivered.	• February 2023 ✓ Sessions 4 & 5 delivered.
• December 2022 – Monthly peer support sessions commenced.	• March 2023 – Monthly peer support sessions commenced, joining the same group as the original Champions.

Both cohorts of CoRP Champions received the same content. However, the second cohort did not have expert speakers or reflection weeks, the sessions were shorter, but an additional one was added. The sessions were all delivered virtually as opposed to a combination of virtual and face-to-face. This was so that the new Champions would be able to access the maximum number of peer support sessions alongside the first cohort.

It was encouraging to see that when the second round of recruitment took place, two areas agreed to take part without funding. This helped validate the importance of the repeat offer of the training programme and the creation of CoRP Champions.

Due to the small sample size, the responses of the two cohorts have been combined. Despite the differences in the programme delivery, the feedback from each group had no significant differences and it was therefore appropriate to combine the data.

3. Data analysis and discussion

3.1. Who are the CoRP Champions?

Demographics	Experience/roles
All White British/English	All Qualified Specialist Community Public Health Nurses
All women	A range of post-SCPHN experience - from 4 years to over 15 years
All between 25 and 54 years old	Range of roles: health visitor, team lead, governance lead, specialist for SEND, infant feeding lead

What geographical areas do they represent?

There is a total of twelve 0-19 Services across Yorkshire and Humber:

- ■ Sheffield
- ■ Barnsley
- ■ Rotherham Doncaster and South Humber
- ■ North East Lincolnshire
- ■ Hull
- ■ Humber
- ■ York
- ■ Harrogate
- ■ Leeds
- ■ Bradford
- ■ Locala
- ■ Rotherham
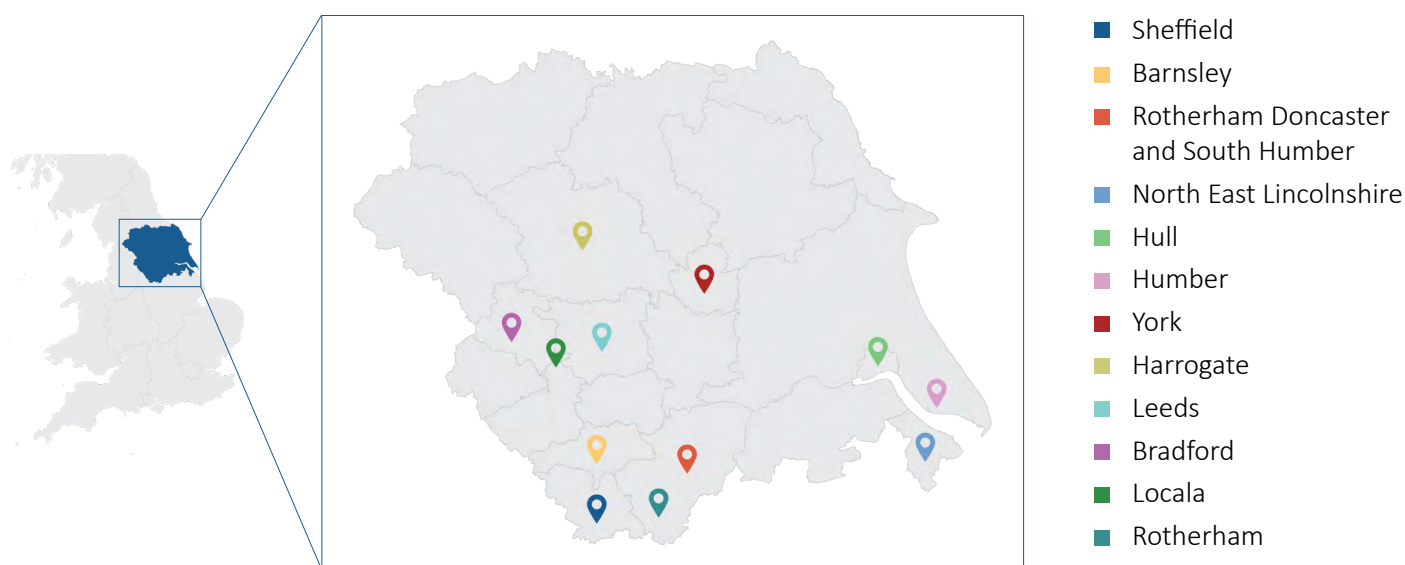
By the end of the programme, 8 had CoRPs.

3.2. At the start of their journey

It was important to consider the level of research experience and knowledge at the start of the 0-19 CoRP Champions' journeys, which enabled comparisons to be made as the 0-19 CoRP Champion progressed through the programme.

Previous formal research training

- 100% had completed a research module as part of their post-training qualification.
- 75% had completed a research module as part of their pre-training qualification.
- 25% had received introductory training in evaluation and research.

Previous engagement in research

- 75% reported using research evidence in their own clinical practice.
- 75% reported supporting or leading audit.
- 75% reported supporting evaluations.
- 75% of 0-19 CoRP Champions have previously attended the 0-19 Research Network sessions.

None of the 0-19 CoRP Champions had carried out research as part of an MSc or PhD. One person had submitted an abstract and two had been participants in a study.

The Champions had limited knowledge of how and where to apply for research funding, 75% were unsure where to look, and the remaining 25% did not know where to look for funding opportunities.

3.2.1. Knowledge and confidence in research and evaluation

From the baseline survey, there was a mix in confidence levels with some reporting no confidence, to others reporting being a little confident or reasonably confident in their own research and evaluation knowledge and ability to be actively involved in research and evaluation.

However, in the interviews and reflections, all of the Champions expressed their lack of confidence at the start of their journey as research Champions.

> "
>
> *I didn't have any real experience in research other than the work that I did for my university courses.*

> "
>
> *It's like learning a different language.*

3.2.2. Thoughts and feelings at the start of their journey

During the interviews and as part of the reflections on the programme, the Champions were encouraged to share their thoughts and feelings at the start of the programme.

These have been themed as follows:

Theme	Quote
Apprehensive	*"That doesn't apply to me. That doesn't apply to me', and then I was, like, thinking, 'Next steps to research. Maybe that's what I should do next".*
	"I sort of sat down and I thought, 'Oh, what have I let myself in for?"
	"I don't know what I'm doing. I just don't… I think I've been signed up to this by mistake, but by the end of it, I thought, 'Well, actually, I can do this."
Motivation	*"I suppose I've always been quite interested in research from my undergraduate years."*
	"I'm passionate about giving evidence-based care and the best care possible."
	"This is an opportunity because it's kind of just sparked something"
Imposter	*"If someone had just said to me, 'Will you be applying for the role of a research champion?', I'd have gone, 'What, me? No, you've got the wrong person."*
	"I felt that a bit like that impostor syndrome, you know, where I think, well, this is what I've signed up to do."

3.2.3. What does this mean for future programmes?

It was interesting to hear the apprehension expressed by all the Champions at the start of the programme. This will be important to consider in the development of future programmes, as practitioners who could apply may feel unable.

The imposter syndrome[2] has been widely written about in psychological research and also relates to the thoughts and feelings of those embarking on new roles, or in different areas of practice. These thoughts and feelings of self-doubt, that "I shouldn't be here", and this wasn't their place were openly expressed by the 0-19 CoRP Champions as a key theme in their feedback. It is important when introducing these kinds of programmes to acknowledge these feelings at the start to allow the participants to move forward. This quote reflects that this was achieved in the programme:

> *That belief really that they believed in us. That helped me to believe that I could achieve.*

Personal motivation was a key driver for the CoRP Champions and when considering future programmes, this is another factor for consideration.

3.3. The training programme

To support the structure of the evaluation of the CoRP Champions programme, Kirkpatrick[3] Evaluating Training Programs: The Four Levels has been drawn upon as a useful framework and focuses on four levels of learning.

Level 1 – Reaction: Do your learners find their training engaging and relevant to their training needs?
Level 2 – Learning: Have your learners acquired the intended knowledge and skills through the training programme?
Level 3 – Behaviour: Can your learners apply their new skills or knowledge in real-life situations?
Level 4 – Results: Has there been positive organisational outcomes as a result of the training programme?

3.3.1. Level one - initial reactions to the taught sessions – did they find it engaging and was it relevant to their needs?

Several components, see Figure 2, were highlighted by the Champions that impacted their engagement with the learning.

Figure 2: Components that impacted learning
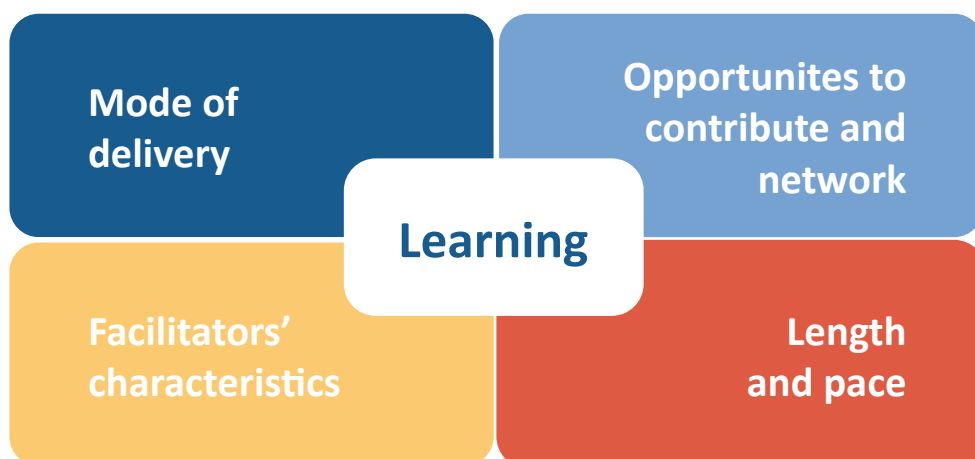
A. Length and pace of the taught sessions

- Generally, just right
- Shorter for sessions 1 & 2
- Longer for sessions 3 & 4

> *I think they're great and I think they're broken down into quite simple, bite-sized pieces.*

> *I think it would be helpful to have the sessions over a day perhaps so that there is time to have breaks/network over lunch etc which helps to absorb the information learned. Or even put the sessions over 2 days with an overnight stay in between.*

B. Mode of delivery

From the feedback, there were mixed views and preferences of the format to deliver the sessions. Some wanted all face-to-face sessions, and some mixed, to support their individual learning preferences and situations.

> *I think the face-to-face sessions and that sharing of information and the networking with other people is just...It's been invaluable, really.*

> *I think it might have been helpful to have met face-to-face earlier on, but I know that ... there's a double-edged sword because sometimes that can be a barrier. Like, the travelling, the getting to...*

C. Facilitators' style and characteristics

The approach, style of the delivery and facilitation, were key themes in the feedback from the 0-19 CoRP Champions. This was seen as an important enabler to support their learning.

Keywords when talking about the facilitators that were repeated in the feedback from all data sources can be seen below in Figure 3.

Figure 3: Feedback about facilitators

non-judgemental
nurturing
warm   supportive
understanding   encouraging
accommodating

> *They have provided an opportunity to connect with others who may have experienced similar challenges, allowing for a sense of understanding and empathy that can be difficult to find elsewhere.*

> *The organisers and speakers were incredibly warm and accommodating, no question was too silly. It is a very supportive environment.*

> *It was a really sort of supportive, nurturing training programme in that it wasn't... Didn't feel like, you know, teacher/student kind of thing.*

D. Opportunities to actively contribute and network within the taught session and the peer support sessions

Overall, the 0-19 CoRP Champions felt able to contribute to the taught sessions. There was a small variation across sessions, with session two reported as the session when fewer felt able to contribute. However, in session four, all 0-19 CoRP Champions reported they could contribute. This may be due to their growing confidence in each other and the facilitators. Due to the high level of content in the sessions, this was also felt to limit networking opportunities in some sessions.

Suggestions for the taught delivery

Time for networking in the taught sessions	*"There is opportunity to join in discussions about the presentations. There is no time planned into the sessions for free chat/peer support discussions."*
	"We are a small, open and honest group and asking questions as we go really helps to understand and apply to our work areas."
Being involved	*"I feel there was less opportunity for group discussion."*
	"The group are very welcoming, and the sessions are based on members contributing to discussion and sharing experiences."
Application of learning	*"I think it would be better to relate the theory to the role and how we would implement in the CoRP."*
	"I think I would have found it helpful to look at examples of existing research groups and how they were developed before heading into the other topics covered as I feel I would have been able to connect the sessions more following this."

Peer support sessions

The feedback on the facilitated peer support sessions was overwhelmingly positive. This is demonstrated in the comments below.

> *So, the peer support has been absolutely invaluable.*

> *And just to kind of bounce ideas off, ideas for sessions.*

> *Once a month just to check in with each other or be on a WhatsApp group, give each other support and ideas.*

> *So, it's just nice to have other people that you can go to that are doing the same thing or have done it already.*

> *They've definitely been really useful as well. We've… as champions, we've been able to share a lot of things. So, for instance, when setting up groups and stuff, we've talked about how we've done it in our area, and then shared that between each other.*

The need for informal support was clear from the data with the group starting to facilitate this themselves:

> *We have got like a little WhatsApp group that we just like checking if we are going to conferences and things like that or asking you know things.*

> *Reflecting on peer support sessions allows us to see the benefits of such activities, gaining support from like-minded individuals empowers us to share our experience with other members of our networks.*

Summary

✓ Overall reaction to the training programme is extremely positive.

✓ The importance of the style of facilitation was key to supporting the learning experience and was evaluated very positively.

✓ Provision of a range of learning environments - a mix of virtual and face-to-face was valued.

✓ More opportunities for group work and networking within taught sessions, to support discussion and the consolidation of learning, would have been of value.

✓ The peer support sessions were invaluable in supporting and embedding learning.

✓ Opportunities for informal learning are important.

4. Level two reaction – have the learners acquired the intended knowledge and skills through the programme?

Content of the sessions

When asked about their overall learning at each session, 100% of participants felt that they had learnt new information and skills at all sessions to support their role.

> *Everything has been brilliant - informative, encouraging, thought-provoking.*

> *I really enjoyed the session; I think this is a great way of getting new services on board with research and how this can be used to inform practice.*

> *It's been really essential to have the guidance and support of the facilitators and you know, someone just encouraging you when you're knocked back or you feel you've come up against a brick wall.*

> *I think the teaching sessions that we had were brilliant. They were spot on, really, really good.*

As each session was different and built on the next, the reported learning varied from session to session. However, the aims and objectives of each session were met.

Taught session	Reported learning post-training	Feedback
Introduction – roles, expectations, explaining the importance of research to colleagues and understanding of 0-19 Network.	✓ All understood the role and expectations. ✓ 5 confident in explaining the research and the 0-19 network, 1 not confident.	*"I learnt more information regarding the research Champion role. It was helpful to meet the other new Champions, their managers and the leaders involved in the project."*
Research fundamentals to support the development of a CoRP, research standards, GCP, research development and governance.	✓ All participants felt the session supported their understanding of all the areas covered.	*"Everything was covered very well, and we had lots of discussion throughout, the small group helped facilitate this."*

Taught session	Reported learning post-training	Feedback
Practical research skills, including literature search, connecting to networks, barriers and behaviour change, communication of ideas to stakeholders.	✓ All participants felt the aims were achieved, but one reported a lack of confidence in literature search skills.	*"The discussion around behaviour change and getting "buy in" for wider service members was pertinent to what I am experiencing currently so I could really relate to this."*
Consolidation of learning and setting up CoRP.	✓ Aim of the session reported to be met, although there was some lack of confidence around the CoRP.	*"I am going to think about the challenges and opportunities within my organisation at present which may affect my ability to set up the CoRP."*

It was evident in the feedback from the 0-19 CoRP Champions that they all had acquired the intended knowledge and skills from attending the taught sessions. The programme in this respect met the set aims and objectives. The enhancement of skills and building of confidence was identified as needed by the 0-19 CoRP Champions.

Future learning needs

The 0-19 CoRP Champions were asked to consider any future learning needs at the end of the taught sessions. The majority of these are related to specific individual learning needs and therefore have not been collated.

There was a strong theme linked to embedding knowledge, wanting more information about local studies and hearing about the experiences of others.

> *Other champions explaining what they have done in their areas, although this has been discussed will happen.*

> *I think the idea of research being close to practice is key to motivating practitioners to get involved. Looking a bit more closely at examples of research close to practice would be useful.*

Areas the 0-19 CoRP Champions felt they needed to develop in the future are summarised in the table below:

Delivery	Further exploration of confidence in research delivery, developing capacity to run a research project, being a PI or co-applicant, engaging in research activity, supporting recruitment, site development, a deeper understanding of research & development (R&D) governance locally.
Leadership	Build on current confidence, increase awareness of research, confidence and leadership of service evaluation, implement evidence into practice, confidence to role model others, confidence to set up a CoRP, undertake research training, and develop research knowledge.
Supporting/participating	Increasing current engagement, willingness to participate, participate as a recruit, and championing research through attending a CoRP.

From the triangulated data, the Champions reported several actions that they hoped to complete following the training to support their continued CPD:

- **Attending local and national research events**
  "Go to the networking events."

- **Network and collaborate with colleagues to look at service improvement**
  "I will look to arrange a shadowing opportunity with my organisation's clinical governance team."

- **Sharing of learning**
  "Information to pass on to colleagues completing their Master's or are thinking about further education."
  "Promote and raise awareness of research and its benefits to practice, service development, and service users."

- **Plan CoRP meetings and discuss with managers and leads**
  "I will aim to maintain contact with my service manager and give regular updates to keep the interest in relation to setting up the new CoRP for [local trust] 0-19 services."

- **Access further training, resources and shadowing opportunities**
  "Register for further training via the NIHR in preparation for our current study."

- **Consolidate learning and review programme materials**
  "... It's very exciting!! I just feel like to need time now to read/create/put some actions into place."

Summary

✓ The taught programme met its intended aims and objectives.

✓ The need for further support to build confidence was a key theme.

✓ Champions identified opportunities to support their own CPD.

✓ Champions were motivated and inspired to continue their learning journey following the programme.

4.1. Level 3 and Level 4 – embedding and using learning and seeing impact.

The two final levels in the Kirkpatrick Model focus on what happens after the taught sessions. Whilst it is still early days since the completion of the taught programme, the 0-19 CoRP Champions' feedback indicates the positive impact of the programme and examples of embedding the learning.

Impact and embedding

The feedback from the 0-19 CoRP Champions indicated several impacts both at an individual and system-wide level:

Increased confidence	*"I am keen to demonstrate the value of my role and the value of this role as research champion."*
	"I think it opened up my eyes to things that I really didn't have knowledge about in regard to"
	"So definitely feel more confident and it, it's sort of making me think about when I have settled into the role and we've got everything organised, I think it's something there's lots that can be done research-wise in our service."
	"I feel confident in my practice as a health visitor now."

Continued below

Developing skills	"Moving forward I will be using the effective meeting skills learning when delivering the research group sessions."
	"You know, still don't class myself as an expert. I think, you know, every day is a, a school day, isn't it?"
	"I've totally loved it and enjoyed it and it's funny being – I am the research, I'm kind of putting something into practice myself, but I am also the research. It's funny"
Establishing a CoRP	"Moving forward, I now have a team onboard."
	"It has been agreed that I will continue to be funded to develop and embed the CoRP group within the service."
	"The reach has been to over 100 practitioners at various skill mix levels."
Engaging in further study/publishing	"Has inspired me to revisit undertaking my Master's dissertation/Next Steps/Internships."
	"It's something that we could write up and I'm sort of thinking, 'Ooh, we could write that up and we could maybe have it published'."
	"We're now going to be taking part in the Surviving Crying study and I think none of that would have happened."
Sharing knowledge with others – building research capacity	"The taught sessions have provided knowledge and experience that I can now share within the service and via the research group."
	"We also plan to involve students who come through our service not only instilling the importance of research from the beginning of their careers, but also supporting them in their studies."
	"The networking with colleagues from other areas has opened up further avenues of learning and looking at best practice in other services and how this can be used to improve our service and I am sure the sentiment is reciprocated."

Communities of Research Practice – as a direct impact

A deliverable of the project was to set up local CoRP. The 0-19 CoRP Champions all reported that they had been able to do this at the time of interviews although for some it had not been as easy as anticipated.

Initially when trying to set up the CoRP:

> Feel like I've not got as far as I need to be with it. I feel that I need to speak to them about best ways of advertising.

> My first thoughts were that I would go round the team meetings, and sell it face-to-face, but to be honest, it's not always well…I didn't want for it to fall on silent ears.

> When I was telling people that I was a research champion, they were like, 'Oh, that's, that's good. Good for you. Don't ask me. Don't come looking to me to try because I haven't… It sounds good, but I haven't got the time.

Moving forward, they have progressed and have active CoRP groups established:

> " *I think I've got about 14 members of staff that are in the research group now, and I do get regular emails asking me about things.*

> " *We went through the terms of reference; we came up with a group name really quickly and ideas for the future and I'd already got the next session sorted with UKHSA. So, it feels really good.*

It will be interesting to follow up with 0-19 CoRP Champions over the next year to understand how they have progressed with the CoRPs.

Summary

✓ The programme has impacted the 0-19 CoRP Champions' confidence and skills in research.

✓ They have successfully established local CoRP.

✓ A number of Champions have engaged in wider study and publications.

✓ They are spreading and sharing their knowledge with others.

4.2. Summary of the 0-19 CoRP Champions journey through the programme

The Champions provided reflective journals at different points during the programme. The timeline below highlights key themes from this data.

At the start of their journey	Quotes
Thoughts and feelings	
✓ **Imposter syndrome**	*"Research is something I tend to think happens either within academic institutions or within specific research teams."*
✓ **Excitement**	*"I am feeling quite excited about doing something completely different to my day-to-day role as a duty Health Visitor."*
✓ **Motivation**	*"I'm passionate about giving evidence-based care and the best care possible."*
✓ **Inspired**	*"Very inspired, very supportive group."*
Barriers and enablers	
• **Time management**	*"I do need to consider my time management; unfortunately, I have a genuine lack of time perception."*
• **Management support**	*"I am concerned re capacity issues/manager support."*
	"That belief, really, that they believed in us. That helped me to believe that I could achieve."
During the programme	**Quotes**
Growing confidence	*"I have grown in confidence and appear to have a much clear idea of the path I wish to take. I am keen to actively seek out new opportunities."*
	"Having the freedom to consider what might work best in our individual organisations is valuable, especially as what we are trying to achieve is a relatively new concept."
Value of the taught sessions	*"Research in community roles is relatively new and not something that staff are familiar with so when setting up a research group the content of the face-to-face sessions has been invaluable really."*
Collaboration and networking	*"Being able to contribute and share practice from a varying number of services has also been invaluable - that collaboration and networking with colleagues from different services is priceless".*
	"No right or wrong way of doing this - we have to look at the service on an individual basis and look at what and how this will work and fit in."
End of the programme	**Quotes**
Achievement – personal growth	*"I feel a sense of achievement that I have set a solid foundation for moving."*
	"I have found it to be incredibly valuable for personal growth, development, and emotional support."
Motivation	*"They also seemed enthused and excited about getting our research group up and running and we have set a date early in the new year to get things off the ground."*
Looking to the future	**Quotes**
	"I'm looking forward to seeing this journey unfold and to getting my group up and running with the support of the 0-19 research network and the other 0-19 Research Champions."
	"I even started to think again that it might be possible for me to do my Master's dissertation and maybe even a PhD after all!"

4.3. Barriers and enablers to the 0-19 CoRP Champions programme

From the interviews and reflective journals, there were clear themes of barriers, enablers and opportunities to engagement in research, both for the 0-19 CoRP Champions and their services or organisations.

It is important to consider these for future implementation of Champions programmes.

The COM-B[4] (Mitchie et al 2014) model of behaviour change provides a useful framework for considering the key ingredients for change to happen.

The model considers the environmental and personal factors that can influence a change being facilitated. In this project, it was hoped that through the provision of a programme of training and peer support, the 0-19 CoRP Champions would be equipped to lead, embed and engage others in research in support of the CNO pillars of research.

Enablers

COM-B	Enablers – identified in the data	Quotes
Capability - refers to an individual's psychological and physical ability to participate in an activity.		
Physical	A programme of learning that met the needs of the Champions.	"I will be able to take what I have learnt into my trust with the aim that I will be able to set up a community of research practice."
		"I have found writing a reflective log helpful, primarily because I have a poor memory (!) but also as it helps to consolidate what I have learned on the journey and to be able to look back and reflect on how things have unfolded."
	Being given time to participate within their roles.	"You know, leadership makes a massive difference to everything, and having support and having time and permission."
Psychological	Increased confidence in self -including skills and knowledge.	"It is essential to stay current and have an open mind to take on board new areas."
Opportunity - refers to external factors that make a behaviour possible.		
Physical	Management support and leadership from host organisations.	"It is positive that the Trust has agreed to continue to fund me as this will allow me to continue the work that I have been doing but also to embed it."
		"I would like to be more curious about how research opportunities present in everyday practice, I would like to identify other practitioners who are willing to share and contribute their experiences of research with others."
		"A real key engagement from senior management there then."
		"My real strength was that my manager, from the very offset, my service manager was so supportive of this role."

COM-B	Enablers – identified in the data	Quotes
Opportunity - refers to external factors that make a behaviour possible.		
Social	A structured peer support programme.	*"I know that I need to consider that I am not alone in my work."*
		"Attending the peer support sessions has provided reassurance as it's easy to feel isolated when moving into an area of unknown. The peer support sessions have provided a space where we can share our experiences, fears, and successes which can be immensely empowering."
		"As the sessions have gone on, I have considered that we are all responsible for research, and that all staff need to be aware of research and the processes around it. I have begun to see that it will not be me solely responsible for running a group, it will be a collective group of staff with an interest in providing evidence-based care and that it could actually be quite exciting."
Motivation - refers to the conscious and unconscious cognitive processes that direct and inspire behaviour.		
Automatic	Personal interest and drive.	*"I have had an interest in research both in terms of undertaking my own research, and in wanting to know the best research to inform my health visiting practice."*
Reflective	Seeing the benefit as the journey progresses.	*"Research and practice are inter-dependable."*
		"Re-framing research as something embedded in practice provides me with more purpose."
		"I felt the importance of agreeing to be part of this programme as a representative of the service opportunities to identify my own specific contribution to research."

Barriers

COM-B	Barriers – identified in the data	Quotes
Capability - refers to an individual's psychological and physical ability to participate in an activity.		
Physical	Time and capacity to participate.	*"Concerns about time the programme will take - I feel that this is going to take a lot of work to undertake and implement in practice alongside my current role which is a lot of work with setting up a service."*
Psychological	Lack of research in 0-19.	*"I feel there still lacks a solid base of evidenced-based resources freely available to health visitors on many topics commonly discussed by 0-19 Practitioners."*
		"It's more established and embedded in hospitals."
Opportunity - refers to external factors that make a behaviour possible.		
Physical	Lack of engagement from peers and wider service.	*"I felt it was perhaps the wrong time, and I would struggle."*
	Lack of infrastructure - both locally and nationally.	*"I'm now sitting in the council under public health, whereas normally you've got your massive R&D departments in the NHS."*

COM-B	Barriers – identified in the data	Quotes
Opportunity - refers to external factors that make a behaviour possible.		
Social	Lack of support from leaders.	*"I can see that there will be challenges from the wider leadership team due to service and staff capacity and what would be expected of staff."*
Motivation - refers to the conscious and unconscious cognitive processes that direct and inspire behaviour.		
Physical Social	Lack of motivation from others.	*"Think as you come out into local enterprise or local authority there's less of that there. I don't know. You don't feel as linked academically."*
Reflective	An uphill journey.	*"Research is itself is not as established in community as it is in nursing. We're not as… Um, we're not around it as much, do you know what I mean? So, it doesn't feel as familiar."*
		"It's short sightedness and you know people are just not encouraged to go or people feel really guilty taking time out."

5. Conclusion

This chapter has presented the feedback from the 0-19 CoRP Champions on the programme. Those participating have reported that they have benefited personally and professionally. Their participation in the programme has been instrumental in creating the motivation and opportunities for research capacity beyond the programme, through future learning and by embedding learning within local organisations.

Overall, the programme has demonstrated successful delivery with the mode and approach facilitating learning as defined by Kirkpatrick[3] at all levels.

There were key features that supported the success of the programme including:

- Length and duration of the sessions
- Facilitator attributes
- Mode of delivery
- Opportunities of support and networking
- For future programmes, these features will need to be considered.

Finally, the most significant barrier to engagement and development of the 0-19 CoRP Champions programme was described as capacity, both at the individual and at the organisational level. This was due to the impact on an individual and team's capability and opportunity to develop their research capacity. Leadership and motivation among research Champions can be viewed as a driver for change. Peer support, supervision, capacity and management engagement were all seen as enablers for the development and the sustainability of a CoRP.

Chapter 4: Developing and strengthening network relationships

Summary of the chapter

This chapter looks at the wider outcomes of the 0-19 Research Network and evaluates how working with different stakeholders in a variety of modes has impacted the success of the 0-19 Research Network, both across Yorkshire and Humber, and nationally.

Key learning
Higher Education Institutes (HEI) sessions.   ✓ Developing and delivering a bespoke training session to SCPHN students in HEI settings inspires future engagement in research.
Importance of the network having a virtual presence   ✓ Mixed-methods of communication are needed for wider connections.   ✓ Quarterly newsletters and emails are considered the best way to stay involved and connected.   ✓ A bespoke website is wanted as a central place to get information and updates.
Steering group   ✓ Having a dedicated group of people with a variety of roles and expertise is vital to the success of the project.   ✓ There was an underestimation of the time requirements for some aspects of the project.   ✓ Including space for the core team to reflect and consider their own development would be of help.
Wider external activity and national achievements.   ✓ There were unexpected benefits of having a network in Yorkshire and Humber, leading to presenting at national conferences and award nominations.
Key enablers include: • Increasing the reach of the 0-19 Research Network.   • Engagement of HEIs, student health visitors and school nurses.   • Mixed communication methods.   • Cohesive team.   • Expanding the networks national reach raising the profile.

1. Introduction

One of the objectives of the project was to increase the network reach; this work focused on strengthening links with academia, digitalisation and increasing virtual presence. It was underpinned by the development of a project planning group of core members to steer the project.

This chapter presents the feedback for each of these objectives, as well as highlighting work that was completed outside of the funded project objectives and that has added value.

2. Higher Education Institutions (HEIs)

2.1. Background

As previously outlined, a key project objective was to strengthen links with 0-19 practitioners in HEIs; this involved specifically targeting SCPHN students to raise the profile of 0-19 public health research in the region. The opportunity to inspire early career researchers, at a research-active stage in their academic journey, also maximised the goal of promoting key messages to postgraduate SCPHN students:

- The importance of evidence and research in 0-19 services.

- Current research drivers.

- Why research matters.

- Illustrate what research engagement looks like.

- Opportunities to professionally develop from a research perspective.

- Communities of Research Practice and the 0-19 Research Network.

There are three HEIs in the 0-19 Research Network area; two of the HEIs engaged and enabled the delivery of the session by the 0-19 Research Network co-leads, the third felt that the timing of the offer did not fit the students' timetable and asked to be approached in the next academic year. The demographic information relating to the student SCPHNs are very similar to the Champions and those who completed the baseline survey, indicating that they are representative of the SCPHN population.

2.2. Method

Two sessions were delivered in HEIs to 29 students, they were issued a post-session evaluation. A small number (45%) returned this. The feedback from the SCPHN students was gathered using a post-session evaluation form, asking a range of questions which allowed for both structured responses and opportunities for free-text feedback.

Despite the differences in the programme delivery, the feedback from each group had no significant differences and it was therefore appropriate to combine the data.

Two key factors impacted the delivery and evaluation of the sessions: Firstly, the availability of a face-to-face session versus a virtual session. Secondly, student workload significantly impacted upon the survey response rate of 45%:

> *I am unsure how much information I retained mostly due to the amount of work currently undertaking as part of my current course.*

HEI Evaluation of the sessions delivery:

Theme	Evidence
Online/face-to-face delivery	• 85% reported the length of the session was just right. • 15% would like a shorter session (online participants). • > 90% felt they could share or contribute to the session, those who felt they couldn't had attended the online session. • Problems with the virtual platform. • Virtual platforms were not conducive to group discussion. *"Yes, there were opportunities to ask questions and start discussions. A face-to-face session would be even better."*
Understanding and confidence	• 80% felt they could share information about the network; those who felt they couldn't had attended the online session. • 65% said they would join the network. *"As a whole we were given ample opportunity to partake."* *"Leaders of the session welcomed participation."*
Action going forward	*"I will discuss with managers how research is used to inform our practice, as it's not always evident."*
	"If I decide to complete my MSc, I will seriously consider trying to get my work published."
	"Raise awareness around research opportunities and the impact this has on practice."

HEI Evaluation:

Theme	Evidence
Why research matters	• 65% stated that following the session they would attend the 0-19 Research Network sessions. • 80% felt they could explain what the network sessions were to a colleague. *"I found the session very useful, and it highlighted the importance of research needed for continued improvement or review of practice."*
Barriers to engaging in the network and/ or research activity	*"I was not aware of the options for further training."*
	"I did not realise we had a research network!"
	"Did not know the options available to pursue a career in research."
Opportunities to engage in research	*"I feel I now have more knowledge on how I can get involved in research in the future in my role as a health visitor."*
	"Services are linking throughout Yorkshire and Humber and we (as network members) will find out about current research projects within the area."

3. Webpage

An outcome of the project was to develop a webpage for the 0-19 Research Network. This would be a place to house information about the network, share its accomplishments, how to be involved, and wider information about 0-19 public health research in the Yorkshire and Humber area.

The development of the webpage was originally scheduled for year 1, with a plan to evaluate it in year 2. However, due to the gap in administration support in the first year, the time allocated to the webpage had to be redistributed to the 0-19 CoRP Champions programme and face-to-face networking meetings. Therefore, it was planned to complete the webpage during the transition between years 1 and 2.

At the start of year 2, the team was approached by NHS England to create a video about the 0-19 Research Network for the Research Toolkit for Matrons and Health and Social Care Leaders. Due to the time and resources required to create a video, the time allocated for the website was deferred again to accommodate this. As a result, the webpage was not developed until late 2023 and will launch in Spring 2024, therefore the evaluation of the webpage is outstanding.

4. Newsletter and social media

As part of the repeat survey, respondents were asked to feedback on the 0-19 Research Network quarterly newsletter and X (formerly Twitter) presence. This was to gain an understanding of the virtual presence of the 0-19 Research Network and what would be needed in the future to strengthen its presence.

It is encouraging that in the survey 55% of respondents received the quarterly newsletter and 25% were unsure if they did or not. The newsletter offers further information to those members, or actively reaches other members who have not been able to attend.

4.1. Views on the newsletter

70% of survey respondents felt that the newsletter was informative and that it was produced frequently enough. Only 8% wanted it more often and 19% less often. Feedback indicates that the newsletter is informative, keeping people up-to-date with research, providing details of local research opportunities and is a tool for sharing information with colleagues.

> *Keeps it on my agenda and enables me to keep up-to-date.*

> *It helps me see what is happening in different areas.*

> *Learning about new opportunities.*

> *Reinforces key information and enables me to share this with others.*

> *As with the sessions, useful, informative and interesting, food for thought re. own service delivery.*

> *Talk about what's happening in community research and how we can be involved. Opportunities available. Discuss how to support research and trials in hospital. Opportunity to shadow research staff in the hospital.*

> *I pin it up in our office and talk to colleagues about it.*

When asked about what could enhance the newsletter, 90% either skipped the questions or stated that there was no improvement necessary.

> *Hard to say as it is very informative.*

The remaining respondents wanted to hear more about opportunities to be involved and to hear case studies of how staff are involved in research or being supported to participate and develop research skills.

> " *Could have a research term explained in each newsletter or stories from practitioners who are engaging in research.*

> " *Really about how staff are being supported to be involved - incentives and job opportunities.*

> " *You are doing a great job :-) Any advance notice of meetings/conferences/training dates. Maybe have a research focus on each one following on from one of the meetings e.g. a focus on service evaluations - who to go to for support, links to templates etc.*

4.2. Social media impact

During the course of the project, the 0-19 Research Network created its own X (formerly Twitter) profile with the aim of engaging members and raising the profile of the network and 0-19 public health research in the Yorkshire and Humber area. Of those who had completed the survey, 32% had seen posts (formerly tweets), of those 77% found it a useful way to engage with the network. And, although only 36% follow the network on X, 41% said that they plan to follow the 0-19 Research Network.

4.3. Future virtual engagement

As this is the beginning of the 0-19 Research Network journey into virtual engagement, it was important to understand how members wanted to be updated. They were given the option to select different social media platforms, websites and direct contact, with the option to suggest other modes. From the responses, it was clear that direct email and newsletter were the most preferred options, 81% and 70% respectively. This was closely followed by 0-19 Research Network website (53%), see Graph 12 for all responses. This shows clearly that the development of a website is important and validates taking more time to develop to ensure it meets the engagement needs of its members.

> " *I think go all out with everything!! The more visible the better!*

Graph 12: How would you like to receive updates from the 0-19 network?
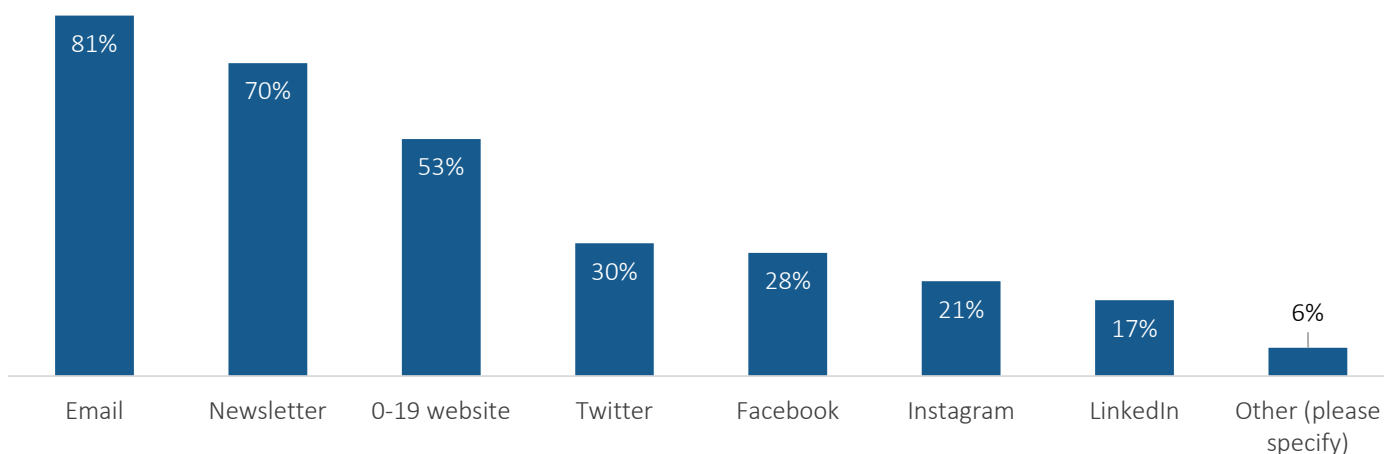
5. Project Steering Group

As outlined in Chapter 1: Introduction and Background, a Steering Group was established, this included representatives from a variety of stakeholders to ensure that the project was delivered to plan and to a high standard. They also acted as the project's expert advisors and were responsible for the delivery of all aspects of the project. This section focuses on their feedback and reflections of working on the project.

5.1. Background

The feedback from the Steering Group was collected in a focus group, where they were asked 3 questions: What went well? What were the challenges? What would they do next time? Their responses have been collated and themed below.

What went well:

Theme	Evidence
Met our project expectations	*"The Champion programme achieved what we set to do. We aimed for 3 Champions and got 6 which was great."*
	"The interest of others validated the anxiety about doing this, it showed the interest and appetite. It was above and beyond what I was expecting, I feel energised and certain that it's important to carry on."
	"Normalised and achievable of being involved in research."
	"Getting research on the agenda during such a time of flux and when resource is far outstripping demand, is no mean feat, and is uplifting for the weary workforce."
Wider engagement	*"Going into universities to give early messages."*
	"Interest has been generated outside of our area, demonstrating how much value this has, strengthening the core team, and the network."
	"It has enabled me to connect with other managers across the area and neighbours. It's lifted the isolation."
Ensuring health visitors and school nurses are represented	*"Identification and showcasing of current PHN research has increased (certainly from an SN perspective)."*
	"Raising the profile of HV and SN significantly."
	"Increased publications for school nursing as a result."
Success of the Champions programme	*"Excellent to see the Champions grow and come together, seeing the difference in them. The team have a sense of achievement to see practitioners motivated, especially when the workforce is in crisis and there are clear challenges in practice."*
	"Recognise Champion confidence has changed/grown in their time in the role."
Personal development	*"It has enabled personal growth and help on an individual level too."*
	"We developed with our network."
	"You feel you can bring something and don't feel like an imposter, we are on a journey ourselves. It's using accessible and appropriate language "making it real", "demystifying.""
0-19 cohesive and collaborative project team	*"Collaboration has been really good, with different viewpoints and everyone working together."*
	"We all gain from each other and feel safe together, we're not intruders. There's an ability to share/trust different organisations. Share our different skills, the right project team is important."
Working with the iHV/SAPHNA	*"Having the iHV/SAPHNA gives trust within the network and confidence that it is ok to have a conversation and we can speak freely."*

What were the challenges:

Theme	Evidence
Time and capacity	*"Could have double or triple the time."*
	"We knew that the objectives would be delivered - not always on time. I have grown as we got into it and felt supported by the team to work within the project plan."
	"The only thing stopping us is capacity of what we can do now."
Lack of definition of roles	*"Need to make roles more defined to see who has more knowledge and so when a query comes in it can be sent to the most appropriate person."*
Product of success	*"We've created an appetite beyond what we thought it would be, the time restraint is difficult as this could be a full-time job, there is so much more we could do."*
	"We have been a victim of our own success, saying "yes" a lot has advantages and disadvantages."
	"When opportunities arise, we sometimes can't fulfil that and feel guilty as over committed. We are interested, but I don't want to let people down."
Lack of knowledge	*"It's a challenge being novices, for example in bid writing."*
Formality of the project	*"The challenge of a formal project has added pressure to meet targets and keep within the boundaries of the project."*
External view/ priorities	*"Organisations see it as outside of the "day job", not what it brings and how to have the network seen as "core business"."*
Retaining fair focus on 5-19 element	*"Ensuring an equal focus across health visiting and school health, weaker focus on school nurses at beginning of project."*

What would you do next time:

Theme	Evidence
Additional expert support	*"Bid writing with someone who had done it before to pull at it a bit to be realistic and more around costings/time."*
	"I didn't think of some things and although it was really good, there are some things I would have reconsidered. Exposure has helped to understand this."
Incorporate extra funding	*"Funding for travel for the Champions to help them engage with wider work outside the training sessions."*
Recruitment	*"Thinking around offering this as a Band 7, need a job description/profile to show what the role is and make it easier for organisations."*
	"Research Champion job descriptions should be shared with managers, which, going forward, will make it easier for organisations to overcome some of the barriers."
	"Improved coaching for recruitment/prospective Champions and their managers."
More networking with existing organisations	*"We haven't reached out to others as much as we could have, e.g. NIHR."*

Theme	Evidence
Personal development – reflection	"Take time to stop/pace."
	"Didn't have time for own supervision, you've not looked after yourselves. Next time, build in reflective time for the project team."
	"We've been busy doing the doing, and not given time to reflect/supervision."
More time	"It's been fast-paced, with presentations/conferences."
	"There's external pressure to commit to and complete what you said you would do, instead of this being internal and organic as part of your role."
Responsibility	"A challenge is that it's your sense of responsibility to everyone engaged – it's easy to try to be responsible for all things - it's overloading to be legitimate."
	"Despite the challenges Want to continue and want to plan for next steps."
	"The hardest part is the setting up, now can draw on the resources created."
Importance of positive reinforcement of roles	"Imposter syndrome in research is such a common theme, but coaching and supervision helps."
	"You're doing a fabulous and brilliant job."
	"Everyone has a key role."
Project management	"Processes are just as important as outputs."
	"Delegation of responsibility."
	"I am worried about not having enough project management going forward, what happens after the funding finished, who is responsible and which project members will continue?"
Utilise networks	"Utilising the network as a resource going forward to support enquiries and FAQs."
	"Being part of the network is about contributing, not being a passive member."

6. Added value

Throughout the course of the project, there have been a number of achievements for the 0-19 Research Network (Yorkshire and Humber) which were not anticipated at the beginning of the project. This includes sharing the success of the network at national conferences, being shortlisted for and winning national and regional awards. Table 6 below outlines this work.

Table 6: Increasing reach and engagement

Title	Activity	Detail	Reach
Awards	Shortlisted for the RCN Awards 2023- Public Health Nursing, Clinical Research Nursing and Nurse of the Year Award	Attended national award ceremony	Wider engagement with strategic partners.
	Shortlisted and won NIHR Clinical Research Network Yorkshire & Humber Research Awards 2023 – Best Contribution in a non-NHS Setting	Attended regional award ceremony	Wider engagement with strategic partners.

Title	Activity	Detail	Reach
Sharing and networking	Presentation at iHV Evidence-based Practice Conference – Sept 2023	• Introducing the 0-19 Research network • Sheffield CoRP - Research Health visitors - the way forward	288 delegates in attendance
	Presentation at SAPHNA Conference – Sept 2023	Realising the research potential of 0-19 Services	200+ delegates in attendance
	Presentation at iHV Leadership Conference – Dec 2023	Creating Nurse Leaders in 0-19 Research	230 delegates in attendance
	Research Toolkit for Matrons and Health and Social Care Leaders	Created 4 videos about the 0-19 Research Network	Part of the Research Toolkit for Matrons and Health and Social Care Leaders and on the 0-19 Research Network website
	Presentation at NIHR Clinical Research Network (Y&H) SERVE: Vision 2027 Conference - November 2023	Introducing the 0-19 Research Network aiming to start the discussion for future collaborations	100+ delegates in attendance
	Facilitation of table top discussion and poster at the Grounded Research Annual Conference 'Be Part of Grounded Research'- November 2023	The 0-19 Research Network	Approx. 20 delegates in attendance

7. Conclusion

The wide reach of the 0-19 Research Network and the additional outputs of the project have allowed for increased engagement, and access to professionals at different stages of their research careers. The engagement of HEIs is one of the project's successes which has inspired student health visitors and student school nurses to consider research career development ideas and opened pathways for them to achieve this.

The mixed communication methods have supported people to engage in a way that is useful to them. And, although the website was not completed as per the original plan, it is a key part of the 0-19 Research Network that is wanted by members and non-members, to support engagement in 0-19 public health research. Therefore, ensuring dedicated time for it is essential and central for future communication.

It has also been seen that having a cohesive team covering all roles is crucial for the success of the 0-19 Research Network and the project as a whole. For success it has been clear that there is a need for protected time and reflection time, to support the team's own professional development and give quality time to the network and project outcomes.

The growth of the communication of the 0-19 Research Network and profile of the team has also expanded their national reach, raising the profile and bringing more people to it. This has allowed them to participate in several other achievements which would not have happened without the project, including being shortlisted for the Nursing Times Awards and winning the NIHR Clinical Research Network Yorkshire & Humber Research Award 2023 – Best Contribution in a non-NHS Setting.

Chapter 5: Conclusion, next steps and recommendations

1. Conclusion

The evaluation has demonstrated that the project has achieved its aims and objectives, as outlined in Table 8.

Table 8: Outcomes of project aims

	Project deliverable	Key Learning	Key enablers	Outcome/impact
1.	Create 0-19 Research Champion (Y&H) roles that develop the Champions as CoRP Leads, whilst concurrently establishing their respective local CoRP. A CoRP development programme will be devised to support this process.	• Overwhelming positive feedback on all parts of the programme - taught sessions and peer support. • All champions reported increased confidence and skills in research. • All have established a Community of Research Practice (CoRP), and the programme has supported embedding research in local areas.	• Leadership and management support. • Personal drive and motivation of Champions. • Time and capacity. • Approach of the facilitators. • Peer support. • Networking opportunities.	✓ Programme designed and successfully delivered. ✓ 6 Champions recruited from across Yorkshire and Humber. ✓ 100% of Champions reported an increase in research. ✓ 100% of Champions reported an increase in knowledge and understanding of research. ✓ 6 new local CoRP established, meaning a total of 8 CoRPs across region.
2.	Facilitate events that create networking opportunities between professionals to enable collaborations to be established, to co-produce research and to discuss priorities with a focus on 0-19 public health research.	• Previous experience in research and formal training was limited before the project. • The network has been seen as a vehicle to support research engagement and build capacity. • Engagement in SCPHN research increased during the project. • The events, both face-to-face and virtual, supported networking, shared learning and engagement in research.	• Management support. • Local leadership. • National policy drivers. • Personal support.	✓ Bi-monthly virtual networking meetings delivered. ✓ 3 face-to-face networking events delivered. ✓ Expert speaker and 0-19 public health researchers presented at all events. ✓ A self-reported increase in attendance to research interest groups, completion of research applications and leading audits, between the initial and repeat surveys. ✓ Positive shift in confidence, knowledge and understanding of research. ✓ 92% of respondents report they now know where to go and who to talk to about being involved in research/evaluation. ✓ Two associate Principle Investigator (PI) places achieved. ✓ 5 Principal Investigators on studies.

	Project deliverable	Key Learning	Key enablers	Outcome/impact
		• The network has impacted on both individuals and service engagement in research. • The main barrier to engagement in the network was reported as capacity.		✓ Delivery of studies: • 3 Surviving Crying sites • 1 COMBAT (Community- based Behavioural Activation Training for depression in adolescents) site • 1 Alarm Distress Baby Scale (ADBB) site • 1 HARMONIE (RSV study - respiratory syncytial virus) site • 1 ICON (I Can Cope - when babies cry) site • And additional 0-19 researcher roles and expert advice. ✓ Research co-applicants • 1 CHESS (Childrens Early Self-care Support for children with Neurodisability) site • 1 research for patient benefit (RfPB) obesity site • 1 physical activity site, findings currently being written up. ✓ Research discussions & Born and Bread in Doncaster (BaBiD) partnership meeting attendance. ✓ 1 Health Education England (HEE)NIHR integrated clinical academic (ICA) Internship applications (1 successful). ✓ 5 First Steps into Research places, plus mentorship from within the Network. ✓ 1 Chief Nurse & Allied Health Professions (AHP) Fellowship Programme place.
3.	Engage regionally with Higher Education Institutes (HEIs) with a focus on two goals: a. to engage with students to help raise the profile of 0-19 public health research with a view to developing early career researchers; b. to establish links with potential academic supervisors/researchers for research-interested practitioners to engage/ collaborate with (e.g. post-graduate study, co-applicants on a bid etc.)	• Developing and delivering a bespoke training session to SCPHN students in HEI settings inspires students to engage in research.	• Engagement of HEIs, student health visitors and school nurses.	**a.** ✓ Training sessions delivered to 2 cohorts of students in the 2022/23 academic year. ✓ HEI training sessions delivered to 3 further cohorts in the 2023-24 academic year. ✓ 65% of training session participants said they would join the 0-19 Research Network **b.** ✓ Communication established with all HEIs in Yorkshire and Humber.

	Project deliverable	Key Learning	Key enablers	Outcome/impact
4.	Develop a sustainable prototype model for the CRN in Yorkshire and Humber (and other regions) to develop other successful 0-19 research networks, based on an evaluation of whether the model has been effective in its processes and in achieving its outcomes.	Wider external activity and national achievements. • There were unexpected benefits of an increased presence in Yorkshire and Humber leading to presenting at national conferences and award nominations.	• Increasing the reach of the 0-19 Research Network. • Expanded national reach raising the profile.	✓ 0-19 CoRP Champions programme was successfully developed and delivered. ✓ 0-19 Research Network established and embedded in the Yorkshire and Humber region. ✓ Membership increased from 85 to 280 members. ✓ Interest from other areas and national organisations. ✓ Shortlisted for the Nursing Times Awards. ✓ Won NIHR Clinical Research Network Yorkshire & Humber Research Awards 2023 – Best Contribution in a non-NHS Setting. ✓ 4 Quarterly Newsletters created and disseminated. ✓ NHSE Matron's Toolkit video on the network ✓ Presented at five regional/national conferences
5.	Develop a web presence to increase our visibility, to disseminate information, to ensure the sharing of timely research opportunities, to signpost and facilitate connections, increasing reach.	• Mix-methods of communication are needed for wider connections. • Quarterly newsletters and emails are considered the best way to stay involved and connected. • A bespoke website is wanted as a central place to get information and updates.	• Mixed communication methods.	✓ Website developed. ✓ X (formerly Twitter) presence established with a 0-19 Research profile @019ResearchNet.
6.	Further develop the project planning group of core members to operationalise the project deliverables regionally.	• Having a dedicated group of people with a variety of roles and expertise was vital to the success of the project. • There was an underestimation of the time requirements for some aspects of the project. • Need to include space for the core team to reflect and consider their own development.	• Cohesive team.	✓ Steering Group established. ✓ Governance of project upheld.

Learning for future development of the 0-19 Network:

1. The importance of project leadership and support

*   Leadership and modelling
*   The role of the project lead and co-leads was a crucial facilitator of the success of the project. Without their time, energy and passion as role models, the project would not have had the reach and impact it achieved.
*   The personal connections and networks that the leads supported, facilitated making research real and relevant to all who engaged in the network.
*   The capacity and time to achieve this should not be underestimated.

2. The importance of support

Having support was seen as essential to all those engaged in the 0-19 Research Network. And although this was dependent on individual need and research career stage, there is key learning which can be applied to individuals, teams and organisations.

Enablers were identified as:

*   Leadership and management support.
*   Research being embedded in local areas.
*   National policy drivers and personal support were key to engagement.
*   Peer support, supervision and networking opportunities.

For the project team, the support that helped included the wider support outlined above. However, there were some project-specific skills and qualities that enabled the success of the project:

*   Research experts as part of the Steering Group to support delivery, engagement and development.
*   Experienced project management.
*   A cohesive non-judgmental team covering all project roles.
*   On reflection, it was felt by the team that building in peer support and supervision for themselves would have helped with the delivery of the project and their own professional development.

3. Time and capacity

The biggest barriers that were consistent across all aspects of the project was time and capacity. This affected individual, organisational and team engagement and was often cited as a reason for not attending meetings or participating in research.

What facilitated time and capacity for the 0-19 Research Network and engaging with research was:

*   Personal drive and interest in research.
*   Management support.
*   Organisation understanding of the importance of 0-19 public health research, and this being embedded in the organisational structure and vision.
*   Having research as a paid/commissioned part of the job role and written into job descriptions.

What helped the project team with time and capacity was having:

*   Personal drive and interest in research.
*   Team members having paid time to be part of the project.
*   Dedicated administration support.
*   Endorsement from iHV and SAPHNA

4. Marketing

It is evident that marketing was a clear driver for the success of the project and the 0-19 Research Network.

Marketing activities that supported engagement with 0-19 Research Network and research:

- Quarterly newsletters.
- Direct emails.
- Virtual and face-to-face Networking events.
- X (formerly Twitter).
- Presenting at national and regional conferences.
- Award submissions.

Marketing was an important element to consider when recruiting HEI sessions and 0-19 CoRP Champions. Although the sessions and recruitment were successful, there is key learning to be considered when recruiting for another cohort.

- Having a clear outline of the role and responsibilities of the 0-19 CoRP Champions' organisation and management.
- Understanding of previous experience and training to ensure that this is not seen as a barrier to applying.
- Consider what is being applied for - structure around roles and responsibility as opposed to professional grade/job role.
- Consider timing of offer around HEI curriculum to allow for biggest impact and time in lectures.

2. Future recommendations and next steps

It can clearly be seen that the project has met its aims of increasing research engagement and capacity of public health professionals working with the 0-19 age group. However, to maintain its success and to grow participation and recruitment of children and families in public health research, the following are recommended:

Ongoing funding and stakeholder engagement.	• Investment is required to:
	   • ensure the project team has the time and capacity to maintain the 0-19 Research Network and the additional resources created during the project.
	   • review and update resources and the webpages.
	   • maintain communication methods.
	   • maintain CoRP support meetings and build in reflection/peer support for project leads.
	   • expand the CoRP Champions programme into all areas of Yorkshire and Humber.
	• Ongoing support from iHV and SAPHNA to give expert knowledge and experience. As well as support national dissemination/networking.

Ongoing project management support	• Dedicated administration to support:
	   • The management of the 0-19 Research Network.
	   • Formatting of the newsletter and additional resources.
	   • Management of the 0-19 Research Network (social media).
	   • Management of delivery of face-to-face/virtual events.
	   • Coordination of CoRP Champions training/peer support.
	   • Coordination of Project Team meetings.

Maintenance of communication	• Continuation of:
	   • regular updates and opportunities via direct email.
	   • bi-monthly networking sessions.
	   • bi-annual face-to-face networking events.
	   • quarterly newsletter.
	   • annual HEI sessions.
	• Further development of:
	   • X (formerly Twitter) presence.
	   • webpages to reflect the 0-19 Research Network outputs and wider 0-19 public health research opportunities.
	• Consider expanding to other social media platforms.

CoRP Champion Programme	• Run further CoRP Champions programme:
	   • to give opportunities to organisations without CoRP Champions.
	   • to strengthen areas currently with a CoRP Champion and mitigate against sickness and vacancies.

Personal development	• Establish regular supervision sessions for 0-19 Research Network leads. • Submit journal articles about the project and the 0-19 Research Network. • Share learning at local and national conferences/events.

It is important to build on the momentum and success of the project, and the increased interest in 0-19 public health research in the Yorkshire and Humber area that the project has created.

The Research Network has achieved all objectives and is ready to be moved forward. Importantly, 'research-ready sites' have been established, enabling access to population groups which previously have been difficult to gain access to. Further investment will build on this to enable continued growth in those areas. It will also enable the 0-19 Research Network to have a wider reach across the region.

Proposed next stage objectives:

- To develop a robust sustainability plan and local collaboration agreements for the Network to achieve self-sufficiency and become adopted into mainstream services – **Research sustainability**

- To consolidate the researcher connections that have been developed and to collaborate jointly on grant calls/funding bids – **Research Studies**

- To run a Regional 0-19 Research Leads CoRP (Community of Research Practice) – **Research Leadership**

- To lead a Regional 0-19 Research Network facilitating bi-monthly virtual and face-to-face events – **Research Connections**

- To support the newly formed CoRPs to recruit to studies – **Research Delivery**

- To consider Patient and Public Involvement and Engagement (PPIE) involvement and EDI ways of working within research

To do this, consideration of future funding is vital and clear business objectives for the 0-19 Research Network and additional resources need to be agreed. Engagement with NIHR is required to navigate funding opportunities and linking with other CRNs to understand how 0-19 Research Networks can be maintained on an enduring basis.

Sharing the learning is an important next step. This has already started as outlined in Chapter 4, and plans are in place for sharing at national conferences in 2024, including the iHV and SAPHNA conferences.

Appendix: Logic model and methodology

Aim: to support and increase the participation and recruitment of children and families in public health research, with a focus on those underserved populations (**research delivery**). To increase research engagement and capacity of public health professionals working with the 0-19 age group (**research capacity**).

Objective	Inputs	Outputs	Outcomes	Tools to measure
All	**Capacity of the project team**	Team has capacity to manage project deliverables.	Project delivered to time and in budget.	Quarterly reports to NIHR.
3	**Engage HEIs**	2 SCPHN programme leads engaged. Delivery of the unlocking research capacity session to 0-19 students. Increased HEI engagement in network.	Students have a greater understanding of research and their role. HEI colleagues report increased engagement (capacity).	Pre and post questionnaire to students following session. Attendance reports from 0-19 Research Network.
1	**6 CoRP Champions recruited**	CoRP Champion programme developed. 4 x workshops and supervision delivered.	CoRP Champions have increased confidence in research and are able to develop CoRP.	Baseline survey of CoRP Champions' capability/confidence. Survey evaluation of each workshop. 3 reflective journals from CoRP Champions throughout the programme. End of project survey of CoRP Champions. End of project interview with CoRP Champions on supervision and overall programme.
1	**Development of Champions and Local CoRPs**	4 x new CoRPs in place.	Wider engagement in research (capacity). Increased confidence of practitioners.	Baseline survey of wider 0-19 practitioners in Yorkshire and Humber. Record of attendees at each CoRP. Post-event survey after each CoRP. End of project survey of wider 0-19 practitioners in Yorkshire and Humber. New CoRP in place and attendance lists.

Objective	Inputs	Outputs	Outcomes	Tools to measure
2	**Coordinate 0-19 CRN events/ meetings**	5 events delivered per year. Increased attendance practitioners. Increased engagement of students (SCPHN).	Increased capacity to be involved in research. Increase in studies in 0-19 research. Increase in confidence to engage in research. Increase understanding of role of 0-19 in research.	Baseline survey of wider 0-19 practitioners in Yorkshire and Humber. Record of events and agendas, and attendance reports 0-19 Research Network. Data on current research/training applications to NIHR and other funders. Post-event survey after each meeting. Interviews/focus group with a sample of attendees. End of project survey of wider 0-19 practitioners in Yorkshire and Humber.
5	**Develop a web presence for 0-19 Network**	Newsletter for members. Webpage developed to signpost. Social media presence.	Increased networking opportunities. Increased engagement in research activity.	Number of newsletters read. Feedback on newsletter. Feedback and hits on webpage. Number of tweets and activity.

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