PSSRU

Personal Social Services Research Unit

News from the Personal Social Services Research Unit PPIE: March 2024

Welcome to the first Newsletter of 2024, and one which comes with spring on the horizon!

We start the year with a new funding period for our Quality, Safety and Outcomes Policy Research Unit (QSO PRU). Whilst there are similarities with our previous research activities in this PRU, there will be refreshed research themes, new collaborations and a revised PPIE strategy. We will be contacting all our current members of the Public Involvement Research Advisor Network to find out if you are interested in continuing with your involvement for QSO PRU (and PSSRU). We will also be monitoring the diversity of lived experiences and demographics within our Research Advisor Network to make sure we have an equitable, diverse and inclusive membership. There is nothing for you to do for now – we will be in touch soon!

As well as the upcoming activity with QSO PRU, research at the University of Kent Personal Social Services Research Unit remains very active. In this newsletter, we shine a project spotlight on 'Food and drink in later life – the role of homecare'. We also shine the spotlight on our Research Advisor Anica Alvarez Nishio, who shares with us her extensive lived experience and knowledge, together with the wide range of projects she is involved with, both at the University of Kent and with other organisations.

I wish you all a pleasant Easter time,

Sarah

(Public Involvement and Engagement Manager)

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Project Spotlight.

Food and Drink in Later Life – the role of Homecare

The 'Food and Drink needs of older people' project, funded by the School of Social Care Research (SSCR) is a collaborative project with Dr Stacey Rand (PSSRU, University of Kent), together with researchers from Brighton and Sussex Medical school, University of Surrey, and colleagues from Health Innovation Kent Surrey Sussex. The project also involved two researcher advisors, Della Ogunleye and Karin Webb.

Background (from the project guide):

Most research on older people's needs related to food and drink has focused on care homes or hospitals. Less is known about older people living at home, especially those who use homecare services (also known as domiciliary care or help-at-home).

Previous studies have found that older people living at home, especially those using homecare, are at risk of malnutrition and dehydration. This may be caused by different, but often overlapping, problems. These include changes to appetite or taste in later life, difficulty chewing or swallowing, dietary restrictions due to health problems, and reduced mobility that affects whether people can prepare food, memory problems, being socially isolated, difficulty in getting to shops or affording to buy food.

Main Findings (from the project guide):

- Older people's needs related to food and drink are often understood medically. There can be a narrow focus on malnutrition and dehydration – whether people eat and drink enough.
- Little attention is given to whether older people also enjoy what they eat and drink and whether they can socialise or stay active around food and drink (for example, by preparing meals, choosing ingredients, eating with others). These are important aspects of eating and drinking and can support someone to stay healthy and also to live well.
- The contribution of homecare to supporting older people in these ways is often overlooked and undervalued.
- Short visits, due to funding cuts, often limited between 15 to 30 minutes, do not always allow enough time to carry out important tasks related to food and drink in a person-centred way.
- Limited investment and time also limit collaboration with other healthcare professionals (like, community dietitians) and family carers, which would improve the care received by older people living at home.

Public Involvement

The project outputs were all co-designed with the team's Public Involvement Research Advisor, Karin Webb, with support from a wider group of advisors and members of the advisory group. Della Ogunleye was also involved in the earlier work of the project, which included the development of early drafts of the slides, and also the design of the proposal and project.

Find out More!

The team have produced a plain English summary and a more in-depth guide about the key findings and the implication for policy. There is a blog, as well as a webinar detailing more about the project and the research outcomes.

- 4-page Plain English Summary
- 16-page Guide
- Blog
- Webinar

The scribe image below was produced by Nifty Fox during the final project event webinar. This graphic depicts an overview of the survey used during the research project, as well as an overview of the question and answers during the webinar.

If you would like to know more about this project, please:

Send an email to Dr Stacey Rand at s.e.rand@kent.ac.uk

Visit the project website

Research Advisor Spotlight.

Anica Alvarez Nishio

In this edition, we shine a spotlight on our Research Advisor Anica, who is part of our Public Involvement Strategy and Implementation Group (PISIG) for the Quality, Safety and Outcomes Policy Research Unit. Anica is also involved in a variety of other projects, including the University of Kent Domiciliary Care research.

What lived experience and knowledge do you bring to your involvement role as a Research Advisor?

I smiled when I saw that question: between myself, my family, close friends and people I care for in the community, just off the top of my head I have lived experience of anxiety, arthritis, cancer, COPD, dementia, depression, diabetes, eating disorders, eczema, elder care, end of life care, fertility issues, incontinence, mental health issues, multiple long term conditions, neurodiversity, rare diseases, severe allergies, stroke, suspected self harm, trauma…. All of which makes it sound like there is a great amount of drama, but I think it is actually pretty reflective of most people's experience. In addition to my lived experience, I bring knowledge gained from my professional work, much of which is around the use and ethics of technology, especially digital technology, and also from my voluntary work, which tends to centre around veterans, youth employability, and working with offenders and ex-offenders.

Please describe your involvement within PSSRU (and QSO PRU if relevant):

I began working with PSSRU about five or six years ago, I think, when I was recruited as an RA by Helen Hogan to work on a project with her. I then applied to join the Public Involvement Strategy Implementation Group, and I am happy to say I was successful. I really enjoy this role because I enjoy thinking strategically about how to bring the voice of the public more effectively into frontline research, and also because I enjoy mentoring others who are new to public involvement.

What other networks, roles and projects are you involved with?

I am involved, or have been, with a wide variety of roles: Remote by Default 1 & 2, which was done 'at pace' during the Covid pandemic to assess the impact of the digital delivery of healthcare, and post-pandemic on the longer-term effects on patients, workforce and policy; CoMPuTE, which is using AI modelling to assess multiple long-term conditions in the context of health inequalities and social determinants of health; a domiciliary care project at Kent; a project looking at hospital acquired pneumonia at Liverpool, etc. I am also involved with NICE (the people who develop guidelines about treatments and medicines) and NIHR (the people who fund research).

Tell us an interesting fact about you!

I have a rather elderly schnauzer, George, who now spends most of his time sleeping, and I have recently discovered paddle boarding, which is less challenging than it looks and is good fun.

Thank you Anica!

Please let me know if you would like to feature in a future edition of 'Research Advisor Spotlight'. It really is a great way for us all to find out more about people in our network and to make further connections in the world of public involvement!

Publications and Bulletins.

PSSRU Blog : Carer's self-care – staying well and healthy while caring for a loved one with dementia

NIHR Latest News

Social Care Institute for Excellence – Older LGBTQ+ people and social care repository.

The NIHR are looking for new public members with an interest in health, public health and social care to join one of their funding committee. For more information please visit their website or watch a short video. The deadline for application is midnight Sunday 28th April 2024.

Acronyms and Links for further information.

ASCS	Adult Social Care Survey NHS Digital
CoMPuTE	A research project to investigate if using artificial intelligence can help us predict those more likely to develop multiple long term conditions CoMPuTE — Nuffield Department of Primary Care Health Sciences, University of Oxford
LGBTQ+	Lesbian Gay Bisexual Transgender Queer (or Questioning) and other gender identities and sexual orientations not covered by the other 5 initials.
NICE	National Institute for Health and Care Excellence 'Homepage'
NIHR	National Institute for Health and Care Research. 'Homepage'.
PIRAN	Public Involvement Research Advisor Network. QSO PRU Website: PPI Tab.
PISIG	Public Involvement Strategy and Implementation Group. QSO PRU Website: PPI Tab.
PPIE	Patient and Public Involvement and Engagement. NIHR Resource Pack (Aug 2022).
PSSRU	Personal Social Services Research Unit. 'About Us'.
QSO PRU	Quality, Safety and Outcomes Policy Research Unit. 'About Us'.
RA	Research Advisor.

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