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Dear Colleague

Research Governance for Social Care

I am writing to thank you for the excellent progress made by Councils with Social Services Responsibilities on implementing the Research Governance Framework (RGF). The results of a recent national survey indicate that the majority of Councils now have established systems for the governance of social care research. If your Council has not implemented the Framework corporately I would be pleased if you would pass this information to your Director of Adult Social Services and to your Research Governance Lead, where appointed.

You will know that the Department launched the RGF in 2002 to protect people who use services and carers from the risk of badly designed or poorly conducted research. The RGF set out clear standards for good practice on the part of all key participants – funders, researchers, research employers and care organisations.

Although the RGF was designed to cover both health and social care, implementation was initially focused on the NHS. Coverage of the social care context presented additional challenges. The first national survey in 2002 revealed that, despite a significant amount of research underway, only a minority of CSSRs had any systems in place for approving, monitoring or recording this activity.

As a result, and after extensive consultation, a separate implementation plan was produced for social care. This contained staged proposals for minimal system development, distinguishing between own-account and external research. The aim was to establish sound governance for all externally funded research in CSSRs by the end of 2005.

The recent follow-up survey of CSSRs reveals that this aim has largely been achieved with the majority indicating that they had established, or were planning shortly to establish, systems to:

- ensure that all staff are aware of the RGF;
- routinely record and monitor all research activity;
- check that independent review of the ethics and science of externally-funded research has been undertaken;
- ensure that all relevant staff are notified about research taking place.

While this indicates that most Councils have secured the basis for good governance, it remains a fragile process in many. It is important that it be seen to command active senior level support. The *Research Governance in Social Care: The results of the 2005 Baseline Survey* report can be viewed and downloaded at:

www.dh.gov.uk/PolicyAndGuidance/ResearchAndDevelopment/ResearchAndDevelopmentAZ/ResearchEthics/fs/en?CONTENT_ID=4002132&chk=41bESQ

To support the RGF, we are working with the Social Care Institute for Excellence to establish a *National Research Register for Social Care*: the NRRSC. Using data submitted by Councils, this will record for the first time all significant research activity within local Councils and provide a vital resource for research, policy and practice communities. A *Resource Pack* has also been produced in conjunction with the national Social Services Research Group and ADSS to assist implementation, and seed corn funding has been provided to support the formation of local governance alliances
(www.ssrg.org.uk/governance/index.asp)

This is excellent progress and Councils are to be commended for their hard work in a context of limited resources and ongoing change. Not least because of these constraints, however, proportionality will be important. Protection from the potential risks of research must be balanced against support of good quality research. In particular, account should be taken of independent review (i.e. by University, NHS research ethics committees and/or funding bodies), where it has been obtained. The minimum responsibility of care organisations is only to satisfy themselves that this review has taken place, and that the work is appropriate for the local context. Clearance must also have been obtained, where relevant, from the ADSS national review system.

Overall however the situation is extremely positive and underlines the central role that CSSRs play in the research process – both as hosts and, increasingly, funders of good quality research. The next stage is to work together to identify ways in which we can harness the results of this research activity more systematically to establish a robust national evidence base for social care policy and practice. Active participation by Councils in the development of the new research register for social care will be an important step in this direction.

Thank you again for your commitment to this important process. I look forward to continuing to work with you on the next steps.

With best wishes

Yours faithfully



Kathryn Hudson
National Director for Social Care
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