

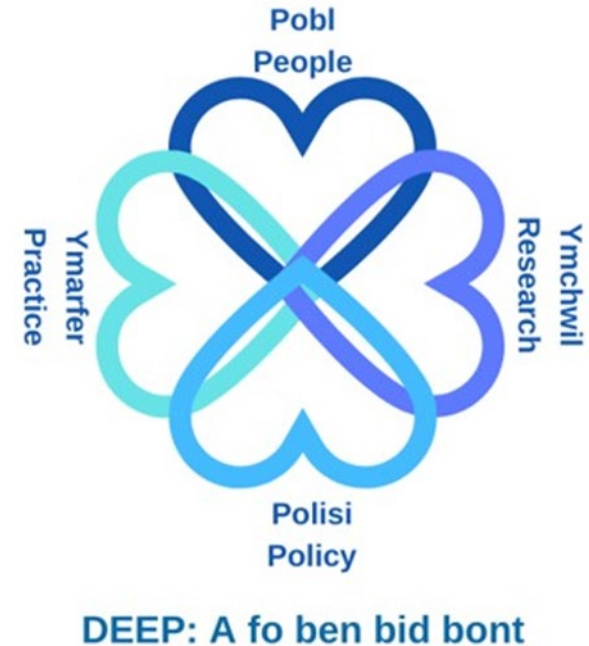
# DEEP: Why take a co-production approach to using evidence in health and social care?

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# DEEP definition

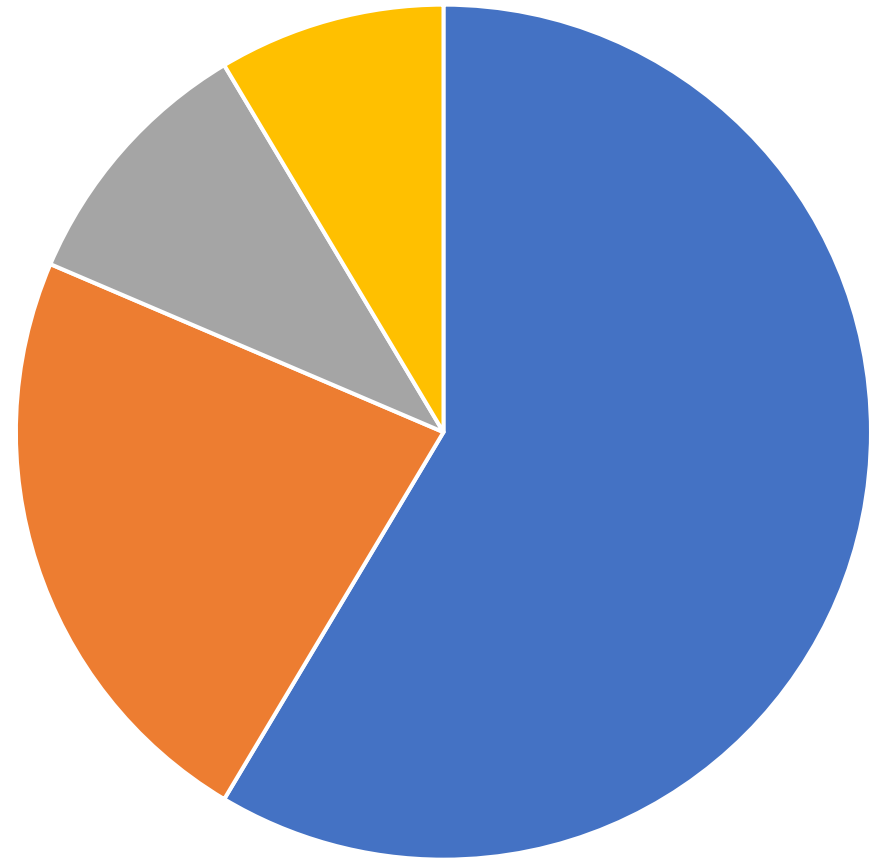
DEEP is a co-production approach to gathering, exploring and using diverse types of evidence in learning and development using story and dialogue methods.



# It respects diverse knowledges

*“Knowledge in the universities of our world represents a very small proportion of the global treasury of knowledge.”*

Hall and Tandon (2017)



It recognises that knowledge is constructed not delivered



Mercer and Littleton (2007)

# It enables the conceptual, not just instrumental use of knowledge

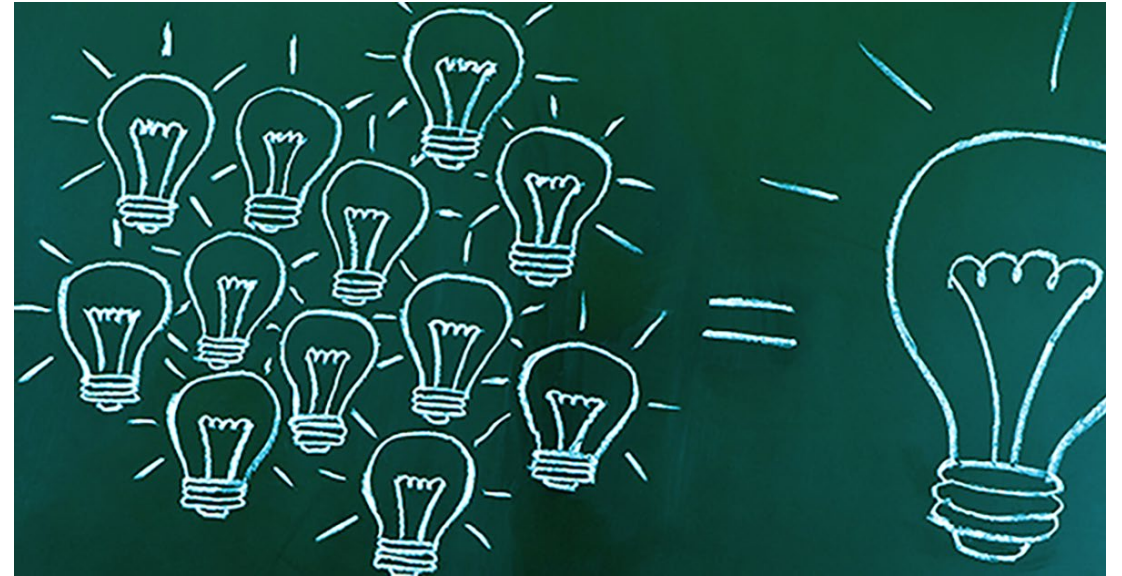
Instrumental use, e.g:

- Lighting in dementia care homes

Conceptual use, e.g.

- Safeguarding
- Person-centred care

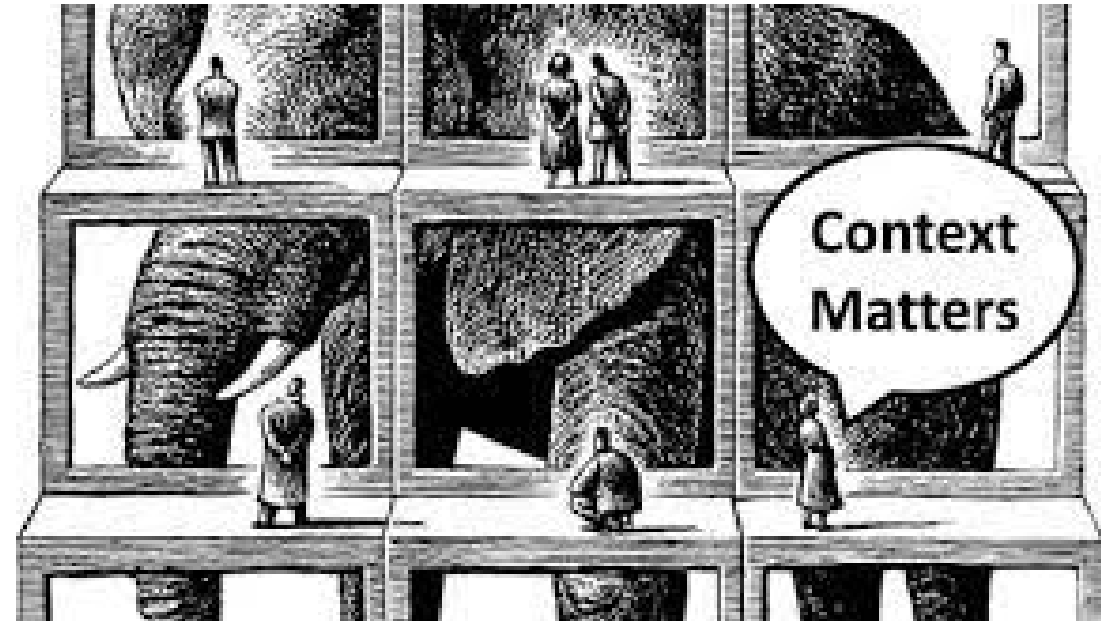
Davies, Nutley and Smith (2000)



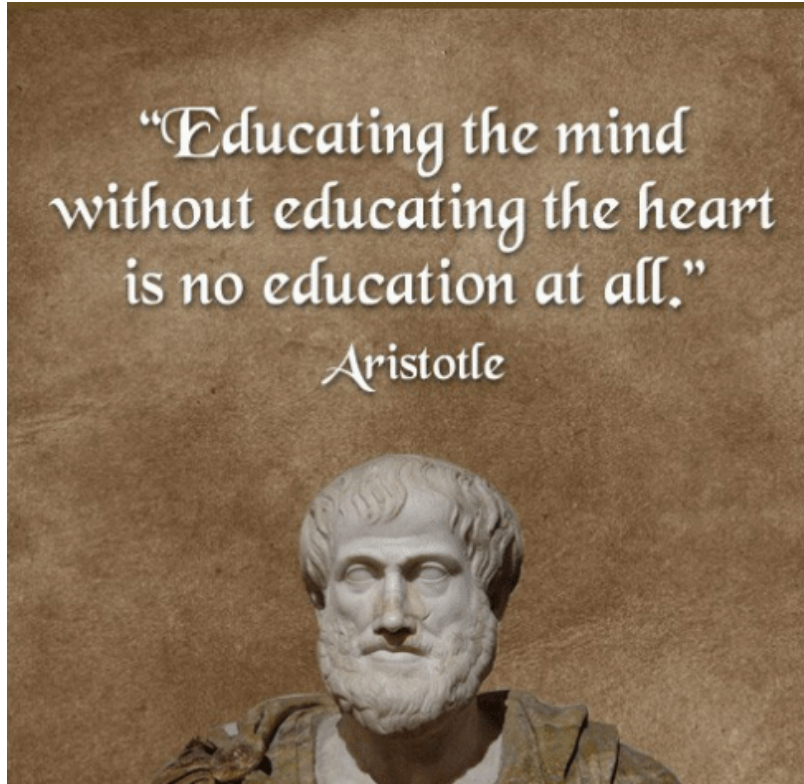
# It enables the use of evidence in complexity and context

*“There is a need to consider more carefully, the complexity of services and of the contexts in which they operate, and then to work to ensure that the methods used to gather and use evidence are more sensitive to the context”*

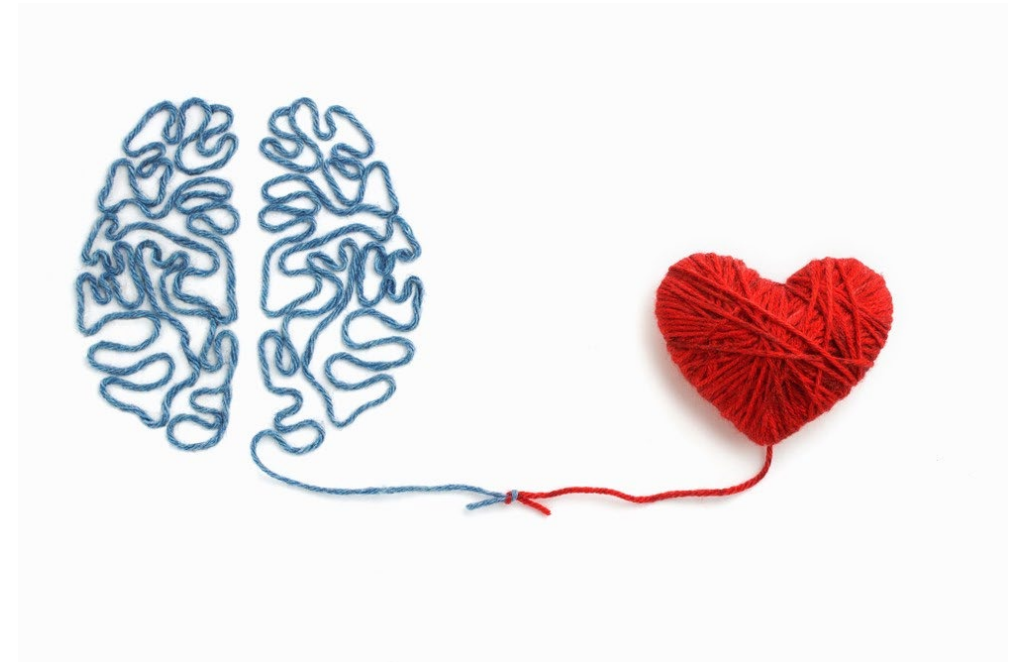
Ghate and Hood (2019)



# It engages the head and heart in learning



Nugent et al (2018)



# A co-production approach to using evidence to support parent carers in Bridgend CBC





# Melding research and lived experience evidence

**Health and  
Social Care** in the community

Health and Social Care in the Community (2015) 23(1), 14–22

doi: 10.1111/hsc.12115

## Special Issue

### Carer assessment: continuing tensions and dilemmas for social care practice

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#### What is known about this topic

- Practitioners are hesitant to assess carer need via a separate assessment process.
- The conduct of carer assessments is problematic. They are narrow in

#### Abstract

Since the early 1990s, UK social care policy has committed to supporting carers. Legislation (England and Wales) over this time period has recognised the importance of separate carer assessments that take into account an individual's ability and willingness to care. This paper considers carer assessment from the perspective of social care practitioners. It reports on qualitative data from a carer research programme that spans over 20 years (1993 to present) and includes 383 in-depth interviews with social care practitioners across England and Wales. Offering unique longitudinal insights, we identify some persistent tensions associated with the translation of UK carer assessment policy into social care practice. We explore practitioners' long-standing ambivalence towards carer assessment and their reluctance to evidence



# Extract of abstract from the research

“Offering unique longitudinal insights, we identify some persistent tensions associated with the translation of UK carer assessment policy into social care practice.... Deficits relating to the conduct of carer assessment are identified. For example, the reliance on structured, problem-focused assessment protocols that restrict discussions to the personal care aspects of caring and fail to capture the complex, diverse lives that carers lead. Carer assessments do not reflect the reciprocal nature of many caring relationships, as a one-way direction of care is assumed. They do not take into account the broader support network of individuals who may be involved in helping someone with complex care need”

# Bringing the research evidence to life through sharing related evidence from lived experience



[https://youtu.be/-S\\_sHKpBC\\_E](https://youtu.be/-S_sHKpBC_E)

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