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# Communities of Practice: Timeline

Supporting people with **complex conditions (CC)** throughout the lifespan

Enhancing, diversifying & sustaining social care **workforce (WF)**

**KICK-OFF**

Bringing diverse stakeholder groups together & scoping research priorities

**1**

**PRIORITY-SETTING**

Sharpening these research priorities and translating them into Communities of Practice

**2**

**LAUNCHING COPS**

Initiating Community of Practice themes, selecting specific areas of interest and ways forward

**3**

**COPS**

64 CC members

69 WF members

Total of 51 COP meetings

**4**

**COP EVALUATION**

21 interviews

**5**

**COPS 'WOUND DOWN'**

**6**

Jul 2021

Nov 2021

29 Mar 2022

Jan to Feb 2025

Apr 2025

June 22 to Apr 25

# COPs provide a platform for collaboration

Experts by Experience          Academia          Statutory Services

Service providers          Voluntary/Community Sector

Feeling listened to, heard, treated as equals

Insight into research, to understand research and ask questions.
Opportunity to identify research need.

Ongoing relationships, supporting research.
Helping bridge the gap between researchers and participants

# Contributing & shaping learning about adult social care (co-producing knowledge)

**Broad topics & an inclusive learning environment**

*we've done some really interesting things… there's a range of professions aren't there, and a range of knowledge bases (E05)*

*That group it does stop everyone not to have a badge saying we are social workers and we are doctors and we are disabled people, we are same in that group that is [a] beautiful thing itself (E04)*

**Thirst for capturing & co-producing knowledge**

*I always come away finding that I've taken something away of something interesting or something else I could read about  (E05)*

**Learning through building relationships**

*Well, as a result of these COPs, I think that certainly relationships between academia, frontline delivery and people, experts by experience, I think that there is a better relationship there, which is vital… it gives another perspective (P04)*

# Sharing learning and knowledge transfer within and beyond the COP in adult social care (defining territory)

**Promoting shared learning within the constraints of the prevailing culture**

- Overall, it needs to be more of a culture change within social care organisations that practitioners feel they have permission and are encouraged to do this [attend COPs]. (P03)

**A shared 'language' of research to promote learning**

- I think sometimes that's about language and about not understanding each other. I don't think we always understand research speak and I think researchers don't always understand social care language. (P01)

# Identifying their potential for influencing new social care practice (inventing new practice)

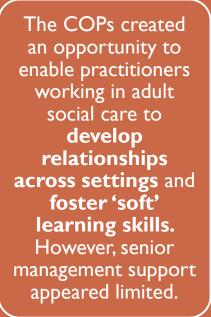**Networking, validating research ideas and developing knowledge-exchange collaborations**

**Embedding learning into practice and influencing policy**

- I met… a good and collaborative community, which is rare to find, because these collaborations between practitioners, members of the public and academia are not easy to build. (R01)
- It was a validation and the endorsement. (P07)

- From my point of view, because the outcome of the COPs meant that I was able to share information and it is, you know, bringing things to people's forefront of their mind. That in time you like to think actually, you know, does start to inform policy (P06)

# Key learning points

The COPs exhibited a **strong inclusive community** element, allowing a broad range of topics to help generate learning.

The COPs created an opportunity to enable practitioners working in adult social care to **develop relationships across settings** and **foster 'soft' learning skills.** However, senior management support appeared limited.

A key strength of the COPs was their potential for bringing in connections through **networking** and developing opportunities for knowledge-exchange **collaborations**.

COP members described how information shared had the potential to **influence practice** individually or at a service level, with the potential [*but no actual evidence!*] to **shape policy**.

# Thank you

For more information or to get involved please contact the Kent Research Partnership team

**Contact details**

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**Kent Research Partnership**

Building research capacity in adult social care