



# Cumberland Council Research, Evidence, Evaluation and Learning (REEL) Capabilities Framework

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## Background

Cumberland Council received a grant of £4.8 million from the National Institute of Health and Care Research (NIHR) to establish a new Health Determinants Research Collaboration (HDRC). The Cumberland HDRC is a collaboration between Cumberland Council, the University of Cumbria (UoC), the University of Central Lancashire (UCLAN), Cumbria Council for Voluntary Services and community organisations. The HDRC aims to enhance the research capacity and capability of Cumberland Council, particularly in addressing health inequalities. This collaborative will strive to instill an evidence-informed culture within local government and to undertake research in situations where evidence is not already available.

## Purpose

The REEL Capabilities Framework sets out the capabilities needed by staff to embed evidence into the Council's decisions, practice, policies and culture. Allied to the capability framework is a Cumberland Council's REEL Training Programme which provides structured learning opportunities to enable everyone to gain the REEL capabilities, advancing their skillsets and careers.

## Scope

The REEL Capabilities Framework is designed to generate learning about evidence and how to create it. It is open to all staff as continuous professional development and career advancement. The training will be voluntary, staff across all directorates will be encouraged to participate and will be supported to attend training as part of their professional development. As a HDRC we also have learning opportunities focused on Health Inequalities and the Determinants of Health and how they play out in each directorate.

## Strategic Alignment

The Framework is grounded in Cumberland Council's Strategic Plan 2030. It aligns with the principles of the Cumberland Approach<sup>1</sup> as shown in Appendix A and shares the Cumberland Council vision of enabling positive outcomes for health and wellbeing for all residents. In addition, the Cumberland Council values of being compassionate, innovative, empowering, ambitious and collaborative are embedded into the content of the REEL Capabilities Framework.

The Framework also draws upon the core concepts of behavioural change from the Making Every Contact Count- (MECC)<sup>2</sup> approach. MECC is an approach to behavioural change that uses the millions of day-to-day interactions that organisations and individuals have with other people to support them in making positive changes to their physical and mental health and wellbeing. For organisations, this means providing their staff with the leadership, environment, training and information that they need to deliver this approach. For staff, MECC means having the competence and confidence to deliver healthy lifestyle messages, to encourage people to change their behaviour and to direct them to local services that can support them. For individuals, MECC means seeking support and being responsible for their health and lifestyle, and looking after their physical and mental wellbeing. Whilst the REEL Training Programme does not deliver a MECC course, the core concepts of MECC are woven throughout the REEL Training to ensure staff are fully supported to Make Every Contact Count.

The REEL Capabilities Framework also aligns with several established existing national frameworks, regulatory requirements and strategies, thus ensuring its validity. We have meticulously considered their guiding principles and best practices to create a robust and comprehensive framework (see Appendix B).

The REEL Capabilities Framework has set out and defined eight domains of capability necessary for comprehensive research training and knowledge acquisition for Cumberland Council staff who would like to develop their evidence gathering and research skills. The REEL capability framework is organized into eight interconnected, non-hierarchical domains that can be considered collectively, as well as individually. They are as follows: Health Inequalities and Determinants of Health, Theory of Change

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<sup>1</sup> Cumberland Council. (2024). The Cumberland Approach. <https://www.cumberland.gov.uk/your-council/council-documents/council-plan/how-we-will-do-cumberland-approach>

<sup>2</sup> Public Health England. (2016). Making Every Contact Count (MECC): Consensus statement. <https://www.england.nhs.uk/wp-content/uploads/2016/04/making-every-contact-count.pdf>

Methodology, Using Evidence, Performing Service Evaluations, Planning and Delivering Research, Ensuring Continuous Quality Improvement, Strategic Research Leadership, and; Co-Production and Co-Research (see figure 1).

Understanding what health inequalities and the factors that determine them is a key starting point for everyone in the Council if we are to truly embed health and wellbeing at the heart of everything we do. This course is for everyone.

Once these key concepts have been acquired the training progresses to cover the theory of change method for planning services and interventions. This is a core planning tool for Cumberland Council and advised for anyone delivering, designing or evaluating front line services.

The 'using evidence' domain will hone your understanding of what evidence is, how to discern 'good' evidence from 'weak' evidence, how to find evidence appropriate to your task - and how to present it in a balanced way. Evidence is used to underpin theories of change which is why it follows this domain in our training programme.

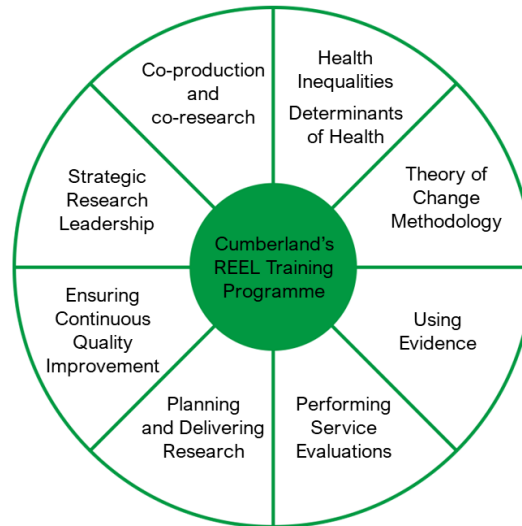
Evaluation is the collection of evidence to prove the worth of service, project or intervention. Performing service evaluations therefore follows the evidence domain as it is a very common application of evidence.

Having explored evaluation, you will hopefully have gained an appetite for the wider field of research. This is where the next domain, planning and delivering research, comes in. This will help you to understand when and how to use different types of research for different purposes.

In our Council setting we use evidence, evaluations and research to help us to understand how to make services better. Understanding continuous quality improvement is therefore the next domain in the programme and is most suitable for team, service or directorate leaders.

The strategic research leadership domain is for senior leaders who need to consider how to have an evidence-informed approach to leading their areas of responsibility and how to create evidence-informed cultures in their teams.

The last domain in the training programme, co-production and co-research, thread through all the other domains as a core approach we take to work at Cumberland Council, working with our residents rather than doing things to them. This is appropriate for any member of staff.



*Figure 1 Domains of REEL capabilities.*

REEL Capabilities training will be offered across three levels of proficiency (entry-level, intermediate and advanced). Each level builds upon and expands the capabilities of the previous whereby advancing to the next level requires mastery of the capabilities outlined at the previous level. It is recognized that staff might already possess research credentials or may choose to enhance their REEL capabilities beyond those outlined at a certain level of practice. This could correspond to colleagues holding leadership roles or those currently in a particular career pathway.

Each domain in the framework is an area of capabilities. These are described in terms of the knowledge and skills you would demonstrate to be competent at each level of each domain. Our associated REEL Training Programme is designed to support staff to develop the knowledge and skills set out in each domain.

## The REEL Training Programme

The REEL Training Programme derived from the Capabilities Framework will facilitate training and boost research capacity and capability within Cumberland Council. The Training Programme will be available from March 2025 onwards and can offer opportunities for accreditation alongside learning. Staff can select any training course from across the framework – it is not necessary to progress around the domains in a particular order or at a particular level. Staff who participate will be encouraged to embrace the spirit of open inquiry and be equipped with skills to enable collaborative

research opportunities with the community and voluntary sector. The range of REEL capability domains will be a valuable tool for entry-level employees, mid-tier personnel, and senior and executive staff members of the Council.

## REEL Capabilities Domain 1: Health Inequalities and the Determinants of Health



Health inequalities are systematic and unjust differences in health status observed across the population and among different groups in society. These differences are potentially avoidable and caused by the conditions in which people are born, live, work and grow. Determinants of health are factors encompassing the physical, social and economic environment, and a person’s individual characteristics and behaviours. Knowing and understanding what health inequalities and the determinants of health are about, at both local and national level, will help us to identify health issues

and disparities and find solutions through evidence-based research. Every directorate in the Council delivers a service that has an impact on the health and wellbeing of residents, and this domain will help staff in all directorates understand what this means for them.

The competencies needed to attain this domain are set out below.

### Entry level:

Core Knowledge:	Key Skills:
<p>HI1 Understand the range of health inequalities that people can experience and the impact they can have on people’s lives.</p> <p>HI2 Understand the extent to which each directorate influences the determinants of health and how service can positively impact on health inequalities.</p> <p>HI3 Understand the main priorities of Cumberland Council’s Research Plan in terms of the health inequalities within local communities that it will address.</p>	<p>HI4 Recognise key factors that contribute to the avoidable differences in health outcomes between groups or populations.</p> <p>HI5 Able to link the activities of the directorate to the improvement of health inequalities.</p> <p>HI6 Able to articulate why tackling the determinants of health is of benefit to the Council, communities and residents.</p>



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*Intermediate level:*

Core Knowledge:	Key Skills:
HI7 Understand how legislation and statutory duties underpin efforts to tackle health inequalities. HI8 Understand key national research on health inequalities and determinants of health (e.g. the national and local Marmot Report <sup>3</sup> ).	HI9 To identify a range of factors that may be contributing to a local health inequality. HI10 To articulate national policies that underpin service design to improve health inequalities.

*Advanced level:*

Core Knowledge:	Key Skills:
HI11 Understand evidence of best practices in Local Authorities to improve health inequalities.	HI 12 Identify and formulate plans to address issues from health inequalities in communities. HI13 Conduct Health Impact Assessments.

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<sup>3</sup> <https://www.instituteofhealthequity.org/resources-reports/england-marmot-reports>

## REEL Capabilities Domain 2: Theory of Change Methodology



A Theory of Change<sup>45</sup> is a tool used to explain and illustrate how and why a desired change is expected to happen in a particular context. This method is a process of thinking through and documenting how an intervention, strategy or intervention is expected to lead to change, why it will work, how it will benefit, who will benefit from it, and what the conditions required for success will be. Theories of change express the logic of service design and each step of the process is underpinned by evidence. Each element of a theory of change is a blueprint for evaluation, and

training on designing a monitoring and evaluation plan to complement your theory of change is included in this domain.

The competencies needed to attain this domain are set out below.

### Entry level

Core Knowledge:	Key Skills:
<p>TOC1 Understand what a theory of change is, its benefits and how it can be used.</p> <p>TOC2 Understand what each component of a theory of change is and how they logically connect.</p> <p>TOC4 Understand how a theory of change relates to monitoring and evaluation.</p>	<p>TOC3 Be able to read and critique a theory of change e.g. the HDRC theory of change.</p> <p>TOC5 Be able to read and critique a monitoring and evaluation plan linked to a theory of change e.g. the HDRC monitoring and evaluation plan.</p>

<sup>4</sup> <https://www.ncvo.org.uk/help-and-guidance/strategy-and-impact/strategy-and-business-planning/theory-of-change/> , or if you prefer a published paper try [https://www.researchgate.net/publication/279533296 Useful Theory of Change Models](https://www.researchgate.net/publication/279533296_Useful_Theory_of_Change_Models)

<sup>5</sup> Weiss, C. H. (1995). Nothing as practical as good theory: Exploring theory-based evaluation for comprehensive community initiatives for children and families. In J. Connell, A. Kubisch, L. Schorr & C. Weiss (Eds.), *New approaches to evaluating comprehensive community initiatives* (pp. 65-92). New York: The Aspen Roundtable Institute.

*Intermediate level*

Core Knowledge:	Key Skills:
<p>TOC6 Understand the role of assumptions and evidence in a theory of change.</p> <p>TOC7 Understand how to apply a theory of change to a range of different settings e.g. project, service, organization.</p> <p>TOC8 Gain a working knowledge of ways to measure the short-term impact of change at project and service level.</p> <p>TOC9 Understand how to co-produce theories of change with residents.</p>	<p>TOC10 Write a theory of change for an area of work.</p> <p>TOC11 Write a monitoring and evaluation plan for an area of work.</p>

*Advanced level*

Core Knowledge:	Key Skills:
<p>TOC12 Understand how to review and revise a theory of change.</p> <p>TOC13 Understand how to use a theory of change for fundraising, staff development, marketing, service design and strategy.</p> <p>TOC14 Gain a working knowledge of ways to measure the strategic impact of change at organisational level.</p>	<p>TOC15 Support a team to develop a theory of change and monitoring and evaluation plan.</p>

## REEL Capabilities Domain 3: Using Evidence



Evidence is any information or data that supports or disproves a claim, hypothesis or argument. It is the basis for making decisions, drawing conclusions, and establishing the truth or validity of a statement. Understanding what evidence means or shows is essential for us as a Council to make informed decisions and policies that will affect the community.

The competencies needed to attain this domain are set out below.

### *Entry level*

Core knowledge:	Key Skills:
<p>E1 Understand what evidence is and the breadth of different types of evidence.</p> <p>E2 Understand where and how to find evidence.</p> <p>E3 Understand how to judge the quality of evidence.</p> <p>E4 Understand how evidence is used in decisions, practice and policy.</p> <p>E5 Understand how to present evidence in different formats.</p>	<p>E6 Able to retrieve evidence that supports day to day work.</p> <p>E7 Able to assess the reliability of evidence linked to day-to-day work.</p> <p>E8 Able to present data in a balanced way.</p>

### *Intermediate level*

Core knowledge:	Key Skills:
<p>E9 Understand the limitations of local and national data sets.</p> <p>E10 Understand bias in evidence created by different stakeholders.</p>	<p>E11 Develop an outline of the evidence that would underpin service design or delivery in own directorate.</p> <p>E12 Use Cumberland Council's Evidence Hub to search for and understand existing evidence.</p>

### *Advanced level*

Core knowledge:	Key Skills:

<p>E13 Understand the markers of high quality evidence e.g. scale, validity, robustness.</p> <p>E14 Understand circumstances when lower quality data can be utilized.</p>	<p>E15 Critically evaluate the evidence used in own directorate.</p> <p>E16 Construct evidence-based policy and make evidence-informed decisions.</p> <p>E17Contribute new material to Cumberland Council's Evidence Hub.</p> <p>E18 Champion the need for high quality evidence across the Council.</p>
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## REEL Capabilities Domain 4: Performing Service Evaluations



Service evaluation is a process to understand how a service was delivered by examining its implementation, delivery, impact and intended outcomes. It is important to evaluate services to ensure that service providers offer best quality service and are using their resources efficiently. Conducting service evaluations, with input from service users as well as service providers, provides us with evidence to support decision-making as a Council and helps us to identify areas for improvement.

The competencies needed to attain this domain are set out below.

### *Entry level*

Core Knowledge:	Key Skills:
<p>PSE1 Understand the value and process of evaluation.</p> <p>PSE2 Understand different types of evaluation and their applications in their roles / services (e.g. process, impact, formative, value for money, realist etc.).</p> <p>PSE3 Understand the tension between theoretical evaluation design and its delivery in practice.</p>	<p>PSE4 Critique evaluation designs and reports.</p> <p>PSE5 Design an outline for an evaluation for an area of work that is proportionate to the project and resources available.</p>

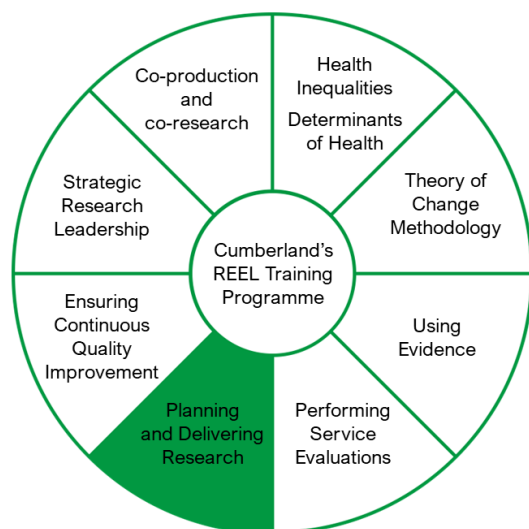
### *Intermediate level*

Core Knowledge:	Key Skills:
<p>PSE6 Understand tools for monitoring and evaluating services.</p> <p>PSE7 Understand how to involve residents in the design and delivery of service evaluation.</p> <p>PSE8 Understand how to feed forward findings of evaluations into the improvement of services.</p>	<p>PSE9 Assess the quality and authenticity of services evaluations in own directorate.</p> <p>PSE10 Design a detailed evaluation plan.</p> <p>PSE11 Conduct and write up an evaluation that is proportionate to the project and reflect on learning from the process.</p>

*Advanced level*

Core Knowledge:	Key Skills:
PSE12 Develop a comprehensive toolkit of techniques for service evaluation. PSE13 Understand how to commission an internal or external evaluation. PSE14 Understand how to facilitate or lead an evaluation.	PSE15 Develop clear and concise service evaluation plans. PSE16 Convene meetings / events to feed learning from evaluations forward into future plans. PSE17 Lead or oversee an evaluation project.

## REEL Capabilities Domain 5: Planning and Delivering Research



Planning and Delivering Research is about using research to gather evidence through a planned project, study or intervention, and making informed decisions from the obtained evidence. Alternatively, we can conduct research to find evidence that is not readily available. Planning Research requires us to identify a research question or problem, carry out a literature review on a particular topic or topics, define research objectives, and develop or adopt a protocol that is appropriate. Delivering Research requires comprehensive knowledge of methodologies to

collect data and produce evidence. REEL Training on Research Ethics and Governance will also be provided to complement this domain.

On completion of training, staff will be able to:

### *Entry level*

Core Knowledge:	Key Skills:
<p>PDR1 Understand the stages of the research process and why they are all important.</p> <p>PDR2 Understand the different types of research and how they might be useful to own work / service (e.g. qualitative, quantitative and mixed method, primary and secondary).</p> <p>PDR3 Understand the data collection and analytical tools associated with each type of research.</p> <p>PDR4 Understand the sensitivities of collecting and handling personal data and the legalities of data protection.</p>	<p>PDR5 Develop a research question relevant to own area of work.</p> <p>PDR6 Critique other people's research design.</p> <p>PDR7 Identify the limitations of particular types of research.</p>

### *Intermediate level*

Core Knowledge:	Key Skills:
<p>PDR9 Understand how to plan each stage of a research project.</p>	<p>PDR14 Plan, undertake and evaluation a research project in own area of work.</p>

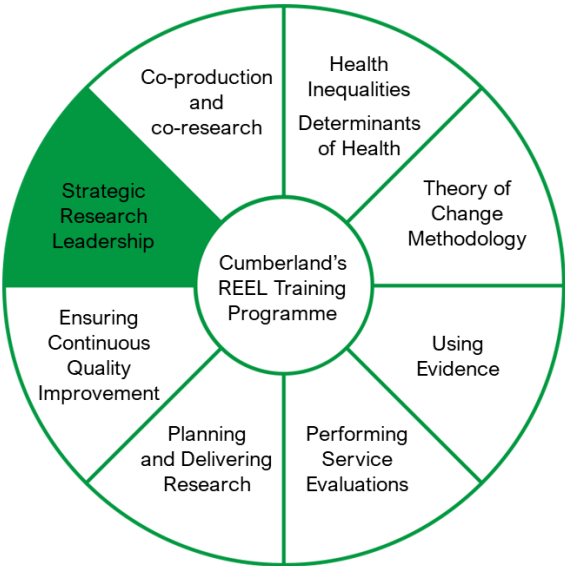


<p>PDR10 Understand the strengths and limitations of a range of data collection and analysis tools including quantitative, qualitative and creative approaches.</p> <p>PDR11 Understand how to involve residents in the design and delivery of research.</p> <p>PDR12 Understand what is required in an application for research funding.</p> <p>PDR13 Understand how to navigate the legal, ethical and practical issues that arise in research projects.</p>	<p>PDR15 Conduct a rapid evidence / literature review.</p> <p>PDR16 Contribute to writing a funding application for a research project.</p>
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*Advanced level*

Core Knowledge:	Key Skills:
<p>PDR17 Understand how to critically appraise the strengths and limitations of a range of data collection and analysis tools for stakeholders, participants and the project.</p> <p>PDR18 Understand how to write up research for different audiences.</p> <p>PDR19 Understand how to apply for ethics from a range of different ethical committees.</p> <p>PDR20 Understand how to publish research in peer reviewed journals and at conferences.</p> <p>PDR21 Understand how to mobilise research findings in practice and policy.</p> <p>PDR22 Understand how to quality assure a research project.</p>	<p>PDR23 Interpret the results of research.</p> <p>PDR24 Apply research findings (own or others) to an area of work.</p> <p>PDR25 Work autonomously to plan and conduct research.</p> <p>PDR26 Write research reports and papers that meet the standards of peer review.</p> <p>PDR27 Support early researchers to become research active.</p> <p>PDR28 Work collaboratively with other stakeholders on research projects.</p> <p>PDR2 Write or lead the development of an application for research funding.</p>

# REEL Capabilities Domain 6: Ensuring Continuous Quality Improvement



Continuous Quality Improvement (CQI) is a model by which organisations can build quality improvement into their services. As a Council, we are highly committed to the satisfaction of our residents and communities through the provision of excellent, efficient and enterprising public services. Ensuring Continuous Quality Improvement as a REEL capability will equip staff with new knowledge and levels of enquiry that will lead to changes in practice. Continuous improvement in service quality will yield long-term benefits for residents helping us to improve the health and

wellbeing of residents.

The competencies needed to attain this domain are set out below.

*Entry level*

Core Knowledge:	Key Skills:
CQI1 Understand what continuous quality improvement is and how it benefits staff, communities and the Council. CQI2 Understand the sequence of stages of continuous quality improvement and what they each involve. CQI3 Recognise the association between continuous quality improvement and the Theory of Change in relation to their own practice or project.	CQI4 Identify an area of own service that might benefit from continuous quality improvement.

*Intermediate level*

Core Knowledge:	Key Skills:
CQI5 Understand the relationship between innovation and improvement.	CQI8 Develop an improvement plan and process for an area of own service.

<p>CQI6 Understand the use and limitations of a range of continuous quality improvement tools.</p> <p>CQI7 Understand the role of evidence, evaluation and research in continuous quality improvement.</p>	<p>CQI9 Critically think through a range of perspectives on a particular issue or problem.</p>
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*Advanced level*

<p>Core Knowledge:</p>	<p>Key Skills:</p>
<p>CQ20 Understand continuous quality improvement at a directorate and organisational level.</p>	<p>CQI21 Deliver a continuous quality improvement project.</p>

## REEL Capabilities Domain 7: Strategic Research Leadership



Strategic Research Leadership is a skillset that hones in on the skills and knowledge required to lead research teams and research projects. The Strategic Research Leadership training is intended to complement more general leadership training that Council staff have already received or will receive.

The competencies needed to attain this domain are set out below.

*Entry level – Not available at an entry level.*

### *Intermediate level*

Core Knowledge:	Key Skills:
<p>SRL1 Demonstrate effective people management skills in research situations, to develop individuals and promote a culture of trust and support.</p> <p>SRL2 Understand the operational functions (finance, legal etc.) needed to enable a successful research project.</p> <p>SRL3 Understand risk and risk management in relation to research activity.</p>	<p>SRL4 Able to work in collaboration with stakeholders across the research project.</p> <p>SRL5 Design and develop clear and concise research plans.</p> <p>SRL6 Critically appraise staff research capabilities.</p>

### *Advanced level*

Core Knowledge:	Key Skills:
<p>SRL7 Understand the legal responsibilities inherent in leading research projects.</p> <p>SLR8 Understands what governance structures are appropriate for a given research project.</p>	<p>SRL8 Proficiently evaluate research development experiences.</p> <p>SRL9 Design, develop and implement research projects, interventions and programmes.</p> <p>SRL10 Manage and be accountable for research finances, including for grant applications, budgeting, and use of funds in active projects.</p>

	SRL11 Make the transition from doing research to managing research done by others.
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## REEL Capabilities Domain 8: Co-production and co-research



Co-production and co-research ensure that residents' lived experience contribute to the design and delivery of research and or services protecting the Council from unconscious bias and assumptive thinking. Co-production refers to residents working with practitioners to design a service, evaluation or piece of research. -Co-research refers to residents working alongside researchers to design, deliver and disseminate research. Both approaches are designed to enhance the quality and relevance of service design and research by incorporating diverse viewpoints and expertise.

The competencies needed to attain this domain are set out below.

### *Entry level*

Core Knowledge:	Key Skills:
<p>CPCR1 Understand the importance and benefits of involving residents in the work of the Council.</p> <p>CPCR2 Understand the difference between engagement, involvement, participation, co-production and co-research.</p> <p>CPCR3 Understand the key principles of engaging residents in work (e.g. respect, payment, transparency).</p>	<p>CPCR4 Identify a range of ways in which residents could be involved in own service area.</p>

### *Intermediate level*

Core Knowledge:	Key Skills:
<p>CPCR5 Understand the complexities of involving residents in different types of work .</p> <p>CPCR6 Understand the basic principles of the PICE (Public Involvement and Community Engagement) model.</p>	<p>CPCR8 Design, deliver and evaluate a co-production or co-research project.</p>

CPCR7 Understand a range of models of participation, co-production and collaboration.	
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*Advanced level*

Core Knowledge:	Key Skills:
CPCR9 Understand how to use the results of co-production and co-research at a strategic level.	CPCR10 Develop a co-production or co-research plan for the directorate. CPCR11 Support team members to enable co-production and co-research in their work.

# Appendix A – Strategic Alignment with Cumberland Council’s Strategic Guiding Principles

## Guiding Principles from the Cumberland Approach

Cumberland Council’s REEL Training Programme, when developed, will align with the Cumberland Approach as set out in figure 2 below.

Accessible and Trusted Services	All training will be accessible and inclusive and trainers aim to build trusting relationships with participants on courses.
Listening, involving and engaging	All the domains of training support staff to listen to, to involve and engage residents in generating evidence and evidence-informed services themselves. This is also the focus of one specific domain of the framework.
Learning and improving	Evidence, evaluation and research are the basis of individual and organizational learning. All the domains of the training programme support learning and service improvement, and there is a dedicated domain on continuous quality improvement.
Prevention and early intervention	Evidence is needed to support investment in preventative and early interventions when demand from people in crisis is so high. The REEL training programme supports staff to use and / or gather such evidence and to plan new preventative services robustly with evidence.
Collaborative working	The REEL framework promotes collaboration between directorates and with external stakeholders and communities.
Leadership	The REEL training framework has a domain on strategic research leadership in order to support leaders across the Council to have evidence-informed leadership and to lead evidence-informed approaches in their teams.
Local first	Cumberland is a diverse area and the REEL training programme will support staff to understand how well different evidence sets reflect the different groups of people and different geographies of Cumberland underpinning a local approach to the design and delivery of services.
Sustainability	There is great potential to achieve sustainable improvements in health outcomes as a consequence of carefully planned research projects which produce robust evidence.



## Appendix B: Strategic alignment with existing strategies and frameworks

- Cumberland Council. (2024). *How we will do this - The Cumberland Approach*. Retrieved from Cumberland Council Plan: <https://www.cumberland.gov.uk/your-council/council-documents/council-plan/how-we-will-do-cumberland-approach>
- General Medical Council (GMC). (2024). *Generic professional capabilities framework*. Retrieved from General Medical Council: <https://www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/generic-professional-capabilities-framework>
- Gov.uk. (n.d.). *Government Analytical Evaluation Capabilities Framework*. Retrieved from Gov.uk: [https://assets.publishing.service.gov.uk/media/5e96c443e90e071a13b0892e/Magenta\\_Book\\_supplementary\\_guide.\\_Government\\_Analytical\\_Evaluation\\_Capabilities\\_Framework.pdf](https://assets.publishing.service.gov.uk/media/5e96c443e90e071a13b0892e/Magenta_Book_supplementary_guide._Government_Analytical_Evaluation_Capabilities_Framework.pdf)
- Health Research Authority. (2017, November 7). *UK Policy Framework for Health and Social Care Research*. Retrieved from NHS Health Research Authority: <https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/>
- Local Government Association. (2024). *Transformation Capability Framework*. Retrieved from Local Government Association: <https://www.local.gov.uk/our-support/transformation/transformation-capability-framework>
- National Institute for Health and Care Excellence (NICE). (2022, June 22). *NICE real-world evidence framework*. Retrieved from NICE: <https://www.nice.org.uk/corporate/ecd9/chapter/overview>
- NHS England. (2017). *Multi-professional framework for advanced practice in England*. Retrieved from The Centre for Advancing Practice: <https://advanced-practice.hee.nhs.uk/multi-professional-framework-for-advanced-practice/>
- NHS England. (2021, November). *National Health Service (NHS) England*. Retrieved from Making research matter. Chief Nursing Officer for England's Strategic plan for Research: <https://www.england.nhs.uk/wp-content/uploads/2021/11/B0880-cno-for-englands-strategic-plan-for-research.pdf>

## Appendix C – Glossary of terms

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Term	Description
CQI	Continuous Quality Improvement
DoH	Determinants of Health
HI	Health Inequalities
HDRC	Health Determinants Research Collaboration
MEL	Monitoring, Evaluation and Learning
NIHR	National Institute of Health and Care Research
PICE	Public Involvement and Community Engagement
REEL	Research Evidence, Evaluation and Learning
REEL capability	The ability to carry out research, work with evidence, evaluate research and take part in learning
ToC	Theory of Change
UCLAN	University of Central Lancashire
UoC	University of Cumbria

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