

Student Name : Roxana Chiciu

Student ID : 2537593

**Module Title and Code : Digital skills and Research Methods
(LCHS4007_BIRM)**

Lecturer's Name : Markus klingelfuss

Assignment Title : Research Report

Understanding Research

Understanding Research in Health and Social Care: An Evaluation of Organisational Resilience in Care Homes

© 2022 Ross et al. Published December 20, 2022./2023

Research plays an important role in improving health and social care because it provides evidence that helps professionals deliver safe, effective, and person-centred care. By understanding how research is happening, health and social care practitioners can evaluate evidence and apply it to improve practice. (Care Quality Commission, 2023)

This report examines the research article "Organisational Resilience in Care Homes: A Qualitative Study of Adaptive Capacity in Everyday Care Practice" and explains its purpose, research methods, and findings. The study was published in 2023 and was written by Alastair Ross, Janet E. Anderson, Santhani Selveindran, Tamsin MacBride, Paul Bowie, Andrea Sherriff, Linda Young, Evie Fioratou, Edel Roddy, Heather Edwards, Belinda Dewar, Lorna M. Macpherson. All of these authors contributed equally to the document. The report also discusses

the importance of the study within the UK health and social care sector and reflects on what has been learned about research methods.

The study explores *organisational resilience* within Scottish care homes. Organisational resilience refers to the ability of organisations to respond, adapt and continue providing safe, high-quality care despite everyday challenges such as staff shortages, changing resident needs, limited resources and unexpected situations. Instead of focusing only on mistakes or failures, the researchers examine how care home staff successfully adapt their work to maintain person-centred care in complex environments. The study is based on *Resilient Healthcare Theory* and uses the *CARE (Concepts for Applying Resilience Engineering)* model to understand how care is delivered in real-life practice rather than how it is expected to happen according to policies or procedures.

The research involved a wide range of participants, including care home staff, managers, residents, family members, inspectors and multidisciplinary health and social care professionals working in Scottish care homes. Including participants with different roles allowed the researchers to develop a comprehensive understanding of how care is coordinated and adapted in everyday practice.

This topic is highly relevant to health and social care in the United Kingdom because the number of older adults requiring long-term care continues to increase. Many residents in care homes have multiple long-term conditions, making care complex. Staff must respond quickly to changing situations while maintaining residents' dignity, safety and quality of life. The study highlights the importance of flexible working, teamwork, communication and person-centred care, which are key principles within UK health and social care practice (NICE, 2021). Furthermore, improving organisational resilience can help care homes provide safer care, improve residents' experiences and support the wellbeing of staff working under pressure.

The purpose of this study was to understand how care home staff adapt their work to provide safe and effective care in complex and unpredictable situations and efficiency despite challenges. The study also aimed to explore how organisational resilience can be strengthened through better communication, coordination, learning and system design.

The research was guided by the following objectives: a) to understand how care is delivered in everyday practice ("work-as-done"), b) to identify how staff adapt to changing demands and limited resources, c) to explore opportunities for improving organisational resilience and person-centred care within care homes.

Research methods describe the techniques researchers use to collect and analyse information in order to answer a research question. Choosing an appropriate research method is essential because different research questions require different types of evidence (Polit & Beck, 2021).

Quantitative research focuses on numerical information. Qualitative research focuses on people's experiences, opinions and behaviours. Instead of collecting numbers, qualitative researchers collect detailed information through interviews, observations, focus groups or written accounts. Qualitative research is particularly useful in health and social care because many important aspects of care, such as communication, dignity and person-centred practice, cannot easily be measured using numbers (Creswell & Creswell, 2023).

Mixed-methods research combines both quantitative and qualitative approaches within the same study. Researchers may collect numerical data together with interviews or observations to gain a more complete understanding of a research problem. This approach combines both methods even if it requires more time, energy and resources.

The researchers used a *qualitative research design*, which was the most appropriate method because they wanted to understand how care home staff experience their work and how they adapt to everyday challenges. Rather than measuring performance using statistics, the researchers explored the real-life experiences of staff and residents by observing daily practice and discussing their experiences with participants. The study followed **e**thnographic principles, meaning that researchers spent time within care homes observing normal routines and interactions over an extended period, which is called field work and observance. This approach enabled them to understand what staff actually do in practice, referred to in the study as "*work-as-done*," rather than relying only on written policies or procedures.

The study was informed by Resilient Healthcare Theory, which focuses on how healthcare organisations successfully adapt to changing situations while continuing to provide safe care. The researchers applied the CARE model to examine how resilience is demonstrated through anticipation, monitoring, responding and learning in everyday care practice.

The main research objectives were to examine how everyday care is delivered in care homes, how staff adapt to changing demands and limited resources, identify how organisational resilience supports safe, effective and person-centred care and provide recommendations for improving the quality and safety of care in Scottish care homes.

The research was carried out over 24 months across several care homes in Scotland, giving the researchers enough time to build a detailed understanding of everyday practice, and time to collect primary data. This refers to information collected directly by researchers for the specific purpose of answering their research question. In contrast, secondary data refers to information that already exists, such as government reports, published research articles or national health statistics. In this study, the researchers did not rely on previously published information. Instead, they gathered original data directly from care home staff, residents, relatives and professionals working within the care sector. First, the researchers completed 68 hours of non-participant observation, where they observed staff carrying out their normal duties without becoming involved in the care they provided. These observations allowed the researchers to see how staff responded to changing situations, balanced competing priorities and adapted to residents' individual needs. Initially, observations were broad before becoming more focused on key areas such as medication management, mobility, nutrition and oral care (toothbrushing)

The researchers also conducted 33 individual interviews with participants. Interviews were carried out privately within the care homes and followed a semi-structured format. This allowed participants to answer open-ended questions while giving researchers the flexibility to explore important topics in greater detail. Interviews focused on everyday care, communication, staffing pressures, care planning and person-centred care.

In addition, focus groups were organised with care inspectors and multidisciplinary professionals, including dietitians, physiotherapists, pharmacists and care home managers. Focus groups encouraged participants to discuss their experiences together and compare different perspectives. The researchers also held round-table workshops, where professionals reflected on the preliminary findings and discussed possible improvements to care home practice. These discussions helped validate the emerging themes identified during the study.

Residents and family members also contributed to the research through interviews using an approach called Emotional Touchpoints. It encouraged participants to describe how different aspects of care made them feel. This approach supported person-centred research by allowing residents and relatives to express their experiences in a sensitive way. (Ross et al., 2022)

The researchers selected participants using purposive sampling, meaning participants were chosen because they had specific knowledge or experience relevant to the study.

After collecting the information, the researchers analysed the data using thematic analysis with QSR NVivo 12 software. All interviews, focus groups and workshops were audio-recorded, transcribed word for word and uploaded into the software. Researchers coded the information using the CARE (Concepts for Applying Resilience Engineering) Model, which helped identify patterns across the data. Three main themes emerged from the analysis: care planning and use of information, coordination of everyday care activities, and providing person-centred care. These themes explained how organisational resilience supports safe, effective and flexible care within care homes.

Ethical considerations were an important part of the study. Ethical approval was granted by the University of Glasgow, informed consent was obtained from all participants, and the researchers followed the COREQ guidelines to ensure transparency and trustworthiness (Polit and Beck, 2021). Overall, the qualitative research design was highly suitable because it allowed the researchers to understand the complex realities of care home practice. The findings provide valuable evidence for improving organisational resilience and the quality of care for older adults within UK health and social care

This report has examined the research paper A Qualitative Study of Organisational Resilience in Care Homes in Scotland and explained its purpose, research methods and main findings. Completing this report has improved my understanding of research methods and the importance of using appropriate research designs to answer different research questions. I have learned the difference between quantitative, qualitative and mixed-methods research, as well as the differences between primary and secondary data collection. I also understand how qualitative research can provide valuable insights into people's experiences, behaviours and everyday practice. This knowledge will be useful in my future studies and career within health and social care. Understanding how research is conducted will help me critically evaluate evidence, support evidence-based practice and contribute to delivering safe, effective and person-centred care that meets the needs of service users across the UK health and social care sector.

Reference List (Harvard Style)

Braithwaite, J., Wears, R.L. and Hollnagel, E. (2015) Resilient Health Care, Volume 3: Reconciling Work-as-Imagined and Work-as-Done. Boca Raton: CRC Press.

Care Quality Commission (2023) Assessment framework for providers. Newcastle upon Tyne: CQC. Available at: <https://www.cqc.org.uk> (Accessed: 1 July 2026).

Creswell, J.W. and Creswell, J.D. (2018) Research Design: Qualitative, Quantitative and Mixed Methods Approaches. 5th edn. Thousand Oaks, CA: Sage.

National Institute for Health and Care Excellence (2015) Older people with social care needs and multiple long-term conditions (NG22). London: NICE. Available at: <https://www.nice.org.uk> (Accessed: 1 July 2026).

Polit, D.F. and Beck, C.T. (2021) Nursing Research: Generating and Assessing Evidence for Nursing Practice. 11th edn. Philadelphia: Wolters Kluwer.

*Ross, J., Cunningham, S., Monaghan, B., McLellan, E., Baxter, H., McLellan, S., Anderson, J.E. and Hockley, J. (2022) A Qualitative Study of Organisational Resilience in Care Homes in Scotland. *International Journal of Environmental Research and Public Health*, 19(3), pp. 1–22.*

Silverman, D. (2020) Interpreting Qualitative Data. 6th edn. London: Sage.

Skills for Care (2023) The Care Certificate Standards. Leeds: Skills for Care.
Available at: <https://www.skillsforcare.org.uk> (Accessed: 1 July 2026).