

The research process report

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## Health and social care low funding

Health and Social care settings are crucial for helping the health and welfare of society today. However, funding for these services has become a significant challenge due to factors such as budget restrictions, rapidly increasing demand, a growing population, and service costs. Restricted financial resources can then affect the quality, availability and stability of care provided to service users. This report will investigate the key issues and impacts low funding has on service users and staff and will find and evaluate three credible sources based on my chosen topic, research methodologies and data collection.

A large part of NHS funding is spent on its workforce, which includes over a million staff. However, staff shortages and recruitment problems have put additional pressure on NHS workers. This situation can lead to stress, burnout, and more staff taking time off work. The government has tried to improve this by increasing the number of places in medical schools and training programmes. Although this is a positive step, it will take time before any of these new healthcare professionals are fully trained and able to support the NHS.

The rise in inflation has increased the cost of services the NHS provides such as, medicines, energy and fuel. In the past few years, these costs have risen more than what was expected. Healthcare leaders have explained that higher prices and staff costs have made it more expensive to provide care, but funding for services does not always increase in the same way. This means some services are becoming harder to afford and may struggle to continue. In addition, many patients now have more complex health needs, requiring greater support and treatment, placing even more

pressure on NHS resources. I chose this topic because low health and social funding are key issues that affect many people, including myself. The NHS and other care services mostly depend on funding to provide a strong quality of care for their service users. I wanted to learn more about how these funding problems clash with the healthcare system, workers and patients. My awareness of this topic can also help show why it is vital for authorities, such as the government, to recognise the importance of funding in the healthcare sector.

The King's Fund article simplifies that the NHS is under stress because costs like staff pay and medicines are emerging faster than the funds they receive. This means hospitals and services often have to spend more than their budget allows. As a result, organisations such as the NHS must face making hard choices, like cutting or restricting their range of services. The article indicates that better long-term funding and practical plans are needed so the NHS can deliver good care without being persistently overworked. This article is helpful because it distinctly shows why low funding is such a big problem in the workplace. It helps support my topic by providing true examples of the financial strain that health and social care face, showing that these issues affect both patients and the people who work in the system. Using this source helps build my essay by providing awareness and evidence to support my points about the impact of the funding issue. Research from the King's Fund article is useful for understanding funding issues, but it does have some gaps. It mainly focuses on statistics and trends rather than giving clear solutions. It also focuses more on systems rather than personal experiences, so the impact on individuals is less clear. There is also limited detail on how problems will be managed in the future.

The open-access government article covers the growing financial pressure on healthcare settings. It explains that a mix of rising demand and staff challenges is at the heart of the difficulties. Although they receive a high level of funding, costs are rising quickly, including staff pay and service demand. The article argues that directly adding short-term funds isn't enough; these healthcare sectors are learning how to manage with these continuing challenges. This article supports my topic by explaining

why NHS funding is exhausted. It brings real-life pressure, such as work issues, patient waiting lists, and building issues, providing strong evidence to support my points about low funding in health and social care. Using it in my essay makes my report entirely clear, and more so because it shows that funding challenges have real consequences. This article on low funding is useful, but it does have gaps in its research. It often explains the problem without offering clear solutions and does not always include up to date data. It also focuses more on systems and budgets, rather than the real experience of people who rely on care services.

The article from the Care of England focuses mainly on the ongoing issues of low funding in adult social care and how it is affecting services. It explains that recent government budget choices have not done enough support the sector, leaving many care providers under financial pressure. Because of this, some services are struggling to continue as normal, and there are concerns that support for vulnerable people could be reduced. The article also highlights how a lack of funding makes it harder to keep staff, as low pay and difficult working conditions lead to people leaving their jobs. This source is useful because it clearly shows how funding choices are linked to real problems in the care system. It supports the idea that under-funding is not just a short-term issue but something that continues to affect both services and the people who rely on them. The focus on staffing is important, as shortages in workers are a common problem across health and social care. However, the article mainly reflects the view of care providers, so it may be slightly biased. It does include the experience of people receiving care or give much detail about possible long-term solutions, which shows gaps in the research.

There are three different types of research methods; qualitative, quantitative and mixed methods. Qualitative research is used to explore people's thoughts feelings and experiences in depth. It often involves methods such as interviews, focus groups, or open-ended questions, where people taking part can give detailed answers in their own words. For example, service users may be asked to describe their experience of health and social care services. This type of research helps provide detailed understanding and meaning. Quantitative research focuses on collecting

numerical data that can be measure and compared. It commonly uses surveys, questionnaires or statistics. For instance, researchers might record how many people are receiving care. This approach is useful for identifying patterns, trends and relationships between variables. Mixed methods research combines both qualitative and quantitative approaches in one study. Researchers gather both the numbers and the opinions to gain a fuller understanding of a topic. For example, a study on social care could measure staff leaving rates through surveys and then use interviews to explore why staff are leaving. This approach provides a more complete and balanced view of the topic.

I choose mix methods research for my future studies because it looks at both factual numbers and individuals' personal experiences. For low funding, you could use data to show budget cuts or number of staff, then add interviews to understand the effects it has on both workers and patients. This will help make my future research such as this one look more detailed, whilst helping to explain what the numbers from the statistics and data mean.

Primary data is information that you collect yourself for a specific purpose. This can include surveys, interviews or observations. It is usually more relevant to the topic you're studying because you are choosing exactly what to ask or study. However, a downside is it can take up a lot of your time, effort and money to collect. Secondary data is information that has already been collected by someone else, such as, reports, websites, books. It is much quicker and efficient to use, but it may not be up to date or directly focused on your specific topic. For my research on low funding in health and social care, i would choose to use secondary data. This is because there is already a lot of useful information available, which helps show it is a serious issue. It also saves a lot of time and allows me took at loads of different articles. For future research, i would try and use both primary and secondary data types. Mainly i would look at using primary data. This is because speaking to people directly, such as care workers or patients, would give me a better understanding of how low funding affects real lives. It would make the research more detailed, rather than just relying on facts and figures.

This report highlights the serious effects of low funding on health and social care, showing how it impacts services, staff, and patients. Sources from the King's Fund, the Government, and Care England provide evidence of financial pressures and the real-life consequences. Mixed methods research is recommended for future studies combine numbers and personal experiences, while secondary data offers existing evidence efficiently. This topic is important because funding directly affects the ability of care services to operate effectively and provide safe, reliable support to those who need it the most.