

Editorial

Collaboration is the key to success in many aspects of health and social care delivery. It is also a characteristic of good research. This journal has developed from partnership working between South West Yorkshire Mental Health NHS Trust and the University of Huddersfield. Another local collaborator is the Centre for Health and Social Care Research (CHSCR) based in the School of Human & Health Sciences at the University of Huddersfield. As background for those readers unfamiliar with CHSCR; it was established in 2003 as a focus for research activity across local organisations and disciplines in West Yorkshire. It brought together a number of thriving research collaborations such as the Ageing and Mental Health Research Group and the Mental Health Research Group. Members of those groups have been involved in founding this journal and published papers in earlier editions. The emphasis of the CHSCR, irrespective of discipline, is on the generation of better understandings of health and social care and, importantly, the added value that those insights bring to the delivery of effective care. The CHSCR brought together the interests of University staff with research minded clinicians from across the broad constituency of health and social care. The first Centre Director was Professor Sue White who moved to the University of Lancaster in 2007. Now after nearly a year in post, this editorial offers an opportunity to offer a personal reflection on the importance of effective collaboration as a way of working for the Centre in the future.

First impressions of the CHSCR to someone looking in at the website (<http://www2.hud.ac.uk/hhs/chscr/index.php>) would be of a virtual organisation with a wide assortment of interests and limited common ground. Further investigation offers glimmers of what are common threads, clinical effectiveness, service delivery and organisation, risk and safety and education. Over the next few months these will become clearer as colleagues work together in different collaborations to weave new synergies. However there has been considerable activity over the last year. Not least, a number of full and part time postgraduate students have commenced their doctoral journey undertaking projects looking at topics many of which will be of interest to this journal in the future. The supervisory teams supporting these students have brought together colleagues from different disciplines across our rich research community and hopefully readers will also see the fruits of their work in future editions and importantly the benefits interdisciplinary insights bring.

Effective research collaborations in my view produce better outcomes. This was brought home to me most recently when, with colleagues, I was

involved in developing and submitting what subsequently became a successful bid to evaluate older peoples' mental health services in a primary care trust in the North West of England. The original submission was enhanced by a timely critical review by service users and expert clinicians prior to its submission. That review was only possible because of the excellent relationships, trust, structures and goodwill that already existed. The lesson learnt from that experience is that effective collaborations are characterised by partners who can listen and learn from each other. In research that works to strengthen the endeavour. If researchers do not have the will to listen to clinicians and service users their research is inevitably impoverished. Similarly researchers have much to offer clinicians in order that new ways of working are robustly investigated. Working with service users brings to the forefront those erroneous assumptions about shared research priorities.

Trust is an important component of collaboration. Trust in social institutions is required if they are to function. If we no longer trust an organisation we withdraw our support as was seen when deposit holders withdrew their savings from Northern Rock. You may be asking what has this to do with research. Trusting in another party requires a relationship and involves reliance. Trust entails investment in the honesty and competence of the other party or parties. In research trust is manifest in many ways. The reader of research has to be confident that the study was undertaken reliably and validly; the participant wants to be assured that their contribution is managed ethically and they will not be harmed by their involvement; the funder wants to be confident that the researcher can deliver the project, and the researcher wants guarantees that the collaborations forged will support their endeavours. Hence, trust promotes a sense of community and making it easier for people to work together. What better basis for underscoring effective research collaborations and providing direction for the CHSCR?

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