

Health care managers' access and use of management research

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This report contains transcripts of interviews conducted in the course of the research and contains language which may offend some readers.

Published May 2013

This project is funded by
the Service Delivery and
Organisation Programme

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This report should be referenced as follows:

Health care managers access and use of management research. Final report. NIHR Service Delivery and Organisation programme; 2012.

Relationship statement:

This document is an output from a research project that was funded by the NIHR Service Delivery and Organisation (SDO) programme based at the National Institute for Health Research Evaluations, Trials and Studies Coordinating Centre (NETSCC) at the University of Southampton. The management of the project and subsequent editorial review of the final report was undertaken by the NIHR Service Delivery and Organisation (SDO) programme. From January 2012, the NIHR SDO programme merged with the NIHR Health Services Research (NIHR HSR) programme to establish the new NIHR Health Services and Delivery Research (NIHR HS&DR) programme. Should you have any queries please contact sdoedit@southampton.ac.uk.

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Criteria for inclusion

Reports are published if (1) they have resulted from work for the SDO programme including those submitted post the merge to the HS&DR programme, and (2) they are of a sufficiently high scientific quality as assessed by the reviewers and editors. The research in this report was commissioned by the SDO programme as project number 09/1005/01. The contractual start date was in July 2009. The final report began editorial review in March 2012 and was accepted for publication in May 2013. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The SDO editorial team have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the final report documentation. However, they do not accept liability for damages or losses arising from material published in this report.

Acknowledgements

We acknowledge the valuable advice received from members of the advisory group, namely Professor Jo Rycroft-Malone, Professor Stephen Davies, Jan Fowler and Dr Keith Ruddle.

We are also grateful for the support of the anonymous provider organisation.

We benefitted greatly from discussions with colleagues working on other SDO management practice projects, notably at the SDO events that brought teams together and the meetings organised for the management fellows.

We thank academic and administrative staff at SDO for their encouragement of the management practice programme, especially Stephen Lemon and Ruth Saw.

We would also like to thank the clinicians and managers who generously gave their time to be interviewed. We are particularly grateful to the six organisations who hosted the case studies.

Contributions of authors

Sue Dopson, PI, responsible for oversight of the fieldwork, cross-case analysis and Action Learning Set analysis, writing of the report dissemination and the management fellow report.

Michael Fischer, fieldwork lead in two sites, contribution to cross case analysis, writing of empirical chapters and commenting on the final report.

Louise Fitzgerald, responsible for Action Learning fieldwork and lead on analysis of Phase 3, writing of empirical chapters as well as commenting on drafts of the final report.

Jean Ledger, fieldwork lead in one site, conducting of the literature review, contribution to cross case analysis, empirical chapters and commenting on drafts of the final report.

Chris Bennett, fieldwork lead in two sites, contribution to cross case analysis, writing of empirical chapters and commenting on the drafts of the final report.

Gerry McGivern, CI, fieldwork lead in one site, work on Action learning sets, contribution to cross case analysis, writing of empirical chapters and commenting on drafts of the final report.

Ewan Ferlie, CI, contribution to two fieldwork sites, cross case analysis and commenting on drafts of the final report.

Janette McCulloch, our management fellow, contribution to cross case analysis, action learning set work, comments on final report and the management fellow report.

Executive Summary

Background

Despite much work on how clinicians use and enact clinical research, which is now well-known, there is less on healthcare managers' use of management research and how this might be evolving. Earlier work by members of the research team concluded that healthcare management was largely invisible in the Evidence Based Medicine (EBM) arena. So the baseline is one of very limited engagement of healthcare managers with research. The poor uptake of management research by practitioners has been attributed to numerous factors: the fact that academics and managers possess different perceptions and assumptions about knowledge utilization and research; a lack of proven knowledge transfer and dissemination models within academia; divergent institutional incentives and rewards in educational institutions and organisational contexts.

Recently it has been argued that healthcare managers' motivation and ability to access and use management research may (under some circumstances) be increasing from historically low levels, due to the professionalisation of management and a developing high-quality knowledge-base.

Some studies have shed light on the effects of theories and research deriving from the disciplines of economics and finance on managers' decision-making. However there is a need for empirical research on how healthcare managers, whether general managers or those doctors, nurses and other professionals with clinical as well as managerial responsibilities (called here clinical managers or sometimes 'clinical hybrids'), use the research base of management and organisational knowledge in the decision process. The available literature does not indicate empirical studies of healthcare managers' or clinical hybrids' use of management research, nor how they derive principles from research evidence and translate them into concrete actions to resolve organizational challenges. This project seeks to address this major lacuna.

Aims

The study had three main aims.

1. *To explore healthcare managers' own responses to the research question: "under what circumstances and how do managers access and use management research-based knowledge in their decision making?". In order to situate the enquiry in terms of managers' day to day practice, this question was operationalised by seeking to understand*

how managers, engage with management-related knowledge – including, although not exclusively, research-based knowledge.

2. *To explore the utilisation of management knowledge in context.* This question was addressed by purposively studying the use of management knowledge found being cited and used in some way in the organisations studied. These case settings provide another lens for studying how the two knowledge domains of formal/ codified and experiential/ relational knowledges interact in these settings. What do these sites reveal about how and why research- based management knowledge of different forms may be transposed and used or rejected?
3. *What is the value of the action learning set (ALS) as a method of sharing research-based learning and of encouraging and facilitating the uptake and utilization of research-based evidence?*

Additionally it should be noted that the project also benefited from the attachment of a Management Fellow to the research team. This was an NIHR initiative intended to encourage close working between academics and practical managers. This proved to be a highly successful enterprise and a report detailing the contribution to this project made by the Management Fellow can be found at Appendix 9.

Methods

The research design used mixed methods, having a three-phase design, which deliberately explored the boundary between management research and practice. Core to the design was exploring the acquisition and utilisation of knowledge from the field of management /organisation studies in a wide diversity of health-related settings. These were purposively selected for their significance to facets of processes of knowledge production and utilisation in a 21st century health knowledge economy which has become more diverse and multi-layered and to explore the links between individual motivation, learning and action. The case sites, which were given pseudonyms, were:

- *Beechwell*, a Policy Unit.
- *Elmhouse*, a Health Care Consultancy.
- *Firgrove*, an Academic Health Sciences Centre (AHSC).
- *Mapleshire*, a Collaboration for Leadership in Applied Health Research and Care (CLAHRC).
- *Oakmore*, an Independent Charitable Trust offering specialist services.
- *Willowton*, a Primary Care Trust (PCT).

The research design consisted of three phases:

In Phase 1, the unit of analysis was the individual manager. Phase 1 involved 45 interviews with general managers and clinical managers in the sites, who were identified as interested in using management research and knowledge. This phase focused on exploring the individuals' perspectives on what motivated them to seek management knowledge, what search processes and sources were used, how management knowledge was utilised within their work and finally, what were the main influences of their 'knowledge career' on their management practices.

The primary focus of Phase 2 was the utilisation of management knowledge in context. It comprised six in-depth comparative case studies of management knowledge utilisation; 92 interviews were carried out in this phase, making a total of 137 interviews overall

Phase 3 was always classed as 'experimental'. The research protocol states that the ALSs were *'to test and evaluate this form of intervention as a method of sharing research-based learning and of encouraging and facilitating the uptake and utilisation of research based evidence'*.

Results

- In all the cases, managers were most highly oriented towards knowledge drawn from their own experiences and from others within their own communities of practice.
- Managers' careers play an important (and previously neglected) role in shaping their orientation to knowledge – including their motivation and willingness to engage with and adapt management texts.
- Research-based knowledge and particularly management journals appear as the lowest source of interest and influence for most managers. This suggests an interesting and marked tension between two contrasting forms and sources of knowledge domains: a) relationship- and experientially-based knowledge; b) evidence-based management texts and codified knowledge.
- Some knowledge leaders appear to be accomplished at transposing abstract knowledge into a form useable in a specific organisational context. This was demonstrated in Phase 2, where the importance of the activities and presence of certain knowledge leaders in transposing the management knowledge was observed. Converting theories and formal evidence into the local management practices involved them in inventiveness and improvisation, not captured by conceptual models of knowledge translation.
- A wide range of diverse management knowledges in use was found in the sites. Formal management knowledges tended to cluster in two main areas: performance management and productivity/quality improvement represented one group, and approaches to desired organisational change another. Formal management knowledges

were often accompanied by more experiential forms; for example, case studies, training and development activities, workshops, mentors, and coaches.

- The theme of management knowledge transposition appeared important, implying a more far-reaching, non-linear process of transforming knowledge from the field of expertise to the field of practice. Managers often tested out 'evidence based knowledge' in context, re-evaluating the issue and indeed the management knowledge (formal and experiential) that they referenced.
- The analysis suggests that knowledge leaders are greatly assisted in transposing management knowledge if there are formative spaces where people can step away from their immediate context and engage with a variety of formal management knowledges and the experiences of others.
- The study of Action Learning Sets confirms and extends understanding of the motivation of individuals to seek new knowledge. It was found in the sets that individuals are driven to look for knowledge when they have a personal commitment and involvement with a work issue.
- The medium of ALS offers several unique characteristics seemingly not always available to individuals within their own organisations. These include: independent perspectives; credible other professionals whom individuals can consult; and the opportunity to debate topics which cannot be openly discussed inside the organisation.

Conclusions

At the heart of the conclusions is a desire to signal the complexity of the social processes involved in accessing, contextualising and using management knowledge. As noted by others commenting on the field, the results suggest management knowledge is not one unified thing; it rather involves multiple formal and informal aspects.

These findings question the assumption that knowledge translation is a linear and rational process. The plurality of knowledge forms (tacit, explicit, embodied, codified) and the proliferation of products and organisations available in the 'knowledge economy' suggests more complex models of knowledge flow and exchange may be timely. The empirical cases demonstrated a plurality and blending/transposing of knowledge sources that gave rise to a non-linear and dynamic picture of management knowledge utilisation; one less congruent with rational accounts of evidence-based knowledge transfer. This concept of knowledge transposition seems to better capture the complexity of the processes observed informing management knowledge use.

Finally, it was concluded that Action Learning Sets may be valuable for intermixing codified, experiential and interpersonal knowledges and enabling the crossing of disciplinary and institutional boundaries.