SDO Management Fellowships - Evaluation of a Knowledge Mobilisation and Capacity Building Initiative
Research Brief (REF: MF261): CALL FOR PROPOSALS

1. Introduction

The National Institute for Health Research Service Delivery and Organisation programme (NIHR SDO) commissions new research of direct relevance to managers in the NHS, as well as supporting the use of such research within the service. Two key aims of the SDO programme are therefore:

- To add to the evidence base that is relevant to the practice of managers in healthcare organisations and which can be used to improve the effectiveness of managerial behaviour and decision making and so to contribute to improved organisational and clinical performance; and

- To promote greater engagement between the academic community of researchers and the practice community of healthcare managers through the development of links between academic institutions and NHS organisations in their local area.

As part of this work, the SDO programme has set up a scheme whereby project teams that are successful in bidding for large-scale empirical research projects may have the opportunity to apply for an SDO Management Fellowship to form an integral part of their research plans. An SDO Management Fellowship provides some additional resources, beyond those specified in the original proposal. This enables a practising manager from a healthcare organisation that is involved or engaged in the research project to become directly involved in the project, for example, by assisting with the research and acting as a 'knowledge broker' between the research team and the local NHS.

The scheme began in 2009 and there are currently six fellows. It is anticipated that up to six more fellows will be appointed in the second half of 2009.

The intention of this call is:

- to commission an external evaluation of the SDO Management Fellowships initiative that reflects the dynamics, processes, emergent properties and diverse impacts of the Fellowships as they develop;

- to generate rich formative evidence that can be used for learning as the Fellowships grow and develop and that has broader applicability for other research teams and health organisations tackling similar challenges;

- to improve patient outcomes by adding to the evidence base on the impact of closer engagement between the academic community of researchers and the practice community of healthcare managers and health professionals on the design and conduct of applied health research and its implementation in practice.

This external evaluation is intended to examine the processes and impacts of the Fellowship scheme in the round. It will <u>not</u> be focused on the success of otherwise of individual Fellows

within the scheme; nor will it be concerned with evaluating progress of the research projects with which the Fellows are associated.

We have provisionally allocated a budget of up to £100,000 for this call for proposals. This call will be conducted as a **one stage** process and we are therefore seeking full project proposals at the outset. We anticipate that a single project will be commissioned, ideally to be completed within six to nine months. For projects lasting longer than nine months an interim report may be required and any proposals of this type should be clear what could be reported at an early stage.

Please note that this call is not open to those research teams who currently have, or have a current application being considered for, an SDO Management Fellow.

2.   The SDO programme objectives

The Service Delivery and Organisation programme (SDO) is one of the national research programmes of the NHS in England and is a constituent programme of the National Institute for Health Research (NIHR). The NIHR SDO programme improves health outcomes for people by:

- Commissioning research and producing research evidence that improves practice in relation to the organisation and delivery of health care, and
- Building research capability and capacity amongst those who manage, organise and deliver services – improving their understanding of the research literature and how to use research evidence.

The primary audience for the research which the SDO programme commissions is decision makers in the NHS in England and Wales – particularly managers and leaders in NHS organisations. We focus our research commissioning on topics and areas where we think research evidence can make a significant contribution to improving decision making, and so to improving the organisation and delivery of healthcare to patients.

Further information on the SDO programme, including a list of past, current and recently commissioned projects, can be found on the SDO website (www.sdo.nihr.ac.uk).

Since April 2009, the NIHR SDO programme has been managed by NETSCC, Service Delivery and Organisation - part of the NIHR Evaluation, Trials and Studies Coordinating Centre at the University of Southampton.

3.   Background to this call

3.1 The SDO Management Fellowships

The SDO Management Fellowships programme is a new initiative which is intended to serve the two aims of the SDO programme set out in section 2 above. The SDO programme sees the Fellowships as encompassing three key objectives:

1. to improve the quality and relevance of the respective funded research projects through greater managerial involvement;
2. to develop capacity in the managerial community for accessing, appraising and using research evidence; and
3. to encourage greater engagement, linkage and exchange between the research and practice communities in healthcare management.

The Management Fellows are typically practising managers working in healthcare organisations that are local to the SDO funded research projects. Most Management Fellowships run for an equivalent of approximately 12 months full-time over the total period of the research project.

Management Fellows are expected to be directly engaged in the research process and to contribute to all stages, from design through fieldwork, data analysis and reporting, while recognising that they are essentially supernumerary to the original proposed and funded research team. Management Fellows are to be supported throughout with appropriate guidance and training by the research team. In addition to their contribution to the research project, Management Fellows are also expected to contribute to local and wider efforts at effective knowledge mobilisation and capacity building.

Summary details of the current Management Fellowships are given in the Appendix to this document. Further information about the Management Fellowships already awarded and additional information on the overall scheme is available at www.sdo.nihr.ac.uk/fellowships.html

3.2 Evaluating this new initiative

The current research call by the NIHR SDO Programme aims to evaluate this new initiative and, in doing so, to make a substantial contribution to learning for the SDO programme, the SDO Management Fellows and their associated research projects and for the NHS as a whole. It also aims to contribute to the wider evidence base on the impact of greater managerial involvement in research, on how best to build research capability and capacity among managers and in local health care organisations, and on how best to promote greater engagement between the service delivery and organisation research and practitioner communities.

Increasing managerial involvement in research and building research capacity and capability among managers and in local health care organisations

It is increasingly recognised that managerial practice and research need to be closely linked. Research evidence has the potential to improve managerial practice and decision making (Shortell, Rundall and Hsu 2007) and managers have a key role in the translation of health research into practice (HM Treasury 2006), whether in their capacity as commissioners, as managers playing a high-level strategic role or as direct operational managers who are involved in supporting the uptake of research on clinical effectiveness. However, it is also acknowledged that there is a significant research practice gap in health care management (e.g. Walshe and Rundall 2001), that managers need further support to enable them to make more effective use of research and other forms of knowledge and that there is a need to develop the capacity of NHS staff to use implementation and clinical research in daily practice (CERAG 2008). Further empirical research is needed to understand how best to address these gaps.

Promoting greater engagement between researcher and practitioner communities

The past decade has seen growing interest in the theory and practice of the emerging field of what can broadly be termed research use and implementation. Although there is a lack of conceptual clarity and terms such as 'knowledge translation' attract different definitions (Tetroe et al. 2008), there is particular interest in health services in understanding the activities commonly termed 'knowledge transfer' and 'knowledge exchange': interaction between

researchers and decision-makers (e.g. clinicians, managers or policy-makers) that results in research informing health service decision-making and practice.

A range of models of the research use process have been developed. One such model, on which the SDO Management Fellowships programme draws, is the interaction model, which emphasises the importance of sustained interaction between researchers and practitioners (whether managers or clinicians):

"…a major predictor for the application of research to practice is the extent of interaction throughout the research process between the researchers and the practitioners who could potentially use the results" (Denis and Lomas 2003: S2:2)

The interaction model emphasises the importance of formal and informal links between researchers and research users at each stage of the research process: from defining the research questions, through designing and carrying out research studies to implementing the findings in practice and determining further research questions (Landry et al. 2001; Kiefer et al. 2005).

The interaction model conceptualises research use as a complex, multifaceted, iterative and dynamic social process that is facilitated or impeded by surrounding personal, professional, team, organisational and legislative factors. Engagement with research is socially and organisationally situated, problem-led and heavily dependent on local context. It is influenced by local systems of meaning in which research evidence is often only one form of evidence used by practitioners, managers and policy-makers (Bartunek et al. 2003; Lomas 2007; Nutley et al. 2007). Understandings of 'research use' in this model are not limited to instrumental (i.e. direct) uses but also encompass conceptual uses (i.e. when research contributes to shifts in the assumptions or understandings that underpin frameworks and discourse) (Weiss 1979).

Despite the growing interest in such theoretical models and literature streams and the development of major initiatives like the Canadian Health Services Research Foundation that link researchers with health policy makers and managers (Lomas 2000), there is as yet relatively little empirical research evidence to inform efforts to develop such models in real world settings (Mitton et al. 2007; Tetroe et al. 2008; The Clinical Effectiveness Research Agenda Group 2008). Considerable work has been done to identify such areas as: the barriers and facilitators to research use in health policy-making and practice (e.g. Ross et al. 2003; Mitton et al. 2007); cultural differences between practitioners and academics (e.g. Bartunek et al. 2003; Denis et al. 2003; Bowen et al. 2005); and the importance of good relationships and a high degree of trust between researchers and research users (e.g. Landry et al. 2001; Bowen et al. 2005). The nature of capacity building is now understood to encompass both factual learning (e.g. research concepts, the findings of specific research projects, how to locate and access information) and attitudinal change (a shift in how individuals and groups view research and their relationship to it) (Bowen et al. 2005). However, little is known about which strategies work best to encourage such collaborative links, in what contexts, how they work and why (Pawson and Tilley 1997; Lavis et al. 2003; Kothari et al. 2005; Armstrong et al. 2006; Hanney and Gonzalez-Block 2006; Mitton et al. 2007; Tetroe et al. 2008).

There are a few empirical studies, particularly in the Canadian context, that examine efforts to build research partnerships between researchers and research users in health care (e.g. Antil et al 2003) and in other public sectors (Walter et al. 2003; Clark and Kelly 2005) but further well-designed and formal research studies are needed to assess and evaluate the success of such strategies in specific contexts in order to know best how to direct resources (Mitton et al. 2007; Tetroe et al. 2008).

This call aims to evaluate one such knowledge mobilisation and capacity building initiative in the NHS – the SDO Management Fellowships programme – and therefore responds to this recognised gap in the literature in relation to evaluating the effectiveness and efficiency of strategies aimed at increasing the impact of research on management decision-making, at enabling managers to build research active organisations and at engaging researchers with managers.

Relationship to other SDO research calls and current projects

Applicants should be aware of the potential for overlap with SDO research calls in related areas. In particular, applicants should note the following calls and ongoing work:

SDO Project 08/1801/220 Research utilisation and knowledge mobilisation – A scoping review (Ferlie; King's College, London).

Research Brief *MP241 Management Practice in Healthcare Organizations*

A range of projects have been funded under this call and any proposed work should take care to complement rather than duplicate. Funded projects under this call include the following three projects funded under Part V (*Proposals on knowledge utilisation in healthcare management*):
  (i)   08/1808/242 *Increasing the motivation and ability of health care managers to access and use management research* (Dopson; Oxford University).
  (ii)   08/1808/243 *Explaining health managers information seeking behaviour and use* (Edwards; Kingston University).
  (iii)   08/1808/244 *Evidence for management decisions (EMD) – advancing knowledge utilisation in healthcare management* (Swan, University of Warwick)
(These three projects also have an SDO Management Fellow attached – see Appendix).

Research Brief CLA258 *Evaluating Partnerships between Universities and NHS Organisations: Learning from the NIHR Collaborations for Leadership in Applied Health Research & Care (CLAHRCs)*
It is anticipated that projects commissioned under this call will be listed on the SDO website once they have been contracted.

Research Brief KM259 *Research utilisation and knowledge mobilisation by healthcare managers* [Call opened 25 June 2009, closes 20 August 2009 – brief available from the SDO website at: www.sdo.nihr.ac.uk/callforproposalsbypanel.html]

4. Call for proposals: main topic areas identified

Nature of the evaluation

Proposals will need to take the following into account:

- The Management Fellowships share three key objectives (see 3.1 above) but will embody these objectives in different ways. The evaluation will need to be sensitive to the diversity of aspirations between the projects, the plurality of perspectives (e.g. Management Fellows themselves, Chief Investigators, other members of the research team) and the diversity of health care organisations involved. Depending on the nature of the research project to which a Fellow is attached, it may be appropriate to involve a range of stakeholders in the evaluation (e.g. project advisory board and host organisation 'sponsors' in addition to the

research team and the Management Fellow) and to consider a wide range of local activities related to the Fellow's role in the project.

- The Fellowships are at an early stage and are evolving. One starting point might therefore be to consider a research team's initial aspirations and criteria for success as set out in their original application for a management fellow, but the evaluation would need to take due account of how these early plans may have altered since.

- The Management Fellows scheme is a very new initiative for the SDO programme. In order to contribute to the SDO programme's ongoing consideration of the scope for such initiatives, the evaluation will need to consider and comment on the *potential* of the scheme as well as its current state at the time of the evaluation.

- Evaluators are expected to share emerging findings with the Management Fellows and Chief Investigators during the evaluation, and such plans should be noted and costed.

- The timescale for this evaluation means that this research will be largely formative; the SDO programme may use it to lay the foundations for a future summative evaluation of the Management Fellowships initiative.

The following are areas of interest that might form part of the evaluation of the SDO Management Fellowships initiative.

4.1 The impacts of the SDO Management Fellowships

In considering the impacts of the Fellowships, it is expected that the evaluation will consider by what mechanisms and through what processes these impacts are achieved. For example, what approaches have been used to address the objectives; who has been involved and with what effects; what lessons can be learned?

- To what extent and with what impacts have the Fellowships been able to address the three key objectives of the programme:

    o to improve the quality and relevance of the associated funded SDO research project/s through greater managerial involvement;
    o to develop capacity in the managerial community for accessing, appraising and using research evidence; and
    o to encourage greater engagement, linkage and exchange between the research and practice communities in healthcare management?

- What impacts have the Management Fellowships had on:
    o the individual Management Fellow and the Chief Investigator/s
    o the research team
    o the host health care organisation
    o the wider local health care economy
    o patient outcomes?

- In what ways and to what extent have the Fellowships contributed to developing the research capacity and capabilities of their local healthcare organisations?

- How sustainable are the changes that have been made? To what extent is it likely that they will be sustained beyond the current research project and associated Management Fellowship?

4.2 The decision to apply (or not to apply) for an SDO Management Fellowship

- What influenced the invited research teams and the Management Fellows to apply for an SDO Management Fellowship? What were the facilitators and barriers? What were the key drivers and motivating factors?
- To what extent has the experience of the Fellowship met the initial expectations and objectives of the research teams and Fellows?
- What factors influenced the invited research teams and potential Management Fellows who decided *not* to apply for a Fellowship?

4.3 Establishing the Fellowships

- What lessons can be learned from the process of establishing the Fellowships?
- What training and support needs have been identified for research teams and Fellows and how have these been addressed?

4.4 Working as an SDO Management Fellow

- What impacts have the Fellowships had on the design and conduct of the associated research projects?
- What impacts have the Fellowships had on the Fellows' managerial roles?

5. Criteria and process for proposal selection

The SDO programme is now seeking full proposals in the areas outlined above. We have provisionally allocated £100,000 to this call and anticipate funding one project, ideally to be completed within six to nine months.

The application process will be in one stage. Proposals will be subject to external academic peer review and will then be reviewed by the SDO Commissioning Board which will then make recommendations to the Programme Executive Group on whether to fund each proposal. All proposals which are not funded will receive feedback from peer reviewers and the Commissioning Board.

The main criteria which will inform the selection process will be:

- Relevance of the proposed research to the main areas or themes set out in this call for proposals and to the SDO programme's consideration of future initiatives in this area.

- Relevance of the proposed research to the needs, interests and current and future challenges for the academic and management communities in the NHS.

- Likelihood that the proposed research will produce findings which are useful to and capable of application by the academic and management communities in the NHS.

- Likelihood that the proposed research will promote the greater engagement of the academic community of researchers and the practice community of healthcare

managers, and the development of links between academic institutions and NHS organisations in this area.

- Scientific rigour and quality of the proposed research, and the expertise and track record of the research team.

- Value for money of the proposed research, taking into account the overall cost and the scale, scope and duration of the work involved.

6. General guidance for applicants

Our main aim is to commission research which is well designed, will be effectively carried out by the research team, and will provide findings which meet the needs of the SDO programme and the NHS management and leadership community it serves. We do not require or expect any particular methodological approach, disciplinary background or expertise, research team structure or other constraints on applicants. However, experience of reviewing applications over a number of years leads us to make the following general points which we urge applicants to take into account:

- **Theoretical framing and empirical methods.** In addressing issues in a way likely to lead to the wide applicability of findings, we encourage applicants to demonstrate the sound theoretical and conceptual underpinnings of their proposals, and to show the theoretical and conceptual connections between their proposed research questions and empirical work. Empirical projects may use a wide diversity of methods, including both qualitative and quantitative approaches, carefully matched to study questions and with clear understandings as to how findings from different empirical approaches will be integrated.

- **Stakeholder involvement**. Applicants should demonstrate clear involvement of all relevant stakeholders (including where relevant, local communities, lay people, service users, carers and minority ethnic communities as well as health care practitioners and managers) during the design, execution and communication of the research.

- **Linkage and exchange**. Given the core mission of the SDO programme and our focus on knowledge mobilisation successful projects are most likely to involve partnership working between experienced academic teams and those more closely involved in the design and delivery of services.

- **Location of research**. The NIHR Service Delivery and Organisation programme is funded by the NIHR, with contributions from WORD in Wales. Researchers from England and Wales are invited to apply. Researchers from Scotland and Northern Ireland should contact NETSCC to discuss their eligibility to apply.

- **Research governance**. Applicants should ensure that their proposal complies with the Research Governance Framework. Successful applicants will be required to provide proof of research ethics committee approval for their project, if this is required.

- **Costs and value for money.** The proposed costs of the project should be proportionate. NHS R&D Programmes currently fund Higher Education Institutions (HEI) at a maximum of 80% of Full Economic Cost (except for equipment over £50,000 – 100%). For non-HEI institutions, NHS R&D may fund 100% of costs. However, the SDO programme

reserves the right to award a grant for less than this maximum and for less than the amount sought by applicants where appropriate.

7. Dissemination and knowledge mobilisation

In outlining their research plans, the applicants should make clear how findings will be communicated effectively to a wide variety of academic, policy and service audiences. Researchers should bear in mind the two main objectives of the SDO programme (see section 2), and recognise that the SDO programme seeks to fund projects which show a creative and proactive approach to engaging with the NHS management and leadership community. Researchers will be expected to deliver the following written outputs from any proposed research: an executive summary (500 words) and research summary (2000 words) with clearly identified policy, managerial and practice implications; a full report detailing all the work undertaken; supporting technical appendices (up to a maximum of 30,000 words).

8. Application process and timetable

Any questions, queries or requests for clarification in relation to this call for proposals should be sent by email to sdo@southampton.ac.uk by **8 September 2009** with the reference number and title for the call for proposals (as shown at the top of this brief) as the email header. Responses to all questions received by this deadline will be posted on the SDO website alongside the call by 22 September 2009.

The process of commissioning will be in **one stage** and applicants should submit **full proposals** via the SDO website by **1pm** on **Thursday 8 October 2009**. No late proposals will be considered. No paper-based only submissions will be considered although a signed paper copy will need to be submitted within one week of the closing date in addition to the emailed application. Applicants will be notified of the outcome of their application by **10 March 2010**.

Applicants should plan for projects to start as soon as possible.

Please note that these dates may be subject to change, and any changes will be notified on the SDO website.

References

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Appendix A

Chief Investigator	CI location	Project		Fellow	Employing Org of Fellow
Prof Roland Petchey	City University, London	08/1808/237	Allied Health Professionals (AHPs) and Management www.sdo.nihr.ac.uk/sdo2372008.html	Jo Partington	Imperial College Healthcare NHS Trust (ICHT)
Prof David Buchanan	Cranfield University	08/1808/238	How do they manage? A study of the realities of middle and front line management work in healthcare www.sdo.nihr.ac.uk/sdo2382008.html	Susan Lawrence, Deputy Operations Manager, Surgical Services	Cambridge University Hospitals NHS Foundation Trust
Dr Paula Hyde	University of Manchester	08/1808/241	Roles & behaviours of middle & junior managers: managing new organizational forms of health care www.sdo.nihr.ac.uk/sdo2412008.html	Charlotte Haynes, Research & Projects Lead	Stockport NHS Foundation Trust
Prof Sue Dopson	University of Oxford	08/1808/242	Increasing the motivation & ability of healthcare managers to access and use management research www.sdo.nihr.ac.uk/sdo2422008.html	Janette McCulloch, Organisational consultant	Camden PCT, provider side
Prof Christine Edwards	University of Kingston	08/1808/243	Explaining health managers' information seeking behaviour and use www.sdo.nihr.ac.uk/sdo2432008.html	Chris Smith, Locality Manager	South West London & St George's Mental Health NHS Trust
Prof Jacky Swan	University of Warwick	08/1808/244	Evidence in management decisions (EMD) - Advancing knowledge utilisation in healthcare management www.sdo.nihr.ac.uk/sdo2442008.html	Claudia Roginski, Head of Information	Coventry PCT

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