

Title: The Case for Managerial Academic Careers

Abstract: This article highlights the need for a shift in how we view research and academic careers within healthcare management. By creating formal academic pathways for managers, we can better align operational and system-level improvements with evidence-based research, ultimately leading to better patient outcomes and a more resilient healthcare system.

Authors

Jenny Shand, PhD, MPH <https://orcid.org/0000-0002-4899-795X>

Associate Professor of Health Services and Population Research, Clinical, Educational and Health Psychology Department, University College London, London, United Kingdom;

Catherine French, PhD, MSc, <https://orcid.org/0000-0001-8898-1162>

Director of Strategy, King's Health Partners, London, United Kingdom

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In healthcare, evidence-based decision-making is key to improving patient outcomes. While clinical academic pathways have evolved to address this, there is untapped potential in nearly half the NHS workforce to engage more actively in health research. 52.8% of the NHS workforce are clinical staff [1] [2], and only 36% of Chief Executives of NHS Provider organisations have a clinical background[3]. There is an opportunity to expand the research skills of non-clinical managerial staff to better bridge the gap between research and practice, ultimately improving system outcomes.

The Value of Academic Research in Healthcare: Research active healthcare organisations lead to better patient outcomes; clinical academic careers underpin the integration of research and practice [4]. Research literacy among clinicians allows for the interpretation of evidence and its application in day-to-day care. This model has been expanded to include various healthcare professions, such as nursing and allied health professionals, supported by institutions like the National Institute for Health and Care Research (NIHR).

However, the NHS workforce includes a significant proportion of non-clinical staff, including those in managerial and leadership positions. These individuals play a crucial role in shaping healthcare delivery, yet their paths to academic involvement are much less defined. As healthcare becomes more complex, the ability for managers to engage in evidence-based research becomes crucial for improving health system performance. Managers bring interests from different disciplines; examples include economics, organisational studies, operational research and broader social sciences. There is a growing need for evidence-informed strategy and policy at a system and national level. Providing continued opportunities for those working in the system to engage in research, in the same way clinicians do, might enable more evidence-based decision making. There are emerging opportunities but these exist in pockets, with access lacking in certain key areas.

Challenges for Managerial Academic Pathways: Within NHS trusts in England, the accountability for the research portfolio sits with clinical staff, Chief Medical Officers or Chief Nursing Officers. Unlike their clinical counterparts, healthcare managers lack a formal structure for academic progression. Many managers, especially at higher levels, are required to have master's-level qualifications, suggesting they possess research literacy. However, these skills are often underutilised due to a lack of structured career pathways and knowledge of opportunities that allow managers to continue to engage and participate in research as their career develops.

Furthermore, research in healthcare management tends to focus on clinical perspectives, overlooking the broader systems and organisational changes that non-clinical staff manage. This creates a missed opportunity for integrating managerial expertise with academic research, particularly in areas like system transformation, service evaluation, and operational improvements, and benefiting from collaboration and learning from wider disciplines.

Why a Managerial Academic Career Path is Necessary: Managers, with their operational knowledge and system-level insights, are uniquely positioned to influence change. By

equipping them with academic research skills, they can contribute to a deeper understanding of healthcare systems, make evidence-based decisions, facilitate effective implementation of innovations and embed impact measurement.

For instance, many healthcare managers are already familiar with frameworks like logic models, theories of change, and outcome measurement. These skills align closely with academic research methodologies, yet are often not recognised or developed within a formal academic structure, and evidence is often not published as there are few incentives to do so.

In other systems, e.g., the USA, MBAs are common place for those in health service management positions, in line with the culture of a professional corporate environment. This is also the case in other industries. Job descriptions for senior appointments often reference and value MBAs with less attention or recognition of doctoral studies. Healthcare has been underpinned by research which is embedded in the system, but has focused on clinicians and is yet to be more widely mobilised for managers[5].

Benefits to the Individual and System: For managers, engaging in academic research offers several benefits:

- **Skill Development:** Managers can improve their ability to apply research frameworks to operational challenges, leading to more informed decision-making.
- **Career Progression:** Building a track record of academic outputs can enhance career opportunities, particularly in leadership roles that require a deep understanding of evidence-based practice.
- **Contribution to Research:** Managers can bring valuable system-level insights to research projects, leading to more context-specific studies that are better aligned with the needs of healthcare organisations and the populations they serve.

At the system level, promoting managerial academic pathways can:

- **Improve Implementation of Research:** By involving managers in the research process, healthcare organisations can ensure that new evidence is more effectively translated into practice.
- **Foster Collaboration:** Managers who are engaged in research can enhance engagement between clinical and academic teams, improving collaboration and the implementation of findings.
- **Enhance Workforce Satisfaction:** Providing opportunities for academic involvement can improve job satisfaction for managers, leading to better retention in a workforce that is often under pressure.

Building the Infrastructure for Managerial Academic Careers: To create sustainable academic pathways for healthcare managers, several steps need to be taken:

- **Formalising Career Pathways:** At present, non-clinical research paths do not recognise the skills and expertise that individuals may have gained in the health system and their career-to-date which can be beneficial to research. Like the clinical

academic model, there should be structured pathways that recognise and build on the research literacy and context knowledge that many managers already possess. This could include doctoral programmes tailored to healthcare managers and those in executive positions, as well as protected time for research activity in job plans.

- **Expanding Research Opportunities:** This may range depending on individual ambitions – from ensuring all are ‘research aware’, to those that want to be research active or research leaders. Examples include roles on research committees, support to research projects and protected time for research activities. There should be inclusive access opportunities rather than relying on networks or individual champions that allow some to thrive but not all. Structural barriers, such as the requirement to be registered as a health professional for many research career development fellowships, need to be addressed.
- **Creating Networks:** A network of managers interested in academic research could provide opportunities for peer support, sharing best practices, and collaborating on research projects.

Conclusion: Healthcare systems are evolving, and so too should the roles within them. While clinical academic careers have proven successful in integrating research with practice, there is untapped potential within healthcare management. By promoting academic career pathways for managers, we can build a more research-literate workforce that is better equipped to lead system-wide improvements and efficiencies. This shift will require strategic investments in infrastructure, career development, and a cultural shift towards valuing the research contributions of all healthcare professionals, not just those in clinical roles.

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