

Beyond rhetoric: What health services management research must do for research and practice

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Everything has dramatically changed over the last five years, and management in healthcare has become a serious issue. Prior to the economic crisis, management in healthcare was on the agenda, but not so much on the mind (and in the heart) of all players in the healthcare field.

Now it is there: policy-makers, managers, professionals, industry leaders. It is clear to all that without sound management practices, we will not be able to face the challenges of modern health systems.

Space for waste, mistakes, mismanagement is incredibly reduced. Public health systems can not afford to work as shadow welfare systems anymore. Transparency, value-based policies, and globalization are pushing private and public healthcare providers to take the leap.

In this context, research has the obligation to support this effort. Research in healthcare management must select and investigate relevant issues for policy and practice, timely and in-depth. We can no longer afford to have research completely disconnected from reality, from the “shop floor” of healthcare organizations or from the “boards” of health institutions and agencies. We can not afford to have research that produces useless quantitative investigations with uncontrolled control variables, unnumbered limitations, etc.

We need to have empirically rigorous research that is reliable, with clear managerial and policy implications, inspirational, and grounded in real-life issues. Hospitals everywhere are reconfiguring toward “patient-centered/focused” approach, and we still have no operationalized framework or clear theory behind it, nor evidence of impact. Population health management is the new buzzword. But how it is translated in practice? Why should we pursue it? All systems and managers are investigating (or are forced to investigate) new ways of arranging the skill mix among health workers. What’s going on? Benefits? Drawbacks? And everyone is advocating for bundle payment. Sure. But when does it work? And what does it produce?

There are several big questions that need to be addressed. Now! And with new intriguing research approach. The advent of big data is a great opportunity, though it should be used for research questions of great and enduring interest. What else do we need?

Much, much, and much more engaged research. Engaged research is underused by scholars, although it could be a viable, if not the best, research approach to investigate the big questions of interest for managers and policy-makers.

As I am assuming the role of editorship of Health Services Management Research from this first issue of 2016, I would love to see an increase in the number of submissions based on engaged research, as well as all kinds of research and manuscripts, no matter if quantitative or qualitative, on management or policy issues, provided they deliver lessons, implications, and actionable findings for scholars, practitioners, policy- and decision-makers. In this respect, *Health Services Management Research* (HSMR) can count on a great team of associate editors, the possible types of submission have been further elaborated, and we have a new review policy to significantly accelerate the time from submission to publication.

After almost 30 years, HSMR wants to consolidate and further develop its role as the “home” of healthcare management researchers, linking Europe with the rest of the world. Increasingly, my aim is to make HSMR the bridge for a transatlantic and transcontinental dialog on healthcare management and policy. We are already moving quickly in that direction, and I am sure the academic and practice community will benefit immensely from this.

Finally, let me thank professor Walshe, who led the journal for the last four years, and especially professor Spurgeon, who founded and managed HSMR brilliantly for 24 years.

Thanks to them, HSMR is still the healthcare management leading journal on a European level, and the most international.

As three is the magic number, and I am the third Editor in Chief and this is only the third editorial in the history of HSMR, I am sure we are starting on the right foot and thanks to the contribution of all editors and contributors, the journal’s scope will only get better and better.

Federico Lega
Editor-in-chief