

# BMJ Leader

## **Translating Research and Evidence: Aims and Scope**

Translating Research and Evidence submissions are short pieces that communicate findings from existing research in a way that makes it accessible to both practicing healthcare leaders and to researchers interested in issues relating to healthcare leadership. There is a great deal of research in leadership and management and in the social sciences that is aimed primarily at a small community of specialized researchers. Often, this specialized community is not specifically interested in medicine and healthcare. To a significant extent, the aim of these pieces is to advance a body of social science or management theory, and healthcare professionals are unaware of it. Nevertheless, much of this research has the potential to advance both the scholarship and practice of leadership in healthcare.

The aim of this submission type is to communicate the findings of existing research to a new audience of researchers and practitioners that is specifically interested in healthcare leadership and management. We anticipate that these submissions will be short (between 1000 and 3000 words unless there is good justification for a longer submission) and written in an engaging and accessible style. Submissions can be translations of a focused body or school of research. They can also be translations of individual research pieces.

The research being translated can draw on a wide range of methodologies, including but not limited to ethnographies, interview studies, laboratory studies, randomized trials, field experiments, and studies drawing on large quantitative datasets. The research that forms the basis for this type of submission can be work done in a healthcare context, but it can also be work done in non-healthcare contexts. In some cases, authors can submit translations of more

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theoretical pieces, so long as those individual theory pieces draw on and synthesize other empirical studies.

In all cases, the submission will be judged for its novelty and usefulness to the readership of this journal. Our hope is that these translation pieces will accumulate over time to generate a body of empirically grounded knowledge and conceptual frameworks from diverse disciplines and research traditions that will inform and enhance research into and the practice of healthcare leadership.