In the second series of articles on transformation Peter Hogg et al continue the outline of transformation in the research focus.

# Introduction

This article is the second in a series of three that were published as a whole, will outline how the Directorate of Radiography within the University of Salford changed its research focus. The first article focused into the leadership style which was adopted to produce research which has value. We acknowledge that examples of practice and research are essential requirements, which would not necessarily coincide in many instances, both in business and in radiographic practice. It has been said that business need to realise that its research need to get the best out of university research produces, including the benefits that do interact actively with universities, they have recognised that they benefit from an assortment of intellectual resources which have been built up over time. Examples of these include: experiential methods design, the ability to gather data swiftly, the ability to analyse data objectively, in relation to the research question. In the context of radiography research it can be speculated that meaningful hospital/university collaborations will often more than simply the project outcome alone. Also, if university related research is to be a catalyst for practice advancement then the research activity should focus as near to market as possible and with this in mind there might be a need to implement a strategy for effecting change as a result of the research outcome/s.

# Transferring research into practice

Radiography is an applied field and on receiving radiography related publications across several journals, it is important to think differently to industry based innovators. Business research tends to be applied and related research is to be a catalyst for practice advancement then the research activity should focus as near to market as possible and with this in mind there might be a need to implement a strategy for effecting change as a result of the research outcome/s.

- **Will it be read?**
- **Will the relevance to practice be evident?**
- **Are there rights for transferring research into practice?**
- **Did the research get translated into practice?**

Three chance elements bring into focus the difference between ‘dissemination of research’ and ‘knowledge exchange’. Dissemination is a relatively simple task, for instance publishing academic work about the research. Knowledge exchange involves transferring the research knowledge in a more meaningful fashion. This implies it would be used in practice and achieving this might be much more complex than dissemination.

Previously, universities have been judged on the quality of research they conduct and disseminate and this has been quality assessed through Research Assessment Exercises (RAE)1, a process of profiling each discipline of research, enabling the grading of universities on a national scale. Recently there has been a shift in emphasis through the introduction of the Research Excellence Framework (REF)16 which replaces RAE. Through REF, universities are expected to ensure knowledge transfer occurs in a meaningful fashion. This implies that there is now a drive for universities to engage in research that is of real value to the communities within the territories they serve, since REF argues that research should have value: Considering the earlier points made about practice advancement – notably the lack of clarity between research and practice advancement – it has become necessary for universities to re-think their research priorities: the introduction of the Research Excellence Framework (REF) has provided research it can be speculated that market innovation may detract from the university’s ability to generate novel ideas and to think differently to industry based innovators. Business research tends to be applied and related research is to be a catalyst for practice advancement then the research activity should focus as near to market as possible and with this in mind there might be a need to implement a strategy for effecting change as a result of the research outcome/s.

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1. Investigate technologies and imaging practice to improve
g. Funding bodies
f. NHS Managers
c. Practitioners
b. Patients
a. Technology change; knowledge transferred into product
development
b. Enhanced staff technical and interpersonal abilities
a. Enhanced machine and practitioner capability

c. Potential outcomes
a. Improved patient experience
e. Improved patient experience
f. Predictions which have clinical and professional relevance
c. Predictions which have clinical and professional relevance
b. Extending the screening programme age will mean our work could impact on a larger proportion of the population.

c. Final thoughts

In this article we have set out what we believe to be the important factors that should be considered when defining a new area of research which would likely have value to our profession. We acknowledge that the range of areas we have selected is limited and they do not reflect our entire educational portfolio, or the scope of radiographic practice per se. This is the nature of quality research, it should have a clearly defined focus because depth is more important than breadth. Building on this article, next month we will give an overview of one of our research areas – breast. In that article we shall outline how the specific strands of the research inter-relate to form a cohesive approach to investigating a particular problem.

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