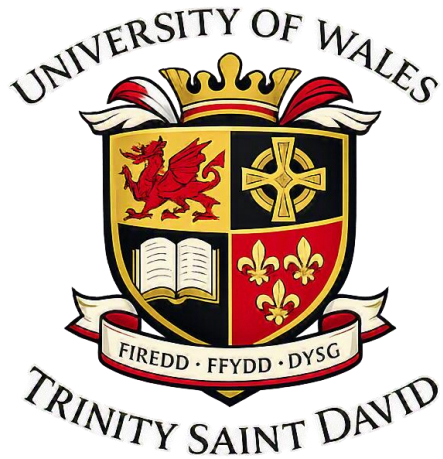




Slide Heading: Research Proposal
Presentation

Research Title : Crisis Leadership in
Pharmacy Management: Navigating
2026 Medicine Shortages

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Module Name & Code :
Developing a Research Proposal
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Introduction

Brief Background:

- Severe pharmaceutical supply chain volatility across the United Kingdom has made medicine shortages a chronic business crisis.
- These recurring stock-outs shift heavy operational and psychological burdens directly onto local frontline pharmacy teams.

Research Aim & Central Question:

- Research Aim: To investigate how pharmacy managers can utilise structured leadership strategies to foster team resilience and maintain operational continuity during medicine shortages.
- Central Question: How can community pharmacy managers utilise Transformational Leadership styles to maintain operational resilience and staff well-being during recurring medicine shortages?

Workplace Importance & Core References:

- Traditional, task-focused transactional leadership models often fail to support staff well-being in high-pressure pharmacy environments.
- Understanding proactive, compassionate, and horizontal leadership is vital for workforce retention and minimising patient service disruptions (Nuffield Trust, 2024; Obiedalla et al., 2026; West, 2021).

Methodology (Part 1)

Research Approach & Design:

- This proposal adopts a strictly **qualitative research design** to explore the "why" and "how" of leadership experiences.
- Grounded in an interpretivist epistemology and relativist ontology to capture socially constructed, subjective realities.
- Utilises inductive logic where themes and patterns emerge directly from the raw field data.
- Follows a phenomenological tradition to deeply examine the lived experiences of pharmacy managers during crisis conditions.

Data Collection Method:

- Primary data is gathered via **in-depth, semi-structured interviews** to secure nuanced personal accounts.
- Interviews are guided by open-ended questions consisting of a clear central inquiry and targeted descriptive sub-questions.

Data Analysis:

- Text transcripts will be rigorously processed using the six distinct phases of **Thematic Analysis** (Braun and Clarke, 2022).

Methodology (Part 2)

Sampling Technique:

- Employs a **non-probability, purposive (judgmental) sampling technique** rather than random sampling methods.
- The chosen sample size is intentionally small but information-rich, consisting of **6 to 8 UK community pharmacy managers**.

Sampling Justification:

- Participants are selected strategically based on explicit purposive criterion boundaries (Patton, 2015) to ensure they hold relevant expertise.
- Safeguards project feasibility, managing time limits and manpower while allowing the study to hit deep thematic saturation.

Ensuring Quality & Rigour (Validity and Reliability):

- **Validity (Credibility & Transferability):** Secured via "member checking" (transcript verification) and providing "thick descriptions" to truly capture the intended phenomenon (Guba and Lincoln, 1994)
- **Reliability (Dependability):** Maintained through a transparent, documented academic audit trail and a detailed reflexive journal to guarantee consistency (Creswell and Poth, 2018).

Ethical Considerations (Part 1)

Gaining Informed Consent:

- Every potential participant will be provided with a comprehensive Participant Information Sheet (PIS) outlining the research parameters.
- Voluntary participation is strictly enforced; written informed consent must be securely obtained from all pharmacy managers prior to conducting any interview recording.

Ensuring Confidentiality and Anonymity:

- To strictly fulfil the promise of confidentiality and anonymity, all personal names, corporate brands, and precise regional locations will be stripped from the final texts.
- Identities will be masked using systematic alphanumeric pseudonyms (e.g., Manager A, Pharmacy 1) to completely protect commercial and personal safety in the report.

Ethical Considerations (Part 2)

Protecting Participants from Harm:

- The research design actively minimises emotional vulnerability and professional risk associated with discussing sensitive workplace disruptions or operational supply failures.
- The researcher will actively manage power dynamics and personal positionality, maintaining a primary protective "duty of care" toward all participating practitioners.

Complying with University Ethical Guidelines:

- The study will strictly comply with formal institutional ethical frameworks and cannot proceed without official panel clearance.
- All raw digital files and text documents will be securely backed up on password-protected University cloud storage drives in accordance with GDPR regulations.
- The overall ethical architecture directly adheres to established professional standards, specifically the "BPS / BERA ethical guidelines" (Guba and Lincoln, 1994; Smith et al., 2009).

Limitations & Recommendations

Potential Challenges (Limitations):

- **Small Sample Size:** Utilising a qualitative sample of 6 to 8 pharmacy managers limits the structural generalisability of the findings to the wider pharmaceutical industry.
- **Time Limits:** Developing and executing the project milestones must be completed within a strict academic semester frame, restricting longitudinal observation (Bell and Waters, 2022).
- **Access Issues:** Securing available community pharmacy managers who are willing to participate may prove challenging due to intense workload pressures and ongoing supply crisis disruptions (Thomas, 2023).

Improvements for Future Research (Recommendations):

- **Broader Sample:** Future research should expand the participant pool across multiple regional NHS trusts to capture a wider geographic perspective.
- **More Time:** Allocating a longer timeframe would allow for a longitudinal research design to track changes in team resilience over an extended period.
- **Different Methods:** Implementing a mixed methods approach could blend qualitative thematic insights with quantitative survey data to test broader hypotheses (Creswell and Creswell, 2024; Thomas, 2023).

Conclusion

Methodological Summary:

- The proposal outlines a structured, qualitative study grounded in an interpretivist philosophy and a phenomenological tradition.
- Data collection will rely on in-depth, semi-structured interviews analysed through Braun and Clarke's six-phase thematic analysis framework.
- A purposive, non-probability sampling technique will target an information-rich sample of 6 to 8 UK community pharmacy managers.

Ethical Commitments:

- Research integrity is secured through voluntary participation, signed informed consent, and full compliance with university institutional panels.
- Strict anonymity and confidentiality are maintained via alphanumeric coding, with all digital assets stored on secure, GDPR-compliant cloud servers.

Limitations & Final Outlook:

- While the small sample size and strict time constraints limit broad generalisability, the research design provides deep, localised insights into leadership behaviours under pressure.
- The study ultimately addresses a critical knowledge gap, moving from reactive responses to a proactive, transformational framework that builds long-term operational resilience.

References

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