

NIHR Journals Library  
***Information for Authors***



A note on using this document:

Please ensure you are using the most up-to-date version of this document, which can be found here: <https://www.journalslibrary.nihr.ac.uk/information-for-authors/> along with a list of the most recent updates.

Items in green are hyperlinks, and page numbers in blue are cross-reference links. If you are using a printed copy, all websites are listed at the back. Margins are set up for double sided printing and punching.

Journals Library  
*Information for authors*

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## Getting started

Publications in the NIHR Journals Library are the research findings from the participating NIHR research programmes. Speculative article submissions are not considered.

Authors must adhere to the NIHR Journals Library Information for Authors when preparing their final reports for submission. We advise that you use the [Editorial Criteria Checklist](#) as a guide when preparing your report to ensure that it meets all submission requirements.

Authors of reports for the Programme Grants for Applied Research (PGfAR) programme should ensure that they read the Programme Grants for Applied Research guidance on [page 9](#) first.

Please submit your report online using the [Management Information System](#). If you have any questions or require assistance, please contact us ([journals.library@nihr.ac.uk](mailto:journals.library@nihr.ac.uk)).

In order that the external review process is carried out efficiently, the editorial office starts identifying potential external reviewers 10–12 weeks in advance of the final report being delivered. To aid this process, authors are asked to suggest potential reviewers for consideration. Authors should also regularly update their programme on the date they plan to submit their final report so that reviewers can be accurately assigned a date for the review.

## Reporting guidelines

Below is some specific guidance relating to the most common types of report submitted to the NIHR Journals Library. If you are reporting on a different kind of study to those mentioned, a comprehensive list of available reporting guidelines, listed by study type, can be found on the [EQUATOR Network website](#). The EQUATOR Network is an international initiative that seeks to improve reliability and value of research literature by promoting transparent and accurate reporting of research studies.

If your research is related to service improvements, you might find it useful to refer to the [Standards for Quality Improvement Reporting Excellence \(SQUIRE\)](#) guidelines. These guidelines provide a framework for reporting new knowledge about how to improve healthcare.

To improve the completeness of reporting, and ultimately the replicability of interventions, an international group of experts and stakeholders has developed the [Template for Intervention Description and Replication \(TIDieR\) checklist and guide](#). The NIHR Journals Library supports the principles of the [TIDieR checklist](#) and expects authors to provide descriptions of interventions that would enable others to replicate their work or implement the intervention. Particular attention should be paid to the descriptions of Control Groups, Patient Information and physical information (e.g. descriptions of prescribed treatments).

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## Randomised controlled trials

Unless there is good reason to do otherwise, randomised controlled trials (RCTs) should include the headings set out in the revised [CONSORT checklist and flowchart](#). If your report is an RCT, please ensure that it is specifically stated in the title of the report.

A slightly adapted version of CONSORT headings is set out below:

- ▶ List of abbreviations/glossary
- ▶ Abstract
- ▶ Plain English Summary
- ▶ Scientific Summary
- ▶ Introduction (including scientific background and explanation of rationale)
- ▶ Methods (including information about participants, interventions, objectives, outcomes, sample size, randomisation, blinding, statistical methods and a summary of any changes to the project protocol)
- ▶ Results (including participant flow, recruitment, baseline data, numbers analysed, outcomes and estimation, ancillary analyses, adverse events)
- ▶ Discussion (including interpretation, generalisability, overall evidence)
- ▶ Conclusions (implications for healthcare, recommendations for research)
- ▶ Acknowledgements
- ▶ References
- ▶ Appendices

Detailed guidance about what to include under each heading is available in the [CONSORT statement](#). For instance, the report should comply with the [CONSORT extension for abstracts guidelines](#) and contain the [ISRCTN](#) along with the corresponding author's email address.

Particular attention should be paid to items 8 and 9 from the CONSORT checklist regarding randomisation and allocation. It is also important to ensure that missing data is properly reported (items 13a and 13b) and that interventions (item 5) are clearly stated.

In instances of reporting on more than one trial please ensure that it is clear throughout the report which trial you are referring to. It is advisable to use separate chapters or clearly marked headings to show which trial is being discussed.

If your trial reports on clinical effectiveness and cost-effectiveness, we advise that you produce the clinical effectiveness and cost-effectiveness in separate chapters, including if possible the methods, results and conclusions for each. The conclusions and recommendations should be clearly reported and should be described in the Scientific Summary.

An example of a randomised controlled trial can be viewed here: <https://dx.doi.org/10.3310/hta16100>.

The CONSORT site also contains guidance for reporting cluster RCTs and other designs. If you are reporting a study of diagnostic accuracy, please refer to and use the headings set out in the [Standards for Reporting of Diagnostic Accuracy \(STARD\)](#) checklist in your report.

When writing your report, if appropriate, we suggest you conduct a meta-analysis to demonstrate the additional impact of your study and as a sign of quality.

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## Evidence synthesis/systematic reviews

Unless there is good reason to do otherwise, you should follow the [PRISMA](#) standards and checklist when preparing your report. The abstract should comply with PRISMA guidelines.

The main report should also include (but need not be restricted to) the headings set out in section 1.3.6 of the [CRD report, \*Systematic Reviews: CRD's guidance for undertaking reviews in health care\*](#). A slightly adapted version of these headings follows:

- ▶ List of abbreviations/glossary
- ▶ Abstract
- ▶ Plain English Summary
- ▶ Scientific Summary
- ▶ Background
- ▶ Hypotheses tested in the review (research questions)
- ▶ Review methods (including any changes to the protocol, search dates, etc.)
- ▶ Studies included in the review
- ▶ Studies excluded from the review
- ▶ Results of the review
- ▶ Analysis of the robustness of the results (sensitivity analyses)
- ▶ Discussion
- ▶ Conclusions (implications for healthcare; recommendations for research)
- ▶ Acknowledgements
- ▶ References
- ▶ Appendices

Authors should note that the term 'systematic review' will only appear in a report's title when the account of the search, appraisal and synthesis methods (to minimise biases and random errors) would, in theory, permit the replication of the review by others.

Search dates for stand-alone literature reviews must be no more than 12 months old upon first submission of the report to the Editorial Office. However, where a literature review is one component of a multi-element study, they should be as up to date as is feasible.

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## Qualitative and mixed methods studies

Qualitative and mixed methods studies should include the following sections:

- ▶ List of abbreviations / glossary
- ▶ Abstract
- ▶ Plain English Summary
- ▶ Scientific Summary
- ▶ Context
- ▶ Research objectives
- ▶ Literature search / review
- ▶ Methodology (including any changes to the protocol)
- ▶ Data sources
- ▶ Modes of analysis / interpretation
- ▶ Literature searches (positioning as appropriate)
- ▶ Results of qualitative study & results of quantitative study (if mixed methods) / application (structure of reporting will vary between studies and may require several chapters)
- ▶ Discussion (including robustness of the results and limitations)
- ▶ Conclusions (implications for healthcare; recommendations for research)
- ▶ Acknowledgements
- ▶ References
- ▶ Appendices

## Technology Assessment Report (TAR)

National Institute for Health and Care Excellence (NICE) Technology Assessment Reports (TAR) should follow the TAR template. To request a copy of the template, please email [htatar@nhr.ac.uk](mailto:htatar@nhr.ac.uk).

During the appraisal, editorial and publishing process for TARs a number of different versions of the report will be created before it is accepted for publication. To identify which version is being worked on, please include the date the version is amended in a footnote. You might find it useful to develop a checklist for your own purposes to help you keep track of which version you are working on.

During the editorial process you should ensure that you are working on the version of the report that has been stripped by NICE.

Information that is deemed confidential by the National Institute for Health & Care Excellence (NICE) will not be included in the published journal issue. Where such information has been removed, particular care should be taken to ensure that the remaining text remains coherent.

The title of a TAR should include the words 'systematic review' and if appropriate 'economic evaluation'.

Details of the search dates should be included in the Scientific Summary.

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## Pilot and feasibility studies

The NIHR Journals Library ensures that the results of pilot and feasibility studies that have been funded by the participating programmes are published, regardless of outcome or significance of findings in order to ensure that as much information as possible about each study is in the public domain. There may be occasions when a successful pilot or feasibility study should be published along with the substantive study rather than separately. The reasons for combining or separating the two reports will be considered by the Editors on a case by case basis.

The published reports of pilot and feasibility studies are often used to inform future funding decisions. Authors are encouraged to report everything, be transparent in their reporting, be reflective and avoid overstating their findings.

## Economic evaluations

Many reports contain economic evaluation components. Where appropriate, authors should seek to satisfy the [Guidelines for authors and peer reviewers of economic submissions to the BMJ](#).

Although these were designed to be guidelines for reviewers you may find the ten headings below useful as a checklist when preparing your report.

- ▶ Study question
- ▶ Selection of alternatives
- ▶ Form of evaluation
- ▶ Effectiveness data
- ▶ Benefit measurement and evaluation
- ▶ Costing
- ▶ Modelling
- ▶ Adjustments for timing of costs and benefits
- ▶ Allowance for uncertainty
- ▶ Presentation of results



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# Programme Grants for Applied Research Final Report Submissions

This guidance has been prepared specifically for researchers in receipt of funding from the NIHR Programme Grants for Applied Research (PGfAR) Programme. Please ensure that you follow this guidance in addition to the rest of the Information for Authors guide.

After the successful completion of a pilot phase to evaluate a different report structure for PGfAR Journals Library Reports, the NIHR Journals Library Board agreed a change to the submission requirement for PGfAR reports.

From January 2017, all researchers funded by the PGfAR programme should submit a final report using the summary report guidance as below.

The preparation of a final report for these complex and extensive programmes of research should not be underestimated. The report should be a considered, well-prepared account. It is acknowledged that researchers involved in work funded by this programme are actively encouraged to publish findings and developments over the course of their research. The PGfAR summary report requirement has been designed to recognise and utilise these published articles to support the account of the research you submit to the NIHR Journals Library.

## Preparing your report

Approximately three to six months before you submit your report, your PGfAR programme manager from the NIHR Central Commissioning Facility (CCF) will send you an email advising you of the submission date for your final report and providing further information about the documents you will need to submit with your report. At this time, you will also be invited to suggest potential reviewers for consideration. In order to avoid conflicts for reviewers, authors should also provide information about membership of any advisory groups or programme associated committees such as Trial Steering or Data Management committees where appropriate.

Authors should also regularly update their PGfAR programme manager contact on the date they plan to submit their final report so that they, in turn, can inform the Journals Library team for them to reallocate resources.

## Report Contents

PGfAR authors should refer to this guidance when preparing their draft final report. The summary style report format is detailed below.

Where reference is made to 'Standard', authors should refer to the relevant part of this guidance document.

### Abstract

- ▶ Standard abstract of the programme of research. The word count for a PGfAR report abstract can be up to 750 words. See the abstract section on [page 17](#)

### Plain English Summary

- ▶ A short summary (no more than 300 words) in plain English of the programme of research. See the Plain English Summary section on [page 18](#)

### Scientific Summary

- ▶ Scientific Summary of the programme of research; word count up to 2400 words. See the Scientific Summary section on [page 18](#)

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## Research Summary

- ▶ Please also provide a research summary that records any changes from the original proposal that have affected the direction of your research programme. This summary will help the Journals Library team prepare editors and peer reviewers for the changes and developments since the start of your research as planned in your funded application

## Synopsis (main body of the report)

- ▶ The total word count for the synopsis/summary may vary depending on your research but the recommendation is it should be a maximum of 25,000 words. This is a guideline only but where reports are submitted in excess of 30,000 words, authors will be asked to reduce the report word count
- ▶ This section of the report forms its core. As such, it should provide an accessible synthesis of the entire programme showing clearly how each element relates to and, where appropriate, builds on another. We would like this part of the report to “tell the story” of the work undertaken as a result of the programme grant – its development, successes, challenges, recommendations for future research and conclusions. Any alterations to the programme’s original aims/design should be summarised briefly
- ▶ As part of this section, you will need to provide a **Research Pathway Diagram** of the stages and development of the interconnecting work packages that contribute to the whole programme. You can find examples in the published PGfAR summary reports in the NIHR Journals Library. A good example of the type of suggested diagram can be found here: <https://www.journalslibrary.nihr.ac.uk/publications/hsdr02470/08-1809-255-fig2.png>
- ▶ We recommend that within this synopsis authors provide a short sub-section for each work package, briefly summarising their research aims, methods for data collection and analysis, any limitations, key findings, and the interrelation with other parts of the Programme
- ▶ More detailed information (e.g. protocols, tools, details of interventions, consent processes, figures, tables, published papers or links to them) should be presented as appendices rather than breaking the flow of the text in the main body of the report
- ▶ Authors should include an account/discussion of the [involvement of patients and/or the public](#)
- ▶ We anticipate that authors will draw the synopsis to a close by reflecting on what was and what was not successful in their programme before including a sub-section where they make their recommendations for future research, and a sub-section drawing out implications for practice and any lessons learned
- ▶ Please be advised that we have a requirement that reports do not make recommendations about policy or practice. For further guidance, please see Conclusions/Recommendations on [page 19](#)

## You may find it useful to look at these published examples of PGfAR summary-style reports:

<https://www.journalslibrary.nihr.ac.uk/pgfar/pgfar04020/>

<https://www.journalslibrary.nihr.ac.uk/pgfar/pgfar04030/>

<https://www.journalslibrary.nihr.ac.uk/pgfar/pgfar04060/>

## References (As standard NIHR JL reports) See the References section on [page 24](#)

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## Appendices

- ▶ *Unpublished research content:* The appendices will be a substantial part of your report containing a full description of methods, tools and outcomes where research has not been previously published. Particular reference to use of tools, methods and details of interventions would be included in these appendices. Written appendices should be concise.
- ▶ *Previously published links or copies:* If you have previously published content that would provide an appropriate level of detail, you can include a link to, or copy of, any articles that have been published related to the work packages or the programme. Please be selective about the use of appendices and ensure that the publications chosen as links provide appropriate content that best describe the research undertaken. There is no need to link to articles of similar content. However, you will need to establish that links out from your report to other peer reviewed journals all provide open access to the published journal article. Access via subscription or through an institution's OVID/Athens gateway is not acceptable. You should consider whether there is another suitable 'open' source that would provide the detail for the particular section of the synopsis.\*
- ▶ If you intend to reproduce the whole article as your appendix, you will need to confirm with the article publisher that this is acceptable. You may require permission to do so. The NIHR Journals Library is an Open Access publication and any content used or linked to will need to have the same open access or appropriate permissions (See the Permissions section on [page 43](#))
- ▶ You should consider carefully which of the articles you intend to use for the appendices of the report are the most appropriate and will provide the information as described in the Appendices section as 'Unpublished research content' \*\*

**\* If you have placed a proof copy of your article in your institution's repository and the document is available as an open access item, you may wish to use this as your link if the published article is only available through journal subscription or pay per view.**

**\*\* Please note that it is now possible to include links to outputs such as published articles in your project pages of the NIHR Journals Library. This will allow you to consider carefully which of your published articles are best suited to the final report and which could be accessed as links from your project pages. Please refer to your PGfAR programme manager for more information.**

## Report Submission

You should submit your draft report and accompanying documentation as requested by your PGfAR programme contact at CCF not (as described in the main author guidance) via the NETSCC MIS system. Once they are satisfied that your report can go forward for editorial review, a member of the NIHR Journals Library team will check the submission and notify the editors that they have received the report. After this, the NIHR Journals Library team will be your main point of contact through the stages of review and revision and will advise on how you should submit revisions and additional documentation.

Ultimately, your PGfAR report should bring together all of the strands of the programme in a single place, such that the report as a whole is greater than the sum of the individual parts. It will also act as an archive for the whole Programme Grant.

## Funding Acknowledgement

When acknowledging funding you should use the wording as below:

"This project was funded by the NIHR Programme Grants for Applied Research and will be published in full in Programme Grants for Applied Research; Vol. X, No. X. See the NIHR Journals Library PGfAR project pages for further information."

## Editorial review

The editorial review process for the Programme Grants report submissions differs in one way from the standard process. Because of the scope and diversity of the PGfAR research Programme, reviewers will not be approached to review the report until after the report is submitted. The assigned editors will review the report and discuss the relevant types of reviewers with the NIHR Journals Library team in order to secure the most appropriate ones for the subject matter. This will add a minimum of 2-4 weeks to the editorial review process. Below is an estimated timeline for the PGfAR editorial process.

Duration	Process
Start	Final report submitted to editorial office
1	Editorial Office complete initial checks and sends the draft report to the Editor
2	Editor identifies requirement for external reviewers
1	Office prepares short list for editor selection
2	Editor selection and office invitation to reviewers
2	Invitation to expert reviewers
6	Final report sent to reviewers who carry out the review.
Milestone	Reviewers return comments to editorial office. Comments sent to editor
3	Editor reviews report and reviewer comments
Milestone	Editor delivers comments to editorial office
4	Editor and reviewer comments sent to author. Report is revised
Milestone	Author submits draft manuscript (revised report)
2	Draft manuscript sent to editor, who reviews the report
Milestone	Editor comments returned to editorial office
3	Editor comments sent to author. Draft manuscript revised in response to editor comments.
Milestone	Author submits revised manuscript
2	Revised manuscript sent editor for further comment
Milestone	Editor comments are returned to editorial office
Milestone	If editor approves the author's response, the manuscript is sent to the production house. If not, it undergoes another round of editorial review, adding approximately four weeks to the process before it can go to the production house.

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## Report contents

You should provide a comprehensive report, including the data, methods, results and final conclusions together with management information and any other information relating to the project up to the completion date. However, please ensure that your writing is succinct.

## Word count

As of 1st January 2017, the main body of all submitted reports (excluding PGfAR reports, see [page 9](#)) must not exceed 50,000 words. This limit includes all text, tables, figures and boxes within the main body of the report. Please note that your report will not proceed to peer review if it is over this limit.

The limit does NOT include the abstract, Scientific Summary and Plain English Summary (which continue to have their own individual word limits). It also excludes the table of contents, references, appendices or other supplementary material.

## Report sections

All reports submitted to the NIHR Journals Library should contain the following sections:

- ▶ Title
- ▶ Abstract
- ▶ Table of contents
- ▶ List of tables and list of figures
- ▶ Alphabetical list of abbreviations/glossary
- ▶ Plain English Summary
- ▶ Scientific Summary
- ▶ Main body of report
- ▶ Acknowledgements (including journal outputs, i.e. associated publications)
- ▶ References
- ▶ Appendices

It may be useful to refer to published reports on the [NIHR Journals Library website](#) to get an idea of the overall approach and format when preparing your report.

## Efficacy and Mechanism Evaluation

If your report has been funded by the EME programme and is a staged programme of work with go/no-go milestones the project should report once all stages that were agreed to go forward are completed. The report should cover all stages of the programme of work, providing a chapter for each stage and a final chapter drawing all the stages of the programme together.

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## Reporting patient and public involvement

The NIHR promotes the involvement of patients and the public in all stages of research. The NIHR Journals Library aims to set a standard for the reporting of this involvement, in keeping with its role of providing a comprehensive archive of funded research. All reports should therefore explain how patients and the public have been involved in the study outside of being study participants/research subjects.

Authors should report faithfully on PPI activity even if only to acknowledge the absence of it within the study. You may do this by describing PPI throughout your report or in its own separate section.

In developing your reporting on PPI, please think about the following:

- ▶ If there was no patient and public involvement (PPI) in the study, please state this in your report setting out why this was not thought appropriate or was not feasible
- ▶ What form did the PPI take and at what stages did it occur during your study?
- ▶ What impact did PPI have during the study? How was it useful?
- ▶ If there was little/no impact of PPI during the study, please say so
- ▶ The way(s) PPI will support dissemination of the results

When reporting public involvement in any study, you may wish to refer to the GRIPP2 Short Form (below) for guidance on what to include on and in which sections of your report this should appear.

### GRIPP2 Short Form

Section and topic	Item	Reported on page no.
1: Aim	Report the aim of PPI in the study	
2: Methods	Provide a clear description of the methods used for PPI in the study	
3: Study results	Outcomes - Report the results of PPI in the study, including both positive and negative outcomes	
4: Discussion and conclusions	Outcomes - Comment on the extent to which PPI influenced the study overall. Describe positive and negative effects	
5: Reflections/critical perspective	Comment critically on PPI input in the study, reflecting on the things that went well and those that did not, so others can learn from this experience	

For studies which are mainly about public involvement in research, you may wish to refer to the [GRIPP2 Long Form](#)

You may find it useful to look at some of the following published journal issues for examples of good reporting on patient and public involvement:

- ▶ Issue [2:48](#) of Health Services and Delivery Research
- ▶ Issue [2:04](#) of Health Services and Delivery Research
- ▶ Issue [3:01](#) of Programme Grants for Applied Research
- ▶ Issue [5:04](#) of Public Health Research
- ▶ Issue [21:35](#) of Health Technology Assessment

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## Title page

### Title

Your report should have a title that is accurate, clear and short – no more than 20 words. The title is important, in part, for ensuring that relevant reviewers are found and for enabling readers to find your published report. It should say what the report is about and include the main methods. Please try to avoid using terms like “the effectiveness of” or “researching into”.

The format of the title should be: Subject: main study method + acronym (if widely used).

If the report includes a random control trial, please include ‘RCT’ in the title after the colon. For example, “Anti-psychotic drug reduction for adults with learning disabilities: the ANDREA-LD pilot RCT”.

For Programme Grants for Applied Research, use the format: “Subject: the XXX research programme”.

Your title should be submitted with your final report. It will be reviewed during the editorial process for consistency and clarity.

### Keywords

Please also provide a list of keywords for your report. For **HTA** and **EME** reports you should use MeSH terms for keywords.

There is a free tool available from the US National Library of Medicine that may be helpful to identify MeSH terms. It is [MeSH on Demand](#). All authors have to do is paste the text of the abstract from the report into the text box and then select ‘Find MeSH Terms’. The program then identifies all the relevant MeSH terms based on the text pasted in the box. This will help to select relevant MeSH terms quickly and easily.

### Author list

Your title page must include details of authors’ names and their institutional affiliation at the time they worked on the report. If you would like to include a group or collaboration within your author list, please format this as “author 1, author 2, author 3... on behalf of the X group”. Please also provide the corresponding author’s contact details (including email, telephone number and address).

### Conflicts of interest

A conflict of interest declaration must also appear below the authors’ names and institution list. For example:

Competing interests: XXXX has received funding from the pharmaceutical industry to attend an influenza-related conference

Or

Competing interests: None declared.

The NIHR Journals Library adopts the International Committee of Medical Journal Editors (ICMJE) approach to conflicts of interest, as discussed in detail here: <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/author-responsibilities--conflicts-of-interest.html>

As ICMJE states, “A conflict of interest exists when professional judgment concerning a primary interest (such as patients’ welfare or the validity of research) may be influenced by a secondary interest (such as financial gain). Perceptions of conflict of interest are as important as actual conflicts of interest.”

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The NIHR Journals Library requires that all authors must complete the ICMJE declaration form for the disclosure of potential conflicts of interest. Authors are asked to note that this form asks for all potential conflicts and if in doubt, authors are asked to be inclusive in their declaration. In particular authors are reminded that ICMJE include the following as potential conflicts:

- (1) relevant financial activities outside the submitted work
- (2) Intellectual Property.
- (3) Relationships not covered above.

For further information please see the ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (COI): <http://www.icmje.org/conflicts-of-interest/>



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## Abstract

An abstract must be submitted as part of the report and will appear on MEDLINE and other appropriate bibliographic databases. The abstract should be an unnumbered section without references, figures or tables.

This should not be more than 500 words (with the exception of PGfAR reports, which have a limit of 750 words). Please include a word count.

Abstracts should include data (relative risks, odds ratios, and confidence intervals) to support statements of efficacy or cost-effectiveness.

Your abstract should include the following headings:

- ▶ Background
- ▶ Objective(s)
- ▶ Design
- ▶ Setting
- ▶ Participants
- ▶ Interventions
- ▶ Main outcome measures
- ▶ Data sources (if applicable)
- ▶ Review methods (if applicable)
- ▶ Results
- ▶ Limitations
- ▶ Conclusions
- ▶ Future work
- ▶ Study registration
- ▶ Funding details

### Reporting of cost effectiveness results in abstracts

1. The NIHR Journals Library contains research reports, not technology appraisals. They should therefore not make judgements about what is worthwhile or what would be value for money for the NHS.
2. Cost-effectiveness is measured on a spectrum, not a dichotomy. The dichotomy comes with cost-effectiveness thresholds, as used implicitly or explicitly in many healthcare decision-making processes.
3. NICE, by contrast, does work with dichotomies. Its base cost-effectiveness threshold is £20k/QALY, although that can increase in various circumstances to £30k, £50k or £100k per QALY – or even more.
4. This means that authors in Abstracts in the NIHR Journals Library:
  - a. Should normally report the costs (usually £) and benefits (usually QALYs) in numbers, with confidence intervals
  - b. Might want to say that something is more or less cost-effective, or similarly cost-effective (the difference being that such language acknowledges a spectrum)
  - c. Should not say “it is cost effective” or “it is not cost-effective” (those both dichotomise, implying a threshold)
5. This advice needs to be read in conjunction with the aims of the study and applied thoughtfully.

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## Plain English Summary

In addition to a Scientific Summary of your report you are also asked to provide a Plain English Summary of no more than 300 words so that your work can be accessed and understood by any reader including members of the general public. In providing this, please note the following:

- ▶ A Plain English Summary is in keeping with the NIHR Journals Library's commitment to accessibility
- ▶ Follow the same principles and procedures as in writing the Plain English Summary that accompanied your funding submission
- ▶ If possible involve a public member of your research team to ensure the language is appropriate for non-academics. We strongly recommend that PPI representatives on research teams are asked to write or review plain English summaries
- ▶ Do not cut and paste sentences and phrases from the Scientific Summary; a Plain English Summary needs to be written afresh
- ▶ When writing a Plain English Summary you may wish to consider the following questions: what was the question, what did we do, what did we find, what does this mean?
- ▶ As an example of excellence in this field, please see reports in the Cochrane Library, which have a 'plain language summary' in addition to the Abstract, for which the Cochrane Library won an award in 2012

### Useful Links:

- ▶ The [Plain English Campaign](http://www.plainenglish.co.uk/free-guides.html) guide on medical writing: <http://www.plainenglish.co.uk/free-guides.html>
- ▶ Cochrane Library: <http://consumers.cochrane.org/blog/leading-medical-research-non-profit-wins-plain-language-award>
- ▶ INVOLVE Plain English summaries resource: <http://www.invo.org.uk/resource-centre/plain-english-summaries/>

### Good examples from published reports:

- ▶ Issue 21:03 of Health Technology Assessment: <https://www.journalslibrary.nihr.ac.uk/hta/hta21030/>
- ▶ Issue 21:09 of Health Technology Assessment: <https://www.journalslibrary.nihr.ac.uk/hta/hta21090/>

## Scientific Summary

The Scientific Summary should provide a succinct overview of the methods and results of your report. It will be included in your published report and also made available separately online. The summary should:

- ▶ Not exceed 2400 words, including headings. Please include a word count at the bottom of your summary
- ▶ Appear as an unnumbered section without references, figures or tables
- ▶ Cover all the key points from the main text of the report
- ▶ Be written in a simple manner, with sufficient detail to help readers understand the results of the study and give confidence in the findings
- ▶ Have an appropriate structure (see below)
- ▶ Have funding details and study registration details, for example, if the report is a randomised controlled trial, the [ISRCTN](#) should be included at the end of the summary, whereas if the report is a systematic review a [PROSPERO](#) number should be included

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We suggest the following main headings for your summary, but please use headings as appropriate for your report:

- ▶ Background (if required)
- ▶ Objectives (list of research questions)
- ▶ Methods (how the research was conducted): data sources, study selection (inclusion criteria), data extraction (and assessment of validity), data synthesis
- ▶ Results (research findings)
- ▶ Conclusions: implications for healthcare, if appropriate; recommendations for research (numbered in priority order)

## Literature searches (where appropriate)

Authors are encouraged to demonstrate how their research informs the existing knowledge base by undertaking a structured background literature review.

Where including a literature search is appropriate, the Methods section[s] should include:

- ▶ All information sources used in identifying studies with the name of the database, the platform or provider used (e.g., OVID, PubMed, Dialog), the date of coverage and the date last searched
- ▶ Any supplementary sources such as checking reference lists, searching trial registries, any contact with study authors to identify additional studies and Internet searches

Search dates for stand-alone literature reviews must be no more than 12 months old upon first submission of the report to the Editorial Office. However, where a literature review is one component of a multi-element study, they should be as up to date as is feasible.

## Conclusions/recommendations

It is a requirement that reports do not make recommendations about policy or practice. However, authors are encouraged to identify implications for practice or local service delivery from the findings of their research.

For example, a study on support workers should not enter the policy debate on statutory registration, but may note the association in a study between organisations with designated board-level responsibility for support workers and impact on staff engagement/retention or similar, or a study on commissioning practice should not make recommendations about structural change, but may note characteristics of high-performing organisations and teams.

Each conclusion should be worded as being derived from the evidence. For example:

'The evidence suggests that a national programme for X may meet the National Screening Committee's criteria . . . ' (not 'A national programme for X is recommended . . . ')

'The accepted criteria for an X screening programme are not currently met' (not 'The introduction of an X screening programme is not recommended . . . ')

'Findings from this research indicate that substitution of care by x (staff) for y (staff) may provide equivalent quality of care, but there was no evidence of cost reductions in the study groups' (not 'swapping doctors for nurses is always going to be more expensive and not worthwhile')

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'Research suggested a strong positive association between a particular form of incentive scheme and improved clinical processes' (not 'incentives should be introduced for all staff to improve patient care')

It is perfectly acceptable and desirable to make recommendations about future research. Reports should summarise evidence and draw out the implications of that evidence for practice. Recommendations for future research should be listed in order of priority. In addition, reports must indicate how rapidly the 'knowledge base' in an area is developing, to help inform a decision about when it might be appropriate to update a review in the area.

Recommendations arising from research will undergo careful consideration by the advisors of commissioning bodies.

### Divergent results

It will be important for authors to reflect carefully on the results of technology assessments which indicate that the findings of effectiveness and cost-effectiveness analyses do not agree. That is, where effectiveness assessment concludes that a technology is not effective, or there is not significant evidence to support a conclusion of effectiveness, but the economic analysis reports that the technology is likely to be considered cost effective. Such situations are not rare and can make the overall assessment of a technology challenging. Authors should consider contextual and analytic factors which may contribute to apparently divergent findings between elements of their health technology assessment and make these transparent to readers.

## Appendices

The appendices should include information that, while relevant to the report, is not needed to understand and judge the methods or results of the research. Important information should be in the main body of your report.

Please ensure that your appendices include the following:

- ▶ Literature searches – where these have been carried out, the full electronic search strategy for at least one major database (including line numbering in numerical order and any limits used) should be included as an appendix, so that the search can be reproduced
- ▶ Questionnaires, interview guides, interview formats, observation guides, figures or tables of work-ups or formulae
- ▶ Recruitment graphs
- ▶ Sample participant responses
- ▶ Supplementary information about interventions
- ▶ Supplementary analyses
- ▶ Tables of background data (please note that tables and figures in the appendices should be numbered sequentially with those in the main body of the report, and included in the lists of tables and figures)
- ▶ Documentation to be included in the appendices should be provided as original files, not scans or photocopies. Please note that appendices will not be copyedited or typeset so it is important that documents submitted are of suitable quality for publication

Excessive transcripts from qualitative research should not be included. The journal editors may ask you to reduce the length of your appendices if the material is not considered relevant.

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## Placement of documents guidance

The NIHR Journals Library website provides a platform to showcase all information about your project in one place, creating a threaded publication of your research. Because of this, some of the information that would previously have been included within the final report can now sit on your project page on the website.

Please see our Guidance for the placement of tables, figures and documents on [page 30](#) for where we would usually expect these to be placed – in the main report, appendices or project webpage.

## Acknowledgements

The Acknowledgements section of the report should include a subheading ‘Contributions of authors’. Here, the role of each author should be recorded; this should also include their job title and area of speciality.

For example:

‘Fred Bloggs (Senior Research Fellow, Health Economics) conducted the analysis of economic models.’

‘Dr Jan Janssen (Lecturer, Health Psychology) conducted the review of memory, mood and psychomotor measures used in clinical studies.’

‘Ms Sheela Patel (Research Fellow, Health Economics) conducted the review of economic effectiveness, carried out budget impact analysis and prepared the results for publication.’

In line with current ICMJE guidance (<http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>), authors should ensure they have written permission from all non-author contributors acknowledged in this section.

In a subsection entitled ‘Publication(s)’ all associated publications to the report should be listed.

If your report contains patient data which is routinely collected by the NHS, please include a subsection containing the following statement:

*“This work uses data provided by patients and collected by the NHS as part of their care and support. Using patient data is vital to improve health and care for everyone. There is huge potential to make better use of information from people’s patient records, to understand more about disease, develop new treatments, monitor safety, and plan NHS services. Patient data should be kept safe and secure, to protect everyone’s privacy, and it’s important that there are safeguards to make sure that it is stored and used responsibly. Everyone should be able to find out about how patient data is used. #datasaveslives You can find out more about the background to this citation here: <https://understandingpatientdata.org.uk/data-citation>”*

## Confidential information

Your report may include commercial-in-confidence information (information provided in confidence relating to commercial interests of the owner of the information) and/or academic-in-confidence information (information provided in confidence in circumstances where disclosure could prejudice future publication of the information in a scientific publication).

If this information will remain confidential in the time it takes for your report to undergo the editorial process, you should strip the confidential information from the report and provide details of the affected pages (with page numbers, references, tables, etc.). You should also re-write the affected content of your report so that it is still readable without the confidential information.

Where you feel it is not possible to re-write the text or if it is likely that the information will become no longer confidential before the end of the editorial process, the information should be highlighted in yellow. Highlighted information sent to production will be redacted in the published version.

You should keep the editorial office informed about any changes in confidentiality of information as soon as possible.

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## Report format

Please ensure that you format your report in line with the requirements set out below, and in the References section ([page 24](#)) and Artwork Preparation, Tables and Figures sections on the next page.

### General guidelines

- ▶ Your report must be presented in Microsoft Word format 1.5-line spacing throughout (including within tables)
- ▶ We prefer the use of a standard font
- ▶ Each page should be numbered
- ▶ A total word count should be provided for the report, plus a separate word count for the Scientific Summary and abstract[s]. As of **1st January 2017**, the main body of all submitted reports (excluding PGfAR reports) must not exceed **50,000 words**. See Report contents ([page 13](#)) for more information.
- ▶ Quotations over 40 words in length should be displayed as a separate paragraph (please do not use text boxes)
- ▶ Footnotes should NOT be used
- ▶ If there are any active links in your report, the link text provided should match the URLs you have linked to. The production house will use the link text you have provided to create the hyperlinks.

### Supporting media

You may wish to include video or audio material with your report in order to support and enhance your research. This material will need to be considered by the reviewers and editors alongside your report to ensure that it is suitable and relevant. If you would like to include videos or audio files you should:

- ▶ Submit media files at the same time as your final report
- ▶ Ensure that they include the usual Acknowledgements and disclaimers ([page 42](#)) required for project outputs, as well as the research project number
- ▶ Submit supporting documents to show that participants have given approval to appear in the videos / podcasts and that this covers their use as part of the report on the NIHR Journals Library website
- ▶ Provide proof of permission where this is required to publish the file

We would suggest that you include videos and podcasts in your report in the same way as other supporting documents, in the appendices. It may be appropriate to reference them with a link in the main body of text to the file in an appendix.

### Artwork preparation

All artwork will be redrawn to journal style.

The resolution and image quality of figures and photographic images are very important. Therefore, please follow the advice below when supplying these items.

Most image formats can be used, e.g. TIFF or EPS files. Line figures drawn in PowerPoint are also acceptable.

Below are some guidelines for each type of artwork file:

- ▶ Images that are made up of photographic images and both text and lines can be saved as EPS or TIFF (at a resolution of 600 dpi)

- 
- ▶ For line art EPS files give the best quality.
  - ▶ BITMAP files (TIFF, JPEG, etc.) files of text and line art should be saved at 800 dpi
  - ▶ Supply colour photographic images in CMYK colour mode, not RGB
  - ▶ Photographic images should be saved at 250–300 dpi
  - ▶ Digital images (i.e. directly from a digital camera or other imaging device or from scanned photographs) should be saved as a TIFF file
  - ▶ All photographic images should be anonymised

## Tables

Please do not try to summarise too much data in one table. More explanatory text and concise tables will be easier for the reader to follow. Please ensure that all tables follow the guidance below:

- ▶ Aim to include a maximum of 25 tables in the main body of your report where possible
- ▶ Number tables consecutively starting from Chapter 1
- ▶ All tables must be supplied in an editable format within the Word document, not as embedded figures
- ▶ Tables should be as concise as possible as they will be reproduced on A4 pages. If the material is complex, tables may need to run across a double page spread or over many pages and this can, in some cases, lead to a reduction in impact
- ▶ If a set of table heads cannot be applied to an entire table, it would be preferable to split the table into a number of smaller tables for clarity
- ▶ Where information is to align across a table, it is essential for each item to be supplied in its own individual cell
- ▶ Tables should be accompanied by a brief caption. Use footnotes to the table to explain all non-standard abbreviations that have not already been defined in the paper. Use superscript letters (a, b, c, etc.) to identify each footnote
- ▶ Do not duplicate data in tables and figures

## Figures

You should aim to include a maximum of 25 figures in the main body of your report where possible. Figures should:

- ▶ Be numbered consecutively (not by chapter or appendix)
- ▶ Be legible at A4 landscape size, including a margin. This is the maximum size that a figure (or figure part) can be set at
- ▶ Be provided with a caption below the figure. All illustrations will be redrawn.
- ▶ Use white, black or horizontal/vertical/diagonal hatching to differentiate parts of a diagram, rather than grey shading or dots. A key defining these and any symbols used should be included within the diagram itself.
- ▶ Be included in the main body of the report
- ▶ NOT be included in the abstract or Scientific Summary

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## References

When including references in your report you must ensure that:

- ▶ References must be in Vancouver style (numbered consecutively with superscript numbers in the order in which they are first mentioned in the text). For example:<sup>1</sup>

6. Macran S, Wileman S, Barton G, Russell I. The development of a new measure of quality of life in the management of gastro-oesophageal reflux disease: the REFLUX questionnaire. *Qual Life Res* 2006. Published online 11 October 2006.

- ▶ Up to **six authors** are quoted in full followed by *et al.*
- ▶ Numbering starts in the main text of the report, i.e. Chapter 1, not in the abstract or Scientific Summary
- ▶ Superscript numbers should be positioned after the punctuation in the text
- ▶ Whenever a study is cited, its corresponding reference number must also be cited, even in the Discussion, Summary and Conclusion sections or chapters
- ▶ There is one list of references at the end of the report (never at the end of each chapter). There are a couple of exceptions to this:
  - ▶ if you have produced a list of excluded studies (with the reasons for their exclusion), none of which are cited individually in the text or tables in the main text of the report. It is then acceptable to include these, listed alphabetically by first author (and not numbered), in a stand-alone table in an appendix or as a subcategory of the main reference list
  - ▶ Systematic reviews should present study-level characteristics as a table, which can then be cited in the report, thus removing the need for numerous references to studies being required at single points of the text. See *The PRISMA Statement for Reporting Systematic Reviews and Meta-Analyses of Studies That Evaluate Health Care Interventions: Explanation and Elaboration* (<http://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1000100>) for further information
- ▶ The reference list is complete, accurate and does not contain duplicate entries
- ▶ All references are cited and are correct, and none have been cited that are not included in the reference list (this can occur with references cited in tables and figures)
- ▶ Journal abbreviations are those used by Medline but if you are in any doubt about the correct abbreviation, give the journal title in full
- ▶ Personal communication details and unpublished references should not appear in the reference list (see [page 26](#) for further details)
- ▶ Acts of Parliament should be referenced (see [page 29](#) for examples)
- ▶ URLs cited in the text or reference list should have an associated last accessed date

## EndNote

The Journals Library template is not available on EndNote, however the production house have produced a template file for you to download. Provided the data are set up in EndNote correctly, this template should enable you to automatically produce correctly formatted references in the reference list in most cases.

NIHR Journals Library EndNote template:

<https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/NIHR-Journals-Library.ens>

- ▶ Authors who have imported Journals Library RIS files should use Endnote's 'Find Reference Updates' feature to copy the full journal title into the 'Journal' field



- 
- ▶ Sometimes citations will be attributed to authors such as 'Health Do' and 'Committee SPIA' (instead of 'Department of Health' and 'Scientific Pandemic Influenza Advisory Committee' respectively). To make Endnote treat an author name as a single unit rather than reformatting it as surname and initials, add a comma at the end of the text in the field (e.g. 'Scientific Pandemic Influenza Advisory Committee,'). The comma will not appear in the displayed reference list, but the group name will not be reformatted
  - ▶ In this template, court cases, e.g. 'Gillick v. West Norfolk and Wisbech Area Health Authority [1985] 3 All ER 402.' are formatted using Endnote's fields as Case Name [Year Decided] Reporter Volume Court Docket Number. The year (in this example, 1985) is encoded as 'Year Decided', the volume (3) is 'Reporter Volume', the court details (All ER) are in the 'Court' field and the case number (402) is contained in 'Docket Number'
  - ▶ NIHR Journals style is to use abbreviated journal titles. EndNote can translate between full and abbreviated journal titles using its Journals Term Lists (separate from the template). The Medical term list contains the official short titles from the Index Medicus. Instructions for enabling term lists are available here: <https://www.library.ucdavis.edu/guide/endnote/>

## Zotero

If you are using Zotero referencing software instead of EndNote, we have created a CSL style for references in the NIHR Journals Library.

NIHR Journals Library Zotero Style:

<http://www.zotero.org/styles?q=nihr>

## RIS file for common references

The following RIS file provides the entries for common references used in NIHR Journals Library reports. These RIS entries have been optimised for EndNote so please be aware that other citation managers may differ in which fields they use for information such as as 'date accessed'.

RIS file for common references

<https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/common-refs-ris.txt>

## References in tables and figures

Studies in all figures, tables and forest plots should be referenced. If possible, references cited in tables/figures should also be cited in the main text (the final position of tables and figures in the formatted text may result in references being cited out of order, thus requiring extensive renumbering).

Where references are cited in tables and figures, these should include the reference number as well as the author name(s).

We understand that some reference management software cannot reference figures and forest plots, therefore in this instance, a temporary reference list should be added above or below each figure/forest plot that requires referencing. The list should include the full references for the studies in the figure. Please note that our production house will use this temporary list to redraw the figures with superscript reference numbers during the production process. Once the figures have been redrawn, the temporary reference list will be removed and the references amalgamated with the main 'References' section.

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## References to unpublished work

References to personal communications should **only be cited in the text** (name of the person, affiliation and date of communication) and **not as a formal numbered reference**. You should obtain permission from the source to cite personal communications and include a copy of this when submitting your report.

References to papers accepted but not yet published should be designated 'in press' in the reference list (however, you must have obtained written permission from the journals to cite these papers).

Papers not yet in press should be treated as personal communications.

References to 'grey literature', e.g. a department's audit report, or other internal reports, may be included in the reference list provided they can be properly identified (authors, full title of report, department/organisation, year, etc.), and, if appropriate, labelled 'unpublished'.

## Verbatim Quotations

Verbatim quotations from interviews are fundamental features of reports on qualitative research that seek to explore respondents' views and experiences and to discover the meaning they attach to words and concepts: by, for example, identifying persistent themes, common narratives and forms of discussion. However, quotations should not be included as a substitute for analysis. They should be used to illustrate a point, rather than to make it. Authors should select quotations rather than report them in their entirety.

Particular attention should be given to ensure that verbatim quotations do not contain:

- ▶ Language that is libellous, defamatory, indecent, obscene or otherwise unlawful
- ▶ Language that is culturally sensitive or which could cause offence to any individual(s) or organisation(s)
- ▶ Proprietary or brand names

Authors are encouraged to explain the strength of feeling, which might otherwise be expressed in language unacceptable to the NIHR as publisher of the report, within the text of the report itself. Such an explanation may well include an appreciation of the use of different colloquial terms in different contexts. Please note that profanities or coarse language included in reports may be subject to redaction.

As a general principle, people, places and organisations should be anonymised. If anonymisation is neither possible nor desirable, authors should ensure that they have permission from those affected to use the content to be included BEFORE submission of the final report.

Verbatim quotes should be indented and formatted as follows:

**Trust, Dir of Finance:** *text of quote in italics.*

**Interviewer:** *text of quote in italics.*

**PA11 – Hospital care:** *text of quote in italics.*

For more information about how references should be written, please see Reference examples on [page 27](#) and refer to the [ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals](#).

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## Reference examples

### Journal articles

Brooks R, with the EuroQol Group. EuroQol – a new facility for the measurement of health-related quality of life. *Health Policy* 1990;**16**:199–208.

Macran S, Wileman S, Barton G, Russell I. The development of a new measure of quality of life in the management of gastro-oesophageal reflux disease: the REFLUX questionnaire. *Qual Life Res* 2006. Published online 11 October 2006.

Sargent A, Bailey A, Turner A, Almonte M, Gilham C, Baysson H, *et al.* Optimal cut-off for positive Hybrid Capture 2 Test for the detection of human papillomavirus: data from the ARTISTIC trial. *J Clin Microbiol* 2012; in press.

### DOIs

Mazmanian SK, Ton-That H, Schneewind X. Sortase-catalysed anchoring of surface proteins to the cell wall of *Staphylococcus aureus*. *Mol Microbiol* 2001;**40**:1049–57. <https://doi.org/10.1046/j.1365-2958.2001.02411.x>

### Epub ahead of print

Kozyrskyj AL, Ernst P, Becker AB. Increased risk of childhood asthma from antibiotic use in early life [published online ahead of print April 5 2007]. *Chest* 2007. <http://www.chestjournal.org/papbyrecent.dtl>. (accessed 16 April 2007)

Kozyrskyj AL, Ernst P, Becker AB. Increased risk of childhood asthma from antibiotic use in early life [published online ahead of print April 5 2007]. *Chest* 2007. <https://doi.org/10.1046/j.1365-2958.2001.02411.x>

### PROSPERO

Harnan S, Uttley L, Tappenden P, Cantrell A. Colistimethate sodium powder and tobramycin powder for inhalation for the treatment of pseudomonas lung infection in cystic fibrosis. PROSPERO 2011:CRD42011001350. Available from: [http://www.crd.york.ac.uk/PROSPERO/display\\_record.asp?ID=CRD42011001350](http://www.crd.york.ac.uk/PROSPERO/display_record.asp?ID=CRD42011001350).

### Foreign-language journal article

Valencia Martin J, Climent Paya VE, Marin Ortuno F, Monmeneu Menadas JV, Martinez Martinez JG, Garcia Martinez M, *et al.* [The efficacy of scheduled cardioversion in atrial fibrillation. Comparison of two schemes of treatment: electrical versus pharmacological cardioversion.] *Rev Esp Cardiol* 2002;**55**:113–20.

### Erratum

Hunskar S, Vinsnes A. The quality of life in women with urinary incontinence as measured by the sickness impact profile. *J Am Geriatr Soc* 1991;**39**:378–82. [Erratum published in *J Am Geriatr Soc* 1992;**40**:976–7.]

### Corrigendum

Hunskar S, Vinsnes A. The quality of life in women with urinary incontinence as measured by the sickness impact profile. *J Am Geriatr Soc* 1991;**39**:378–82. [Corrigendum published in *J Am Geriatr Soc* 1992;**40**:976–7.]

## Cochrane Database Systematic Review

Kuschel CA, Harding JE. Multicomponent fortified human milk for promoting growth in preterm infants. *Cochrane Database Syst Rev* 2004;**1**:CD000343. [OR Cochrane Database Syst Rev 2004; Issue 1, Art No. CD000343.]

Hay-Smith EJ, Bø K, Berghmans LC, Hendriks HJ, de Bie RA, van Waalwijk van Doorn ES. Pelvic floor muscle training for urinary incontinence in women. *Cochrane Database Syst Rev* 2001;**1**:CD001407. <https://doi.org/10.1002/14651858.CD001407>.

## Supplement

Wiklund I, Bigard MA, Grace E, Talley NJ, Kamm M, Veldhuyzen van Zanten S, *et al.* Quality of life in reflux and dyspepsia patients. Psychometric documentation of a new disease-specific questionnaire (QOLRAD). *Eur J Surg* 1998;**164**(Suppl. 583):41–9. [OR *Eur J Surg* 1998;**164**:S41–9.]

## Abstract

Burton G. Active vaginal cones therapy: a new form of treatment for genuine stress incontinence. Proceedings of the International Continence Society (ICS), 23rd Annual Meeting, 8–11 September 1993, Rome, Italy, abstract no. 134.

## Book

Nunnally JC. *Psychometric Theory*. 2nd edn. New York, NY: McGraw-Hill; 1978.

Jolliffe IT. *Principal Component Analysis*. New York, NY: Springer; 1996.

## Chapter in book

Horne R. Treatment perceptions and self-regulation. In Cameron LD, Leventhal H, editors. *Self-regulation Of Health And Illness Behaviour*. New York, NY: Routledge; 2003. pp. 138–53.

## BNF

Joint Formulary Committee. British National Formulary. [edition number] ed. London: BMJ Group and Pharmaceutical Press; [year of publication].

## Meeting or presentation

Kind P, Chuang LH, Macran S. SF-36 and EQ-5D: a simple and original solution to the complexities of conversion. International Society for Pharmacoeconomics and Outcomes Research (ISPOR), 12th Annual International Meeting, Arlington, VA, 19–23 May 2007.

Shepherd J, White I, Rees R, Thomas J, Brunton G, Harden A, *et al.* A systematic comparison of different sets of quality assessment criteria in systematic reviews of effectiveness in health promotion. Paper presented at the XI Cochrane Colloquium, Barcelona, October 2003.

## Technical report/discussion paper

Hahn GH, Shapiro SS. *A Catalogue And Computer Programme For The Design And Analysis Of Orthogonal Symmetric And Asymmetric Fractional Factorial Experiments*. Technical report no. 66-C-165. Schenectady, NY: General Electric Research and Development Center; 1966.

Kind P, Hardman G, Macran S. *UK Population Norms for EQ-5D*. Centre for Health Economics discussion paper 172. York: Centre for Health Economics, University of York; 1999.

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## Leaflet

The Suzy Lamplugh Trust. *Working Safely In Other People's Homes*. London: The Suzy Lamplugh Trust; 2002.

## White paper/Green paper

In text: *Working Together To Safeguard Children*

In references: Department of Health. *Public Health White Paper. Choosing Health: Making Healthier Choices Easier*. London: HMSO; 2004.

## Thesis

Smith J. *Title Of Thesis*. PhD thesis. Edinburgh: University of Edinburgh; 2009.

Gregory CR. *Assessing Amenability To Treatment In Community Corrections: Creating A Valid And Reliable Instrument For Male Batterers*. Dissertation Abstracts International Section A: Humanities and Social Sciences 2004;65:1992-a.

## Newspaper article

Cracknell D, Porter A. Brown set for new tax bombshell. *Sunday Times*, 31 August 2003, p. 1.

## Press release

National Institute for Health and Clinical Excellence. *Latest NICE Guidance Sets New Standards For Treating Depression In Children And Young People*. Press release, 28 September 2005.

## UK Act of Parliament

Great Britain. *National Health Service and Community Care Act 1990: Elizabeth II*. Chapter 19. London: The Stationery Office; 1990.

Great Britain. *National Health Service and Community Care Act 1990*. London: The Stationery Office; 1990.

## Website

Venables W, Smith D. *An Introduction To R: A Programming Environment For Data Analysis And Graphics*. Version 2.2.0; 2005. URL: <http://cran.r-project.org>.

Sloane NJA. *A Library Of Orthogonal Arrays*. URL: [www.research.att.com/~njas/oaddir/](http://www.research.att.com/~njas/oaddir/). (accessed July 2006).

Muruve NA, Steinbecker K, Willard TB. *Transurethral Needle Ablation Of The Prostate (TUNA)*. *Emedicine*, 2005. [www.emedicine.com/med/topic3069.htm](http://www.emedicine.com/med/topic3069.htm) (accessed March 2006).

Camm AJ. *Best Practices For Atrial Fibrillation Ablation*. *Medscape*; 2006. URL: [www.medscape.com/viewprogram/6303](http://www.medscape.com/viewprogram/6303) (accessed 1 June 2007).

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## Guidance for the placement of tables, figures and documents

Below is guidance as to where we would normally expect you to place common documents, tables and figures within your report. Please note that this is only a guide and that you should assess the most appropriate place for the material based on your individual report.

Material appearing in the appendices and on the project web page of the Journals Library website will not be copyedited and typeset. Therefore, it is important that the material you submit is of a suitable quality for publication.

### Main body of the report

The report should provide a comprehensive account of the research, including the data, context, background literature, aims, methods, results and conclusions, together with management information and any other information relating to the project up to the completion date. See the relevant reporting guidelines on [page 4](#) for the content headings expected for different types of report.

- ▶ Results
  - ▶ Figures / tables of results
  - ▶ Boxes of results / quotes
- ▶ Prisma / Consort / STROBE / EMERALD flowcharts
- ▶ Recruitment information / profiles
- ▶ Details of interventions
- ▶ Framework (or equivalent) analysis
- ▶ Discussion
  - ▶ Summaries of key research recommendations
  - ▶ Implications for healthcare / practice
  - ▶ Strengths and limitations
- ▶ Algorithms and Models
- ▶ Data sources
- ▶ Statistical tests, trends etc.
- ▶ Primary qualitative data

### Appendices

The appendices should include information that, while relevant to the report, is not needed to understand and judge the methods or results of the research.

- ▶ Methodological material
  - ▶ Questionnaires
  - ▶ Interview guides
  - ▶ Interview formats
  - ▶ Observation guides
  - ▶ Figures / tables of work-ups / formulae
  - ▶ Search strategies

- 
- ▶ Recruitment graphs
  - ▶ Sample participant responses
  - ▶ Supplementary information about interventions
  - ▶ Supplementary analyses

Appendices should be included in the report document itself, uploaded in one document as type: 'Draft Final Report'.

## Supplementary Material

With the launch of the new Journals Library website, we now have the facility to host material that supplements the final report. Supplementary material is supportive of the evidence in your report but is not fundamental to understanding of the research findings, so is not needed within the appendices. See <https://www.journalslibrary.nihr.ac.uk/programmes/hsdr/141913#/> for an example of where this has been used.

With all supplementary material, please be sure to:

- ▶ Use the journal naming convention to indicate the order in which the files should appear and include an in-text citation to each document within the report (eg. "See Report Supplementary Material File 1")
- ▶ Add a list of supplementary material after the list of tables and figures within your report
- ▶ Ensure you have proofread all supplementary material files as we will not proofread or copy edit these files after submission to the Editorial office
- ▶ Ensure you have the correct permission in place for the material to appear online, send the editorial office proof of this and include these on your permission checklist
- ▶ You should submit these documents with your final report on the Management Information System, using the 'Final Report Supplementary Material' file upload type. Please see Report Submission on [page 47](#) for more guidance

## Project webpage on the Journals Library website

The NIHR Journals Library website provides a platform to showcase all information about your project in one place, creating a threaded publication of your research. In order to develop your threaded publication, you can submit additional material throughout the life of the project. This serves an archival purpose, enabling easier reproducibility and more transparency. Here is a good example of a project that fully utilised this facility: <https://www.journalslibrary.nihr.ac.uk/programmes/hta/0630320/#/>. You can submit these documents to your NIHR contact, or with your final report on the Management Information System, using the 'Additional Editorial Documentation' file upload type. Some examples of files you may wish to include are listed below:

- ▶ Protocol
- ▶ Statistical Analysis Plan
- ▶ Health Economics Plan
- ▶ Data extraction tables (note, these will be typeset)
- ▶ Table of excluded studies
- ▶ Ethics material
  - ▶ Letter of ethical approval
  - ▶ Ethics application
  - ▶ Governance permissions
  - ▶ Consent forms

- 
- ▶ Participant information sheets\*
  - ▶ Patient information leaflet
  - ▶ Dissemination
    - ▶ List of or links to papers from study
    - ▶ List of presentations from study
    - ▶ Dissemination information
  - ▶ Qualitative coding output
  - ▶ Forms and questionnaires
  - ▶ Computer code (e.g. WinBUGS)
  - ▶ Trial documentation
  - ▶ Conduct of trial
  - ▶ Visit schedules
  - ▶ Timetables and schedules
  - ▶ Project / trial management organisational structure

For the material above you should use your own judgement on placement depending on your individual report. If necessary you can refer to these stand-alone documents within the report, linking to the project page. The editors will also make an assessment of where material should be placed.

\*The NIHR Journals Library supports the need for researchers to feedback to study participants. As part of the final reporting please include the end of study information sheet or any other applicable information. For more information please see the [Health Research Authority guidance on information at the end of study](#).

## Supporting media

You may wish to include video or audio material with your report in order to support and enhance your research. This material will need to be considered by the reviewers and editors alongside your report to ensure that it is suitable and relevant. If you would like to include videos or audio files you should:

- ▶ Submit a link to your media files at the same time as your final report. These should be hosted on a platform that guarantees long-term access
- ▶ Ensure that they include the usual Acknowledgements and disclaimers (see [page 42](#)) required for project outputs, as well as the research project number
- ▶ Submit supporting documents to show that participants have given approval to appear in the videos / podcasts and that this covers their use as part of the report on the NIHR Journals Library website
- ▶ Provide proof of permission where this is required to publish the file

We suggest that you include links to videos and podcasts in your report in the appendices or on the project webpage. It may also be appropriate to reference them with a link in the main body of text.



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## Editorial house style

The following sections provide guidance on the editorial house style. This section is not exhaustive, but provides the key elements of house-style that you should follow when preparing your final report.

The following online sources also provide useful guidance on standards for report writing:

- ▶ [The Grading of Recommendations Assessment, Development and Evaluation \(GRADE\) Working Group](#) (grading the quality of evidence and recommendations)
- ▶ [The EQUATOR Network](#) – Enhancing the QUality and Transparency Of health Research

## Use of numbers

### Ages

- ▶ Ages should be written in full from one to ten and as numerals for 11 upwards. For example: over 40, under nine.
- ▶ Always use numerals and hyphens for the adjectival form, e.g. '8-year-old child' or '80-year-old woman'.

### Equation numbering

Please number all equations in your report in the following format, aligned to the right of the equation:

$$S = -2.59N^2 + 8.74N + 90.07 \quad (1)$$

### Numbers, units and dates

- ▶ Numbers in the text should usually be written in full from one to ten and as numerals for 11 upwards
- ▶ Ordinal numbers up to and including nine in full, thereafter numerals, e.g. 21st
- ▶ However, numerals may be used for numbers less than ten if presented in parentheses, and numbers at the beginning of a sentence should always be written in full
- ▶ Numbers followed by units should always be presented as numerals
- ▶ Units of time should not be abbreviated: years, months, weeks, days, hours, minutes, seconds
- ▶ Compound units should be separated by a slash: kg/m<sup>2</sup>, ml (not mL)

### Percentages

- ▶ Per cent should normally be written in full; however, if this appears several times within a paragraph it is acceptable to use the % symbol.
- ▶ The % symbol should always be used in mathematical and statistical contexts, tables and lists.
- ▶ The % symbol must always be associated with a numeral, e.g. 7% not seven %.

### Units of measurement

Units must always be SI or SI-derived.

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## Naming conventions

### Computer programs

Computer programs/software in initial caps, e.g. Copernic Agent Basic, SPSS, Excel, PowerPoint, RevMan, Eppi-Reviewer, Stata, Stimul8, WinBUGS, etc.

### Names of countries

Use ISO 3166-1 (<https://www.iso.org/obp/ui/#search>).

### Organisations and government departments

Use initial caps when it is possible to prefix the name with 'the', indicating that this organisation is the only one of its kind. For example, the Department of Health (DH), the National Institute for Health and Care Excellence (NICE), the National Health Service (NHS). If the organisation is one of many, do not capitalise (except in the acronym). For example, a primary care trust (PCT), or a strategic health authority (SHA).

### Titles and headings

Only the first word of a title or heading should have an initial capital letter.

### Trade names

Drugs should be referred to by generic name (check BNF: <https://www.medicinescomplete.com/about/publications.htm?pub=bnf>, and use rINNs), with trade name and manufacturer at first mention in the Scientific Summary and main text, e.g. oseltamivir (Tamiflu®, Roche).

Equipment should have trade name, trademark or registered symbol, manufacturer, and a brief address (town and, for example, US state) at first mention in the Scientific Summary and main text, e.g. Clearview® Chlamydia test (Inverness Medical Innovations, Princeton, NJ).

Computer software/programs should always state the version, with manufacturer and location (town) at first mention in executive summary and main text, e.g. WINBUGS 1.4.3 (MRC Biostatistics Unit, Cambridge, UK).

A brief address (town and, for example, US state, country) should be given at the first mention of company names in the text.

## Language and Presentation

### Abbreviations

Try to avoid using abbreviations in the title or headings, except for common abbreviations (i.e., AIDS, CPR, CT scan) and RCTs. They may be used in the summary and elsewhere in the paper, but must be defined at their first mention in the abstract, Scientific Summary and again at their first mention in the main text of the paper. At the front of the report, please provide an alphabetical list of abbreviations used in the text.

Whilst 'versus' should be used in the main text, the abbreviation 'vs.' can be used in figures, tables, their legends and in parentheses.

### Eponyms

Non-possessive for syndromes; possessive for diseases and anything else, e.g. Down syndrome, Addison's disease (von Willebrand disease OK), Barrett's oesophagus, Raynaud's phenomenon.

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## Currency conversions

If a currency conversion is necessary to present comparative costs per QALY, then include the year for which the conversion was calculated and the type of dollar should be defined, i.e. CAN\$, US\$, SGD\$, etc.

## Cross-references

All cross-references are to be italicised if they are referencing the same report. Chapter and appendix cross-references should always be preceded by 'see'; figure and table cross-references should be preceded by 'see' only if they are not the main citation (the citation that the figure/table will be placed next to). Use 'and' not a comma when more than one figure or table or parts thereof are cross-referenced.

- ▶ e.g. for a main citation: (*Table 1*)
- ▶ e.g. see *Appendix 1*
- ▶ e.g. see *Chapter 4, Decision model*
- ▶ e.g. see *Accounting for uncertainty*
- ▶ e.g. see *Figures 5 and 6*
- ▶ e.g. see *Table 11a and b*

However, if a cross-reference is for another report, then it is in lower case and not italicised.

- ▶ e.g. see table 1 in Myers *et al.*

## Dates

Inevitably, some of the information in your report will become out-of-date, sometimes even before your journal issue is published. To minimise these occurrences, please be thoughtful about how you convey information about future events, such as policy decisions by policy bodies. For example, 'The NSC intended to consider the policy implications of X in 2012' (rather than 'A decision was still awaited in 2012').

## Glossary

If the subject area is highly specialised, please produce a glossary – an alphabetical list of technical or medical terms with accompanying explanations presented with the purpose of aiding a reader.

## Italicisation

Latin terms (except *et al.*) and names of muscles should not be italicised. All single letters that represent variables (*x*, *y*, *z*) should be in italics, for example *x*-axis and *y*-axis.

## Plain English

We encourage the use of plain English where possible in report writing. Please see the [Plain English Campaign website](#) for further information. This includes examples about the principles (including report writing tips) and training courses.

## Spelling

UK spelling. Use –ise spellings (rather than –ize) for words such as globalise/organise (except when such words appear in the titles of referenced papers).

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## Further information sources

The following online sources also provide useful guidance on standards for report writing:

- ▶ [The Grading of Recommendations Assessment, Development and Evaluation \(GRADE\) Working Group](#) (grading the quality of evidence and recommendations)
- ▶ [The EQUATOR Network](#) – Enhancing the QUality and Transparency Of health Research

## Publication ethics

We take an active role in the prevention of plagiarism, falsification of data, fabrication of results and other areas of ethical misconduct. All journals in the NIHR Journals Library are members of the [Committee on Publication Ethics \(COPE\)](#). This is a UK-based charity, with over 7000 members worldwide from all academic fields. COPE advises editors and publishers on how to handle cases of research and publication misconduct.

Plagiarism detection software may be used to check reports submitted to the NIHR Journals Library.

Should there be concerns that a project suffered misconduct in research, publication, or professional behaviour, the case may be discussed in confidence with the editorial board, or referred to COPE or any other relevant authorities.

We support the declaration of transparency. For further information please see the EQUATOR website.

When preparing your report please ensure that you follow the guidance on Authorship, Data sharing and Dual Publication below.

## Authorship

All persons designated as authors must qualify for authorship, and all those who qualify must be listed. Acquisition of funding, the collection of data, or general supervision of the research group, by themselves do not justify authorship. As well as being accountable for the parts of the work he or she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors. Authorship credit should only be based on:

- ▶ Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work
- ▶ Drafting the work or revising it critically for important intellectual content
- ▶ Final approval of the version to be published
- ▶ Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved

All of these conditions must be met to qualify for authorship. When an individual has made a contribution to the manuscript but does not meet these criteria, their contribution should be recognised in the acknowledgements. Written permission to be acknowledged should have been obtained from such individuals, since readers may infer their endorsement of the data and conclusions.

This policy follows the [ICMJE guidance on Defining the Role of Authors and Contributors](#).

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## Data sharing

### Why share data?

Making clinical trial data sets available to investigators beyond the original research team can improve patient care, advance medical knowledge and provide better value for money from health research.

Data generated through participation of patients and the public should be put to maximum use by the research community and, whenever possible, translated to deliver patient benefit. Data sharing benefits numerous research-related activities: reproducing analyses; testing secondary hypotheses; developing and evaluating novel statistical methods; teaching; aiding design of future trials; meta-analyses; and helping to prevent error, fraud and selective reporting.

Data sharing achieves many important goals for the scientific community, such as:

- ▶ Reinforcing open scientific inquiry
- ▶ Encouraging diversity of analysis and opinion
- ▶ Promoting new research, testing of new or alternative hypotheses and methods of analysis
- ▶ Supporting studies on data collection methods and measurement
- ▶ Facilitating education of new researchers

### Data sharing and the NIHR Journals Library

Your final report should include a statement about your data sharing and accessibility. The statement should provide a clear and positive indication of where and when the data will be shared. Possible responses might state that all available data:

- ▶ Can be obtained from the corresponding author
- ▶ Is included as an appendix to the report
- ▶ Can be obtained from the corresponding author via the (name of) repository

The statement should be positioned within the acknowledgements section of your report.

If you have deposited (or intend to deposit) data from your study into a data repository or archive, please supply the URL so that the link to the data archive can be displayed on the NIHR Journals Library website alongside your published report. Please see issue 17:10 of Health Technology Assessment “The CRASH-2 trial: a randomised controlled trial and economic evaluation of the effects of tranexamic acid on death, vascular occlusive events and transfusion requirement in bleeding trauma patients” (<https://www.journalslibrary.nihr.ac.uk/hta/hta17100/#/abstract>) as an example of this activity.

### Confidentiality and Anonymity

For research involving samples or information from human participants, data must be managed and shared in a way that safeguards the confidentiality and anonymity of participants and is consistent with the terms of consent signed by participants. Data sharing does not necessarily mean public access. Data can be shared on request or via registration if deposited in an archive.

### Examples of data sharing statements

Below are some examples of data sharing statements you might include in your report. Please note, these examples are indicative and statements will be considered on a case-by-case basis. If you are unsure please contact the NIHR Journals Library team for guidance.

### Primary research:

- ▶ 'All available data can be obtained by contacting the corresponding author.'
- ▶ 'We shall make data available to the scientific community with as few restrictions as feasible, while retaining exclusive use until the publication of major outputs. Anonymised data will be deposited here <link> to encourage wider use.'
- ▶ 'The data will be made available via <link/corresponding author> within <x> months of publication, this is due to <insert reason>.'
- ▶ 'Due to <insert reasons>, there is no data that can be shared.'

### Secondary research:

- ▶ 'This is a qualitative study and therefore the data generated is not suitable for sharing beyond that contained within the report. Further information can be obtained from the corresponding author.'
- ▶ 'Requests for access to data should be addressed to the corresponding author or to the data custodian (if known).'

## Dual publication

### NIHR dual publication policy

Publication of your funded research in the NIHR Journals Library fulfils two purposes:

- ▶ To ensure that a full account of the research is available in the public domain in perpetuity; and
- ▶ To contribute to dissemination of the research findings.

Dual publication occurs when two or more papers, without full cross-reference, share the same hypothesis, data, discussion points or conclusions.

The NIHR considers that publication of its research, necessarily in briefer format, in specialist and general journals is important for the dissemination and uptake of research findings and therefore expects grant holders to seek such publication.

Although the possibility that this may constitute dual publication may cause concerns, it is considered that the NIHR Journals Library, which contains comprehensive accounts of whole funded projects, is different from other, smaller, journal articles and therefore publication in both formats is acceptable. We ask authors to give an original account of their work within their reports, and therefore that they avoid including lengthy passages of material that is (or will be) published elsewhere. However, if reasonable justification is provided and the Editors agree, we would instead ask authors to acknowledge the source within the report in line with The Committee on Publication Ethics (COPE) guidelines.

COPE (<https://publicationethics.org/category/keywords/redundant-publication>), defines redundant publication as:

*When a published work (or substantial sections from a published work) is/are published more than once (in the same or another language) without adequate acknowledgment of the source/cross-referencing/justification,*

*or*

*When the same (or substantially overlapping) data is presented in more than one publication without adequate cross-referencing/justification, particularly when this is done in such a way that reviewers/readers are unlikely to realise that most or all the findings have been published before*

Further guidance can be found in the [ICMJE Guidelines relating to Overlapping Publications](#).

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## Guidelines for publishing an article based on your NIHR Journals Library report

It is important that authors seeking publication of an article based on their report in another journal adhere to the following:

- ▶ You should not submit large items of identical work to the report you submit to us
- ▶ You should inform any journal that your work will be published in the form of a single whole issue of the relevant journal within the NIHR Journals Library, including actual or expected publication date
- ▶ You should inform the journal how the submitted paper differs from that submitted to the NIHR Journals Library. The Journals Library publications are intended to contain much more comprehensive accounts of the research carried out
- ▶ If your paper is accepted by another journal, the full and correct acknowledgements to both the funder and the programme journal must be provided (see Acknowledgements and disclaimers on [page 42](#))
- ▶ If the journal is not concerned about the publication date of your NIHR journal issue and plans to publish after it, then reference should also be provided to the correct volume and issue number, if known (see Acknowledgements and disclaimers on [page 42](#))
- ▶ If the journal will only publish your paper before the NIHR journal issue is published, please inform the NIHR Journals Library Editorial Office so that a more suitable publication date can be arranged to allow for this. If the delay requested is substantial, approval will be needed from the editors
- ▶ You must not assign exclusive rights to your research findings to any individual or organisation (as you have already assigned non-exclusive rights to the Crown in your contract). Please see the Copyright section on [page 41](#) for further information

## Notification procedure

You are obliged, by the terms of your contract, to notify your programme monitoring contact (prior to delivery of your final report) or the editorial office (once the report is in editorial review) of any intention to publish the results of your work elsewhere at least 28 days in advance of publication in another journal (including pre-publication of articles through 'Early Cite' or 'Article in Press' services).

This also applies to public oral and poster presentations, so you should also advise us 28 days before submission of abstracts to organisers of an event or conference.

This is to allow time for the relevant communications teams and the Department of Health's press officers to prepare for any implications of the research on government policy in this area. There may be wider communications activity intended surrounding the publication of your report, and the Department of Health may also need to consider how your initiative affects any press releases they may be distributing at the same time in related areas.

You are also required, under the terms of the contract entered into with the Department of Health, to submit one draft copy of the proposed publication/presentation/other material to the funding programme at the same time as submission of the final report or at least 28 days before the date intended for publication of the other output, whichever is earlier.

To send an output notification please login to the [NETSCC MIS](#). Once you have logged in:

- ▶ Click on the 'My Projects' tab to access a list of your current NETSCC projects
- ▶ Click on the NETSCC ID number for the relevant project to take you to the project details page
- ▶ Select the action 'Enter or Update Output Notification' and click the 'Request' button
- ▶ Complete the resulting task pages to notify us of the output

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We will publish details of articles published in peer review journals relating to your research project with your report.

Details of the correct format for submitting journal references are available within this guide under the References section on [page 24](#).

Please see the Permissions and Copyright section on [page 41](#) of this document for information on assigning copyright and the correct acknowledgements required when publishing the results of your work elsewhere.

### **Planning for article processing charges in Open Access journals**

During the course of your project and throughout the review and publishing phase you may choose to submit an article based on your research to an Open Access publication. Depending on the publication you may be subject to an article processing charge (APC). APC rates vary but are usually within the range of £300 to £3000. Open Access publications usually list their APC rates on their websites.

NIHR expects that APCs will be covered by the funding award.

In due course if an article is accepted for publication and there are insufficient funds to cover an APC you should contact the Monitoring Research Manager during monitoring phase and Editorial Research Manager ([journals.library@nihr.ac.uk](mailto:journals.library@nihr.ac.uk)) post submission of your final report to request additional funding. This will be considered on an individual case basis in line with the [DH/NIHR policy on Open Access publishing](#).



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## Permissions and copyright

### Copyright

**(Applies to all contracts for all programmes from March 2012 standard contract).**

Assuming that your report is accepted for publication, it will be published in the relevant programme journal. Under the terms of your contract, copyright is assigned to the Crown, so it will bear the following statement:

'© Queen's Printer and Controller of HMSO 20XX [year of publication]. This work was produced by [name of author/organisation] under the terms of a commissioning contract issued by the Secretary of State for Health. This issue may be freely reproduced for the purposes of private research and study and extracts (or indeed, the full report) may be included in professional journals provided that suitable acknowledgement is made and the reproduction is not associated with any form of advertising. Applications for commercial reproduction should be addressed to NETSCC.'

Permission to reproduce material from the published report is covered by the [UK government's non-commercial licence for public sector information](#).

If you submit papers arising from your report to other journals it is essential that any copyright agreement you sign is in the form of a non-exclusive agreement as, under the terms of your contract, the Crown has been assigned an irrevocable non-exclusive licence in respect of any information, Intellectual Property, Results, Materials and conclusions arising from the research project.

Most journals have suitable non-exclusive licences for government-funded research. If you have, in error, signed an exclusive copyright agreement with a publisher, it is your responsibility to alert the publisher as soon as possible. If you require any assistance in this matter, please email [journals.library@nih.ac.uk](mailto:journals.library@nih.ac.uk)

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## Acknowledgements and disclaimers

If you submit your work to another journal, or anywhere else, please ensure it carries the appropriate funding acknowledgement and Department of Health disclaimer:

### Funding/publication acknowledgement:

*This project was funded by the [insert programme name] programme (project number xx xx xx xx) and will be published in full in the [insert journal title, volume and issue number, if known]. Further information available at: [insert project page web address].*

### EME Reports Funding/publication acknowledgement:

*This project is funded by the Efficacy and Mechanism Evaluation (EME) Programme, an MRC and NIHR partnership.*

### Department of Health disclaimer:

*This report presents independent research commissioned by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, MRC, CCF, NETSCC, the [insert programme name] programme or the Department of Health.*

### If your final report includes verbatim interview quotations, please use the following Department of Health disclaimer:

*This report presents independent research commissioned by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the [insert programme name] programme or the Department of Health. The views and opinions expressed by the interviewees in this publication are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, MRC, CCF, NETSCC, the [insert programme name] programme or the Department of Health.*

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## Permissions

A Youtube video on the NIHRtv channel is available titled NIHR Journals Library: Getting permission to reproduce copyrighted material (<https://www.youtube.com/watch?v=z0TVilRpyKg>). Please note that we no longer require permission for translation.

It is your responsibility as the author to obtain permission to reproduce work (e.g. figures and text) previously published elsewhere. You should be aware that some journals can charge a fee for reproduction and you will be expected to fund this from your contracted budget.

Even if you are the author of the work being reproduced, you may not necessarily own the copyright for the published material. Please check with the publisher (rather than the author or the journal editor as they may not own the copyright).

If your final report or supplementary material contains large sections of previously published material, you must apply for copyright permission from the relevant copyright holder and submit this to the editorial office with your final report.

As the journal issue will appear online and could be made available in other formats, please ensure that all media copyright is granted.

Please read the step-by-step guide to obtaining permissions at the end of this section for further information.

### Material requiring permission

The following list details the usual material that you will need to obtain permission to use in your report or supplementary material. Please note that this is not an exhaustive list and if in doubt about whether you should seek permission, it is always best to err on the side of caution and contact the publisher you wish to use material from.

- ▶ A single quotation or several short quotes from a full-length book of over 300 words
- ▶ A single quotation of over 50 words from a journal, newspaper or magazine article
- ▶ A quotation of any length from a website
- ▶ Charts, tables or graphs or other representations where the author is using the entire representation or has used a substantial amount of material from another work
- ▶ Photographs
- ▶ Reproduction of web pages or screenshots
- ▶ Certain trade mark usage
- ▶ Certain photographs containing recognisable people
- ▶ Reproduction of advertisements
- ▶ Any third-party software used in a CD, DVD or website supporting an author's work
- ▶ Film stills and film grabs
- ▶ Ordnance Survey maps, map extracts and redrawn maps
- ▶ Quotations from informal writings, such as speeches, interviews, mission statements, questionnaires, classroom discussions or student works

If the data is presented in a different way in charts, tables, graphs and figures, permission is not needed, but the source should be credited. If a table or figure has been adapted you will need to use your judgement as to how different your adaptation is from the original. If in doubt contact the original publisher. Use of data originally described within text does not require permission to be presented in a new format, such as a new table. More information on copyright can be found on the [Intellectual Property Office website](#).

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## Step-by-step guide to obtaining permissions

7. **Decide if it is necessary to include the copyright material:** Obtaining permissions can be a lengthy and expensive process so you should ensure that you are only including material that is necessary
8. **Apply early:** Apply for permission as soon as you decide to include material that has been previously published, usually when you are preparing your final report. Failure to apply at this early stage is likely to delay the publication of your report
9. **Never assume material is copyright-free:** even if material is posted on the Internet or is widely known and discussed, this does not normally mean that it is not in copyright
10. **Have all source material details to hand:** ensure that you have ISBNs, page and figure numbers for the source material when applying for permission
11. **Find the relevant publisher:** If you have the journal in which the original material was published then you can contact the relevant journal to find this out. Alternatively, use MEDLINE (at the [National Library of Medicine website](#)) or other journals database to locate the journal website. If your institution subscribes to Ulrichs, this can also be used to locate contact details of journal publishers
12. **Contact the publisher:** Send an email following the example below:

Dear Sir/Madam,

**Hutchinson ML, Zahniser DJ, Sherman ME, et al. Utility of liquid-based cytology for cervical carcinoma screening: results of a population-based study conducted in a region of Costa Rica with a high incidence of cervical carcinoma. *Cancer* 1999; 87:48–55.**

I am writing to request permission to reproduce Table 1 from the above reference. The table will appear in a report in the journal Health Technology Assessment. This report will also be available online. We therefore request permission to use the material in this and all subsequent editions of the work, all derivative works, in any and all media, in English language. I attach a scanned copy of the relevant page from the original article for your convenience.

Email a scanned copy of the title page and the page containing the relevant material. If you are adapting the table/figure, send a copy of this as well and alter the covering email accordingly

13. **Ensure that full usage rights are granted:** You will need to obtain permissions for full usage rights, that aren't limited to a specific form of media or length of time. Often publishers will reply with permission for limited rights. If this happens you should contact them again immediately, particularly for electronic rights, stating that the work will also be published on the NIHR Journals Library website. Please note, it is acceptable to obtain permission for English language only, however, further permission will need to be sought should you wish to translate your report into another language.
14. **Use the appropriate credit line:** The publisher may insist on a specific credit line, for example the full reference details plus the publisher's details. This should be provided to your programme, along with the proof of permission, when you submit your final report
15. **If a specific credit line is not specified, or permission is not required, the following credit lines can be used as appropriate:**

Reproduced with permission from Smith et al.<sup>49</sup>

Adapted with permission from Smith et al.<sup>49</sup>

Adapted from Smith et al.<sup>49</sup>

Data from Smith et al.<sup>49</sup>

For further guidance please email the editorial office: [journals.library@nihr.ac.uk](mailto:journals.library@nihr.ac.uk)

# Submitting your report and editorial review

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## Forms

This section details the forms that **MUST** be submitted with the final report. Reports cannot proceed to editorial review without these forms. Please read this section carefully and make use of the [Editorial Criteria Checklist](#) to ensure that you have all the required information before submitting your report.

All forms are available online at <http://www.journalslibrary.nihr.ac.uk/information-for-authors/forms> or can be provided by the editorial office.

## ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (COI)

<http://www.icmje.org/conflicts-of-interest/>

Each named author is required to complete the ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (COI). Authors should complete a form even if there are no competing interests.

The form includes instructions to help authors provide correct information, with a sample completed form also available on the ICMJE website. Please do not include details of the main NIHR or MRC grant for your project in section 2 of the form. Please only refer to any other payments received.

A declaration of any conflicts of interest, or absence of, must also appear on the title page of the final report below the authors' names.

## Editorial Criteria Checklist

<https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Editorial-Criteria-Checklist.pdf>

Your final report must meet certain editorial criteria in order for it to be accepted. This checklist is applicable to all final reports submitted at the project end. It should be completed by the lead author and must be submitted with the final report. You should use it as a guide when preparing your report.

## Order of Authors Agreement

<https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Order-of-Authors-Agreement.pdf>

This form must be completed to show the order in which authors will appear in the published journal report. The lead author should arrange for each author to sign the form next to their name. They can sign different copies of the form provided that they sign in the correct position. Each author's signature must be original. Scanned copies of signatures and digital signatures are acceptable. All authors listed must satisfy the author criteria listed on the form and in this document (see the Authorship section on [page 36](#)).

If your report includes more than 25 authors, please download additional pages: <https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Order-of-Authors-Agreement-Extra-Authors.pdf>

## ORCID

In the Order of Authors Agreement we ask you to provide an ORCID iD for all authors. The Open Researcher and Contributors ID (ORCID) repository is an open, not-for-profit, community-driven initiative to resolve authorship confusion in scholarly work. When you register for an ORCID iD, you are given a unique 16 digit identifier which correctly distinguishes your publications and other research activities from others who may have the same, or a similar, name.

The registration only takes 30 seconds to complete and is free of charge. You will then be able to use your iD for all future report submissions and for any submissions to other publishers who request this information. Once you have registered, please also add your ORCID iD to your contact details on the MIS. To do this,

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login to the system, select 'Profile' from the horizontal green tabs, then select "View My Contact Details". You will then be able to add your iD to the ORCID field and should then select "Save and Close".

We will use your ORCID iD to organise the data on the Journals Library website and to ensure all of your work is correctly assigned to you.

To register for an ORCID iD visit: <https://orcid.org/register>

For more information and help with ORCID please visit <http://support.orcid.org/knowledgebase/topics/32827-website-user> or contact the NIHR Journals Library team.

## Permissions Checklist

<https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Permissions-Checklist.pdf>

Please use this form to record the permissions that you have requested and been granted for use of material that has previously been published elsewhere (see the Permissions section on [page 43](#) and Copyright section on [page 41](#) for more information). Please note this form needs to be completed and submitted even if no permissions are required.

## Reporting Guidelines Checklists

If your report is a randomised controlled trial, evidence synthesis/systematic review or a study of diagnostic accuracy you should fill in the applicable checklist(s) below and submit this/these with your final report.

### CONSORT

CONSORT checklist for randomised controlled trials ( all RCTs).

<http://www.consort-statement.org/consort-2010>

CONSORT for abstracts checklist (HTA only to submit with checklist above).

<http://www.consort-statement.org/extensions?ContentWidgetId=562>

### PRISMA

Checklist for evidence synthesis/systematic reviews.

<http://www.prisma-statement.org>

### STARD

Checklist for diagnostic accuracy studies.

<http://www.stard-statement.org/>

### CHEERS

<http://www.ispor.org/workpaper/CHEERS/revised-CHEERS-Checklist-Oct13.pdf>

The Consolidated Health Economic Evaluation Reporting Standards (CHEERS) checklist must be completed by authors of reports which contain a substantial economic evaluation or cost effectiveness component. Please note that whilst you should provide relevant page numbers next to each item it is not necessary to indicate every single instance of an item being included in your report.

For more information about the checklist please visit the CHEERS Task Force webpage (<http://www.ispor.org/TaskForces/EconomicPubGuidelines.asp>).

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## Report submission

It is expected that you will submit a complete report, taking care to ensure that content and presentation are to the highest possible standard on submission.

Before you submit your final report please ensure that you have completed the necessary forms:

- ▶ ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (COI) completed by each author
- ▶ A completed copy of the Editorial Criteria Checklist
- ▶ An Order of Authors Agreement form, agreed and signed by each author. All authors to provide an ORCID iD
- ▶ Completed CONSORT/CONSORT for Abstracts/PRISMA/STARD checklists (as appropriate)
- ▶ A completed Permissions Checklist (whether permissions are required or not)
- ▶ **For HTA reports only** – a completed CHEERS Checklist

Please also check that you have done the following before submitting your report:

- ▶ Ensured that the main body of your report adheres to the 50,000 word limit
- ▶ Ensured that all references are in Vancouver format
- ▶ Ensured that your Scientific Summary adheres to the 2400 word limit and that it does not include references, tables or figures
- ▶ Provided tables and figures in an editable format (not as embedded images) within the main body of the text and ensured they are numbered consecutively
- ▶ Received and paid for permissions to reproduce figures, tables, web shots and so on
- ▶ Included original files for forms, questionnaires and trial documentation to be included in the appendices
- ▶ Ensured that the most up-to-date final protocol[s](or equivalent document) is uploaded on the NETSCC MIS

Once you have completed all of the necessary forms, these should be submitted with your final report online.

To submit your final report, please login to the NETSCC MIS at <https://netscc-mis.nihr.ac.uk/mis/>. Under the 'My Tasks' section, click to open 'Submit Draft Final Report', and follow the on-screen instructions. Please note that in order to successfully complete the task, you will need to submit an Editorial Criteria checklist together with your final report. You should submit the report and appendices as a single document. Submit any supplementary material to be included on your project page on the Journals Library website using the file upload type 'Final Report Supplementary Material'.

If the final protocol differs substantially from the original, please provide a list of the important or significant changes that were made, with a brief description of each, via email to [journals.library@nihr.ac.uk](mailto:journals.library@nihr.ac.uk). You should also provide a description of why these deviations from the protocol occurred and the governance process followed. This will assist the scientific editors when undertaking their review.

### PGfAR Reports

**For PGfAR reports only** – please note you should submit your final report in the manner prescribed by the Programme (NOT via the MIS). If in doubt please contact your Programme Manager.

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## Editorial review

### The Review Process

Once you have submitted your report, your funding programme will check that it is in line with requirements and then it will be passed to the editorial office. At this point, your report has entered editorial review.

The report will then be externally reviewed, usually by at least four independent experts who provide expertise in various relevant areas (such as clinical, methodological, health economics and statistics).

Reviewers are asked to return their comments within 4 weeks. When all the comments have been received, the editors review all of the papers and feedback is given to the author (please note for TAR reports the editors will review the report only after it has been revised in response to the initial reviewer comments). Ideally, all of this will take place within 2 months of receipt of your final report.

Should your report require revision you will be invited to resubmit an electronic version of your revised report within four weeks. This must be accompanied by a table detailing the changes that have/have not been made in response to the editors' and/or reviewers' comments.

The editors will then decide whether or not you have adequately addressed the comments. If the changes are not considered sufficient, you will be asked to make further revisions. Occasionally, the editors may ask for the revised report to be re-reviewed.

When the editors are satisfied that a report is ready for publication, the report is sent to the production house. At this stage, your report is accepted for publication and you can now cite your report as 'in press'. You can upload your report to your institution's repository at this stage; however, if you do so, it must be a closed version. We would prefer you to wait until the report is published because:

- ▶ the report is subject to change throughout the editorial process
- ▶ your dual publication articles may not get published if your work is already in the public domain
- ▶ you may not have secured all necessary permissions for reproduced material within your report.

We advise you to speak to your institution regarding these issues, as well as your requirements for REF compliance and confidentiality issues.

Please note that the editors will make the final decision on a report's suitability for publication. They have an extensive role throughout the process, including assigning reviewers, reviewing reports, signing them off to be sent to the production house and approving the final proofs before publication.

Please see the Editorial Review Timescale on [page 50](#) for further information.



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## Editorial policies

### Transparency

The NIHR Journals Library has a commitment to transparency. Within the limitations of our closed review process we try to ensure that reviewers, editors, authors and readers know as much about the background of the research as possible.

### Duty of confidentiality to authors

All submitted final reports are treated as confidential documents. This means that, unless we have the authors' prior permission, we will not disclose information about a final report. However, during the editorial review process, the following people may have access to your final report:

- ▶ Editorial office staff and other colleagues at NETSCC, NIHR or MRC
- ▶ External reviewers
- ▶ NIHR Journals Library editors and other members of the editorial board or groups
- ▶ Department of Health staff or other policy making bodies, on completion of a confidentiality agreement
- ▶ The production house

### Reviewers

The NIHR Journals Library has a system of closed review, where authors do not know who has reviewed or edited their final reports. However, all reviewers are expected to declare any competing interests that might relate to the final report we have asked them to review, and these are taken into account by the editors when considering reviewers' comments. We would expect reviewers to decline a review request should the conflict of interest be significant.

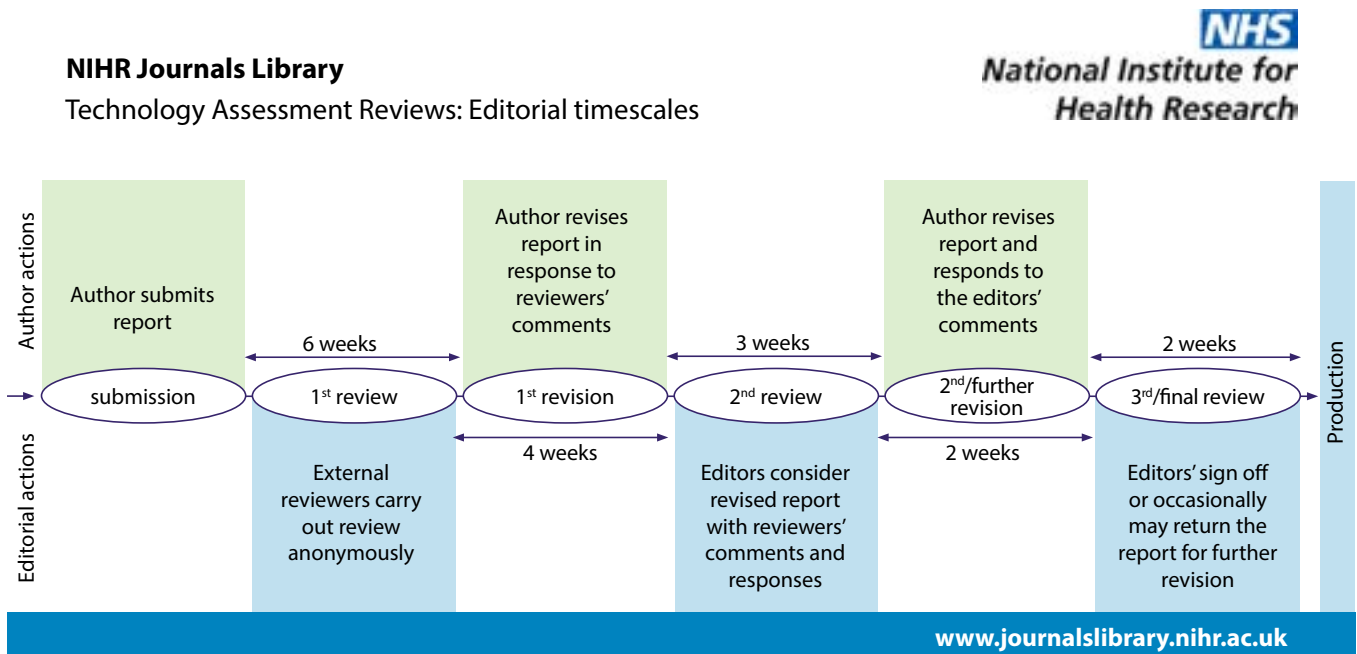
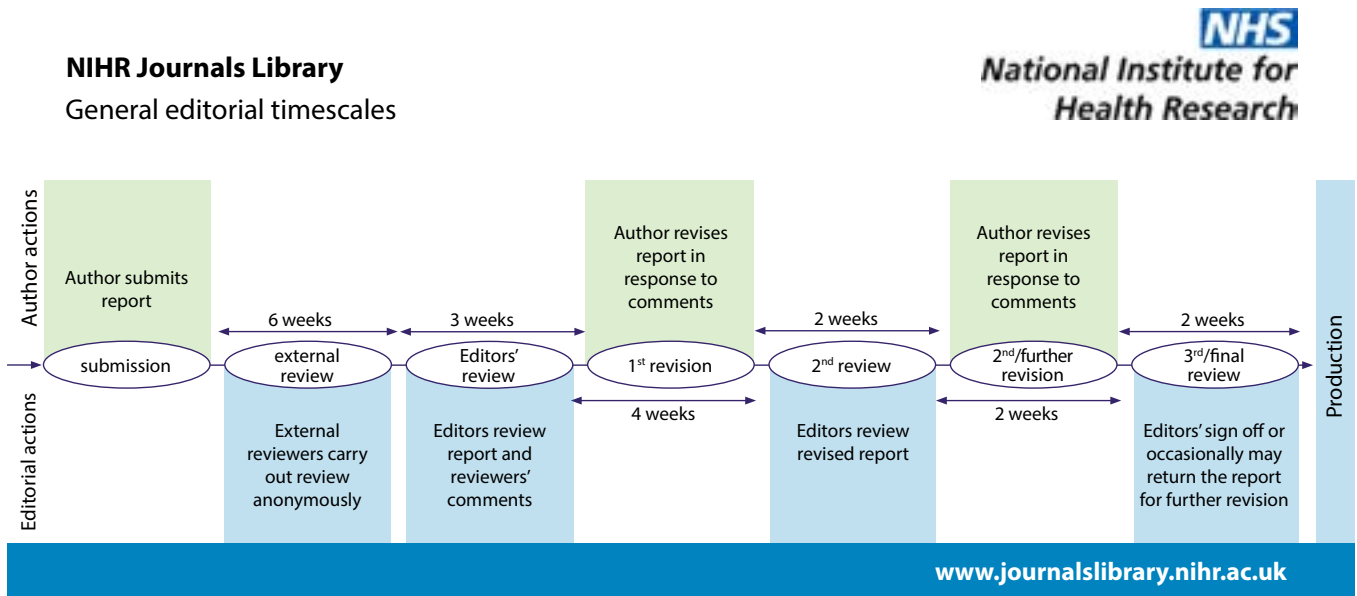
### Editorial board and groups

The editorial board and groups consist of active clinicians and clinical academics (or the equivalent in public health), health policy experts, programme directors and the editor-in-chief of the NIHR Journals Library.

The only occasion when details about a final report might be passed to a third party without the authors' prior permission is if the editors suspect serious research misconduct (please see the Publication Ethics section on [page 36](#) for further information).

## Editorial Review Timescale

Please note that this timescale is approximate. The timescale for TAR reports differs and is shown at the bottom of this page.



## The production process

At the production stage, reports are copy-edited and proofed by professional writers and proof-readers. Typically this takes 4 to 6 months and involves general editing, detailed copy-editing, preparation of proofs, checking proofs by the author/editors, proof-reading, proof collation, resolving any remaining queries and then producing the signed-off journal issue. Reports receive final sign-off by the editors before they are published online.

The production house is responsible for managing the copy-editing, typesetting, proofreading and printing of your report. The NIHR Journals Library uses an external production house called Prepress Projects, with a dedicated project management team looking after NIHR Journals Library work. They will be your main contact during the production process.

## The copy-editing process

Copy-editing reports is a very important part of the publication process. In the first instance it ensures that reports are written in correct English, are readable and that scientific terms and concepts are accurate. It applies a consistent house style to reports, which provides a familiar presentation to readers and aids understanding of reports in unfamiliar disciplines. Copy-editing also plays a significant role in enhancing the readers' experience and perceptions of the journal.

Once all pre-production checks have been completed copy-editing begins. First, the files are prepared for copy-editing by putting them into one file and making initial corrections to spelling and grammar as well as ensuring that the report follows a consistent house style. The copy-editor is briefed on any specific instructions relating to the report and then carries out a detailed copy-edit of the report. This includes checking that abstracts and scientific summaries conform to appropriate guidelines, ensuring that all studies and reports cited are included in the reference list and checking that URLs cited in the text are valid. The copy-editor will then raise any queries that arise with the author. During this stage the copy-editor will also carry out additional tasks, checking that the title is appropriate and carrying out final checks on referencing numbering and so on.

## Author responsibilities

A large number of reports are published each year; therefore it is important that each report follows a production schedule. As an author you have significant input into the process and therefore your cooperation is vital in ensuring that reports publish to schedule. Your main responsibility during the production process is to respond to the copy-editor's queries and check proofs of your report after it has been typeset (and after any subsequent revisions).

A PDF file of the proofs will be emailed to you for checking. You will also be sent author queries and a draft headline and keywords.

Please read everything carefully, and pay particular attention to the following:

- ▶ Headline and keywords – The headline will be used when publishing your report online and is intended to sum up your work in a concise but informative way. Please check that the headline and keywords are appropriate and approve or amend as necessary
- ▶ The layout of the tables
- ▶ Line figures (diagrams) – these are redrawn by an illustrator so please check they are accurate
- ▶ Special symbols or fonts that may have been used (for example Greek letters, symbols, subscripts, superscripts, italics, bold, chemical formulae, mathematical equations)

Queries that arose during copy-editing or proofreading are listed in a PDF file. In the first proofs a box indicates the numbered queries with the corresponding number in the margin of the proofs, which appears in red on the PDF file. Queries relating to references, figures, and tables are listed by reference, figure, or table number.

**All queries must be answered.**

Mark all text corrections clearly.

If you have very few and very minor changes, they may be listed in a Word file attachment and returned, by email, along with your answers to queries. Corrections must be described clearly by specifying page and line numbers.

Alternatively, and again only for very few and very minor changes, you may add corrections and comments to the PDF file and return the edited file by email. All PDF files supplied as first and/or revised proofs should be editable with Adobe Acrobat Reader.

We recommend that you make a copy of the corrected proof, particularly if posting, for reference in any further correspondence concerning your report.

Please return corrected page proofs by post or courier to the following address:

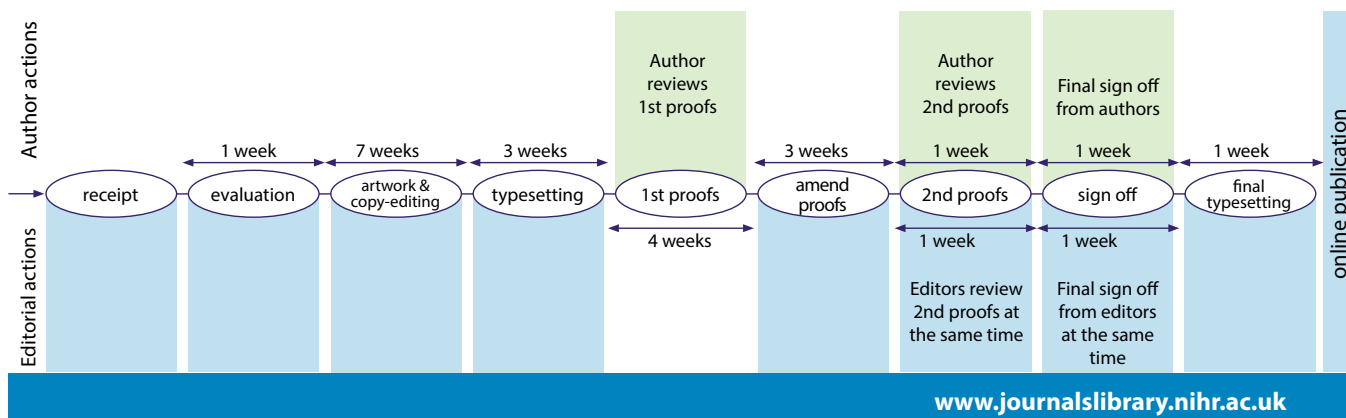
**[Name of Journal]**  
**NIHR Journals Library**  
**Prepress Projects Ltd**  
**Algo Business Centre**  
**Glenearn Road**  
**Perth PH2 0NJ, UK**

**Production timescale**

Please note that this timescale is an approximation. The length of the report will affect the time taken in production.

**NIHR Journals Library**

Production general timescales



[www.journalslibrary.nihr.ac.uk](http://www.journalslibrary.nihr.ac.uk)

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## Open access

Total and complete publication of research findings is part of the NIHR's commitment to the principles of open access and adding value to all stages of research, ensuring best use of public money to benefit the health and wealth of the nation.

All journals in the NIHR Journals Library are open access and are free to view and download online (print copies can be purchased from the individual report pages). Health Technology Assessment is indexed on MEDLINE, CINAHL, EMBASE, Europe PubMed Central, the Cochrane Library and the ISI Citation Index. The four new journals within the NIHR Journals Library will over time fulfill the requirements to be indexed in a similar way.

The Department of Health (DH) and the Medical Research Council (MRC), in association with a number of other UK biomedical funders, is a partner in an initiative to establish [Europe PubMedCentral \(Europe PMC\)](#)

Led by the Wellcome Trust, the aim of this initiative is to create a stable, permanent and free-to-digital archive of the full text, peer reviewed research publications (and datasets) that arise from research funded through the National Institute for Health Research (NIHR) and other members of the [Europe PubMed Central Funders Group](#).

The DH and MRC require electronic copies of all research papers, final reports and / or summaries of research funded in part or in full by the DH or MRC, and which have been accepted for publication in a peer reviewed journal, to be deposited at the earliest opportunity (within six months) in Europe PubMed Central. This applies to all funding applications submitted since 1st October 2006 for MRC-funded reports and 1 April 2007 for DH-funded reports.

The editorial office will arrange for your published report to be deposited with Europe PubMed Central. You will then be contacted directly by Europe PubMed Central and asked to log on to their system to check the details and give your approval before the report appears on the Europe PubMed Central site.

The preferred mechanism for depositing other articles published in peer reviewed journals is for the journal itself to make the deposit to Europe PubMed Central. If an article is not published in an open access journal the responsibility rests with the author, and Europe PubMed Central will accept final, peer reviewed manuscripts of such articles once they have been accepted for publication.

Please see the full Statement on DH / NIHR-funded research and Europe PubMed Central: <https://www.nihr.ac.uk/funding-and-support/funding-for-research-studies/how-to-apply/support-for-study-teams/publishing-your-research/nihr-open-access-policy.htm>.

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## Repositories

An increasing number of universities, both in the UK and globally, are developing electronic institutional repositories in which they encourage their researchers to deposit their research material. This practice is part of a move towards an open access publication approach to research activities, aimed at improving dissemination, access and citations to research.

The NIHR actively encourages researchers, whose own universities have developed an institutional repository, to deposit any research articles relating to their funded project, including the final published NIHR journal issue, into this facility. The [Registry of Open Access Repositories \(ROAR\)](#) is available from the [EPrints website](#).

Please note that each institutional repository is likely to have its own system requirements for data entry. However, for consistency, the journal name must be entered correctly (as it appears on the NIHR Journals Library website) and the publisher stated as the *NIHR Journals Library*.

If you have any queries about entering details of your research into your institutional repository please email the editorial office: [journals.library@nihr.ac.uk](mailto:journals.library@nihr.ac.uk).

## Dissemination

Once your report has been published it is important to ensure that researchers and other users are able to find and cite your report easily. Below are some suggested methods for reaching your readership more effectively.

- ▶ **Publish an article in another journal based on your report.** Target a journal with a high impact factor, which is widely read in your discipline. Make sure you notify us of any upcoming articles so that any wider communications activity surrounding the publication of your report can be planned
- ▶ **Self-archive** your report by placing it in an institutional or subject repository
- ▶ **Email your networks and post on listservs** about the publication of your report
- ▶ **Use your department website or personal webpage** to add information about your report and link directly to it
- ▶ **Optimize your report for search engines** by ensuring that the title, keywords and abstract all accurately describe the content of your research
- ▶ **Use your email signature** to tell people about your report, providing a link to the NIHR Journals Library website
- ▶ **Contribute to Wikipedia** by adding your report as a reference to an article on a relevant subject (with a link) or by creating your own page
- ▶ **Blog** about your area of research and stimulate debate amongst others in the field
- ▶ **Join academic social networking sites** such as [academia.edu](https://www.academia.edu). These are online social communities for people to share research and discuss ideas
- ▶ **Announce your report on Twitter and Facebook** with a link, so that it can be picked up by other researchers and practitioners
- ▶ **Add your report to your CiteULike library** and share it with others
- ▶ **Get known in your community** by going to conferences, reviewing papers for journals and joining an editorial board
- ▶ **Add your report to your course reading list** where this is appropriate

## Web references

Website	Link
CHEERS Checklist	<a href="http://www.ispor.org/workpaper/CHEERS/revised-CHEERS-Checklist-Oct13.pdf">www.ispor.org/workpaper/CHEERS/revised-CHEERS-Checklist-Oct13.pdf</a>
CHEERS Task Force	<a href="http://www.ispor.org/TaskForces/EconomicPubGuidelines.asp">www.ispor.org/TaskForces/EconomicPubGuidelines.asp</a>
CONSORT Statement, Checklist and Flowchart	<a href="http://www.consort-statement.org">www.consort-statement.org</a>
CONSORT Extension for Abstracts	<a href="http://www.consort-statement.org/extensions?ContentWidgetId=562">www.consort-statement.org/extensions?ContentWidgetId=562</a>
Committee on Publication Ethics (COPE)	<a href="http://publicationethics.org">publicationethics.org</a>
Centre for Reviews and Dissemination (CRD) Guidance	<a href="https://www.york.ac.uk/crd/guidance/">https://www.york.ac.uk/crd/guidance/</a>
Department of Health (DH)	<a href="http://www.dh.gov.uk">www.dh.gov.uk</a>
DH/NIHR policy on Open Access publishing	<a href="http://www.nihr.ac.uk/funding-and-support/funding-for-research-studies/how-to-apply/support-for-study-teams/publishing-your-research/nihr-open-access-policy.htm">www.nihr.ac.uk/funding-and-support/funding-for-research-studies/how-to-apply/support-for-study-teams/publishing-your-research/nihr-open-access-policy.htm</a>
Editorial Criteria Checklist	<a href="http://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Editorial-Criteria-Checklist.pdf">www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Editorial-Criteria-Checklist.pdf</a>
Efficacy and Mechanism Evaluation (EME) journal	<a href="http://www.journalslibrary.nihr.ac.uk/eme">www.journalslibrary.nihr.ac.uk/eme</a>
EndNote template	<a href="http://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/NIHR-Journals-Library.ens">www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/NIHR-Journals-Library.ens</a>
EPrints	<a href="http://www.eprints.org">www.eprints.org</a>
EQUATOR Network	<a href="http://www.equator-network.org">www.equator-network.org</a>
Europe PubMed Central	<a href="http://europepmc.org">europepmc.org</a>
Europe PubMed Central Funders Group	<a href="http://europepmc.org/Funders">europepmc.org/Funders</a>
GRADE Working Group	<a href="http://www.gradeworkinggroup.org">www.gradeworkinggroup.org</a>
Guidelines for Authors and Peer Reviewers of Economic Submissions to the BMJ	<a href="http://www.bmj.com/content/313/7052/275.full">www.bmj.com/content/313/7052/275.full</a>
Health Research Authority Guidance on Information at the End of a Study	<a href="http://www.hra.nhs.uk/documents/2015/08/hra-guidance-end-study-pis-v4-1_20-august-2015.pdf">www.hra.nhs.uk/documents/2015/08/hra-guidance-end-study-pis-v4-1_20-august-2015.pdf</a>
Health Services and Delivery Research (HS&DR) journal	<a href="http://www.journalslibrary.nihr.ac.uk/hsdr">www.journalslibrary.nihr.ac.uk/hsdr</a>
Health Technology Assessment (HTA) journal	<a href="http://www.journalslibrary.nihr.ac.uk/hta">www.journalslibrary.nihr.ac.uk/hta</a>
ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals.	<a href="http://www.icmje.org/recommendations">www.icmje.org/recommendations</a>
ICMJE Form for Disclosure of Potential Conflicts of Interest	<a href="http://www.icmje.org/coi_disclosure.pdf">www.icmje.org/coi_disclosure.pdf</a>
ICMJE guidance on 'Defining the Role of Authors and Contributors'	<a href="http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html">www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html</a>
ICMJE guidance on 'Overlapping Publications'	<a href="http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/overlapping-publications.html">www.icmje.org/recommendations/browse/publishing-and-editorial-issues/overlapping-publications.html</a>
Intellectual Property Office – Copyright	<a href="http://www.gov.uk/topic/intellectual-property/copyright">www.gov.uk/topic/intellectual-property/copyright</a>
ISRCTN	<a href="http://isrctn.org">isrctn.org</a>
INVOLVE – Plain English Summaries	<a href="http://www.invo.org.uk/resource-centre/plain-english-summaries">www.invo.org.uk/resource-centre/plain-english-summaries</a>
Medical Subject Headings (MeSH) On Demand	<a href="http://www.nlm.nih.gov/mesh/MeSHonDemand.html">www.nlm.nih.gov/mesh/MeSHonDemand.html</a>

Website	Link
National Archives Non-Commercial Government Licence	<a href="http://www.nationalarchives.gov.uk/doc/non-commercial-government-licence/non-commercial-government-licence.htm">www.nationalarchives.gov.uk/doc/non-commercial-government-licence/non-commercial-government-licence.htm</a>
National Institute for Health Research (NIHR)	<a href="http://www.nihr.ac.uk">www.nihr.ac.uk</a>
NETSCC MIS	<a href="http://netscc-mis.nihr.ac.uk/mis">netscc-mis.nihr.ac.uk/mis</a>
NIHR Journals Library Forms	<a href="http://www.journalslibrary.nihr.ac.uk/information-for-authors/forms">www.journalslibrary.nihr.ac.uk/information-for-authors/forms</a>
NIHR Journal Library Website	<a href="http://www.journalslibrary.nihr.ac.uk/">www.journalslibrary.nihr.ac.uk/</a>
National Library of Medicine	<a href="http://www.nlm.nih.gov">www.nlm.nih.gov</a>
ORCID	<a href="http://orcid.org">orcid.org</a>
Order of Authors Agreement	<a href="http://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Order-of-Authors-Agreement.pdf">www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Order-of-Authors-Agreement.pdf</a>
PGfAR Editorial Timeline	<a href="http://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/PGfARInf_Authors_Editorial_workflow.pdf">www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/PGfARInf_Authors_Editorial_workflow.pdf</a>
Permissions Checklist	<a href="http://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Permissions-Checklist.pdf">www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/Permissions-Checklist.pdf</a>
Plain English Campaign	<a href="http://www.plainenglish.co.uk">www.plainenglish.co.uk</a>
PRISMA	<a href="http://www.prisma-statement.org">www.prisma-statement.org</a>
Programme Grants for Applied Research (PGfAR) journal	<a href="http://www.journalslibrary.nihr.ac.uk/pgfar">www.journalslibrary.nihr.ac.uk/pgfar</a>
PROSPERO	<a href="http://www.crd.york.ac.uk/PROSPERO">www.crd.york.ac.uk/PROSPERO</a>
Public Health Research (PHR) journal	<a href="http://www.journalslibrary.nihr.ac.uk/phr">www.journalslibrary.nihr.ac.uk/phr</a>
Registry of Open Access Repositories (ROAR)	<a href="http://roar.eprints.org">roar.eprints.org</a>
RIS file	<a href="https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/common-refs-ris.txt">https://www.journalslibrary.nihr.ac.uk/downloads/information-for-authors/common-refs-ris.txt</a>
SQUIRE Guidelines	<a href="http://www.squire-statement.org">www.squire-statement.org</a>
STARD Statement and Checklist	<a href="http://www.stard-statement.org">www.stard-statement.org</a>
Template for Intervention Description and Replication (TIDieR) checklist and guide	<a href="http://www.bmj.com/content/348/bmj.g1687">www.bmj.com/content/348/bmj.g1687</a>
TIDieR checklist	<a href="http://www.equator-network.org/reporting-guidelines/tidier/">www.equator-network.org/reporting-guidelines/tidier/</a>
Ulrichs	<a href="http://ulrichsweb.serialssolutions.com">ulrichsweb.serialssolutions.com</a>
Zotero Style	<a href="http://www.zotero.org/styles?q=nihr">www.zotero.org/styles?q=nihr</a>