

Guidance for Authors

OVERVIEW

Aims

Journal of Pharmacy Management (JoPM): The Journal aims to disseminate good practice about pharmacy services to senior pharmacists in primary or secondary care on a quarterly basis.

Journal of Medicines Optimisation (JoMO): The Journal aims to disseminate good practice about Medicines Optimisation (MO) to pharmacists, doctors, nurses and other healthcare workers in primary or secondary care on a quarterly basis. The focus is on 'optimisation', which relates to quality and improving patient care, rather than cost aspects.

The Journals aim to follow the 'Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals' published by the International Committee of Medical Journal Editors (ICMJE) and known as "The Uniform Requirements",¹ and the Committee on Publication Ethics (COPE) 'Code of Conduct'.²

The following guidance has been developed to assist potential authors in submitting their article in an appropriate format for the Journals but the ICMJE recommendations should be consulted if any further clarity is required.

Topics

The Journals welcomes clinical, educational and managerial contributions which are of interest to health services professionals involved with the development of pharmacy practice and MO. These can be specific for primary care, secondary care or tertiary care, address issues that are relevant to more than one sector or span the whole health economy.

Distribution

The normal method of distribution is by an email that provides an alert to the availability of a new edition of a Journal on the website (www.pharman.co.uk).

Length of articles

Journal of Pharmacy Management (JoPM): The preferred length for a Best Practice article is approximately 3,000 words (excluding references).

Journal of Medicines Optimisation (JoMO): The preferred length for an article is approximately 3,000 words (excluding references) although shorter articles of about 1,200 words (excluding references) are also welcomed.

Research Ethics Committees

There is no requirement that papers must have been submitted to a Research Ethics Committee. Whether that is appropriate or not is a matter for authors to consider but the expectation is that, when reporting research involving patients, there should be a statement in the manuscript to confirm that the work has been undertaken in accordance with the approval of a named, appropriate Research Ethics Committee and that informed consent was appropriately obtained.

Copyright

Copyright must be transferred to the appropriate Journal, which will reserve copyright to articles it publishes.

Duplicate submissions

It is a condition that papers submitted to the Journals will not have been previously published and will not have been submitted for publication elsewhere.

Overlapping publications

Plagiarism is not acceptable and papers that substantially overlap a paper that has already been published must not be submitted.

The submission of an article on a topic that has been the subject of a poster, or which has been submitted for a poster exhibition, can be acceptable provided that it contains substantially different, additional or updated information and the written permission of the body that organised the poster exhibition is made available. At the least, wording in the References section should make it clear that the topic has been the subject of a poster or has been submitted for a poster exhibition.

Editorial process

The Editor-in-Chief for each Journal has full authority over the content. The timing of publication and decisions about content are based on the relevance and usefulness of material to readers.

The Editor-in-Chief is assisted in the development and maintenance of policy for each Journal by a specific range of staff, Editorial Board members and Peer Reviewer network.

Charges

No charge is made to authors for work in processing and publishing manuscripts.

Fees

Fees are not normally paid to authors other than exceptionally for a specifically commissioned article.

HOW TO SET OUT YOUR ARTICLE

Title

A short title of up to eight words is preferred but can be longer to suit the article as appropriate. The title should be in upper and lower case with the first letter of the first word capitalised.

Authors

The name(s) of the author(s) should appear as academic title (e.g. Dr, Professor as applicable), forename (a forename is preferred but an initial can be used if wished), initials of any middle names (if it is wished to include them) and surname (house style is not to use post-nominals). This should be followed with the job title, department, address of organisation and email contact details for the Corresponding Author.

Persons named as authors should have made a substantial contribution to the development of the paper. Persons who do not meet this criteria but who provided general support should be listed in an 'Acknowledgments' section.

A person named as an author must have been involved in each of:

- making a substantial contribution to the conception or design of the work or the acquisition, analysis or interpretation of data
- drafting the work or revising it critically for important intellectual content
- giving final approval of the version to be published
- ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

All individuals who meet the first criterion should have had the opportunity to participate in the review, drafting, and final approval of the manuscript.

The Corresponding Author is the person who will communicate with the appropriate Journal during the submission, peer review, editing and publication processes.

Examples of activities that would not in themselves qualify a contributor for authorship are acquisition of funding, general supervision of a research group or general administrative support, writing assistance, technical editing, language editing, and proofreading.

Abstract

Abstracts for practice research articles should be no more than 250-300 words and show:

- title
- author list (show as academic title, initial(s) and surname)
- introduction
- methods
- results
- discussion
- conclusion
- keywords all in lower case (maximum of six), which should supplement words in the title by referring to other key points within the body of the paper.

For other types of paper, the standard headings need not be used.

Content

Present your article in accordance with the following:

- A typewritten form with single line spacing as a 'Word' document and number the pages.
- Use Arial 10 point with bold for main headings and italics for sub-headings.
- The active voice should be used where appropriate e.g. in the methods section.
- The format of Introduction (with aims/objectives), Method, Results, Discussion and Conclusion is a commonly used approach but should be seen as a broad guide only. Alternative headings may be used and the format should be adapted as appropriate for specific articles.
- Use frequent, short subheadings to help readability.
- If there are any abbreviations in your article, place them in brackets after the full title on the first occasion they are used.
- Do not use endnotes, headers or footers (e.g. for references).
- Use black text throughout.
- Separate paragraphs with a single line space and do not indent
- Use International Nonproprietary Names (INN) for drugs, not brand names.

House style

Language develops over time and there is often no clear 'right' or 'wrong' with some aspects of grammar and/or punctuation but, for consistency throughout the Journals, the following approach should be adopted:

- the title to be in upper/lower case with the first letter of the first word capitalised
- single quotation marks to be used except where speech is being shown, in which case double quotation marks should be used
- sentences should not be commenced with a conjunction (e.g. and, but)
- the 'Oxford comma' (e.g. a comma appearing before the conjunction 'and') should generally not be used except at the end of a list before 'etc' where that word then appears
- one space only should be used to separate sentences
- use single spacing between lines
- use English rather than American spelling (e.g. 's' rather than 'z' as appropriate)
- where a bulleted list follows the start of a sentence then the first word in each bullet should be lower case and there should be no full stop used at the end of each bullet except the last one (i.e. the bullet point is regarded as a 'comma' in the sentence). Where each bullet is a stand-alone statement then the first letter of each bulleted point should be a capital and a full stop should be used at the end of each sentence (i.e. each bullet point is regarded as a sentence in its own right)
- the numbers one to ten should be written as such in the text unless they are denoting something that has been measured
- do not use a full stop after 'etc' except where this appears at the end of a sentence

- avoid the use of the term 'in order to' (the word 'to' will commonly suffice) unless there is good reason for the emphasis
- use the form 'and' rather than '&' except where the latter is part of a title
- avoid hyphenating words where appropriate e.g. multidisciplinary instead of multi-disciplinary, inpatient instead of in-patient
- hyphenate compound adjectives e.g. well-written article

Illustrations

The use of diagrams, charts, figures, etc as illustrative components of an article can enhance the printed page. These can be provided as jpeg, bmp, tiff documents, Excel files or Word documents.

Screenshots should generally be avoided as these do not always reproduce clearly.

Authors may provide photographs that might be used at the discretion of the Editor-in-Chief. These should be provided electronically and can be sent after the article is accepted for publication but the Editor-in-Chief should be informed at the time of submission if it is the intention to provide such material.

Hyperlinks

The Journals are made available in an electronic form, which means that you can include hyperlinks to documents and websites to provide more information for readers who would find that helpful. Authors must ensure that they have appropriate authorisation to share work and that they comply with legal requirements e.g. copyright. If in any doubt, do not include the hyperlink.

Photographs

Photographs must only be provided on the basis that they belong to an author or where full and appropriate evidence of permission to use a photograph in the manuscript has been obtained. The source of any photograph must be acknowledged in the manuscript.

Where photographs are submitted, it should be ensured that they have a clean, uncluttered background. It is important to portray a professional image and to avoid untidy desks and irrelevant objects on desks or walls (e.g. unsuitable posters, promotional material). Where healthcare staff appear in the image, their clothing should conform with appropriate guidance on uniforms and workwear for NHS staff.

To avoid the unintended promotion of products, names on containers should not be capable of being read in the photograph.

Where a portrait photo is submitted:

- select a photo where the subject's face is positioned towards the top of the frame.
- check any harsh lighting since this can be unflattering. Outdoor portrait shots are best taken on an overcast day since the sun causes dark shadows on faces.

For group photos, ensure that:

- all the subjects are aware that the photo is being taken and are looking alert and interested
- no-one is in a distracting or inappropriate pose e.g. yawning, eyes shut
- the subject is not too far away and that it is in good focus.

Declaration of interests

The heading 'Declaration of Interests' must appear in the paper and any competing interests (e.g. sponsorship by a pharmaceutical company) should be disclosed.

The ICMJE has developed a form (available at <http://icmje.org/conflicts-of-interest/>) to provide information about author interests that could influence how readers receive and understand the work. The form is designed to be completed and stored electronically.

Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information.

Once the relevant fields have been completed, a disclosure statement is automatically generated based on the information provided and appears in a box on the form. The disclosure wording generated for each author must appear under the heading 'Declaration of Interests' in the submitted manuscript.

Completed ICMJE Disclosure forms for each author must be sent to the Editor-in-Chief at the time of submission of the manuscript.

Acknowledgements

Contributions that do not justify authorship may be acknowledged individually or as a group. The contribution that each has made to the work should be specified.

The Corresponding Author should obtain the written permission of those who it is wished to include as an acknowledged individual or group and should confirm that this has been done to the Editor-in-Chief at the time the manuscript is submitted.

References

The 'Vancouver' style of using a number in the text should be used.

References in the paper must appear as unbracketed superscript numbers in the order in which they appear in the text. The superscript number(s) should appear immediately after any punctuation such as commas and full stops.

References should be to original works and abstracts and 'personal correspondence' should be avoided wherever possible.

The list of references at the end of the paper should give:

- all the authors' names and initials (surname followed by initials of forenames without any punctuation or spaces between the initials) unless there are more than 6, in which case 'et al' should be used for subsequent names followed by a full stop.
- affiliation of author followed by a full stop.
- title, abbreviated according to the 'List of Journals Indexed' in Index Medicus followed by a full stop.
- year of publication (preceded by day date and month where appropriate) followed by a semi-colon separator
- volume number followed by a colon separator
- first and last page numbers followed by a full stop.

There should be no spaces between the year of publication, the volume number and the page numbers but each aspect indicated above should otherwise end with a full stop.

References to books should give the names of any editors, place of publication, publisher and year in place of the Journal information.

Links to references on websites, which will be hyperlinked in the Journals, should be given by stating 'Available at:' or 'Available from:' as appropriate followed by the Uniform Resource Locator (URL) address. There should be a space left after the URL and then a full stop. This should then be followed by square brackets containing the word 'Accessed:' followed by the date on which the reference was accessed on the web, expressed as ddmmyy.

Useful reading lists or websites may be quoted where appropriate. In the case of websites, it should be made clear if these are subject to restricted access.

A check should be made to ensure that all hyperlinked references open correctly.

PATIENT CONFIDENTIALITY

Information that identifies a patient, or which could be used to identify a patient, must not appear in the article.

PERMISSIONS FROM PERSONS OTHER THAN PATIENTS

Written confirmation must be provided to the Editor-in-Chief that anyone who is identifiable in the manuscript by name or in an image:

- is aware of the manuscript
- has given their permission for their name and/or image to appear in the appropriate Journal
- has agreed that their email address can be made available.

The email address will be used by the Editor-in-Chief just prior to publication to contact the persons concerned to provide them with a copy of the intended publication, explain how the appropriate Journal will be distributed and formally seek their written permission for their image to appear in the format outlined.

Written permission should be sought from a parent and/or guardian where appropriate e.g. for persons under 16 years old.

SUBMISSION OF MATERIAL

All material should be sent electronically to the Editor-in-Chief.

Send your article attached to an e-mail in an electronic 'Word' format i.e. '.doc' or '.docx' format, not as Portable Document Format (PDF). This is so that that comments can be marked on it electronically by Peer Reviewers and/or so it can be edited as appropriate.

ACCEPTANCE OF PAPERS

Receipt

Confirmation that a submitted paper has been safely received will be given to the author within a week of receipt.

Confidentiality of manuscripts

Information about manuscripts, including whether they have been received and are under review, their content and status in the review process, criticism by reviewers and their ultimate fate will not be revealed to anyone other than the authors, reviewers and those on a 'need to know' basis who will be asked to maintain confidentiality e.g. editorial staff, sponsors, printers.

Non-acceptance

Manuscripts concerning topics that would not be of interest to readers will not be accepted and authors will be informed within a week of receipt. Such a decision may be made by the Editor-in-Chief, with advice from editorial staff where appropriate.

Peer Reviewers

Peer Reviewers have been selected by the Editor-in-Chief with advice from others as being informed and knowledgeable in their respective fields.

Peer Reviewers are required to respect confidentiality regarding the article, not disclose information about it to others and to destroy paper copies of manuscripts and delete electronic copies one month after submitting their review.

Potential reviewers should confirm that they do not have any conflicts of interest that could complicate their review or inappropriately bias their opinions and, if so, should exclude themselves from reviewing specific manuscripts.

The identity of Peer Reviewers is not disclosed to the author.

Reviewers must not use knowledge of the work they are reviewing before its publication to further their own interests.

The emphasis in the Journals is on disseminating best practice through good quality publications. Peer review therefore aims to provide constructive comment to assist authors, where appropriate, to develop their paper to a publishable standard.

The Editor-in-Chief will consider the comments and recommendations made by the Peer Reviewer, whether favourable or otherwise, but is ultimately responsible for the selection of all content.

Notification

The Editor-in Chief's aim is to reply and confirm the outcome within two weeks of receipt of the original manuscript but this might extend to four weeks in specific circumstances e.g. reviewer unavailable. Decisions are based on the relevance of a manuscript to the appropriate Journal and on the manuscript's originality, quality, and contribution to evidence about important topics in the field.

Authors will be informed if the manuscript has been:

- a) accepted (A). Minor editing changes may be required but these can be made by editorial staff
- b) accepted subject to amendment (ASTA). Minor modifications need to be made by the author but, once done, the article will not be subjected again to peer review
- c) not accepted subject to amendment (NASTA). A major/significant rewrite is required before further review and consideration for publication, including further peer review as appropriate
- d) Rejected (R). Not considered suitable for publication.

Details of any changes required, or reason for a decision, will be conveyed to the Corresponding Author. Articles should be amended and resubmitted to the Editor-in-Chief.

Accepted articles will be published on a 'first come, first served' basis subject space and flexibility to give a mix and balance of content. Authors will be advised of the likely publication date. The general aim will be to publish papers within one year but discussion will take place with the Corresponding Author to agree how to address a situation where this may not be possible.

Editing

Editing will be undertaken to make minor changes and ensure that publications comply with house style.

Sign off

Once the manuscript is available in proof form, generally about two months before the publication date, authors will be sent a copy for final confirmation of content or of any changes that need to be made.

Post sign-off editing

Authors will be given confirmation of the receipt of sign-off/amendments and clarification about changes to be made will be sought where necessary. Minor, amendments will be incorporated without recourse to the author but a PDF proof will be provided should there be a need for more substantial changes.

Any minor changes subsequently identified before publication will similarly be incorporated without recourse to the author.

Retention

Copies of manuscripts and associated correspondence will be retained electronically for a minimum period of 5 years.

APPEALS AND COMPLAINTS

Appeals regarding a decision or make a complaint should do so in writing with the reasons to the Editor-in-Chief. Receipt of the communication will be acknowledged within a week. Views will be sought from the Clinical Editorial Board and the outcome, including a decision, will be communicated within a period of one month from receipt.

CORRECTIONS

If a correction is needed, the following action will be taken:

- a correction notice will be published as soon as possible detailing changes from and citing the original publication
- a new article version will be included on the website with details of the changes from the original version and the date(s) on which the changes were made.
- all prior versions of the article will be archived
- previous electronic versions will be annotated prominently to indicate that there are more recent versions of the article available
- citations will be made to the most recent version.

Errors that are serious enough to invalidate a paper's results and conclusions may require retraction of the paper. It will remain available in the archive but will be annotated to explain the reason for the retraction.

MISCONDUCT

When misconduct is alleged, or concerns are otherwise raised about the conduct or integrity of submitted or published papers, the Editor-in-Chief will initiate appropriate procedures as outlined by the Committee on Publication Ethics (COPE).³ An expression of concern pending the outcomes of those procedures may be published.

ADVERTISING AND SPONSORSHIP

Association of British Pharmaceutical Industry (ABPI)

The Journals will carry advertising and sponsored articles that are compliant with the ABPI Code of Conduct,³ subject to confirmation of acceptability by the Editor-in-Chief.

Material that could be construed as 'hidden promotion' will not be accepted.

Advertising

These will be clearly identifiable as such.

Sponsorship

Sponsored articles will be clearly identifiable as such by means of a suitable heading and presentation in a format that is clearly distinctive from other material.

ADDITIONAL MATERIAL/WEBSITE/CORRESPONDENCE

All contributions are welcome, large or small, including letters and comments.

Authors of correspondence should declare any competing interests. The author of the original article will be given the opportunity to respond as appropriate.

Correspondence material will be subject to editing for length, grammatical correctness and house style.

Where considered appropriate, and at the Editor-in-Chief's discretion, correspondence might be published in the appropriate Journal or made available on the website.

HELP AND ADVICE

Potential authors who need any further assistance in writing a paper or who wish to confirm in advance if a topic would be of interest should consult the ICMJE guidance¹ and/or contact the Editor-in-Chief.

References

- 1) International Committee of Medical Journal Editors (ICMJE). Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals. December 2014:1-11. Available at: <http://www.icmje.org/icmje-recommendations.pdf> . [Accessed 010615]

- 2) Committee on Publication Ethics (COPE). Code of Conduct. October 2008. Available at: <http://publicationethics.org/files/2008%20Code%20of%20Conduct.pdf> . [Accessed: 010615]
- 3) Association of British Pharmaceutical Industry. Prescription Medicines Code of Practice Authority. Code of Practice for the Pharmaceutical Industry. 2015. Available at: http://www.abpi.org.uk/our-work/library/guidelines/Documents/code_of_practice_2015.pdf . [Accessed: 010615]