

## Journal of Health Services Research & Policy

Impact Factor: 2.7

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### Submission guidelines



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## Key information

**Access:** Subscription

**Accepts preprints?** Yes

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## Preparing your manuscript for submission

Your article must be within the scope of the journal and be of sufficient quality. If not, it will not be reviewed. Please read the journal's [Aims and Scope](#) to see if your article is appropriate.

The manuscript must be your original work, you must have the rights to the work, and you must have obtained and be able to supply all necessary permissions for the reproduction of any copyright works not owned by you, including figures, illustrations, tables, lengthy quotations, or other material previously published elsewhere.

Journal of Health Services Research & Policy publishes scientific research on health services, health systems and health care from a wide range of disciplines. The Journal also engages in, and responds to, current scientific, methodological and policy debates in health care that are relevant to many health systems. The Journal aims both to reflect current concerns and to contribute to setting health services, health systems and health care policy agendas internationally.

We welcome submissions reporting on research and/or policy analyses concerning low-, middle and high-income countries. In all cases, the international relevance of the submitted work should be clearly drawn out.

As we are a multidisciplinary journal with an international readership we specifically consider a number of criteria in deciding on publication:

- the importance and originality of the research/policy question;
- the appropriateness of the methods used and how well the research has been carried out;
- the strengths and weaknesses of work presented in the article, including the level of critical engagement with the existing evidence base and critical reflection on the findings and implications of the work;
- the extent to which the implications of the findings for policy or practice have been drawn out and have been justified;
- the writing, organisation and presentation of the work reported in the paper;
- the degree to which the paper would be understood by an international audience, which is not necessarily familiar with the health system in question.

### Article types

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We consider the following types of submissions:

### **Original research:**

Original research papers report on original primary research that uses quantitative and/or qualitative methods to examine a health care or health policy research

question or issue and their implications on health services, health systems or health care policies.

**Original research: quantitative work.** Observational studies (cohort, case-control, or cross-sectional designs) should be reported according to the STROBE statement. For reporting statistical methods and results we encourage authors to review the SMAPL guidelines when preparing the manuscript.

Papers reporting quantitative work should be up to 3500 words with up to 30 references, plus up to five figures, and/or tables and boxes.

**Original research: qualitative work.** Qualitative and/or mixed methods studies should be reported according to SRQR guidance, COREQ criteria, or other relevant guidance as appropriate.

Papers reporting qualitative or mixed methods work should be up to 6000 words with up to 30 references, plus up to two figures, and/or tables and boxes.

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### **Reviews:**

We consider systematic reviews of published research, which may include rapid evidence syntheses, scoping reviews, meta-ethnography, meta-narrative reviews and realist reviews.

Systematic reviews should be reported according to PRISMA guidelines or respective extension for scoping reviews. For realist reviews please follow the RAMESES publication standards. For reporting meta-ethnography please consider the eMERGe Reporting Guidance.

Reviews can be up to 6000 words with up to 50 references, up to five figures and/or tables and boxes, plus one online supplement only. Where review work exceeds the maximum number of 50 references, authors are encouraged to present additional material in an online supplement.

### **Conceptual/methodological articles:**

We welcome submissions that discuss theoretical, conceptual or methodological issues in the context of health services and systems research and health care policy. This may include papers that develop novel frameworks or concepts that help advance the analysis of (perennial) health services and systems research questions and health care policy issues, or that propose and/or test innovative methodological approaches

to examine research and/or policy questions that are of concern in the fields of health services and systems or health care policy research.

Conceptual or methodological articles can be up to 4000 words with up to 30 references, plus up to two figures, tables or boxes.

### **Essays:**

Essays include commentaries or theoretical pieces that discuss a particular health services or systems research, or health care policy issue that is (or should be) of concern across a wide range of countries and health systems. We welcome Essays that compare and contrast a given research or policy question or issue, trace their historical origins and development, and/or reflect on the wider application and use (or misuse) of a given issue or concept. Essays should always discuss implications for policy along with presenting evidence of policy impact to support the argument.

Essays can be up to 3000 words with up to 20 references, plus up to two figures, tables or boxes.

### **Abstracts:**

Original research and Review articles should include a structured abstract (objectives, methods, results, conclusions). Conceptual/methodological papers and Essays should include an unstructured abstract.

### **Word count:**

Word counts exclude text in the abstract, references, tables and figures. Please do not exceed the word limit.

**Editorials:** Please note that we do not consider unsolicited editorials.

**Protocols:** Please note that the Journal does not accept Protocols.

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The journal endorses the [ICMJE requirement](#) that clinical trials are registered in a [WHO-approved public trials registry](#) at or before the time of first participant enrollment. However, consistent with the [AllTrials campaign](#), retrospectively registered trials will be considered if the justification for late registration is acceptable. The trial registry name and URL, and registration number must be included at the end of the abstract.

Your manuscript **must** follow the relevant [EQUATOR Network reporting guidelines](#), depending on the type of study. The [EQUATOR wizard](#) can help identify the appropriate guideline. You will need to upload the appropriate checklist with your submission.

Other resources can be found at [NLM's Research Reporting Guidelines and Initiatives](#).

If your research involves animals, you will be asked to confirm that you have carefully read and adhered to the [ARRIVE guidelines](#).

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### Accepted file types

The preferred format for your manuscript is Word. You do not need to follow a template, but please ensure your heading levels are clear, and the sections clearly defined. Manuscripts must be submitted in English (spelling to be British English) and typed on A4 paper, in double-spacing with margins of not less than 20mm. Please use minimum font size of 12 points (6cpi).

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Your manuscript's title should be concise, descriptive, unambiguous, accurate, and reflect the precise contents of the manuscript. A descriptive title that includes the topic of the manuscript makes an article more findable in the major indexing services.

### Abstract

Original research and Review articles should include a structured abstract (Objectives, Methods, Results, Conclusions). Conceptual/methodological papers and Essays should include an unstructured abstract that concisely states the purpose of the research, major findings and conclusions.

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For clinical trials, the trial registry name and URL, and registration number must be included at the end of the abstract.

#### Keywords

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  - **All persons eligible for authorship must be included at the time of submission (please see the authorship section for more information).**

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- Funding statement
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- Data availability statement
- Any other identifying information related to the authors and/or their institutions, funders, approval committees, etc, that might compromise anonymity.

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If you are including an Acknowledgements section, this will be published at the end of your article. The Acknowledgments section should include all contributors who do not meet the criteria for authorship. Per [ICMJE recommendations](#), it is best practice to obtain consent from non-author contributors who you are acknowledging in your manuscript.

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#### Consent for publication

Submissions containing any data from an individual person (including individual details, images or videos) must include a statement confirming that informed consent for publication was provided by the participant(s) or a legally authorized representative. Non-essential identifying details should be omitted. Please do not submit the participant's actual written informed consent with your article, as this in itself breaches the patient's confidentiality. The Journal requests that you confirm to us, in writing, that you have obtained written informed consent to publish but the written consent itself should be held by the authors/investigators themselves, for example in a patient's hospital record. The confirmatory letter may be uploaded with your submission as a separate file in addition to the statement confirming that

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Identity transparency: Double-anonymized

Reviewer interacts with: Editor

Review information published: None

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Journal of Health Services Research & Policy adheres to a rigorous double-anonymized reviewing policy in which the identity of both the reviewer and author are concealed from both parties. Two independent reviews are required for a manuscript to reach a Revise or Accept decision.

The following manuscript types may not require two independent reviews to be accepted: Letters and Editorials.

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All manuscripts are reviewed as rapidly as possible, while maintaining rigor. Reviewers make comments to the author and recommendations to the Editor who then makes the final decision on all manuscripts, including those appearing in a special issue or special collection. Reviewers are asked to comment on the following issues in their reports:

Importance of the research/policy question

Originality of the research/policy question

Strengths and weaknesses either of the study design, data collection and data analysis (for research papers) or the policy analysis/commentary (for policy papers)

The writing, organisation and presentation of the data in the paper

The extent to which the implications of the findings have been drawn out and have been justified

The degree to which the paper would be understood by an international audience which is not necessarily familiar with the health system in question (not applicable for systematic reviews)

There is no 'scoring' system, and reviewers are not asked explicitly to give their opinion as to whether or not the paper should be published.

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