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Disseminating best practice through publication in journals

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Summary

This article, the second in a five-part series, explores the ways in which best practice might be presented successfully through articles published within journals. The article discusses the importance of preparatory research and 'thinking time', the need for an article plan and how to target journals and approach staff. Information and advice is provided on writing, redrafting and dealing with the peer review process. There is an emphasis on consultation and obtaining feedback on the potential article throughout the planning and writing process.

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THERE IS A PLETHORA of articles on writing for publication within journals, but many of these emphasise the method of writing rather than the message that the author wishes to share (Cooper 2009, Pierce 2009). However, the disseminator of best practice has to give thorough consideration to both the message to be imparted and the method of doing this.

An effective article that may even transform practice begins with clear ideas about the messages that the nurse wishes to convey. Having clarified these first, the author is better placed to prepare an article that speaks to the

readership clearly and which becomes a resource for nurses.

As a practice innovator, the nurse already has exciting ideas to share. It is therefore worth investing time in planning the article, getting the message as well as the method right.

This article addresses publication in healthcare journals, but many of the principles discussed here can also be applied to publication of textbooks. In each case it is good practice to work from the start with the editor to prepare a clear plan of action and to draw on the feedback provided by others. Nurses who share their best practice for the first time often do so through a journal article. Having developed confidence through this process they may then consider expanding their horizons, perhaps by contributing to a textbook. Box 1 highlights some of the challenges and achievements associated with preparing an article for publication.

Preparation

Authors frequently overlook this step of the writing process and then have to wrestle with the frustrations that follow. It is vital to spend some 'thinking time' contemplating the key messages and purpose of the article (Driscoll and Driscoll 2002, Keen 2007) (Box 2). Table 1 highlights some of the possible purposes and associated messages of a journal article, one or more of which might fit with a practice innovation.

It is easy for the nurse, enthused by a local project, to get carried away and to wish to exalt that work in the pages of a journal. However, staking a claim to innovation requires a great deal of preparation and careful consideration (Varkey *et al* 2008). In the article, the reader will need to be convinced why the innovation is so important and why it fits so well with the chosen context. If bold claims are made about practice, the author

should consider other areas to which the innovation might apply.

Novice innovators are prone to make a number of mistakes, to stake excessive and unsubstantiated claims, to underestimate what is already known or has been achieved before, or to assume that the reader can automatically extrapolate what he or she should do next on the basis of the article published. Claims to innovation might be based on research evidence, case studies from experience or practice audit (McSherry 2008, Lewandowski and Adamle 2009, Wardhani *et al* 2009). However, the nature and the limitations of the evidence need to be understood before new practice is recommended.

Practice innovation is often associated with new ideas or practices, but the nurse might demonstrate innovation in other ways too. Some innovations have been associated with explaining ideas differently, with helping others to access, describe and discuss that which was inaccessible before. For example, Gobet and Chassy (2008) provided a framework for the discussion of the components of a skill that can help nurses explore how they achieve particular outcomes.

BOX 1

Promoting best practice: an overview

The challenge

Working with a well-chosen journal to share practice insights, vision and developments in a way that represents learning and achievements accurately and clearly, and inspires other nurses to be innovative.

The achievement

The publication of one or more articles that inform, educate, inspire and even transform the ways in which nurses think about the design and delivery of care.

The insights

By completing this task the nurse will explore the process of writing in a clear and successful way, including what is involved in translating discoveries into a form that is readily accessible to others.

BOX 2

Reflection point

While preparing to begin the writing project, note how much time seems to be allocated to 'thinking time' – time associated with thinking about the purpose of the article, its messages, and the selection of a readership and finally a journal. This is an important investment, a period when the article is 'brewing'. If the nurse knows an established nurse author, he or she might ask the individual about how best to approach this process. In the present author's case, thinking time is achieved while taking walks, sometimes on train journeys and often with a small notebook to hand.

Other healthcare literature has an important tradition of consultation. Colleagues write about case studies, experiences or episodes of practice that help to explore the challenges, problems and opportunities associated with practice (Hezlett 2005, Barrowcliff 2008). In discussing a case study, the nurse is not confiding a doubt, but sharing a scholarly interest in enhancing practice. Such articles demonstrate the author's ability to enquire, examine and reason, as well as to provide insights that might inspire others and/or promote a correspondence that leads to new and shared innovations in the future.

Identifying the readership

Visualising the potential readership helps anticipate where innovative ideas might be published. Nurses should consider whether they want their work to be known and understood by nurses working in a specialist field (for example, special care baby units) or whether they want their work to be read by nurses working at a particular level of practice, such as advanced clinical work, research or management.

A potential author may wish to consider how big a readership he or she desires, especially if writing about a process that has widespread application, for example patient education. While journals do not necessarily state explicitly the make-up of their readership, with the exception of specialist practice titles, the nurse can gain a sense of this through the advertisements they carry. Advertisers, like authors, need to understand who subscribes to, or is likely to read, a particular journal.

The reputation of an author's innovation is not determined solely by the journal he or she is published by, but also through what he or she is able to demonstrate to a chosen readership. Scholarship takes different forms and requires different ways of writing (Smith 2005). No matter how important or unique the ideas, the author who does not understand the readership he or she writes for, and therefore fails to communicate his or her insights, will have only limited success. The most successful writers select a 'voice', one that enables them to communicate in a way that their chosen readership finds interesting, persuasive and accessible (Table 2).

Before choosing a journal, the nurse should consider who he or she wishes to communicate with and where these colleagues read about nursing practice. The nurse should try out ideas about an intended audience with colleagues (Cuthbert *et al* 2009). It is important to ascertain if the nurse's peers think that this readership might be interested in learning about the nurse's best practice. Several articles might emerge from

TABLE 1

Purpose and key message of journal articles

Purpose	Typical messages	Notes
<p>To stake a claim For example, nurses write about a new approach to mentoring students at the start of their clinical placement.</p>	<ul style="list-style-type: none"> ▶ This practice is new. ▶ This practice is managed differently here. ▶ This practice achieves something better. ▶ This practice provides these opportunities... ▶ This practice enables these savings to be made. 	<p>Staking a claim about what 'we do locally', what is unique and exemplary involves considerable fieldwork and some risk. How do readers know that this is new and innovative? Has the literature been thoroughly reviewed before claims are made and can claims be substantiated through what is then presented?</p>
<p>To educate For example, a nurse writes about how best to investigate the body image concerns of a patient with cancer.</p>	<ul style="list-style-type: none"> ▶ The concepts can be understood in this way. ▶ Here is how one might proceed. ▶ This is one way of approaching this practice. ▶ Has thought been given to these issues in this way (shifting perspective)? 	<p>In proposing to educate, an author is not necessarily claiming new practice, but may wish to suggest that he or she can illustrate, explain or aid the understanding of others. The article works to help colleagues understand a difficult or important subject.</p>
<p>To consult For example, nurses write about the challenges of making ethical decisions when a patient expresses a wish to end his or her life.</p>	<ul style="list-style-type: none"> ▶ The matters have been explored and the author has speculated about the following... ▶ This case study leads the author to think about... ▶ Practice in this area involves a number of challenges, which the author understands to be... ▶ These opportunities seem to be present now and the author has considered... 	<p>Much healthcare innovation is communal and accumulates over time. It is shared and enhanced through journals and other avenues such as conferences. Great innovators are not afraid to consult; indeed they are persuaded of the necessity of it given the complexity of care delivery.</p>
<p>To challenge others For example, a nurse explores what is really claimed when others state that they deliver spiritual care.</p>	<ul style="list-style-type: none"> ▶ What is the basis for these claims or accepted ways of doing things? ▶ Have opportunities been missed by failing to consider...? 	<p>Nursing practice can sometimes become trapped in a particular format. There are times when a constructive challenge can serve to transform the approach. However, if an author publishes such a challenge, is he or she ready to stand by his or her arguments?</p>
<p>To debate For example, the nurse examines different approaches to health promotion, drawing on points about health belief and behavioural change.</p>	<ul style="list-style-type: none"> ▶ These are the important options or key considerations. ▶ This practice involves this sort of challenge, these decisions. ▶ This is why practice can seem stressful, feel risky or require this expertise. 	<p>Nursing care might not work in 'black and white', or 'right or wrong' terms. Context is often important, so it is constructive to debate some of the decisions and challenges that nurses collectively face. It is important to represent the different perspectives or options equitably.</p>

an innovation and the nurse might write each with a different voice, one that suits the readership and purpose concerned.

Journal selection

The selection of a journal may be relatively straightforward, perhaps because only one or two such journals are published in the chosen field. However, the nurse should not assume that his

or her work is necessarily of interest only to other nurses; sometimes an innovation might appeal to different professions. It may therefore be appropriate to explore journals that deal more widely with the health services or with particular aspects of practice, for example ethics or management.

It is wise to select a journal that welcomes articles with a writing voice in which the nurse feels comfortable. The best way to judge this is

to read a selection of articles published by the journal. The nurse should set aside traditional ideas about which journals are most prestigious. It is important to remember that an author is writing for a readership and that any journal is a vehicle to speak to these people.

Key considerations in the selection of a journal should include:

- ▶ Its reach – the usual aim is to speak to a large number of nurses doing varied work.
- ▶ Its educational objectives – the excitement arises in helping others to develop.
- ▶ Its commitment to practice – the focus is more on care delivery than on philosophical matters.

Once a journal is selected, the nurse should read the instructions for authors carefully (published in the journal or on its website). These often state in what format work has to be submitted, what

TABLE 2

Writer 'voice' and journal readership

Writer voice	Typical features	Location
Scientific/scholarly	<p>Significant coverage of a highly focused subject matter with limited scope, for example measuring anxiety levels in people with newly diagnosed type 2 diabetes.</p> <p>High incidence of complex concepts and/or abbreviations that describe issues or processes with which the reader is expected to be engaged or familiar.</p> <p>The terminology is carefully crafted and used in precise, consistent terms.</p>	<p>This voice is most often linked to what are described as 'academic' journals. The author talks to 'erudite peers' and risks limiting access to a wider readership. Readership is often limited in size, but may be considered 'elite'.</p>
Professional/collegiate	<p>Typically a thematic or process coverage of subject matter, for example assessing anxiety in patients with diabetes. There is selective use of key concepts or frameworks to explain important ideas, but all are explained to ensure the widest access to readers.</p>	<p>Frequently associated with professional journals, those that attract a wide readership from different grades of practitioner. Concepts and ideas are explained at some length, with an emphasis placed upon clarity and accessibility, as well as consistency. The author talks to colleagues with a practical interest in the subject matter and a readiness to enquire or debate further.</p>
Educational/facilitative	<p>Several possible foci, for example explanation of concepts, process exploration or examination of techniques, but the approach is always facilitative. As with professional/collegiate writing, concepts are explained carefully and consistently used, but there is also an emphasis on 'how to' and 'how this seems or feels'. The author anticipates what learning involves and tries to encourage this at a distance. For example, an article on effective listening during a counselling interview might consider the process of managing an interview as well as the emotional challenges when an interviewee shares intimate information.</p>	<p>Associated with professional journals, but significant opportunities are associated with online journals or those that offer a continuing professional update feature through a website.</p>
Polemical (making an argument about what should or might be)	<p>Incisive and penetrating critique characterises this writing. The author deconstructs what has been assumed or argued in the past and then questions each of the arguments made one by one. The tone remains measured and deliberate, the writing analytical rather than emotive, appealing to reason.</p>	<p>May appear in a wide variety of journals, often at a point where it is judged that complacency has settled in within professional discourse.</p>

the referee and critical review process is and, sometimes, the anticipated length of time between acceptance of an article and publication. If the nurse has an innovation that needs prompt reporting and discussion, it may be that an editor will prioritise the work, but this happens only when the work is well presented, authoritative and judged worthy of early publication by reviewers. Copyright and publishing rights agreements mean that the nurse must approach only one journal at a time and should not make the mistake of planning to submit work to several journals simultaneously.

The article plan

Experienced writers work with a plan, setting out the key headings that they will use, writing a draft summary of the article and any key words that they think accurately describe its content (Oermann 2001) (Box 3). Venturing straight into an article, writing down what seems important and seeing what this adds up to with regard to length, is a recipe for failure. Not only will the nurse need to revise his or her work so that it falls within set word limits, but he or she may also have to adjust sections of the work to help build a clear case.

Among the things the nurse might usefully set out within a plan are:

- ▶ The key sections of the article, the word allocation for each and any references from the literature.
- ▶ The key points to be covered in each section.
- ▶ Points about the introduction (what will draw the reader into the article?).
- ▶ Points about the conclusion (these sum up what has been written, but should also indicate the author's final position).
- ▶ Any tables, figures or diagrams to be added and in which sections.
- ▶ Any educational features to be added to an article, for example implications for practice or aims and intended learning outcomes.
- ▶ Any further resources for the reader (frequently arranged as a box at the end of the article).

It is helpful to rehearse the article plan with colleagues. The nurse should try reading the content of the plan aloud and asking colleagues whether it is a clear and interesting account of the chosen subject. It is important to note where any conceptual leaps occur or passages where connecting information is needed to clarify the account. The nurse should look at that which seems unnecessary to colleagues, but should also remember that the readership might be wider,

BOX 3

Reflection point

To help plan an article that fits a particular journal, study previously published articles. The titles are likely to result from editorial adjustments and can suggest how editors see articles attracting the interest of readers. How many references are there? Note whether tables, figures or other sorts of illustrations are included. If an author uses material from other sources, permission to do so and an agreed form of acknowledgement should, ideally, be included at the time of submission. Editors often, but not always, welcome subheadings within the article that help guide the reader through the work. The instructions to authors may clarify this. Such suggestions may be rejected or changed by the editor later, but at time of submission may help the editor judge the quality of the article and the flow of the material.

and the information needs greater, than that represented by the review group.

Once the plan is formed, the nurse should be able to summarise his or her ideas in one or two paragraphs and send these to the journal editor to enquire whether the article might be of interest. Journal author instructions should be used to check whether this approach should be by letter, email or telephone. The response received will depend on the volume of enquiries that the journal processes and the quality of the idea.

Editors cannot always afford the time to coach authors and neither can they comment on plans. Some might indicate an interest in the idea, stating that the journal publishes such pieces and that there is scope for such a work, although acceptance is usually subject to the process of peer review. Other editors might simply refer authors to their journal's 'instructions for authors', which characterise the subject areas in which they publish.

What the potential author needs to accept at this point is that he or she is speculating. The investment made in the article might or might not pay off, but preparation certainly reduces the chances that the article will be rejected.

Claiming innovation

Before starting work on the first draft of the article, it is important to be sure that what the nurse writes about describes his or her innovation, and not someone else's. There are a number of traps to avoid here, most of which are fallen into unwittingly, but all of which could lead to embarrassment. Any innovation that the nurse writes about needs to recognise the contributions made by relevant stakeholders, to acknowledge any frameworks or theories that have underpinned or shaped the work, and any research tools or preliminary studies that have made the work possible.

The nurse needs to avoid plagiarising the work of other authors, using their words and

presenting them in the article as though they were the nurse's own. It is vital to check carefully that what is written using the words of someone else is presented either as a direct quote (using appropriate quotation marks and attributing source) or as a paraphrase of what others have already explained or claimed.

A paraphrase is where the nurse summarises the points of another author, and acknowledges the source without using the exact words of that author. Acknowledgement of such sources is especially important when it comes to using figures, tables and flow charts. If those presented by the nurse have been adjusted from an original prepared by other authors, or the nurse uses their concepts and terms, then it is important to acknowledge this.

Where an original figure or table is used intact and without adjustment, permission to replicate that work needs to be sought from the copyright holder and the source should be acknowledged in the text of the new article (typically the journal where the work was previously published, although sometimes it is the author).

Beyond plagiarism, the nurse should consider whether the work adequately recognises the work put into the innovation by others, and whether it shows how the work was sponsored and supported. This is not to suggest that the nurse clutters the article with a long list of acknowledgements, but that it is important to summarise briefly the conception of the project and how it was supported, with ideas, expertise and finances. Readers have a better understanding of the importance of the innovation when they know its context and origins. The magnitude of innovation is often best judged when it is understood what effort went into the work and from whom.

Writing the article

Writing seems a personal act, but there are a number of important, impersonal points that will stand the potential author in good stead. Articles are crafted, not inspired. The relief that the author feels as he or she 'gets the work down on paper' is not an indicator that he or she has yet written an article that will make sense to the reader (Henson 2004). However gratifying it feels to finish the article, it is always necessary to go back over the work several times to make sure that it is grammatically correct and that it presents ideas clearly and well.

It is important to look in particular at how key concepts or ideas are used and whether these are explained and used consistently. Most articles will have gone through some degree of redrafting before submission. Reading the draft article the next morning or a few days later, when fresh, is a good way to see whether it still seems as successful as when the last sentence was written.

The nurse should keep reminding him or herself of the intended readership and the voice. One way of testing the voice in use is to read a draft of the work to colleagues, and ask them to write down what sort of speaker this brings to mind, for example a teacher, a debater or a reporter of research. Only when everyone has written down a response should the nurse ask reviewers to reveal their impressions. The nurse should not be discouraged if there are discrepancies, as some readers are more practised than others. However, there should be a semblance of correctness here – for example, if the author thought he or she was educating and the reviewers characterised the reading as polemical, a further review is required.

Nurses should write when their ideas are fresh and when full concentration is possible. If the article has been well thought through during the planning stage a first draft might appear after one sitting. This can be a useful strategy, because it can be easier to lose the thread of the ideas when writing an article over several sessions.

The one-sitting first draft is best achieved if the nurse has protected time to write, has all the references and other resources to hand and can refer to the plan. Writing 3,000-5,000 words usually takes several hours or longer and should be done when the nurse is feeling most alert. Writing articles, especially about a complex subject, is better not attempted when tired.

Using feedback

On submitting the article to a journal, there is a chance that, after peer review, a number of adjustments may be suggested. The reviewers may have detailed what they think would clarify or improve the work. In some instances, there may even be a suggestion for ways to set the work out.

The natural reaction at this point is disappointment, perhaps followed by frustration. The nurse should take a deep breath and recall that, to prepare this much feedback as part of a busy schedule, means that one or more reviewers think that the article has some merit. The reviewers are offering another chance to make the article both interesting and publishable. This is the

moment where professionalism should come to the fore. It may be helpful to set aside some time when fresh to consider the requests, requirements or suggestions offered by the reviewers.

An analogy may be useful here: the article is akin to the attire that a person wears at an important social event. The reviewers have joined the author in the fitting room to help 'get the look just right'. The article has to enhance the nurse's image (what he or she has to share or argue) and the adjustments required are usually about detail (how it is presented, rather than what should be worn). Had the work seemed incoherently expressed, irrelevant or unimportant to the editor, it would probably have been rejected.

The nurse should redraft the elements of the work, as indicated, and re-submit the article with a summary of the adjustments made. It is important to be courteous, thanking reviewers for points shared, noting what has been done in response and explaining the rationale for any points that were not accepted or addressed.

At this stage, the editor recognises that there is a dialogue underway and will try to determine whether the suggestions of the peer reviewers have been addressed diligently, adequately and honestly before deciding whether or not to accept the redrafted work. If accepted, any final adjustments then can be dealt with as part of the examination of proof pages.

Conclusion

Nurse innovators should consider publishing their work. Preparing to publish involves considering the purpose of the article, the messages to be shared within it and whether its claims are defensible. Writing an article before the background work has been completed is often misguided, reflecting a search for publicity rather than a scholarly and professional sharing of insights gained.

Where the preparatory work has been carried out, there remains significant scope for nurses to influence care, to debate further and to educate through the pages of one or more journals. As the preparatory thinking time is left behind, the craft of writing takes over and the plan of how information will be shared comes to fruition **NS**

USEFUL RESOURCES

Gater L (2005) *Writing for Professional Medical Publications*. Booklocker.com

While the title of this book refers to professional medical publications, the principles described within this text are useful across the healthcare professions.

Rogers SM (2007) *Mastering Scientific and Medical Writing: A Self-Help Guide*. Springer, New York NY.

Few textbooks get down to the nuts and bolts of crafting work for publication to the extent that this one does. It addresses a number of publishing myths and provides practical advice on achieving the right tone, or style of writing required of publications.

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