

British Journal of Occupational Therapy: Author's Guide

Guidelines for Authors

Introduction

The *British Journal of Occupational Therapy* (BJOT) is the official journal of the College of Occupational Therapists. Its purpose is to publish contributions of papers relevant to theory, practice, research, education and management in occupational therapy.

- *Vision:* A monthly journal presenting high quality international research and practice related papers that informs the knowledge and evidence base of occupational therapy and is easily accessible through online searches.

Online submission of articles

From March 2008, the submission of articles is online, through Manuscript Central, available at: <http://mc.manuscriptcentral.com/bjot>

Categories of submission

Please note that the *word counts* given for the different categories apply to the main text only; the abstract, references, tables, figures and appendices are not included. *Abstracts* are obligatory; their maximum word counts are shown.

1. Research

Research papers are particularly welcomed and will be given publishing priority. Quantitative, qualitative and mixed method studies are all eligible for submission.

Manuscripts may be submitted as 5,000-word full papers or 2,000-word short papers.

Shorter papers are actively encouraged for studies that report small-scale projects, pilot studies or preliminary findings. We encourage authors to contact the editor if they are unsure of whether to submit a short or a full paper.

Manuscript format

The format of the manuscript will vary depending on the focus and methodology but, where appropriate, must include the following:

Abstract, 200 words (100 words for short papers):

A succinct summary of the purpose, procedures, findings and conclusions of the study, stating the relevance of the work to occupational therapy.

Introduction: A brief rationale for the study and an outline of the primary aims, hypotheses or questions.

Literature review: A critical appraisal of current relevant literature. The review should identify limitations in knowledge and provide a rationale for the study.

Methods: Methods of data collection and analysis must be fully and sufficiently described to allow replication of the study, with coherence between methodology, data collection and analysis. Issues concerning validity, reliability, trustworthiness, credibility and ethics must be addressed.

Results/findings: The results must be presented in a way that is accessible to readers and clearly linked to the aim(s) of the research and methods employed.

Discussion: The implications of the study for occupational therapy must be outlined and the contribution of the study to the current state of knowledge stated. Methodological limitations must be addressed and the implications for practice and further areas of work outlined.

Conclusions: A clear summary of the main points of the paper.

Key messages: Authors are required to submit the following:

- (i) Key findings – a summary statement of two or three key findings. These should not be more than 30 words in total (that is, 10-15 words each).
- (ii) What the study has added – a statement of how the study has contributed to the relevant field. This should not be more than 30 words in total.

This information will be printed in highlighted boxes within the article to assist its readability.

2. Critical Reviews

Critical reviews will address clinical, conceptual, theoretical, methodological or ethical issues relevant to occupational therapy. They will:

- (a) Describe and summarise the literature within a particular area
- (b) Synthesise and evaluate this literature, based on a critical appraisal of the quality of the work described
- (c) Distil the most important elements for the benefit of readers and make recommendations about areas in which further evidence is required.

Manuscript format

Abstract (200 words): A succinct summary of the background, source of review data, how papers were selected and evaluated, the main findings and implications for practice.

Introduction: An explanation of the area or topic and the rationale for conducting the review. It should also make a clear case for the relevance and significance of the review for occupational therapy.

Methods: An explanation of the approach taken to searching the literature, the search parameters and key terms used, the inclusion and exclusion criteria used to identify key papers, the criteria used to judge the papers and how key information was extracted from each paper.

Findings: Presentation of the main evidence and a summary of its quality.

Discussion: This should outline the implications of the review for occupational therapy, highlight the methodological limitations of the review, identify any gaps in the literature and make recommendations for further work.

Conclusion: A clear summary of the main points of the paper.

Key messages: Authors are required to submit the following:

- (i) Key findings – a summary statement of two or three key findings. These should not be more than 30 words in total (that is, 10-15 words each).
- (ii) What the study has added – a statement of how the study has contributed to the relevant field. This should not be more than 30 words in total.

The maximum word count for a critical review will be 5,000 words.

3. Practice Analysis

The aim of a practice analysis is to present a brief critical analysis of an instance of occupational therapy practice. This might include the consideration of work with a client, patient, family or group; it might focus on a particular assessment, treatment method, educational approach; or it might report a novel practice venue.

Manuscript format

Abstract (100 words): A succinct summary of the context, critical reflection on the instance of practice and implications for practice.

Statement of context: An outline of the context of the practice

Critical reflection on practice: This will describe what took place and will include a critical reflection on either (i) how the practice was informed by relevant policy, occupational therapy theory and/or occupational therapy research, or (ii) how the practice contributes to our understanding of relevant policy and occupational therapy.

Summary: The piece will end with a short summary, which highlights issues for future consideration.

Key messages: Authors are required to submit a summary statement of two or three key messages. These should not be more than 30 words in total (that is, 10-15 words each).

Where relevant, authors submitting a practice analysis will be required to provide signed consent for publication from the participants using the *BJOT* consent form (available on Manuscript Central).

Collaborative work with clients, patients or other professionals is welcome.

The maximum word count for a practice analysis will be 2,000 words.

4. Case Reports

Case reports will discuss an interesting case (one to three clients or patients or a single family) that raises a problem or challenge and has implications for occupational therapy. They may also report novel approaches or adverse events, or illuminate the wider side of clinical practice.

Manuscript format

Abstract (100 words): A succinct summary of the case report and implications for practice.

Text: Should include:

- A brief history and context
- An explanation of what happened (the therapy process and outcome)
- Engagement in problem solving, reasoning and reflection.

Summary: A short summary highlighting the relevance to evidence-based practice.

Key messages: Authors are required to submit a summary statement of two or three key messages. These should not be more than 30 words in total (that is, 10-15 words each).

Signed consent for publication from the participants in the case report will be required, using the *BJOT* consent form.

Collaborative work with service users is welcome.

The maximum word count for a case report will be 2,000 words.

5. Personal Journeys

These should describe how it feels to face a specific situation related to the role of being a client, patient, therapist or student. It must involve or be of interest and relevance to occupational therapists.

Manuscript format

Abstract (100 words): A succinct summary of the personal journey and the implications for practice.

Text: Should include:

- A brief outline of the personal situation and context
- Using the idea of a journey, a description of what happened over time, focusing on, for instance, an aspect of care, therapy or education. It will address issues such as the impact on day-to-day life, relationships, families and quality of life; coping strategies; and practical information and advice.

Summary: A short summary highlighting the relevance to evidence-based practice.

Any person mentioned who is not an author must give signed consent for publication. Co-authors are accepted, but the first author must be the person giving the account.

The maximum word count for a personal journey will be 1,500 words.

6. Opinion Pieces

These provide authors with the opportunity to express an opinion concerning any aspect of occupational therapy. These submissions are designed to encourage topical

debate and an exchange of ideas. Contributors may discuss specific aspects of occupational therapy or debate the impact on the profession of the current political or financial climate. Irrespective of the topic discussed, opinions should be supported by evidence or theory.

Opinion pieces should:

- Include an abstract (100 words)
- Be structured and incorporate headings
- Include a list of references, following the guidelines for references below.

The maximum word count for an opinion piece will be 1,500 words.

7. Editorials

These raise issues of importance to the profession. Editorials should not exceed 500 words. Editorials including more than three references must be shorter to fit the journal page.

8. Letters to the editor

These offer comment on previous articles in the journal or on any relevant topic. The editor reserves the right to shorten letters.

Letters should not exceed 500 words. They should be submitted by email to the editor.

9. Executive summaries

This category is designed to provide an effective mechanism for communicating official College of Occupational Therapists' (COT's) reports to the membership and readership in a concise and timely manner; therefore, it will not be a category of submission open to authors other than those working on COT reports.

Executive summaries will be used to provide a précis or summary of substantial COT documents, such as strategic or policy documents or commissioned research. The purpose of the summary is to communicate key aspects of the document to readers, the full version of which will be available via COT, the COT website or both.

The executive summary should contain:

- An introduction explaining the rationale for the document, including reference to how the activity reported relates to the business plan or strategic development of COT
- The main body of text containing a few paragraphs, each with subheadings
- A conclusion paragraph.

If the summary is of commissioned research, it must contain a brief outline of the methodology. In this case, the body of the text should present the key findings and the conclusion should include recommendations for the COT and the profession.

If the summary is of a document other than commissioned research, it must contain the key messages and conclude with recommendations for the COT and the profession.

Executive summaries will be reviewed by an appropriate senior officer of COT, such as a Head of department.

The executive summary should not exceed 1,500 words.

Multiple-part articles

Authors are discouraged from submitting multiple-part articles.

Ethics and consent

Ethics for research

Research articles must state how ethical and/or research governance approval was obtained and state the reference number, where appropriate. Authors must confirm that anonymity and confidentiality are assured and that ethics approval has been gained where appropriate.

Consent*

Consent for publication of personal information (case reports, personal journeys): The publication of any personal information about an identifiable living patient requires the signed consent of the person (this is a requirement under the UK's Data Protection legislation). Authors should use the BJOT consent form.

Information or illustrations that may identify a person, service or organisation must state that consent has been obtained giving permission for the material to be published. The consent form must be signed and dated by the author(s), the patient(s) and a witness, with their names printed underneath. The original consent form should be sent to the editor at the same time as the manuscript is submitted. The manuscript will not be sent for review unless the consent form is received.

Publication without the consent of the person (or family) will be permitted only if all of the following conditions are met:

- (a) The person is dead and his or her family is untraceable to seek consent from
- (b) The article contains a worthwhile clinical lesson or public health point which could not be made as effectively in any other way. ('Worthwhile' is intended to sit on a spectrum between 'interesting', which is the publication threshold with an individual's consent, and 'overriding public health importance', which is the publication threshold over refusal of consent.)
- (c) A reasonable person in the position of the person's relatives would not be expected to object to the publication of the case. (This requires an assessment of the intrusiveness of the disclosure and the potential that it has for causing the patient's family embarrassment or distress. Particular attention must be paid here to differences of cultural and social attitudes. It must not be assumed that what is a matter of indifference in one society will have the same status in another.)

*The sections on Consent and Conflict of Interests are adapted and reprinted by kind permission of the *British Medical Journal* from:

- http://resources.bmj.com/bmj/authors/editorial-policies/copy_of_patient-confidentiality
- <http://resources.bmj.com/bmj/authors/checklists-forms/competing-interests>

- (d) The risk of identification of the patient is minimised by measures designed to prevent the identity of the patient being revealed either to others or to the patient's relatives. (These measures will include anonymisation of the case and/or the author. The publication of photographs without consent will require particular scrupulous attention to anonymisation.)

Conflict of interests*

All authors will be required to submit, via Manuscript Central, a statement disclosing conflicts of interest before publication can proceed.

A conflict of interest exists when professional judgement concerning a primary interest (such as a person's welfare or the validity of research) may be influenced by a secondary interest (such as financial gain or personal rivalry).

It may arise for the authors when they have a financial interest that may influence – probably without their knowing – their interpretation of their results or those of others.

We believe that to make the best decision on how to deal with a paper, we should know about any such conflicts of interest that authors may have. We are not aiming to eradicate conflicts of interests – they are almost inevitable and we will not reject papers simply because you have declared a conflict of interest, but we will make a declaration, within the published manuscript, on whether or not you have a conflict of interests to enable the reader to interpret the work with this in mind.

To ascertain whether or not you have a conflict of interest which must be declared, please answer the following questions (all authors must answer):

1. Have you in the past 5 years accepted the following from an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial, or letter:
 - Reimbursement for attending a symposium?
 - A fee for speaking?
 - A fee for organising education?
 - Funds for research?
 - Funds for a member of staff?
 - Fees for consulting?
2. Have you in the past 5 years been employed by an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial, or letter?
3. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial or letter?
4. Have you acted as an expert witness on the subject of your study, review, editorial or letter?
5. Do you have any other competing financial interests?
If so, please specify.

If you have answered 'yes' to any of the above five questions, we consider that you may have a conflict of interest, which, in the spirit of openness, should be declared when you submit your paper.

If you declare a conflict of interest, you will be required to submit a statement to publish with the article. It might, for example, read:

Conflict of interests: AB's NHS Trust paid a consultancy fee to CD's university in payment for services and CD has been reimbursed for attendance at a conference to present the results of this study.

If you did not answer 'yes' to any of the five questions above, we will publish '*Conflict of interests:* None declared.'

Submission and review

All manuscripts must be typed double spaced. It is essential that all pages are numbered consecutively. An anonymised copy of the manuscript should be submitted to enable the double-blind peer review process to take place. Manuscript Central will guide you through the submission procedure.

Text

Abbreviations

Abbreviations should first be written in full, followed by the abbreviation in parentheses. Following this, the abbreviation can be used within the text. Avoid using abbreviations in the title and abstract. 'Occupational therapy' and 'occupational therapist' should always be written in full and never abbreviated to 'OT'.

Measurements

All measurements must be given in metric units. Whole numbers less than 10, which do not refer to a measurement unit, should usually be written in full. Numbers of 10 or above should be written as digits except at the beginning of a sentence.

Acknowledgements

The contributions of persons, institutions and agencies, particularly those that provided funding, must be acknowledged. It is the author's responsibility to ensure that each individual is willing to be acknowledged.

Tables and figures

Tables and figures should be used when necessary to supplement and clarify the text. Indicate clearly in the main body of the text where each table and figure should be placed.

In tables, vertical lines should not be used to separate columns. Each table must be numbered consecutively in Arabic numerals (e.g. Table 3).

Figures can be either line drawings, graphs or photographs and must include captions. All figures should be numbered consecutively in Arabic numerals (e.g. Fig. 5).

Photographs should usually be black and white and of high quality, showing as much contrast as possible.

Written permission to publish must be obtained from any person recognisable in the photographs (see guidance on consent).

Authors must obtain and submit copyright permission from the publishers to reproduce or adapt any tables or figures that originally appeared in another publication.

References

Only published items, apart from theses, may be cited as references. A manuscript that has been accepted but not yet published may be cited if the journal or the book publisher is named. Such references should state 'in press'. The references should be set out in the following style.

References in the text

- Reference citations in the text must give the surname followed by year e.g. (Melton 2007).
- Works by different authors cited within the same parentheses must be listed chronologically and separated from the previous reference by a comma e.g. (White 2000, Butler 2002).
- If there are two authors then both should be named in the text e.g. (Ballinger and Clemson 2006).
- If there are three or more authors, only the first author should be cited followed by 'et al' e.g. (Payne et al 2005).
- If an author is cited in the text but not in parentheses the surname is followed by the date in parentheses e.g. Cage (2007).
- A direct quotation must be either enclosed within quotation marks when in the body of the text or indented and on a new line. The author's surname, year of publication and page number must be listed. It may be necessary to obtain permission from the publisher for quotes exceeding 100 words from any one work.

Reference list

All references must be listed alphabetically. There are different styles depending on the type of publication. Authors should select the most recent and relevant articles.

Journals

Sumsion T, Lencucha R (2007) Balancing challenges and facilitating factors when implementing client-centred collaboration in a mental health setting. *British Journal of Occupational Therapy*, 70(12), 513-20.

Books

Wilcock AA (2002) *Occupation for health, volume 2: a journey from prescription to self health*. London: College of Occupational Therapists.

Chapter in a book

Lougher L (2002) Child and adolescent mental health services. In: J Creek, ed. *Occupational therapy and mental health*. Edinburgh: Churchill Livingstone, 393-413.

World Wide Web

Department of Health (2001) National Service Framework for Older People. Available at: <http://www.doh.gov.uk/nsf/olderpeople.htm> Accessed on 15.01.02.

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An author must not plagiarise the work of others. The exact words of another author must be enclosed in quotation marks. The original author's surname, year of publication and page number must be included in the text. Authors may paraphrase another's work, but must credit the source in the text by including the original author's surname and the year of publication.

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The review process

Receipt of the manuscript will be acknowledged. Two reviewers will be selected by the editor to evaluate a manuscript's quality and suitability for publication. Should these reviewers disagree, a third reviewer will arbitrate on its suitability for publication.

Some revision of manuscripts is almost always required following comments from reviewers. Requesting revisions to a manuscript does not automatically mean that it will be accepted for publication. Revised manuscripts are sent to the same reviewers for comment, if required.

Prior to publication, the author will receive a proof of the manuscript for verification and minor corrections.

Once the manuscript is published, the corresponding author will receive a pdf of the final version.

Contact information

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