



Publication

The journal is published four times a year and is fully online and openly accessible within three months of publication. All papers should be submitted via the MIDIRS/EBM submission form online <https://www.midirs.org/our-services/contribute/>

It is the **responsibility of the lead author** to acknowledge that there is no plagiarism in the paper and the paper has not been published elsewhere.

Acceptance

Your submission is only formally accepted at the end of the review period. It is under review during that time. If successful you will receive a formal email of acceptance and it is from this date that the Open Access requirements must be actioned and met.

Open Access (OA)

The EBM journal is Sherpa REF compliant. It is the responsibility of the lead author to satisfy the following requirements:

1. Discovery requirement

Put bibliographic details of your article in an institution repository within three months of acceptance, making these open to view.

2: Deposit requirement

Deposit the full text of the **Published Version** of your article in a **Subject Repository** within three months of acceptance, with restricted access.

3: Open Access requirement

Make it open access: this journal has a **three-month embargo** period when you comply in this way. You must make the full text of your article open access in a **Subject Repository** immediately after this embargo period ends

The journal permits you to archive your final paper in your institutional repository as soon as it has been accepted for publication. Three months after publication your paper is fully open access and downloadable from any electronic device anywhere in the world. Research papers from EBM were included in the REF2014 and are acceptable for inclusion in REF2021.

The Doctoral Midwifery Research Society

EBM is the official journal for papers presented at the annual meeting of the Doctoral Midwifery Research Society and these papers are subject to fast tracking.

Referees and review process

All suitable papers submitted to *Evidence Based Midwifery* are subject to double-blind, peer review to assess their academic rigour, quality and relevance to the overall aim of the journal. Referees with relevant expertise in the subject area and or methodology will be asked to provide a structured critical review of papers and reviews will be forwarded to the authors along with comments from

the editor. Where necessary, papers will also be sent to members of the Advisory Panel for expert opinion on matters to do with statistical accuracy, professional relevance or legal ramifications.

All authors will have an acknowledgement of receipt of their paper and the review process should be complete within 12 weeks. Major changes will be agreed with the authors, but the editors reserve the right to make modifications in accordance with in-house style and demands for space and layout.

All papers are sent to the first named author for essential corrections before publication and should be returned promptly. Corrections at this proofreading stage should be kept to a minimum and references and quotations should be checked carefully. Proofs will be sent to all authors for final proofing as Word documents prior to publication and the accuracy of the content is the responsibility of the corresponding (Lead) author. Figures and tables that have to be redrawn in-house may not be included with proofs. Supplementary material can be made accessible online. The editors will decide on the time of publication.

Revision process

- If you are asked to revise your paper, please do so with care and attention to detail.
- Submit a 'Response to peer review' table with your revised paper and insert two columns: First column 'Request for revision' - in this column put in the request for revision/clarity/word reduction etc. Second column 'Response' – in this column insert the line and page numbers where the changes have been made. If you have not made any changes to the text and are submitting a justification for not revising the original text please state the rationale for non-revision. You must then highlight the changes in the document that you have made or the content of the text that you have justified its original format. Make the changes, accept them and then highlight them. **Do not use track changes.** The referees will then be able to easily locate the changes/justification you have made in response to their feedback.

Authorship (updated from: International Committee of Medical Journal Editors (2019)

<http://www.icmje.org/icmje-recommendations.pdf> accessed 01/10/2020.

EBM recommends and endorses the guidance set out by the ICMJE (2019) for authorship based on the following four criteria:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. 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 persons designated as authors should qualify for authorship, and all those who qualify should be listed. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article.

Authorship credit should be based only on:

- 1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data
- 2) drafting the article or revising it critically for important intellectual content
- 3) final approval of the version to be published.

Conditions 1, 2, and 3 must **all** be met.

Acquisition of funding, the collection of data, or general supervision of the research group, by themselves, do not justify authorship.

All others who contributed to the work who are not authors should be named in the acknowledgments, and what they did should be described. Increasingly, authorship of multi-centre trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship. Group members who do not meet these criteria should be listed, with their permission, in the acknowledgments or in an appendix. The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed. In addition to 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.

All contributors who do not meet the criteria for authorship, such as a person who provided purely technical help, writing assistance, or a department chair who provided only general support, should be listed. Financial and material support should also be acknowledged. Groups of persons who have contributed materially to the paper, but whose contributions do not justify authorship may be listed under a heading such as 'clinical investigators' or 'participating investigators', and their function or contribution should be described – for example, 'served as scientific advisors', 'critically reviewed the study proposal', 'collected data', or 'provided and cared for study patients'.

Because readers may infer their endorsement of the data and conclusions, **all persons must have given written permission to be acknowledged.**