

Top ten reasons papers are rejected during initial screening and some tips to avoid early rejection

At the *Journal of Clinical Nursing*, we have a broad mission, that is to advance all spheres of nursing through the generation and dissemination of knowledge encompassing the full range of nursing practice and scholarship. We welcome papers from the full range of methodologies, and seek to encourage critical perspectives that shape the art and science of nursing practice. We adopt a broad and inclusive view of clinical nursing and believe that many different sources of knowledge are needed to inform nursing knowledge and practice.

The editorial office receives literally thousands of submissions every year. We seek to make a quick decision on all manuscripts, but particularly where we feel a manuscript will not make it through our processes and so all submissions to the journal undergo an initial screening process and it is at this point that many papers are rejected. Sometimes, manuscripts are rejected later in the process on the recommendation of the anonymous reviewers, but in this editorial, we are focusing particularly on the top reasons papers are rejected during initial screening. We have grouped these under three headings: Substance, Science and Style.

1 | SUBSTANCE

1. *No clear relevance to nursing is provided.* Every paper we publish in the journal has to be directly relevant to nursing and we provide a prompt for this by asking for specific statements to show how the paper is relevant to nursing. A manuscript that cannot clearly demonstrate relevance to nursing practice will not be considered for publication in the journal.
2. *The manuscript does not show international relevance.* The *Journal of Clinical Nursing* is an international journal and so our preference is to publish material that will advance the discipline globally—that is, information that is relevant to nurses everywhere. Too many authors focus on their own country and do not include wider, international literature. We encourage authors to begin their article by setting out the global context, supported by international literature and to conclude their article with some consideration its broad applicability.

2 | SCIENCE

3. *The study is poorly reported:* It is a requirement that reporting guidelines (e.g. EQUATOR) are followed and the relevant form

needs to be uploaded on submission. However, there are two mistakes that authors make. They chose the incorrect guideline that does not match to their methods and/or they do not complete the form. In some instances, checklists are uploaded but not even completed.

4. *The manuscript adds nothing new.* Too many manuscripts merely repeat what is already known about a subject. To advance nursing knowledge, we encourage manuscripts that make a meaningful contribution. It needs to be clear to the reader including the reviewer, what the contribution of the paper is and how it “fits” with what is already known about the topic.
5. *There are concerns about integrity.* There are a few issues that arise here. One very common issue is where a submitted manuscript presents material that is previously published. This may involve a manuscript having an unacceptable level of similarity to material that is previously published, or it may involve multiple outputs from a single data set, where what is presented in the manuscript does not justify a stand-alone paper. We have a statement on how to prepare multiple outputs from single studies, and discuss “acceptable” division of findings and differentiate this from “salami” slicing (Jackson, Walter, Daly, & Cleary, 2014) and advise authors to read this if unsure about our position on this issue.
6. *Literature reviews are poorly described.* Many reviews are of poor quality and very low on synthesis and as a result are rejected immediately. Many authors appear confused over their review type and there is disconnect between the name that they give to the review and description of the approach used. This aligns very much with the findings from Aveyard and Bradbury-Jones (2019) in their analysis of qualitative literature reviews. They identified more than 35 terms used to describe a literature review which is very confusing. We support their conclusion that those undertaking reviews need to be explicit about the method used and ensure that the processes can be traced back to a well described, original primary source. At the *Journal of Clinical Nursing*, we prefer submitted literature reviews to be registered with PROSPERO (or an equivalent) because this drives up the quality of the reporting.
7. *Unregistered randomised control trials.* As we state in our author guidelines, we require all clinical trials be prospectively registered in a publicly accessible database. Sometimes authors seek to camouflage that they are reporting an unregistered trial by renaming the study as something other than a trial. But regardless of how the study is named, if it fits the definition of a trial, it needs to be appropriately registered.

TABLE 1 Top tips for getting your manuscript into peer review**Substance**

- Make it clear how the manuscript is relevant to nursing
- Cite international literature and explain how the manuscript is relevant in a global context

Science

- Use appropriate reporting guidelines and complete them accurately
- Make the contribution to knowledge clear
- Be transparent about how the manuscript relates to other published work
- When publishing a literature review, be clear about the approach and register the review before submission if possible
- If reporting on a clinical trial, make sure it has been prospectively registered
- When submitting a qualitative report make sure it is coherent, properly analysed and well explained

Style

- Make sure that the manuscript is proofread thoroughly
- Respond to editor and reviewer feedback either by making the requested changes or by offering a point-by-point rebuttal

8. *Qualitative papers are poorly analysed.* Qualitative papers are very welcome; however, quite a number are rejected without review. The most common reasons for this are very poorly elucidated methodology, poor analytical processes and poorly presented findings. Sometimes, we receive papers in which authors state they have done a thematic analysis, yet when we read the paper, the analysis is only at the stage of simple coding. This can carry through to findings where lists of narrative are presented with no evidence of any interpretive or explanatory work. This is sometimes a great shame as it can be seen that the topic is relevant and a lot of work has gone into doing the study but this is let down by poor analysis and reporting.

3 | STYLE

9. *The manuscript is poorly written.* In order to be published in the journal, a very high standard of writing is required. Conveying complex ideas with clarity is crucial. Rejecting a paper because it is poorly written is always disappointing because sometimes the paper may potentially be making an important contribution

to nursing. When papers are rejected for this reason, we do recommend that authors seek writing support if necessary and then resubmit the paper for further consideration.

10. *Authors fail to respond to feedback.* Some authors make the mistake of arguing with reviewers or fail to respond to the reviewers' comments. We are fortunate to have a very engaged and active bank of peer reviewers who work with a lot of generosity with our authors and put enormous effort into providing the feedback that will make a manuscript able to become a published paper. We have a lead statistician and a group of specialist statisticians who review every quantitative paper. When considering feedback, it is very important that feedback is engaged with authentically and with respect. If an author does not agree with feedback, it is fine to present a thoughtful rebuttal but it is not OK to send a revised version of a manuscript back with previously identified issues not either addressed or rebutted.

We recommend that prospective authors carefully read the guidelines that are on our journal website. These guidelines are very comprehensive and provide detailed information about journal requirements, and clear instructions about how to prepare the manuscript to best meet our quality requirements and the needs of our international readership. In conclusion, we offer some top tips to increase the chance of a manuscript making its way past the editor's desk and onwards to a successful review (Table 1).

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