7. Dissemination and publication

This policy remains subject to review by Queen Mary Library Services.

7.1 Background

The Research Councils UK (RCUK) and the Higher Education Funding Council for England (HEFCE) have issued a joint statement to set out the principles regarding greater open access to published research. This included outlining their shared commitment to maintaining and improving the capacity of the UK research base to undertake research activity of world-leading quality and to ensure that significant outputs from this activity are made available as widely as possible both within and beyond the research community. [1]

The UK policy framework for health and social care research, 2017 requires public sector organisations to actively disseminate the findings of their work to appropriate public sector, academic and public audiences. Effective dissemination is also an important means of raising the profile of an organisation, enhancing the recruiting and retention of staff and improving academic and clinical practice.

This policy should be read in conjunction with Policy 11, Research data management. Its purpose is to ensure that staff undertaking research at Queen Mary and Barts Health are:

- Aware of their responsibilities in publishing and promoting their research activity
- Suitably trained to effectively transmit information to other public sector bodies, academic professionals, the public in general as well as patients and their advocates; and
- Supported to identify suitable mechanisms for dissemination by relevant Queen Mary and Barts Health departments.

7.2 The Policy

This policy applies to all research which is led by or involves significant input from Queen Mary or Barts Health staff, honorary employees, short term appointees and visiting staff using Barts Health patients or the staff, premises or facilities of the two organisations, for their research.

All research-active staff are required to abide by the principles of this policy and guidance on publishing research set out in UK and EU Regulations[2] by professional and funding bodies[3].

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[1] For detailed information regarding this please see the RCUK website www.rcuk.ac.uk

[2] Medicines for Human Use (Clinical Trials) Regulations, 2004 (and all its amendments) and EU Directive 2001/20/EC & GCP Directive 2005/28/EC and data protection laws.

[3] GMC Good practice in research and Consent to research (2010)

Committee on Publication Ethics (COPE) Guidelines on Good Publication Practice

Before research is initiated:

- Bids for research funds from income streams held by Queen Mary, Barts Health or associated charitable, government or commercial organisations, should include a broad dissemination strategy, encouraging quality research to be widely disseminated and freely accessed.
- During a research project, investigators should maintain a list of peer-reviewed publications, presentations and other dissemination outlets e.g. briefing papers for commissioners or service managers and make this available to the JRMO in an appropriate electronic format if required; and
- To avoid disputes over attribution of academic credit, it is suggested that, at an early stage, it should be agreed who will be credited as authors, contributors or otherwise acknowledged in the publication. This should where possible, be documented in the project protocol or outline. Special attention should be given to external collaborators and any funder acknowledgements.

Upon completion of the project:

- Investigators should report results in a way that is transparent and open to audit. Researchers will normally produce publications in academic journals. However, Queen Mary and Barts Health seek to encourage a broader approach to dissemination that includes dissemination:
    - Within the organisations
    - To professional audiences
    - Of appropriate findings to commissioners and / or service managers
    - To patients, carers or members of the public taking part in the research
    - Of information to the wider general public
- Investigators may seek advice from Queen Mary or Barts Health Communication Departments on the most effective media to use including language, format and style. Information for patients, in particular, must take account of the language and literacy needs of the local population. It is important to ensure that participants are informed according to plans described in regulatory approved documentation. Advice may also be sought from the Patient Advice and Liaison Service on these issues.
- For clinical results, particular consideration should be given to the dissemination of adverse findings to participants, those responsible for their care, the research sponsor, funding agencies and other organisations with a remit for public safety such as the Medicines and Healthcare Products Regulatory Agency. All efforts should be made to ensure that patients are informed of results before dissemination to the popular media, particularly where there are clinical implications.
- Dissemination strategies must not breach confidentiality agreements and contractual terms where research is externally funded. However, Queen Mary and Barts Health would normally expect that external contracts do not unnecessarily restrict the organisation's publication rights. Contracts and Costings officers and investigators should also ensure that the potential to protect and exploit intellectual property is not compromised by dissemination plans. Such plans must allow for publication to be delayed allowing time for the filing of patent applications or for other forms of protection to be put in place. For advice on Intellectual Property issues, investigators should contact the Innovation and Enterprise Unit at Queen Mary.

- When disseminating research findings researchers should ensure that details of individual participants are not disclosed, unless the participant has given explicit prior consent.
- Research active staff should ensure that claims of authorship are justified. Where publications involve more than one author, the list of authors must conform to accepted good practice: authorship should be in line with the degree of input to the paper and the project upon which it is based. Conflicts of interest (that is, those which, when revealed later, would make a reasonable reader feel misled or deceived) must be declared to editors by researchers, authors and reviewers.[4]
- In citations, researchers should ensure that they appropriately reference their employer in any publication. Queen Mary and Barts Health staff must adhere to the Instructional Citation policies (see 8 below).
- Participants expect that they will be given access to the results of a study and sponsors or investigators should normally provide them. Sponsors or chief investigators are expected to explain how participants will be able to access this information when it does become available and when to expect this. This information can be communicated to participants in many different ways and this is a decision for the sponsor or the chief investigator. Study results could be communicated by:
    - post in a letter or newsletter
    - email
    - DVD
    - Website

Source: HRA Guidance

7.3 Publication

The JRMO should be notified of any outputs of the research such as guidelines, publications, presentation, changes in service delivery etc. before external submission or presentation.

If research misconduct or data integrity concerns have been raised, the JRMO, as sponsor, with senior management of the affected organisation, reserves the right to review, request a hold on publication submission or to refuse permission to publish.

Further information can be obtained from:
Committee on Publication Ethics
BMJ Publishing Group
BMA House, Tavistock Square, WC1H 7JR

Tel:	020 7383 6602
Website:	www.publicationethics.org.uk
Email enquiries:	cope@bmjgroup.com

This policy applies to both Queen Mary and Barts Health.

[4] GMC Conflicts of interest - guidance for doctors September 2008, Queen Mary - Standards of Business Conduct, Barts Health NHS Trust - Standards of Business Conduct (Including declaration of interest)