**Publications policy: NIHR Health Protection Research Unit in Emergency Preparedness and Response (23 May 2022)**

**Our name**

* **Our full name** is The National Institute for Health and Care Research Health Protection Research Unit in Emergency Preparedness and Response, a partnership between the UK Health Security Agency, King’s College London and the University of East Anglia.
* **Our short name is** The NIHR Health Protection Research Unit in Emergency Preparedness and Response.

**Papers**

* **Publication is expected:** The purpose of our Unit is to carry out research and make it public so that others may benefit. The best way to achieve this is via peer reviewed publication. There may be instances where this is not possible, for example where there are security issues. Aside from this, our intention is for all research to result in a peer reviewed paper.
* **Tell us 24hrs before you submit:** Once you have a draft of a paper that is ready for submission, you should email it to Simon ([Simon.Wessely@kcl.ac.uk](mailto:Simon.Wessely@kcl.ac.uk)), John ([John.Simpson@phe.gov.uk](mailto:John.Simpson@phe.gov.uk)), James ([Gideon.Rubin@kcl.ac.uk](mailto:Gideon.Rubin@kcl.ac.uk)), Richard ([richard.amlot@phe.gov.uk](mailto:richard.amlot@phe.gov.uk)) and Harriet ([harriet.boulding@kcl.ac.uk](mailto:harriet.boulding@kcl.ac.uk)). You must cc all authors. We need at least 24hours to comment before you then tell NIHR.
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  + Normally, fees should be met from the theme budget
  + NIHR allow PIs to apply for extra money, which is judged on a case-by-case basis.

**AI (ChatGPT, Bing, Bard etc)**

Our policy on the use of AI in research is that, if you use it, then you should give an honest declaration of how you have used it in any relevant outputs. This is, of course, in addition to any policies set by your employer and the journal. You will need to stay up to speed on their policies about this, as they are likely to keep evolving over the next few years.

**Guidance on criteria for authorship**

* The International Committee of Medical Journal Editors (ICMJE) lists the following as 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.

* ICMJE recommends that all individuals who meet the first criterion should have the opportunity to participate in the review, drafting and approval of the manuscript, and thus have the chance to be authors. Our recommendation, in support of this, is that the person who drafts the paper should be generous in offering authorship to others, while those offered authorship should be conservative in accepting and mindful of the criteria above.
* We work on the basis that the person who wrote the paper goes first and the person who got the money and/or was the principal supervisor goes last. Others will generallyappear alphabetically, unless the lead author and/or senior author feels a different order on the basis of contribution is more appropriate. Joint first or last authorship may also be appropriate in some circumstances. Joint authors typically appear in alphabetical order with a footnote / asterisk explaining that they take a joint position.
* Authorship order must be agreed by all authors. This should be discussed early. If needed, the Unit Director can arbitrate in the unlikely event that authors cannot reach an agreement.