**DESCRIPTION**

The *International Journal of Nursing Studies Advances* (IJNS Advances) is an open access journal that publishes excellent original research, reviews and discussion relevant to nursing, midwifery and other health related professions around the globe. It is a companion title to the respected *International Journal of Nursing Studies*.

We aim to provide a forum for research and scholarly discourse that address topics of national or international significance. We particularly welcome methodologically sound studies that explore and explain patient or staff experience, studies that develop or translate instruments to measure patient and staff outcomes, and studies that develop and/or evaluate interventions to improve patient experience, their clinical outcomes or the capabilities of healthcare staff. We welcome papers that describe novel and important healthcare interventions in sufficient detail to allow their replication provided reporting conforms to the template for intervention description and replication (TIDieR) checklist and guide, especially when such interventions are the subject of an ongoing programme of research. Intervention descriptions must include an account of the theoretical mechanisms of action, the relevant research from which the intervention was developed and describe the current state of evidence about the effectiveness of the intervention. Feasibility, pilot and definitive studies are also considered provided there is sufficient rationale for publication and, in the case of intervention studies, a full description of the intervention. We welcome "negative" results (i.e. studies which do not support a hypothesised difference or association) provided that the design was robust.

Discussion papers that elaborate issues and challenges facing health care in one country are welcomed, provided the discussion is grounded in research based evidence and the authors are addressing a global audience as well as a local one. Similarly we welcome papers that develop theory or research methods and those which elaborate on novel methods for the discipline, provided they are of general applicability. We will publish protocols for significant studies that are reported in sufficient detail to provide replication and verification of the final published research if submitted prior to the commencement of data collection.

**ABSTRACTING AND INDEXING**

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GUIDE FOR AUTHORS

Introduction

The International Journal of Nursing Studies Advances (IJNS Advances) is an open access journal that publishes excellent original research, reviews and discussion relevant to nursing, midwifery and other health related professions around the globe. We aim provide a forum for research and scholarly discourse that address topics of national or international significance.

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1.1 Types of papers

IJNS Advances publishes original research, reviews, and short reports. In addition, we publish editorials and letters. Where a case is made we will also publish protocols of trials which meet our general criteria for interest and significance.

1.1.1 Research Papers - 2,000-7,000 words

Full papers reporting original research can be a maximum of 7000 words in length (excluding references and text in tables or figures), although shorter papers are preferred. IJNS Advances publishes instrument development or validation papers only if they are accompanied by a copy of the full instrument, included as a supplementary file at submission stage so it can be published as an appendix online if accepted. Research papers should adhere to recognised standards for reporting (see guidance below and the Author Checklist).

1.1.2 Review Papers - 2,000-7,000 words

We publish systematic reviews (addressing focused research questions) and broader literature reviews (such as scoping reviews). We also publish discussion papers, which are scholarly articles of a debating or discursive nature. In all cases, there must be engagement with and critical analysis of a substantive body of research or other scholarship. Systematic reviews should adhere to recognised standards for reporting (see guidance below and the Author Checklist).

1.1.3 Editorials and Correspondence - 1,000-2,000 words

Authors who have ideas for editorials that address issues of substantive concern to the discipline, particularly those of a controversial nature or linked directly to current/forthcoming content in the journal, should contact the Editor in Chief (IJNSA@elsevier.com)
1.2 Submission system
Submission to this journal is online at https://www.editorialmanager.com/ijnsa. You will be guided stepwise through the creation and uploading of your files.

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Researcher Academy is a free e-learning platform designed to support early and mid-career researchers throughout their research journey. The "Learn" environment at Researcher Academy offers several interactive modules, webinars, downloadable guides and resources to guide you through the process of writing for research and going through peer review. Feel free to use these free resources to improve your submission and navigate the publication process with ease.

2. Before You Begin

2.1 Ethics in publishing
IJNS Advances is a supporter of the Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals, issued by the International Committee for Medical Journal Editors (ICMJE), and to the Committee on Publication Ethics (COPE) code of conduct for editors. Our guidelines should be read in conjunction with this broader guidance. The ICMJE requirements can be found at http://www.icmje.org/ and the COPE's guidelines at http://publicationethics.org. The work to be described in your article must have been carried out in accordance with The Code of Ethics of the World Medical Association for experiments involving humans (Declaration of Helsinki) and research on health databases (Declaration of Taipei) https://www.wma.net/what-we-do/medical -ethics/. Further information on Ethics in Publishing and Ethical guidelines for journal publication can be found at: https://www.elsevier.com/authorethics and https://www.elsevier.com/ethicalguidelines

2.2 Reporting guidelines
The editors require that manuscripts adhere to recognized reporting guidelines relevant to the research design used and require authors to submit a checklist verifying that essential elements have been reported for all primary research and systematic reviews. We suggest that you consult the guidelines at an early stage of preparing your manuscript. You can search for the correct guideline for your study using the tools provided by the EQUATOR network: http://www.equator-network.org/ The guideline used must be indicated in the journal's Author Checklist, which is to be submitted with every paper.

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We encourage the prospective registration of studies and require it for clinical trials (as defined by the International Committee of Medical Journal Editors). Registration should occur by the time of patient enrolment. Where a study has been registered, please give the registration number within at the end of the abstract and in the body of the paper. Authors seeking to publish a prospective intervention study (other than clinical trials) that has not been registered in advance are encouraged to register at the earliest opportunity before submitting for publication.

2.4 Informed consent and ethical approval
Informed consent must be sought from participants who are able to give it, and this should be documented in the paper. Where informed consent is not obtained, consistent with recognised ethical principles and local legal frameworks this must also be documented in your paper. Ethical approval must be stated at an appropriate point in the article. The approving body and approval number should be identified in the manuscript. If the study was exempt from such approval the basis of such exemption and the regulatory framework must be described.

2.5 Patient details
The personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission. Where an author wishes to include case details or other personal information or images of patients or any other individuals in an Elsevier publication, appropriate consents, permissions and releases must
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2.7 Multiple, redundant or concurrent publication

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All published and in press accounts of the wider study must be referred to in the paper and the relationship between this and other publications from the same study must be made clear. It is not sufficient to simply cite a prior publication, rather text must clearly state that results are from the same study. Submission of an article implies that the work described has not been published previously (except in the form of an abstract), a published lecture or academic thesis that it is not under consideration for publication elsewhere, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder.

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All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, 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 submitted. Everyone who meets these criteria should be listed as an author. You will be asked to confirm this on submission. Other individuals who made substantial contributions (e.g., collecting data, providing language help, writing assistance or proofreading the article, etc.) should not be listed as authors but should be acknowledged in the paper. Those who meet some but not all of the criteria for authors can be identified as 'contributors' at the end of the manuscript with their contribution specified. For papers with ten or more authors, we ask that you give a collective name for the research group (e.g. ATLAS Research Group) to appear at the front of the article and list all authors at the end of the paper.

2.10 Changes to authorship

Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. It is important that all authors agree this. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor will require from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the change. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

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All authors must disclose any financial and personal relationships with other people or organizations that could influence their work. Potential conflicts of interest do not necessarily preclude publication and authors are advised to err on the side of transparency and openness in declaring any relevant
relationships. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Details must be included at the end of your manuscript and in a file that must be uploaded on submission. We recommend you use the ICMJE standard form to help you prepare this declaration. If there are no conflicts of interest then please state this: 'Conflicts of interest: none'. See also https://www.elsevier.com/conflictsofinterest.

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You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated. If you received no external funding (i.e. other than your main employer) please state 'no external funding'. Please see https://www.elsevier.com/funding

3. Manuscript Preparation

3.1. Documents required for submission (overview).

**Author Checklist** - a brief checklist to ensure that you have provided all essential information. The Author Checklist is available as a word file.

**Title page** (with author details) - This should include the title, authors' names and affiliations, and a complete address for the corresponding author including telephone and e-mail address. Twitter handles for one, or all, authors may also be included on the Title Page if they wish for these to be published. A template word file to help guide you is available.

**Blinded manuscript** (no author details) - The main body of the paper including where relevant the abstract, contribution statements, references, figures, tables and any acknowledgements. This should not include any identifying information, such as the authors' names or affiliations. Please ensure that the manuscript includes page numbers for ease of reference during the review process. A template word file to help guide you is available.

**Covering letter** to the Editor (optional) in which you address any matters you may wish the editors to consider (for example requests for exceptions to policy or the relationship of this work to other studies, elaboration on potential conflicts of interest). Additionally, the following are required for all full papers (excluding letters and editorials)

**Reporting guideline checklist** - Additional reporting guidelines checklist for the relevant research design. For discussion papers and non-systematic reviews, where no checklist applies, upload a file with 'reporting guideline not applicable'

3.2. **Title page**

**Title** Concise and informative. The journal requires titles for research and review papers to be in the format Topic (or question): method (e.g. Nurse staffing in intensive care units: a systematic review). The country in which the study was conducted should not normally be named in the title unless it is an essential element (for example a national survey). **Author names**. Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration **Affiliations**. Give the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and the e-mail address of each author **Corresponding author**. Clearly indicate who will handle correspondence at all stages of refereeing and publication. This responsibility includes answering queries about the research that may arise after publication. **Present/permanent address**. If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main affiliation address. Use superscript Arabic numerals for such footnotes.
3.3. Blinded manuscript

It is the authors' responsibility to ensure that the manuscript file contains no details that readily identify them to prospective reviewers. However, we recognise that on occasion essential information or the nature of the work itself may make it impossible to guarantee anonymity to authors. Authors may exercise discretion in relation to redacting details of prior research.

Authors who reveal their identity in the manuscript will be deemed to have declined anonymity and the review will be single blind (i.e. authors do not know reviewers' identities).

The blinded manuscript must include the following essential elements (except as noted above):

3.3.1. Abstract

All submissions (except letters and editorials) should include an abstract of 400 words or less.

In general, the following detail is required: Background, Objectives, Design, Settings (including geographical location if important), Participants; Methods; Results; and Conclusions, which should relate to study aims and hypotheses. Abstracts for Discussion Papers should provide a concise summary of the line of argument pursued and conclusions.

When reporting quantitative results in the abstract report parameter estimates and confidence intervals in preference to p-values (e.g. "risk of death was reduced [Odds ratio 0.9, 95% confidence interval 0.87-0.92]" rather than "risk of death was significantly reduced [p=0.001]"")

Study registration details (e.g, isrctn number) should be included at the end of the abstract.

Abstracts should not include references or abbreviations other than standard systeme international (SI) units. Abstracts of research papers must be structured and should adopt the headings suggested by the relevant reporting guidelines.

3.3.2. Tweetable abstract

Optionally authors may add a `tweetable abstract? to the end of the abstract as a final section. The tweetable abstract should be 140 characters or fewer (to allow people using it to add additional hashtags, links to the article and other twitter handles). Tweetable abstracts should provide the main conclusions or the key message of a paper in a way that is easily understood.

3.3.3. Contribution of the Paper

All submissions (with the exception of Letters and Editorials) should include "Contribution of the Paper" statements comprising a series of short single sentence bullet points under the headings "What is already known about the topic?" (2 or 3 bullets) and "What this paper adds" (2 or 3 bullets). The statements should be placed in the manuscript file between the Abstract and the main body of text.'What is already known' should identify existing research knowledge relating to the specific research question / topic, rather than general background detail. 'What the paper adds' should summarise new knowledge (outcomes) as opposed to offering process statements of what the paper does. eg. "This review demonstrates that nurse-led intermediate care reduces hospital stay but increases total inpatient stay" (outcome) NOT "This review considers the impact of nurse-led intermediate care on acute stay and total inpatient stay" (process).

3.3.4. Keywords

Provide between four and ten key words that accurately identify the paper's subject, purpose, method and focus. Use the Medical Subject Headings (MeSH?) thesaurus (see http://www.nlm.nih.gov/mesh/meshhome.html) or Cumulative Index to Nursing and Allied Health (CINAHL) headings where possible). Give keywords in alphabetical order.

3.3.5. Main manuscript text

You can choose to submit your manuscript as a single file to be used in the refereeing process. It should contain high enough quality figures for refereeing. If you prefer to do so, you may still provide all or some of the source files for tables and figures at the initial submission. Please note that individual figure files larger than 10 MB must be uploaded separately.
Structure: For most papers the basic structure: Abstract, Introduction, Methods, Results,

Discussion should be used. Authors should consult the relevant reporting guidelines for their methods and complete the relevant checklist to ensure essential detail is included (see our Author Checklist and the equator Network: http://www.equator-network.org/)

Discussion: As part of the discussion, authors should describe limitations of the work. A sub-heading before the final conclusions is recommended.

Word limits: Full papers up to 7000 words (excluding tables, figures, and references, editorials up to 2000 words and letters up to 1000 words. Shorter papers are preferred

Tables and figures: Up to 5 in total. The corresponding caption should be placed directly below the figure or table. Additional tables / figures (including large tables) can be included as supplementary material.

Ethical approval and informed consent: details must be given in the methods as specified above

Abbreviations: No abbreviations should be used other than as specified below in our general notes on style.

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There are no strict requirements on reference formatting at submission. References can be in any style or format as long as the style is consistent and references are complete and accurate. Where applicable, author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter and the article number or pagination must be present.

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At revision stage the following documentation is required: a separate "Response to Reviewers" file, which responds point by point to the reviewers' and editors' comments and highlights the changes made. a revised blinded manuscript with changes clearly highlighted. Unless revisions are minor do not simply use your word processor's 'track changes' - your aim is to help reviewers identify revised sections AND to read / review the revised manuscript.

If you provided low-resolution artwork for review, you should also add files suitable for publication at this stage (see below):
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4.1. Language (usage and editing services)

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4.2. Use of inclusive language

Articles should make no assumptions about the beliefs or commitments of any reader, should contain nothing that might imply that one individual is superior to another on the grounds of ethnic background, sex, culture or any other characteristic, and should use inclusive language throughout. We ask authors to consider that the term 'race' is closely associated with ideologies of scientific racism and has no clearly defined scientific meaning.

We recognise that the recipients of healthcare are firstly people. In many cases, it is not appropriate to refer to them as "patients". For example, "people with diabetes" is preferable to "diabetes patients" although recipients of health care in general might be referred to as patients in some circumstances. Never refer to people as 'sufferers' or 'victims' of a condition.

Authors should ensure that writing is free from gender bias, for instance by using 'he or she', 'his/her' instead of 'she' or 'her', and by making use of job titles that are gender neutral (e.g. 'chairperson' instead of 'chairman' and 'flight attendant' instead of 'stewardess'). Nurse is a gender-neutral term.

4.3. Abbreviations, acronyms and initialisms

The International Journal of Nursing Studies Advances does not permit the use of abbreviations, acronyms and initialisms (abbreviations for brevity). We make a limited number of exceptions but we do not allow the use of any abbreviations that are not widely recognised.

The limited exceptions include systeme international units (SI), cases where the abbreviated form has near universal recognition (e.g. USA), statistical terms and tests (e.g. df, t, ANOVA) and instruments and products that are generally identified by their initials or an abbreviation (e.g. SF36, SPSS).

As a rule, any abbreviations which the authors intend to use should be written out in full and followed by the letters in brackets the first time they appear , thereafter only the letters without brackets should be used. For additional guidance, see the editorial policy/style on abbreviations, initialisms and acronyms. Please note that SPSS is the full name of the product, not an abbreviation.

4.4 Tables

Please submit tables as editable text and not as images. Tables can be placed next to the relevant text in the article. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules.

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Do not use footnotes other than where abbreviations or other symbols have been used in a table, in which case the notes should be below the table, not the foot of the page.

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Standard methods of presenting statistical material should be used. Where methods used are not widely recognised explanation and full reference to widely accessible sources must be given. Identify the statistical package used (including version).
Wherever possible give both point estimates and 95% confidence intervals for all parameters estimated by the study (e.g. group differences, frequency of characteristics). Exact $p$ values should be given to no more than three decimal places. Do not interpret non-significant results as evidence that there is no difference / relationship.

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In text citations and reference lists will be reformatted to journal style if the article is accepted. The journal uses an author (date) citation style. Please ensure that every reference cited in the text is also present in the reference list (and vice versa). When copying references, please be careful as they may already contain errors. Use of the DOI is highly encouraged.

Unpublished results and personal communications are not to be included the reference list but may be mentioned in the text. Citation of a reference as 'in press' implies that the item has been accepted for publication.

Web references. As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

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List funding sources in this standard way to facilitate compliance to funder's requirements for example:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill and Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa]. It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding. If no funding has been provided for the research, please include the following sentence: "This research did not receive any specific grant from funding agencies in the public, commercial or not-for-profit sectors."

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Supplementary material such as applications, images and sound clips, can be published with your article to enhance it. Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files.

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Where authors do not own the copyright, they are responsible for gaining permission from the copyright holder and giving full acknowledgement. This includes permission to translate scales where a third party holds the copyright.

If accepted for publication, the any additional material to be made available online should include a reference to the International Journal of Nursing Studies Advances paper and we ask that you add a preliminary reference to your article with "to be published in the International Journal of Nursing Studies Advances" at the point of submission, updating later if needed.

5.1. Appendices
Normally there should be no appendices although in the case of papers reporting tool development or the use of novel questionnaires authors may include a copy of the tool as an appendix as an alternative to providing it as supplementary material if it is short.

5.2. Figure captions
Ensure that each illustration has a caption. A caption should comprise a brief title (not on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

5.3. Electronic artwork

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