



Editorial Meeting Thursday 4 April 2019

Time: Thursday 4 April at 14:00–18:00, Venue: Scandic Palace Hotel, Rådhuspladsen 57, Copenhagen

Participants: Helena Liira, Hans Thulesius, Jørgen Nexøe, Emil Sigurdsson and Svein Kjosavik

Agenda

1. Appointment of person to take minutes of the meeting

Svein was appointed to take the minutes.

2. Approval of minutes of the editorial meeting in October 2018

Minutes of the editorial meeting were approved.

3. Discussion of the current situation of the editorial work

Editorial practices and processes

The journal is running well. The economic situation has improved with more than 100% from 2015 to 2018. Helena believe the income will continue to increase as the publication fee was increased a few years ago, and the number of papers that can be published has been increased to 60 per year. The Impact factor is improving.

Last year, Helena had a process to clarify whether it was possible to reduce the publishing costs. Her conclusion was to recommend to continue business as usual.

Helena has accepted to continue as editor-in-chief for three more years. After that, she wishes to be replaced.

There is a new assistant national editor in Denmark, Malene Plejdrup Hansen. She is an assistant professor at Center for General Practice at Aalborg University

Jørgen suggested to give students the reduced publication fee. It will not apply to so many, but it may mean that some more students can publish papers in SJPHC.

The board agreed with this change.

Situation with the reviewers

The Manuscript Manager is functioning well.

Jørgen suggested changing the portal so authors need to recommend one or more reviewers to be able to submit a paper. That will probably improve the review process.

We should not invite the same person to review more than three papers a year.

Re-submitted manuscripts with unwanted markings should be sent to Pauliina to be cleaned up before they are re-reviewed.

If some reviewers are overly critical or otherwise non-constructive, we should mail Pauliina and ask her to remove the reviewer from the Manuscript Manager. This should also be done if we recognize that some in the list has died.

The number of submitted manuscripts has increased, and now there is some queue to get them published. Consequently, we will certainly publish 60 papers this year.

Any problematic papers

One manuscript in need of a plenary discussion had been sent to the board before the meeting. The conclusion of the discussion was to reject the paper, but to invite the author to write an editorial (within some constraints).

Helena will take the responsibility for the further process.

4. Paper of the year 2017 and 2018

The results from the evaluations by the professors were quite clear, and the editorial board agreed on the decisions.

In the future, we will ask ten professors to be evaluators and ask five to decide the paper of the first year and the other five to make the decision for the second year.

The possibility to avoid conflict of interest will increase, and each professor only need to go through five papers instead of ten.

5. Editorials for 2018 and 2019

The list for editorials are continued as planned. If external authors are invited to make editorials, Helena will send an adjusted plan to all editors.

6. News from the Nordic editors

In Finland, a new election to the Parliament will take place in two weeks. The planned health reform has been refused. Most health professionals were against the planned reform, but the situation in the health care sector is quite unclear. Especially primary health care needs a better structure.

In Denmark, they have started a group based improvement strategy as a part of the accreditation system. In this system, the GPs are benchmarked against the others, and have an improved possibility to evaluate their own practice. There is also research connected to these changes to analyze the impact of the structure. Jørgen leads one such conglomerate of 34 GPs from 14 offices covering about 50.000 inhabitants.

The data-systems in Denmark are a challenge. Today eight different programs are in use, and the service from the suppliers are often unsatisfactory.

In Sweden, there is an increase in on-line service for patients, especially through three main providers of which KRY is the biggest. This change is a challenge for the health service, but it is important that health care can learn to use new technological opportunities to be able to deliver a high quality service in a sustainable structure in the future.

In Iceland, they have only one electronic journal system in use, both in the hospital and in general practice. The number of GPs are increasing and the development of family medicine is in a good track. Still there is a lack of GPs in rural areas. In addition, the number of GPs with a stay abroad has declined.

In Norway, about 50% of the Norwegian students get their medical education abroad. In addition, physicians from other countries move to Norway. Consequently, about 2/3 of new authorized doctors in Norway have their education from other countries. This is too many, and a committee led by Professor Hilde Grimstad in Trondheim is currently working on a report to the Government on how to increase the number of medical students at Norwegian universities.

7. Next editorial meeting

It was decided not to have an editorial meeting in the autumn in years with the Nordic Congress, but to attend the congress and have an editorial meeting during the congress. Therefore, the next meeting will be at the NCGP in Aalborg in June.

SJPHC will cover the expenses for the editors, including the cost of attending the conference.

The editorial meeting during the autumn in 2020 will be in Iceland in late September or early October.

8. Any other business

Publication queue

An author has challenged us why there is a delay from a paper being accepted for publication until it is actually published. This is not a big problem as the papers are published on an ongoing basis but in a manner that end up with four issues a year with a maximum of 15 papers in each. We decided to continue business as usual.