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PROCEEDINGS

Innovations, Quality & Outcomes

Mayo Clinic Proceedings: Having a Family at Age 92!

his inaugural July 2017 issue of Mayo Clinic Proceedings: Innovations, Quality & Outcomes (MCP:IQ&O)—an openaccess, online-only journal—represents a natural extension of contemporary Mayo Clinic Proceedings (MCP) publication practices. The purpose of this editorial is to set forth the mission of the new journal, the rationale for its creation, and its scope and positioning in the scientific publishing landscape. I also highlight the key aspects of the operations of MCP:IQ&O and the challenges and opportunities that we see for this new journal.

Mayo Clinic Proceedings, a venerable brand in the world of scientific publishing, recently celebrated its 90th anniversary² and is now in its 92nd year of publishing. It has undergone many changes in its long existence. Although MCP was a multidisciplinary journal for many years, it refocused on a general/internal medicine theme beginning in the mid-1990s.^{2,3} Beginning in 1999, when William L. Lanier, MD, became editor-in-chief, MCP also saw an unprecedented growth in the number of manuscript submissions and in the quality of those submissions, resulting in a progressive decrease in the acceptance rate, which currently ranges from less than 2% to less than 20%, depending on the manuscript category. 1,2

Considering the many high-quality manuscripts that *MCP* rejects on the basis of editorial fit rather than priority ranking, and on the basis of *MCP*'s desire to provide the best service possible to both our readers and authors, the journal's leadership formulated

plans for offering a new *MCP*-branded publication venue. The decisions about the focus and mission of *MCP:IQ&O* (like those of *MCP*) were driven by our desire to align with the primary value of Mayo Clinic that "the needs of the patient come first."

The conception of *MCP:IQO* as a multispecialty journal was informed by Mayo Clinic's core principle of being a multispecialty group practice committed to an interdisciplinary team approach to complex patient care. Mayo Clinic has long taken an interest and leadership in the transformation of health care. Mayo Clinic's 150th anniversary in 2014 was an opportunity to look backward and forward on how the institution constantly reviews and refines its approach to its mission.

Beginning with the early days of the practice of William J. and Charles H. Mayo, *innovation* to better serve the patient, constant evaluation of the *quality* of the care that is being delivered, and defining the *outcome* metrics best suited to help optimize care have been at the core of Mayo Clinic's mission, ⁷ and will remain so carrying forward into the future. ⁸ As such, the decision to reflect strategies to optimize health care in the title of the new journal was an easy one. In this context, *MCP:IQ&O* makes its mission "building upon *innovations* in research, advancing the *quality* of medical and surgical care, and promoting optimal patient *outcomes*."

The decision on the business model most suitable to support the mission of MCP:IQ&O went through many iterations. Does the world

need another online-only, open-access journal? There is an increasing need for improving discovery of scientific information, enhancing accessibility to published research, facilitating reproducibility of data, and fostering transparency of research methods,⁹ and many research funding agencies now mandate that published findings be made available promptly and freely.^{10,11}

Considering these factors, MCP leadership, with input from its publisher and oversight from MCP's sponsor, Mayo Clinic, strongly believes that the answer to the question above is yes. The concept of author publication charges is intended to cover the time and expense required for manuscript processing, editing, and production, as well as manuscript tracking and website hosting. This funding model remains relatively new for medical journals, but we believe that the cost of publication fees will be offset by the value of (1) the convenience afforded to authors of meeting open-access mandates and (2) the opportunity to see their research freely available immediately after publication, and highly discoverable on multiple platforms. We recognize that there may be concerns regarding the publication volumes, standards for peer review and acceptance, and business practices of some online-only, openaccess journals. 12 However, authors and readers can rest assured that MCP:IQ&O will adhere to the high standards and level of integrity that they have come to expect from an MCP-branded journal.

Elsevier, the publisher of MCP, is also the publisher of MCP:IQ&O. The visual branding of MCP:IQ&O is meant to be appropriately similar to MCP's to affirm a relationship but sufficiently different to allow authors and readers to easily distinguish between the 2 journals. MCP:IQ&O will have its own website at www. mcpiqojournal.org, fully cross-referenced with and searchable on MCP's website at www. mayoclinicproceedings.org. Manuscripts can arrive at MCP:IQ&O through different channels: by referral from MCP on the basis of editorial fit or by direct submission to MCP:IQ&O. Referral from MCP may occur after peer review, or without reviews after initial assessment by one of the associate editors (editorial triage). If peer reviews are available, they will be transferred to MCP:IQ&O along with the manuscript to form the basis for manuscript revisions and resubmission. New reviews will not be required, affording the authors fast turnaround times and freedom from mixed messages. We anticipate that the acceptance rate for this category of submission will be high.

Manuscripts that have not undergone peer review before referral to MCP:IQ&O will be peer reviewed at the direction of MCP:IQ&O's editorial board. Although the referral process from MCP before formal peer review aims at identifying manuscripts of very high quality, we anticipate that the acceptance rate for this category of submissions will be lower because peer reviewer expertise may uncover methodological issues that had not been obvious in the triage and referral process.

Manuscripts can also be submitted directly to *MCP:IQ&O* through the journal's manuscript submission portal at ScholarOne, ¹³ where they will undergo peer review. The peer-review process will be modeled on the practices at *MCP*, albeit with instructions to reviewers and the acceptance criteria referenced to *MCP:IQ&O*'s specific mission. Manuscripts submitted directly to *MCP:IQ&O* might differ from articles submitted to *MCP* in that they may address earlier-stage original research studies, or new or evolving (but less developed) areas of medical research or practice. ¹

Direct submissions to MCP:IQ&O should conform to the MCP:IQ&O Instructions for Authors. 14 The health research reporting guidelines promulgated by the Enhancing the QUAlity and Transparency Of health Research (EQUATOR) Network¹⁵ provide the sort of standards and structural discipline for scientific writing that clinical guidelines already provide to clinical practice. 16 Therefore, we encourage authors to adhere, when preparing their manuscript, to the EQUATOR Network guidelines pertinent to the category of article they are planning to submit. In particular, writers focusing on the domain of quality improvement should use the Standards for QUality Improvement Reporting Excellence (SQUIRE) 2.0¹⁷ guidelines to structure their submission.

The editors of *MCP:IQ&O* will work closely with the editors of *MCP* in the manuscript referral process. To promote optimal communication and coordination between the 2 journals, I will work closely with *MCP*'s new editor-in-chief, Dr Karl A. Nath, ^{18,19} and Dr Lori A. Erickson, another *MCP* associate editor, has agreed to take

on the role of MCP:IQ&O deputy editor. To ensure high quality and consistency of editorial and adjudication processes, the entire editorial board of MCP has agreed to serve in dual capacity as the editorial board for MCP:IQ&O.¹ Going forward, we will augment MCP:IQ&O's editorial board with world-class content experts from areas of medical and surgical practices that are currently not covered by MCP to help recruit and support an ever-widening base of contributors of articles that are relevant and valuable to MCP:IQ&O's audience. We will also incrementally work toward creating an independent MCP:IQ&O editorial board.

As noted elsewhere, MCP:IQO will cover a wide range of topics spanning the disciplines of surgery, pediatrics, obstetrics and women's health, emergency medicine, and many others. Articles published in MCP:IQ&O will retain great interest to the traditional MCP audience in that most of the published content will feature varying combinations of "innovation," "quality," and "outcomes" perspectives in articles whose primary focus is on common, important, clinically relevant topics. MCP:IQ&O will retain most, but not all, article categories currently published in MCP.

MCP:IQ&O is committed to best practices in medical publishing, with fast and fair assessment of author submissions and peerreview process, with the goal to provide a truly competitive timeline from submission to publication. However, to align MCP:IQO's publication practices with those of MCP, and to affirm that the accuracy and authoritativeness of our content is more important to our journal than rushed publication, MCP:IQ&O plans to publish articles only in their final copyedited and proofread format produced by the publisher, not the initial, accepted "post-print" versions of manuscripts. Also, MCP:IQ&O plans to be flexible and responsive to the needs of its authors and readers, and feedback on the journal's content and presentation is desired and welcome.

It is indeed a great privilege to help make the *MCP* brand a family. Like any new journal, we are faced with building a loyal base among readers and authors. In the tradition of our parent journal *MCP*, our focus will be on the quality of service we provide to authors and readers. Thus, we

commit to prompt and thoughtful peer review and manuscript preparation, and to publishing content that is relevant and interesting to our readers' daily lives and that reflects the core value and mission of Mayo Clinic.

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