



Guidelines for Submission of Publication Drafts

This tool for researchers, writers, grantees, and staff is designed to guide the development of reports and other products for potential publication by the California Health Care Foundation (CHCF) and under the CHCF brand. (Sometimes publications are released under the author's brand, in which case the program officer will work with the author to set expectations.)

Questions and comments about the guidelines can be addressed to the CHCF program officer on your grant or to CHCF's director of engagement, Sally Mudd, smudd@chcf.org.

Along with the publication draft, please submit a brief memo answering the following questions (which should summarize a discussion between author, program officer, and communications officer, and sometimes an editor, from the outline phase of this work):

1. Who are the key audiences for this publication?
2. What is the goal of this publication? What, ultimately, do we want your key audiences to do as a result of reading this publication?

Editorial Standards

All reports produced by CHCF's External Engagement department go through a rigorous editorial process; therefore, authors should be prepared to work on multiple drafts before a final product is finished. All products should adhere to the following editorial standards:

- **Relevance to Audience.** The relevance of the findings to the audience should be clearly stated in the introduction and reinforced throughout the product. A discussion between the author and the program officer about the purpose of the report, and an agreement about the audience it is intended to reach, should take place before the draft is written.
- **Clarity/Accessibility.** Information should be presented in a way that is clear and relevant to the publication's audience.
- **Accuracy/Permissions.** Authors are required to fact check publications and supply sources for all data. Accuracy of endnotes and sources is the author's responsibility. Authors must secure written permission to reproduce the graphics or materials of others.
- **Objectivity/Voice.** Information should be presented neutrally and without bias. Tone of voice is professional. Avoid "I" and "we."

Submission Details

Reports and issue briefs should be delivered in a Microsoft Word file.

Clearly indicate headings and subheadings so the editor can understand where sections begin and end. If you are using display quotes or sidebars, indicate their placement in the text.

Citations should be complete and accurate and should be entered into the Word document using the "Insert Endnote" function. If you do not know how to do this, please ask for help. Please note: If the Insert Endnote function is not used, your paper will be sent back for correction.

If your document contains hyperlinks, please spell out the long URL next to the words that you would like to have hyperlinked. For example: "CHCF's website (hyperlink: <http://www.chcf.org/>) is being updated." Instead of this: "[CHCF's website](http://www.chcf.org/) is being updated."

Include author information including name, degrees, title, and organization, as well as a brief sentence or two about the organization, and website URL, if applicable.

Please read [the CHCF style guide](#) carefully before writing your draft.

Submission of Figures and Graphics

If the draft contains figures (pie charts, bar charts, line graphs) that need to be created by the designer (preferred), please provide the raw data for each figure in an accompanying Excel file.

For graphics that have already been produced and that do not need to be recreated by the CHCF designer, please supply high-resolution art files following these guidelines:

Acceptable formats for already-produced graphics: PDFs that have been exported from the source files, or source files (files from whatever software was used to create the graphic), excel files with raw data. These are all editable formats that the designer can manipulate.

Unacceptable formats for already-produced graphics: JPGs, PNGs, any web-based graphic format. These are rasterized files and are not editable.

Provide a title for all figures and graphics and indicate in the draft where each should be placed. All figures must have complete titles, axis labels, and sources. Please include a link to the source landing page (rather than to a PDF), if possible.

The running text should contain a reference to each figure. For example: "See Figure 1" or "as shown in Figure 1."

Editing Process

The publishing process may have several stages, depending on the project. In some cases, a CHCF editor will be involved in the early stages of the scoping of the project, and will have input, along with the CHCF program officer, on the shape of the publication, for example audience, content, format (infographic, issue brief, report, etc.). In other cases, the editor will be brought in after an outline has been produced by the grantee and will provide input. In the majority of cases, the CHCF editor is brought into the process when the first draft of a publication is delivered to the program officer. Usually the program officer works directly with the author for several weeks on the content before the draft is deemed ready for the editorial department at CHCF.

The following describes the timeline and the people involved after the delivery of this first draft to the editorial department. In general, the publishing process takes approximately six to eight weeks.

ASSESSMENT (1 week)

1. The CHCF editor reviews the draft (in some cases, a CHCF external contract editor is assigned to do the actual editing but the CHCF editor oversees the project).
2. A meeting is set up among the author, program staff, and communications officer to discuss the goals for the project, and to determine the format of the piece. Should it remain in the format suggested in the original scope of work, or should it be changed? Are there ancillary products to be developed out of the work that would help reach a specific audience (infographic, interactive data visualization, audio/video, slide show, etc.)? Please note that in cases where supplemental products are created, the author will be required to review them for accuracy.
3. The editor provides an assessment memo to the program officer and the communications officer, outlining the suggested editorial changes to be made to the draft. When everyone agrees on the direction, the memo is also shared with the author.

EDITORIAL PHASE (2-4 weeks)

4. The editor performs a first draft edit, in track changes (usually takes about one week). The edits to the first draft may ask the author to add more content, to rewrite for clarity or comprehension, or to reorganize sections of the publication.
5. The editor shares first draft edit with the program officer/author, who then reworks as necessary and submits a second draft to the editor and program officer for their review. Additional drafts are sometimes required from the author if the program officer deems it necessary.
6. When the CHCF team agrees that the draft needs no additional content work, the editor does a final edit to conform to CHCF's house style. The editor may use an outside copyeditor and will coordinate getting responses from the author if the copyeditor has any questions.

DESIGN PHASE (2-3 weeks)

7. After the editor has reviewed the final draft, the editor sends the report to an outside designer to have it laid out in the CHCF template. When the publication is in layout, the author, as well as the program officer, reviews it. There may be more than one version before it becomes final.
8. The CHCF editor and communications officer give the publication a final title and cover artwork that conform to CHCF's brand (which is approved by the program officer).
9. The final publication is posted on CHCF.org and disseminated through CHCF's channels (newsletter, blast email, social media).

Types of Publications

CHCF has a number of publication types, which are outlined below. Specific examples of each of these types can be provided by your program officer.

- Fact Sheets are usually one to three pages and often contain figures. They can be used to provide a summary of findings from a larger report or a quick discussion of a program, etc. Examples of facts sheets: [Missed Opportunities: Important Discussions About Serious Illness and End of Life](#) and [Listening to Mothers in California: Care Team and Place of Birth](#)
- Issue Briefs run approximately four to 12 pages. Issue briefs focus on the implications of policy, trends, or developments in the health care environment. Examples of issue briefs: [The Secret of Health Care Prices \(Policy Brief\)](#) and [Quantifying Integrated Physical and Behavioral Health Care in Medi-Cal](#).
- Reports provide in-depth information or research and can be 10 to 30 pages. Examples include case studies on new methods for delivering care, comprehensive examinations of new tools in health information technology, research on methods for reducing hospital readmissions, or evaluations of new models of health care delivery, such as retail clinics. Examples of reports: [The Sky's the Limit: Health Care Prices and Market Consolidation in California](#) and [California's POLST Electronic Registry Pilot: Lessons for All States](#).

Reports should be organized in the following structure:

- Title page: title, month/year, and "prepared for the California Health Care Foundation by (author name/grantee organization name)"
- Acknowledgments (if applicable)
- Grantee information (author, title, institution and brief description [up to 25 words] of the work of the author or institution)
- Table of Contents

- Executive Summary should be included for longer reports (>20 pages) and should closely follow the outline of the report and summarize key points
 - Introduction/Background: should include the purpose and context for conducting the research (i.e., policy relevance) and the research questions
 - Methodology (if applicable)
 - Findings/Discussion
 - Conclusion
 - Appendices (if there are appendices, these should be referenced somewhere in the body of the publication)
 - Endnotes (not footnotes)
- White papers are quicker and easier to produce than other CHCF products as they are simply designed and do not have a cover image. These may be similar in length and content as a report, but fewer resources are devoted to layout and production. White papers are usually intended for a small, niche audience and often don't go through standard CHCF promotion channels (email, social media) but are posted on the foundation's website as background on an issue. Example of a CHCF white paper: [Voluntary Behavioral Health Integration in Medi-Cal: What Can Be Achieved Under Current Law](#).
 - CHCF Health Care Almanac is made up of two kinds of products. The first is [a series of graphic publications](#) that provide data and analysis on aspects of the health care market, such as health care costs, disparities, providers, quality of care, and insurance. They are ideally no longer than 40 pages. The second are [market reports](#), which are issue briefs focused on particular regions in California. These are approximately 8 to 12 pages.
 - Snapshots are graphic publications that are not part of the Almanac family of products that provide data and analysis on narrow subjects in health care financing and delivery, such as the results from a survey. They are ideally no longer than 30 to 40 pages. An example of a snapshot: [Help Wanted: Californians' Views and Experiences of Serious Illness and End-of-Life Care](#).
 - Slideshows can showcase multiple images to draw attention to the project. These images can be accompanied by a brief caption, or they can stand alone. Some examples: [Home Is Where the Hearth Is: New Models for Nursing Homes](#) and [Cancer Surgeries in California Hospitals](#).
 - Infographics are attention-grabbing graphic displays of information that highlight key messages from a report or issue brief. CHCF has produced [a variety of examples](#).
 - Interactive graphics: [US Health Care Spending treemap](#), [Covered California dashboards](#) (created with Infogram), and examples of [line charts](#) and [bar charts](#) (also created with Infogram).

- Static graphics: These are often larger format and can be printed as a poster or handout. Examples include: [Choosing a Hospital for Cancer Surgery Is a Delicate Operation](#) and [Pulling the Plug on the ACA](#).
- Share-friendly graphics: Smaller-format graphics are produced mainly for social media. See examples on [Facebook](#) and [Twitter](#).