

The NIH Public Access Policy

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Emerging Trends in Scholarly Publishing
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NATIONAL INSTITUTES OF HEALTH



This Afternoon's Discussion

- The Law
- Implications
- Policy Details
- Collaborations with Publishers
- Announcements



The NIH Public Access Policy Is Now Mandatory

- The Policy implements Division G, Title II, Section 218 of PL 110-161 (Consolidated Appropriations Act, 2008) which states:

SEC. 218. The Director of the National Institutes of Health shall require that all investigators funded by the NIH submit or have submitted for them to the National Library of Medicine's PubMed Central an electronic version of their final, peer-reviewed manuscripts upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication: Provided, That the NIH shall implement the public access policy in a manner consistent with copyright law.

- NIH Guide Notice NOT-OD-08-033

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-08-033.html>

- Note, the law and the Policy apply to NIH and its awardees. Publisher support remains voluntary.

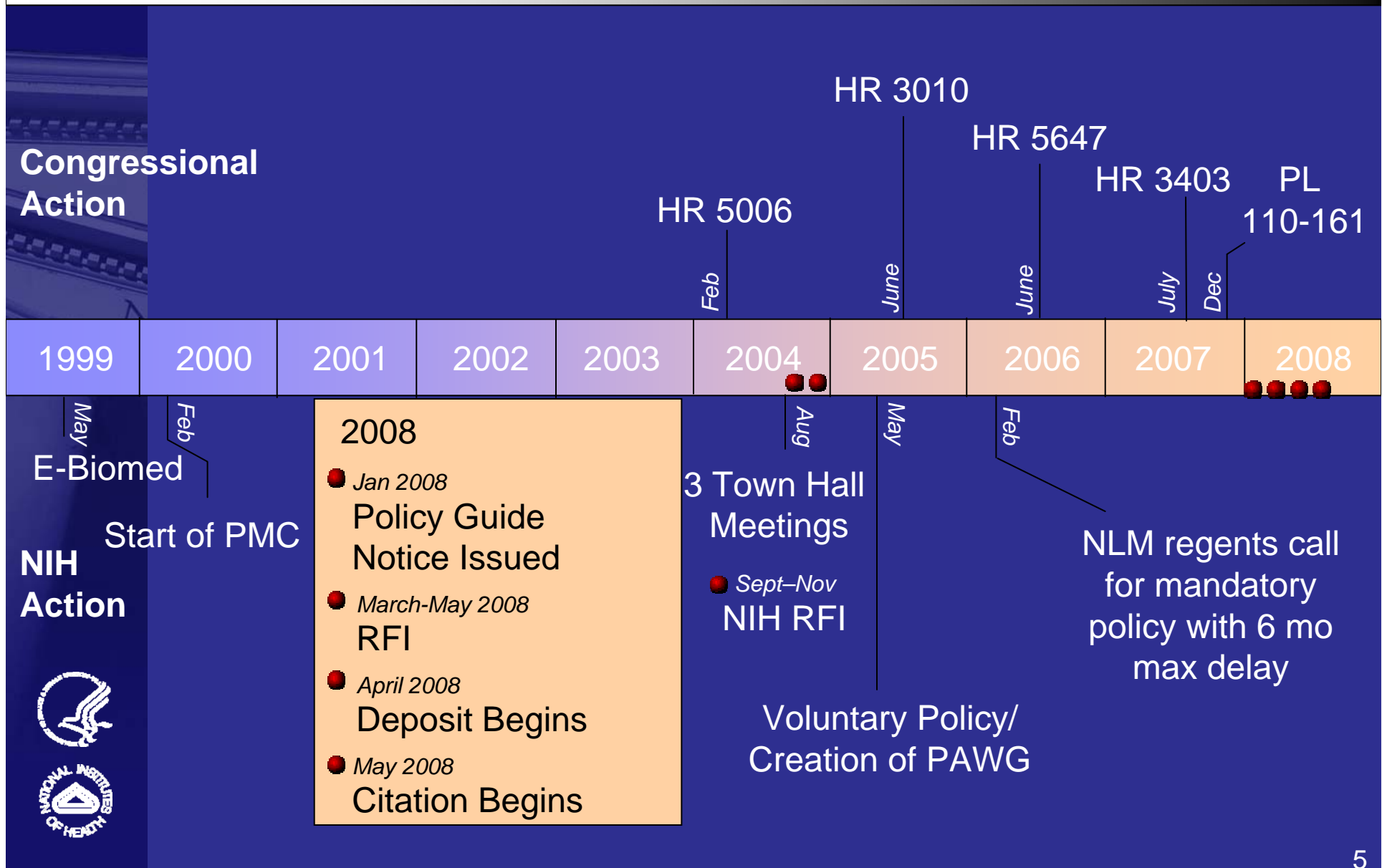


Key Changes to the Public Access Policy

Proposed Policy: September 2004	Final Voluntary Submission Policy: May 2005	Section 218 Requirement: January 2008
The draft Policy requests , but does not require , that NIH-supported investigators submit electronically to the NIH the final, peer-reviewed author's copy of their manuscripts upon acceptance for publication.	Unchanged	The Director of the National Institutes of Health shall require that all investigators funded by the NIH submit... their final, peer-reviewed manuscripts
The manuscripts will be archived in PubMed Central (PMC).	Unchanged	Unchanged
The author's copy will be made available freely to the public through PMC six months after the study's publication .	At the time of submission, the author will specify the timing of the posting of his or her final manuscript for public accessibility through PMC. Posting for public accessibility through PMC is strongly encouraged as soon as possible and within twelve months of the publisher's official date of final publication.	to be made publicly available no later than 12 months after the official date of publication



Chronology



Congressional Actions for a Public Access Policy Date Back Over Eight Years

- July 2004: (eventually HR 5006, HR 108–636)
 - “The Committee is very concerned that there is insufficient public access to reports and data resulting from NIH-Funded research. This situation...is contrary to the best interests for the U.S. taxpayers who paid for this research.”
 - “The Committee ... recommends that NIH develop a policy, to apply from FY 2005 forward, *requiring* that a complete electronic copy of *any manuscript* ...available *six months* after publication, or *immediately* in cases in which some or all of the publication costs are paid with NIH grant funds.”
- June 2005: HR 3010, House Report 109–143 — [in support of the Policy, and requesting a report] “The committee...is hopeful that the policy will be a first step toward providing free and timely access to the published results of all NIH-funded biomedical research”



Congressional Actions for a Public Access Policy Date Back Over Eight Years

- June 2006: HR 5647 — House passes FY07 Labor HHS Appropriations bill with a mandatory 12 month maximum delay period Public Access Policy — CR prevents bill language
- July 2007: (HR 3403 House Report 110–231; S. 1710, SR 110–107) — House and Senate Appropriations pass FY08 Labor HHS Appropriations bill with a mandatory, 12 month maximum delay period Public Access Policy
- December 2007: Division G, Title II, Section 218 of PL 110–161 (Consolidated Appropriations Act, 2008): Requirement becomes law after President Bush signs the bill



Stakeholder Input Since 2003

Correspondence

Year	Publisher	Open Access Advocate	Other Stakeholder	Congress
2003	5	8	10	0
2004	93	61	58	13
2005	45	9	33	9
2006	20	16	9	3
2007	7	3	3	3
2008	4	7	3	9
Total	170	97	113	28

Public Input Requested via *Federal Register* Notice on Sept. 17, 2004:

6,249 comments received on proposed 6 month policy

Feedback:

Agree: 66%

Disagree: 22%

Box Not Checked: 12%

Meetings

Year	Publisher	Open Access Advocate	Other Stakeholder
2004	8	1	7
2005	3	0	4
2006	11	1	1
2007	4	3	0
2008	3	0	3
Total	29	5	15



Why Public Access Now?

The Public Access Policy is an important way for NIH to increase the value of its scientific investment given the advances in information technology. It has three aims:

- **Archive:** A central collection of NIH-funded research publications preserves vital published research findings for years to come.
- **Advance:** The archive is an information resource for scientists to research publications and for NIH to manage better its entire research investment.
- **Access:** The archive makes available to the public research publications resulting from NIH-funded research.



What is at Stake

- Applying 21st technology to the NIH investment to promote science, health and commerce in the context of a globally wired and networked world of scientific information
- Making NIH more transparent and accountable and better able to make strategic decisions about its portfolio
- Ensuring NIH can better promote science and health information derived from NIH-funded research

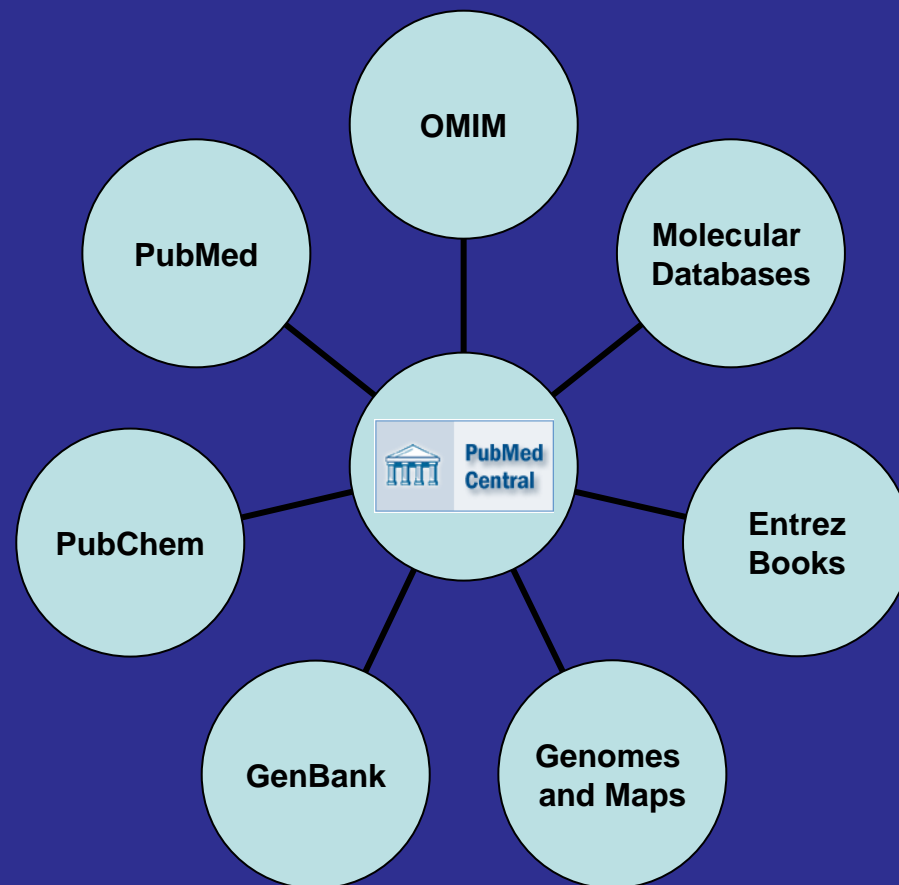


Definitions

- ***PubMed Central (PMC):*** PubMed Central (PMC) is the NIH digital archive of full-text, peer-reviewed manuscripts and articles. Its content is publicly accessible and integrated with other databases (see: <http://www.pubmedcentral.nih.gov/>).
- ***PubMed:*** PubMed provides access to citations from biomedical literature. It includes over 17 million citations from MEDLINE and other life science journals for biomedical articles back to the 1950s, along with links to full text articles and other scientific resources.
- ***Final peer-reviewed manuscript:*** The author's final manuscript of a peer-reviewed article accepted for journal publication, including all modifications from the peer review process.
- ***Final published article:*** The journal's authoritative copy of the article, including all modifications from the publishing peer review process, copyediting and stylistic edits, and formatting changes.



PubMed Central (PMC): A Vital Component of 21st Century Science



- PMC established in 2000
- Today: 1.4 million full text articles; 380 member journals





PubMed
Central

Benefits of an Integrated Archive

1 Search Results

All Databases PubMed Nucleotide Protein

Search for

All: 15328 Free: 15328

Items 1 - 20 of 15328

2: **Electrostatic Mechanisms Underlie Neomycin Block of the Cardiac Ryanodine Receptor Channel (RyR2)**

Fiona C. Mead and Alan J. Williams

Biophys J. 2004 December; 87(6): 3814–3825. Published online 2004 September 10.
doi: 10.1529/biophysj.104.049338.
PMCID: PMC1304893
[| Abstract](#) [| Full Text](#) [| PDF-255K](#) |

2 Compound Described in Article

Biophys J. 2004 December; 87(6): 3814–3825. PMCID: PMC1304893
Published online 2004 September 10. doi: 10.1529/biophysj.104.049338.
Copyright © 2004, Biophysical Society

Electrostatic Mechanisms Underlie Neomycin Block of the Cardiac Ryanodine Receptor Channel (RyR2)

Fiona C. Mead and Alan J. Williams

Cardiac Medicine, National Heart and Lung Institute, Faculty United Kingdom

Address reprint requests to Fiona C. Mead, Cardiac Medicine, Imperial College London, London SW3 6LY, U.K.

Received July 9, 2004; Accepted August 31, 2004.

[| This article has been cited by other articles in PMC.](#)

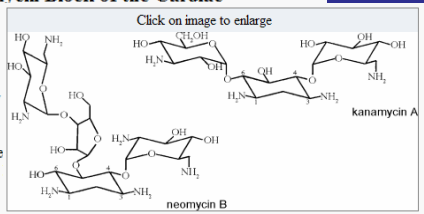


Figure 1.
Structures of the aminoglycoside antibiotics used in this study. For the sake of clarity, the C atoms of the cyclitol 2-deoxystreptamine are numbered, illustrating the classification of neomycin B as a 4,5-disubstituted and of kanamycin A as a 4,6-disubstituted aminoglycoside. Modified from Mingeot-Leclercq et al. (1999).

J Gen Physiol. 2006 March; 127(3): 329–340.
doi: 10.1085/jgp.200509402.
Copyright © 2006, The Rockefeller University Press

3 Other Articles Using Compound

Is Cited by the Following Articles in this Archive:

On the Interaction of Neomycin with the Slow Vacuolar Channel of *Arabidopsis*
Joachim Scholz-Starke, Armando Carpaneto, and Franco Gambale
J Gen Physiol. 2006 March; 127(3): 329–340. doi: 10.1085/jgp.200509402.
[| Abstract](#) [| Full Text](#) [| PDF-956K](#) |


Two Rings of Negative Charges in the Cytosolic Vestibule of Type-1 Ryanodine Modulate Ion Fluxes
Le Xu, Ying Wang, Dirk Gillespie, and Gerhard Meissner
Biophys J. 2006 January 15; 90(2): 443–453. Published online 2005 October 20.
doi: 10.1529/biophysj.105.072538.
[| Abstract](#) [| Full Text](#) [| PDF-220K](#) [| Supplementary Material](#) |

4 3-D View of Structures

NCBI

Structure Summary
MMDB

PubMed BLAST Structure Taxonomy OMIM Help?



Reference: Mikkelsen NE, Johansson K, Virtanen A, Kirsebom LA **Aminoglycoside binding displaces a divalent metal ion from the tRNA-neomycin B complex** *Nat. Struct. Biol.* v8, p.510

Description: Crystal Structure Analysis Of A Trna-Neomycin Comp

Deposition: 2001/3/21

Taxonomy: [Saccharomyces cerevisiae](#)

MMDB: [49607](#) **PDB:** [1I9V](#)

[View options \(Click image to view 3D structure\)](#)

Implications of a Successful NIH Public Access Policy

Easy access to published research funded by NIH will help advance science and improve human health.

- NIH can monitor, mine, and develop its portfolio of NIH-funded research more effectively.
- NIH-funded research becomes more prominent, integrated and accessible, making it easier for all scientists to pursue NIH's research priority areas competitively.
- Meets the public's expectation that articles based on NIH-funded research are publicly available¹.

1. Harris Poll (2006) Most Americans back online access to federally funded research. Wall Street J Online Retrieved on July 20, 2006, from http://online.wsj.com/article_email/SB114893698047965609-IMyQjAxMDE2NDM4MTkzMzE2Wj.html.



The NIH Public Access Policy Applies to Any Final Manuscript that...

- Is peer-reviewed;
- And, is accepted for publication in a journal on or after April 7, 2008;
- And, arises from:
 - Any direct funding from an NIH grant or cooperative agreement active in Fiscal Year 2008, or;
 - Any direct funding from an NIH contract signed on or after April 7, 2008, or;
 - Any direct funding from the NIH Intramural Program, or;
 - An NIH employee.



NIH Guide Notice NOT-OD-08-033

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-08-033.html>

How to Comply- an Overview

■ Address Copyright

- Institutions and investigators are responsible for ensuring full compliance with the Public Access Policy, including ensuring any copyright or other agreements are consistent with submitting to PMC.

■ Submit Manuscripts Upon Acceptance for Publication

- Submission by Authors
 - Submit the final peer-reviewed manuscript to NIH upon acceptance for publication. <http://nihms.nih.gov/>
 - Confirm document conversion and permission to post to PMC
- Submission by a third party
 - Some journals submit final published articles on behalf of authors. http://publicaccess.nih.gov/submit_process_journals.htm
 - Some journals submit final peer reviewed manuscripts. Authors must confirm document conversion and permission to post to PMC.
 - Author Designee (e.g. program assistant, librarian) submits the final peer-reviewed manuscript to NIH upon acceptance for publication to NIHMS.Gov. Authors must confirm document conversion and permission to post to PMC.

■ Cite Article

- Include the **PMC number (PMCID)** for applicable articles in applications, proposals and reports



The NIH Public Access Policy Supports Peer Review

- Under the NIH Public Access Policy, only peer-reviewed manuscripts resulting from NIH funded research are required to be posted to PubMed Central, reinforcing the role of peer review in scientific dissemination
- Peer review is the process where scientists review each others' work, and recommend whether it should be published
 - Generally scientists, most supported at least in part by NIH, volunteer to both author and review articles at no cost to publishers
 - The Public Access Policy applies only to final peer reviewed manuscripts arising from NIH funding.
 - Scientists use NIH awarded funds to have their work published
- Awardees may publish in any journal they wish, consistent with the law



The NIH Public Access Policy is Consistent with Copyright Law

- The Public Access Policy applies to manuscripts arising from NIH funds whose copyright is initially owned by authors or their assignees. NIH-funded authors may transfer rights to a publisher, reserving only the ability to submit the final manuscript to PMC
- Publishers do not own any rights in manuscripts that are not given by the author
- No rights are taken from publishers, rather, the right to PMC is reserved prospectively
- Institutions and investigators are responsible for ensuring that any publishing or copyright agreements concerning submitted articles comply fully with the Public Access Policy and copyright law
- Institutions and investigators have multiple methods to comply with the Policy in a manner consistent with copyright law
- NIH has over seven years of experience in safeguarding copyrighted material on PMC. There are over one million full-text articles on PMC, most of which are covered by publisher-held copyright and accessible under fair use



Rights Typically Transferred by Authors

- Creating Copies
- Distributing Copies for Transfer
- Distributing Copies for Sale
- Preparing Derivative Works
- Posting Articles or Manuscripts to Other Archives
- Posting *Final Published Articles* Not Arising from NIH Funds to PMC
- Posting *Final Published Articles* Arising from NIH Funds to PMC
- Posting *Final Peer-Reviewed Manuscripts* Arising from NIH Funds to PubMed Central (PMC)



NIH Welcomes Collaboration With Publishers

Deposit Method	Content	Author Role
PMC Journal Agreement ¹	All Final Published Articles	None ²
PMC Journal (NIH Portfolio) ¹	NIH Funded Final Published Articles	None ²
PMC Selective Deposit	Final Published Articles	Pays Fee
Publisher Bulk Deposit	Final Peer Reviewed Manuscript	Approve Document Conversion and Posting
None	Final Peer Reviewed Manuscript	Author Submits Manuscript, Approves Document Conversion and Posting

¹ Listed on http://publicaccess.nih.gov/submit_process_journals.htm

² No role in submission process, but remain responsible for compliance

See <http://www.pubmedcentral.nih.gov/about/pubinfo.html> and

<http://www.pubmedcentral.nih.gov/about/pubinfo.html> for information about agreements



NIH Seeks Your Input!

- RFI- March 31, 2008 - May 31, 2009

<http://publicaccess.nih.gov/comments.htm>

1. Do you have recommendations for alternative implementation approaches to those already reflected in the NIH Public Access Policy?
2. In light of the change in law that makes NIH's public access policy mandatory, do you have recommendations for monitoring and ensuring compliance with the NIH Public Access Policy?
3. In addition to the information already posted at <http://publicaccess.nih.gov/communications.htm>, what additional information, training or communications related to the NIH Public Access Policy would be helpful to you?

- Results

- Report will be issued September 30, 2008.
- Will include comments from the March 20 Open Meeting



Additional Information About the Policy

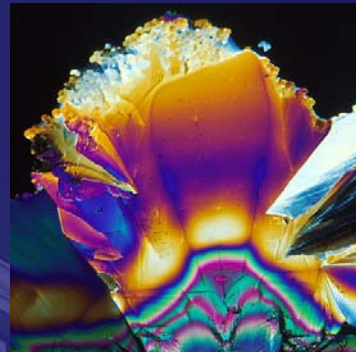
- About the Public Access Policy:
 - <http://publicaccess.nih.gov/>
 - Guide notice: <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-08-033.html>
- Frequently Asked Questions
 - <http://publicaccess.nih.gov/FAQ.htm>
- Training Resources
 - <http://publicaccess.nih.gov/communications.htm>
- The NIH Manuscript Submission System
 - <http://www.nihms.nih.gov/>
 - Tutorials: <http://www.nihms.nih.gov/web-help/>
- PubMed Central:
 - <http://www.pubmedcentral.nih.gov/>
 - PMC Demo: <http://www.ncbi.nlm.nih.gov/Education/pmc/>



Public Access Around the Globe

Funder	Delay Period	Funding	Archive	Requirement
NIH Sec. 218 Public Access Requirement	up to 12 mo	allowable cost for grants	PMC	Yes
European Research Council	up to 6 mo	allowable cost for grants	PMC and others	Yes
Howard Hughes Medical Institute	up to 6 mo	dedicated fund	PMC	Yes
UK Medical Research Council	up to 6 mo	allowable cost for grants	UKPMC	Yes
Wellcome Trust	up to 6 mo	dedicated fund	UKPMC	Yes
UK Medical Research Council	up to 6 mo	allowable cost for grants	UKPMC	Yes





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