

Research Funders and Expanded Access

A How-To Resource for Health Research Alliance
Members, Developed by SPARC and HRA



Table of Contents

Assistance for HRA Member Organizations Adopting a Public Access Policy	3
Resources for Funders.....	4
An Access Primer for Research Funders	4
What is Public Access?	4
What is Open Access?	4
What is Expanded Access?	4
Why does expanded access matter in the context of research and discovery?	4
Why does expanded access matter to research funders?	5
Why should research funders attach access conditions to their grants?.....	5
About the NIH Public Access Policy	6
A note about PubMed Central and PubMed	7
Steps for HRA Member Organizations Adopting a Public Access Policy.....	7
Public Access Policy Template	8
Sample Language for Award Agreement Terms & Conditions and Grant Application Materials....	10
Research Funder Frequently Asked Questions.....	11
Resources for Awardees	14
A Step-by-Step Compliance Guide for Awardees.....	14
Step 1: Immediately Upon Notification of Your Award.....	14
Step 2: Submitting Your Manuscript to a Journal for Review.....	14
Step 3: Codifying Access Rights within the Publication Agreement.....	15
Step 4: Depositing Your Paper to PubMedCentral	16
Step 5: Demonstrating Compliance	17
Awardee Frequently Asked Questions.....	18
Public Access Participation Request Form.....	21
Appendix A: HRA Public Access Task Group.....	22
Appendix B: SPARC Author Addendum.....	23

About the organizations that produced this guide

SPARC®, the Scholarly Publishing and Academic Resources Coalition, and the Health Research Alliance (HRA) partnered to produce this guide for HRA member organizations wishing to implement public access policies.

SPARC is an international alliance of academic and research libraries working to correct imbalances in the scholarly publishing system. Developed by the Association of Research Libraries, SPARC has become a catalyst for change. Its pragmatic focus is to stimulate the emergence of new scholarly communication models that expand the dissemination of scholarly research and reduce financial pressures on libraries. Action by SPARC in collaboration with stakeholders – including authors, publishers, libraries and funders – builds on the unprecedented opportunities created by the networked digital environment to advance the conduct of scholarship.

The Health Research Alliance, a national consortium of approximately 50 non-profit, non-governmental funders of health research and training, formed a Public Access Task Group in 2011 to explore whether and how HRA could be of assistance to its member organizations wishing to implement public access policies. Many HRA member organizations are very interested in increasing access to publications resulting from the research they fund. The Public Access Task Group developed a public access policy template modeled on a public access policy developed by an HRA member organization, Autism Speaks. The Task Group also advised HRA in developing arrangements with the National Library of Medicine to enable awardees of HRA member organizations to deposit to PubMed Central publications resulting from the research funded by those organizations.

Acknowledgments

The Health Research Alliance thanks SPARC, specifically Executive Director Heather Joseph and consultant Greg Tananbaum, for spearheading the development of this Research Funder Guide and for educating HRA member organizations and the HRA leadership on public access and open access. The National Library of Medicine is generously allowing HRA member organizations to use the PubMed Central (PMC) repository, and has taken time and care to educate HRA on PMC requirements. HRA also acknowledges the work of two member organizations, Autism Speaks and the Howard Hughes Medical Institute, in blazing a trail for private funders who wish to adopt public access policies, and thanks them for their generosity in sharing lessons learned. HRA thanks the Howard Hughes Medical Institute for providing funding for the addition of the Authentication Portal to the gHRAsp database. Finally, HRA thanks the Public Access Task Group listed in Appendix A for guiding this initiative.

Assistance for HRA Member Organizations Adopting a Public Access Policy

A number of HRA member organizations share the interest of SPARC, the NIH, and others in increasing access to publications resulting from the research they fund. Many HRA members are also eager to reliably identify publications resulting from the research they fund, for program evaluation, as evidence for their constituents and boards of directors that their resources are being used to accomplish their mission, and other purposes. The type of public access policy detailed in this guide furthers both of these aims. To assist HRA member organizations wishing to adopt such a public access policy, the HRA Public Access Task Group has developed a set of resources to simplify this process. The resources include a public access policy template modeled on a policy developed by an HRA member organization, Autism Speaks. HRA members adopting such a policy will be eligible to use arrangements HRA has developed with the National Library of Medicine at the National Institutes of Health to meet these aims. Under these procedures, papers resulting from HRA member grants can be deposited in PubMed Central. This Guide contains the public access policy template, an overview of the steps necessary to deposit manuscripts and publications, and a number of resources for HRA member organizations that can be customized to share with their awardees. Specific words/phrases that should be customized to reflect the name or policies of the funder have been highlighted in blue.

This guide is divided into two parts: Resources for Funders, and Resources for Awardees.

Resources for Funders contains the following:

- An access primer presented by SPARC
- Steps for funders wishing to adopt a public access policy
- Public access policy template
- Award Agreement Terms and Conditions sample language
- Research Funder Frequently-Asked Questions (FAQ)

Resources for Awardees contains the following:

- About the Health Research Alliance (HRA)
- A Step-by-Step Compliance Guide for Awardees
- Awardee Frequently- Asked Questions (FAQ)

Resources for Funders

An Access Primer for Research Funders

It may be helpful to think of access along a continuum. At one pole is subscription control, in which access must be purchased by a reader or his/her institution. On the other pole is Open Access, in which content is not only immediately free to read, but it can be reused and redistributed (with attribution).

What is Public Access?

Public access sits somewhere in between these poles, encouraging broader readership by limiting access control durations, while ensuring that the use of the material remains subject to the copyright and/or related license terms of the respective authors or publishers. Many research funders considering access policies have viewed public access as a manageable first step toward full Open Access. Public access, unlike Open Access, usually does not demand the *immediate* availability of peer-reviewed articles. Rather, it recognizes that the realities of the current publishing system allow for publishers to embargo access for some period of time (six to twelve months) in order to retain their subscription revenue stream. After that time, articles following the public access model are made freely available to readers in a trusted, persistent repository such as the NIH's PubMed Central archive.

What is Open Access?

Open Access is the free, immediate, online availability of peer-reviewed research results, permitting any user to read, download, copy, distribute, print, search or link to the full text of these articles, crawl them for indexing, pass them as data to software and/or use them for any other lawful purpose. For more information and resources on Open Access, visit <http://www.arl.org/sparc/openaccess>.

What is Expanded Access?

Expanded access is an umbrella term referring to policies that provide greater availability to research results than the traditional access-controlled journal publication model. Both Open Access and Public Access are examples of expanded access policies.

Why does expanded access matter in the context of research and discovery?

Funders invest in research in order to accelerate the pace of scientific discovery, encourage innovation, enrich education, and stimulate the economy – to improve the public good. They recognize that broad access to the results of research is an essential component of the research process itself. Scientific investigation advances only through sharing of results, and the value of an investment in research is only maximized through wide use of its results.

Yet, too often, research results are not available to the broadest community of potential users. Each year a smaller percentage of all scholarly publications is accessible to researchers because of increasing prices and decreasing library budgets, even though the production and quantity of scholarly information is growing exponentially. The Internet provides a new opportunity to bring

information to a wider audience at virtually no marginal cost, and allows them to use it in new, innovative ways. Expanded access is increasingly seen as a tool for unlocking research results and, as a consequence, speeding subsequent discoveries. The equation is simple. More access equals more discoverability and readership. This, in turn, means expanded shared knowledge within and across scientific fields, which accelerates breakthroughs in research.

Why does expanded access matter to research funders?

Organizations fund research in order to better understand important medical and scientific issues, often in the search to find preventions, treatments and cures for specific diseases. But research cannot exist in a vacuum. To reach its full impact it must be communicated. To ensure this knowledge can be communicated and, as a consequence, read, applied, and built upon, research funders should consider the importance of expanded access in accelerating these aims. Increased accessibility hastens the impact of research funding by making results available to the scientific community more broadly and more quickly. This reduces the gaps in the research cycle and makes it easier for interested parties to pursue promising investigative directions. It also encourages the broadest possible audience to read and build upon research results, a critical advantage for narrow topics that could greatly benefit from the input of interdisciplinary scientists.

Of equal importance are the benefits expanded access confers on families, clinicians, patients, and funders. While many government and academic researchers may have institutional subscriptions to scholarly journals, the pay wall keeps critical information away from those who might most benefit from it. Patients and families struggling to understand a diagnosis and possible treatment options have access to the mountains of pseudo-science freely available on the web. Sadly, the rigorously reviewed literature of most value to this constituency is often the most difficult to access. So, too, must clinicians scramble to keep abreast of the latest cutting-edge developments in their fields. Expanded access unlocks this information and encourages a fully and reasoned consideration of the work that research funders have worked so diligently to support.

From a practical standpoint, accessibility can also demonstrate a tangible return on investment. Many research funders rely on private contributions to support their activities. Disseminating research results in a highly visible manner that promotes sharing, discussion, and follow-up science is a clear way to demonstrate the effective use of donations.

Why should research funders attach access conditions to their grants?

While the benefits of research accessibility are clear, the mechanisms for ensuring such openness are only beginning to emerge. The number of journals that are Open Access in a given scientific discipline may be few. In some fields, the top journals in terms of impact (a statistical measure indicating how widely cited a paper is, which can tie into the promotion and tenure system) may all adhere to a subscription model. While research funders have the authority to condition their grants in any way they see fit, few seek to place their researchers in a bind between their funding agencies and their professional standing/advancement. That said, research funders can today apply reasonable conditions that balance the public's interest in widespread dissemination with the realities of the scholarly publishing system, while also working toward a more assertive access policy for the future.

It is important to understand that many of the advances in content accessibility over the past decade have been driven by funding agencies. Many commercial journal publishers saw little incentive to move away from the subscription model that has been largely profitable to the industry. However, organizations such as the National Institutes of Health, Howard Hughes Medical Institute, the Wellcome Trust, and the Research Councils UK (RCUK: see <http://www.rcuk.ac.uk>) that fund research demanded greater accessibility as a condition of funding. Rather than fomenting revolution, these organizations pushed for evolution of the scholarly publishing model. Specifically, they attached a condition of *public access* to research outputs. The NIH public access policy allows publishers to restrict access for some period of time (up to twelve months) in order to retain their subscription revenue stream. After that time, articles should be made freely available in a trusted, persistent repository. The NIH directs awardees to deposit manuscripts to the PubMed Central (<http://www.ncbi.nlm.nih.gov/pmc/>) publicly-available archive to comply with the policy.

Public access has become an established funding condition in many areas. Authors and publishers alike have accepted it as a means to balance the sometimes competing interests the parties share in a peer-reviewed article. The effect of this is that any research funder considering attaching access terms to its grants can comfortably mirror existing public access policies without fear of upsetting its author community. Authors can publish in the outlet of their choice, as virtually every publisher has agreed to abide by policies that mirror the NIH plan. Indeed, many publishers will facilitate the deposit of articles into PubMed Central on the author's behalf.

While public access is an important step, any restriction delaying the unfettered dissemination of research results is problematic. It hinders the spread of knowledge, as well as the speed with which follow-up research can be conducted. In the long term, research funders should consider the collective power they have to accelerate the transition to full Open Access.

About the NIH Public Access Policy

As part of the Consolidated Appropriations Act of 2008, the National Institutes of Health instituted the NIH Public Access Policy to ensure that the public has access to the published results of NIH-funded research. The policy requires scientists to submit final, peer-reviewed journal manuscripts that arise from NIH funds to the digital archive PubMed Central (PMC), upon the manuscript's acceptance for publication. These papers must be made accessible on PMC no later than 12 months after publication (see <http://publicaccess.nih.gov/>). NIH's policy is based on a Federal law that states: "*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.*" (see <http://publicaccess.nih.gov/policy.htm>).

A note about PubMed Central and PubMed

PubMed Central (PMC; <http://www.ncbi.nlm.nih.gov/pmc/>) is a free, full-text (rather than citation-only) archive of biomedical and life sciences journal literature at the National Institutes of Health's National Library of Medicine. HRA has arranged for its member organizations adopting public access policies to use PMC as a stable, permanent, and free-to-access digital archive because it is independent of commercial and publisher entities, has stable funding, and has mechanisms in place to assure its long-term accessibility. **PubMed** (<http://www.ncbi.nlm.nih.gov/pubmed/>) is a citation database comprising more than 21 million citations for biomedical literature from MEDLINE, life science journals, and online books. PubMed does not display the full text of articles. The citation information for PubMed Central articles appears in PubMed, along with links back to the full text as it appears in PubMed Central.

Steps for HRA Member Organizations Adopting a Public Access Policy

The checklist for implementing a public access policy is as follows:

- Customize and adopt the model public access policy developed by the HRA Public Access Task Group (see next page).
- Change your award programs' Terms and Conditions to reflect the new public access policy.
- Include information about the new public access policy in your organization's requests for applications (RFAs) and other funding announcements.
- Develop an appropriate way to guide your organization's awardees to the resources on copyright and related public access issues made available to you by SPARC and HRA (e.g., web pages, tip sheets, RFAs, etc.).
- Complete the HRA Public Access Participation Form (see p.21) and return it to HRA, identifying your organization's Public Access Contact and documenting your organization's adoption of a public access policy.
- Each time your organization completes an award cycle, submit the required information on those grants to the gHRAsp database (refer to gHRAsp data fields and data submission template for details). This information will enable HRA to provide NLM with the information it needs so that the researcher is presented with a list of his/her grants to which the manuscript should be linked, during the manuscript submission process. A current data fields listing is available on the gHRAsp page in the Members Only portion of www.healthra.org and an electronic version of the data submission template is available on the gHRAsp site to those with login credentials. When member organizations submit required data on awards to gHRAsp upon the completion of each award cycle, gHRAsp will become a real-time resource for the HRA membership. For this reason, all HRA member organizations will be encouraged to submit information to gHRAsp upon the completion of each award cycle, regardless of their participation in the public access initiative.
- ***After your organization has submitted the required information on your new awards to gHRAsp***, instruct your new awardees to visit the HRA Authentication Portal (participating HRA member organizations will be provided a specific URL by HRA to give to their awardees) to register using a Gmail account or their eRA Commons account. This will enable them to deposit future manuscripts arising from your organization's funding to PubMed Central. Awardees must log in to gHRAsp each time they receive a new award from an HRA member organization and link the grant to their gHRAsp profile.



Public Access Policy Template

The following is a template developed by the HRA Public Access Task Group in conjunction with the Scholarly Publishing and Academic Resources Coalition (SPARC) that can be used by organizations seeking to implement public access policies as a condition of grant funding. This template is based on the policy developed by an HRA member organization, Autism Speaks, with that organization's permission.

Public Access Policy

*[Note to Funders: Select one of the two opening paragraphs below, **A** or **B**, to customize for your organization]*

(A) **[name of foundation or organization]** funds biomedical research in order to better understand the causes of **[disease name]** and to advance its prevention, treatment, and cure. The main output of this research is new knowledge. To ensure this knowledge can be accessed, read, applied, and built upon in fulfillment of our goals, **[name of foundation or organization]** expects its researchers to publish their findings in peer-reviewed journals.

OR

(B) **[Name of foundation or organization]** funds biomedical research to contribute to the acquisition of knowledge that can ultimately improve human health. To ensure this knowledge can be accessed, read, applied and built upon in fulfillment of that goal, **[name of foundation or organization]** expects its researchers to publish their findings in peer-reviewed journals.

In addition, it is a condition of **[name of foundation or organization]** funding that all peer-reviewed articles supported in whole or in part by its grants must be made available in the PubMed Central online archive in accordance with the following conditions:

- Authors are to deposit an electronic copy of their final peer-reviewed manuscripts in PubMed Central immediately upon acceptance for journal publication. (See How to Deposit an Article in PubMed Central) *[This will be a link to this resource on the HRA website – funders will need to include this link for their awardees.]*
- The manuscript is to be made publicly available in PubMed Central no later than 12 months after the official date of journal publication. This requirement applies to all **[name of foundation or organization]** grants awarded after ____ **[date to be filled in by specific organization]**.

PubMed Central is a database of full-text biomedical journal articles available online without a fee. It is hosted by the National Library of Medicine in the National Institutes of Health. Once posted in PubMed Central, results of research become more accessible, prominent, and integrated within the context of other research findings, making it easier for scientists worldwide to pursue **[specific disease name or “biomedical”]** research. Equally important, families, clinicians, patients, educators, funders, and students reap the benefits of information arising from funding by accessing publications on PubMed Central at no charge.

An author must acknowledge **[name of foundation or organization]** support in every article arising from such funding. **The acknowledgement statement must include the applicable [name of foundation or organization] grant number.** This will enable **[name of foundation or organization]** to link the published outputs of research to the support it has provided.

Links to be available via HRA link mentioned in policy template:

- *NIH Manuscript Submission System (NIHMS) User’s Guide to Submitting a Manuscript (the information at this link will be updated by NLM to include information about HRA funders):* <http://www.ncbi.nlm.nih.gov/books/NBK3846>
- *Author Rights: Using the SPARC Author Addendum to secure your rights as the author of a journal article:* www.arl.org/sparc/author/ The SPARC Author Rights brochure is available for download at www.arl.org/sparc/bm~doc/SPARC_AuthorRights2006.pdf.
- *PubMed Central:* <http://www.ncbi.nlm.nih.gov/pmc/>
- *List of journals that automatically deposit all articles to PubMed Central after an embargo period (there will be link to this information on the HRA website, at* <http://www.healthra.org/resources/publicaccess.html>)

Sample Language for Award Agreement Terms & Conditions and Grant Application Materials

The following are public access policy and compliance statements that research funders can adapt to codify their access conditions within their application materials and award terms and conditions documents. These statements can and should be modified to reflect the particular nuances of the funder's specific public access policy.

Funded researchers are required to submit or have submitted for them to the National Institutes of Health's PubMed Central database an electronic version of the authors' final manuscript including all modifications from the publishing and peer review process (the "postprint") upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication. This requirement applies to all grants awarded after [DATE], whether FUNDER funds the research in whole or in part.

All scientific progress reports must include the PMC ID number (PMCnnnnn) to publications in PubMed Central supported by ORGANIZATION starting with [effective date of organization's public access policy].

*** The funder can require that the researcher deposit the final published version instead of the postprint, but it may be more difficult for the researcher to negotiate copyright to deposit the final published version. The remainder of this guide refers to the requirement to deposit "the authors' final manuscript including all modifications from the publishing and peer review process" (the postprint). Any funders that elect to require the final published version instead of the postprint will need to make that change in any portion of this Guide adapted for use by their organization.*

Research Funder Frequently-Asked Questions

Won't an expanded access policy restrict where grant recipients publish?

Most access policies under consideration fall into the “public access” category, whereby a version of the published paper must be made freely available to readers in a trusted, persistent repository such as the NIH’s PubMed Central archive after a period of time (typically six to twelve months). The implementation of such a policy by your organization is unlikely to impact the range of available outlets in which grant recipients are able to publish. Nearly all publishers have accepted similar conditions from major funding agencies such as NIH and the Wellcome Trust. As such, requiring your grant recipients to comply with this policy should not limit their ability to publish in high impact journals in any way. A policy requiring authors to publish in journals that adhere to a full and immediate Open Access procedure would likely have the effect of restricting the grant recipient’s publication choices at the present time. However, a number of journals offer an “open choice” option whereby individual articles can be converted to immediate Public Access within a subscription-based journal in exchange for a fee. When these journals are considered, an expanded access policy would cover thousands of journals from many of the larger commercial and society publishers.

What do we need to know about copyright in order to manage an access policy?

Copyright belongs to the content creator. In the case of scholarly publishing, it is often assigned by the creator (the author) to the publisher at the time of manuscript acceptance. The publisher provides a boilerplate agreement that authors sign and return. From the research funder’s perspective, this process can be easily modified to assert the access conditions stipulated in the grant award. At the time of the grant award, simply direct the recipients to an addendum they can attach to any publisher’s standard copyright transfer agreement, such as the SPARC Author Addendum found at: <http://www.arl.org/sparc/author/> and included as Appendix B of this document, or they can use the letter template and suggested language to add to the publication agreement found in the “Resources for Awardees” section of this Guide. The Author Addendum, once submitted to the publisher, will codify the access rights the publisher will carve out. Note that (a) virtually all publishers have experience with these types of modifications, and (b) the publisher maintains nearly all the rights it traditionally seeks, including an exclusive copyright for the final published version of the paper.

What staff allocation will be required to manage an access policy?

It is difficult to pin a precise estimate on the person-hours required to manage an expanded access policy. This is due to variables such as the number of grants awarded and the extent to which grant recipients already know about access issues. Certainly, at least one person within the organization will need to have a firm grasp of the policy, its nuances, and the operational and philosophical issues most likely to be raised by active and prospective grant recipients. The organization must also ensure that it has a mechanism in place to monitor compliance with the policy. *To use the special arrangements HRA and NLM have developed, each participating organization is required to designate one staff member as a Public Access Contact and to inform HRA of the name and contact information for that individual.*

Why has HRA elected to designate PubMed Central as the repository in which articles must be deposited?

The availability of your funded research in multiple outlets such as personal websites, institutional repositories and publisher sites increases its exposure. It is, however, important to ensure that expanded access includes availability in a stable, permanent, and free-to-access digital archive. PubMed Central is the best example of such an outlet. It is supported by NIH, a body independent from any one publisher or commercial entity. It has stable funding and mechanisms to ensure its long-term accessibility. It has also been embraced by many parties (commercial publishers, learned societies, funding agencies, etc.) as a viable vessel for ensuring public access. These factors render PubMed Central the most logical repository for HRA-funded papers.

What if an author refuses to abide by these access conditions, or requests to opt out?

A limited number of organizations that have enacted an expanded access policy, most notably **Harvard University** (see <http://osc.hul.harvard.edu/authors/waiver/generate>), have included a waiver request protocol. This allows authors to submit a letter to the organization explaining the circumstances behind the request. As an organization, you will need to determine the conditions under which such waivers would be granted.

From a practical standpoint, how can we track policy compliance?

Tracking compliance is the responsibility of the participating organization. Each HRA member organization can determine the degree to which it wants to track compliance with its policy. It is recommended that funders require awardees to submit the PMC ID of manuscripts deposited to PMC as a part of routine progress reports, which gives the organization an easy way of confirming that papers have been deposited in PMC as required. As suggested in the Public Access Policy Template (page 8), it is good practice to require grant recipients to acknowledge your support in every article arising from such funding.

From a practical standpoint, how do we monitor the supposed “accelerating effect” that increased access will have on the research we fund?

A number of tools exist that can be used to track future citations to a scholarly article. Some are commercial (e.g., Web of Science), others are free (e.g., Microsoft Academic Search, Google Scholar). Articles deposited in PubMed Central display a link when cited by other papers in PubMed Central. These utilities can individually or collectively be used to track how quickly and widely funded research is cited by others.

Our board members don’t have any background on access issues. How do we make the case for an expanded access policy to them?

While the board of every organization is unique, most board members are interested in using funds wisely and efficiently to advance research on the disease, condition, or topic at hand. Expanded access is an excellent tool to meet these expectations. A compelling case for adoption of a public access policy can be made to boards by explaining the following points:

- An expanded access policy maximizes return on investment by getting important scientific discoveries into the hands of the community and the general public rapidly.

- This, in turn, promotes wider and deeper investigation, while simultaneously advancing understanding among patients, families, practitioners, and educators.
- An expanded access policy can advance the organization's mission and demonstrate progress in a manner that board members can understand and witness for themselves.
- Crucially for associations that publish their own journals, no evidence exists that a public access policy generates an undue financial burden for these publications or their parent organizations.

Resources for Awardees

A Step-by-Step Compliance Guide for Awardees

Note to HRA Member Organizations: These instructions can be adapted as needed to guide grant recipients through your organization's compliance process. This template can and should be modified to reflect the particular nuances of the organization's specific public access policy.

PREFACE

[FUNDER] is a member of the Health Research Alliance (HRA, www.healthra.org), a national consortium of non-governmental, not-for-profit funders of biomedical research and training. HRA has made arrangements so that PubMedCentral will accept deposits of manuscripts and publications resulting from research funded by HRA member organizations. [FUNDER] has elected to use these HRA arrangements, which are provided through HRA's grants database, Grants in the Health Research Alliance Shared Portfolio (gHRAsp), which is managed by Innolyst. To meet [FUNDER]'s public access requirement, you should follow the steps below:

Step 1: Immediately Upon Notification by [FUNDER]

When [FUNDER] notifies you that the information about your grant has been added to the HRA database (gHRAsp), go to the HRA Authentication Portal at the specific link provided by [FUNDER], and log in using your Gmail account (____@gmail.com) or eRA Commons account. gHRAsp (for Grants in the Health Research Alliance Shared Portfolio) is a database of awards made by philanthropies that are members of the Health Research Alliance. When you have logged in, search within gHRAsp for grants you have received from your funding organization that is a member of HRA. Click on your grant(s) to link those to your Gmail or eRA Commons account. This will allow gHRAsp to transmit your grant identification information to PubMed Central so that you can link future manuscripts resulting from this award to the correct grant when depositing manuscripts to PubMed Central. *Please note: You must allow 24 hours between completing this step and attempting to submit your manuscript to PubMedCentral.*

Step 2: Submitting Your Manuscript to a Journal for Review

Grant recipients should endeavor to make publishers aware of the access conditions associated with their funded research at the earliest possible juncture. The following letter **may** be included during the manuscript submission process for these purposes. This notification should *not* influence acceptance of your article by any reputable journal.

Dear [Editor Name],

Enclosed is a manuscript to be considered for publication in _____ [Journal Name]. **FUNDER** has provided funding for the research reported in this manuscript and therefore its publication must comply with the **FUNDER'S** "Policy on Public Access to Published Research" ([[URL link to policy](#)]).

In order to ensure compliance with the funder's policy I, as corresponding author on behalf of all the authors, am retaining the rights to:

- Provide a copy of the final manuscript, including all modifications from the publishing and peer review process, to the National Institutes of Health's PubMed Central (PMC) database at the time the manuscript is accepted for publication; and
- To authorize the National Institutes of Health to make such copy of the manuscript available in digital form for public access in PMC no later than 12 months after publication.

By accepting this manuscript for review, _____ [Publisher Name] accepts these terms and agrees that the terms of this agreement are paramount and supersede any provisions in any publication agreement for this article, already signed or to be signed at a later date that may conflict.

(Signature of corresponding author on behalf of all authors)

Note that grant recipients should keep a copy of this cover letter in the event of a future copyright dispute.

Step 3: Codifying Access Rights within the Publication Agreement

Grant recipients should ensure that the publication agreements they sign upon a journal's acceptance of the manuscript is consistent with **FUNDER'S** access policy. The terms of such agreements vary widely from publisher to publisher.

If the agreement does not provide for your right to make the article publicly available in PubMed Central no later than 12 months after the official date of publication, you will need to adapt it. The following is an example of the kind of language you can add to a publication agreement:

*"As an author whose research is funded in part or in whole by **FUNDER**, I am obligated as a condition of my grant to reserve certain rights. The Journal therefore acknowledges that Author retains the right to provide a copy of the authors' final*

manuscript, including all modifications from the publishing and peer review process, to PubMed Central at the NIH upon acceptance for Journal publication for public archiving as soon as possible but no later than 12 months after publication by Journal. _____ [Publisher Name] accepts these terms and agrees that the terms of this agreement are paramount and supersede any provisions to the contrary any publication agreement for this article, already signed or to be signed at a later date that may conflict.”

This can be appended to the end of the publication agreement and returned to the publisher. In the unlikely event the journal balks at accepting a modification of their standard agreement, you should reiterate the conditions of your funding and remind them that the requirement is similar to that of the National Institutes of Health, Howard Hughes Medical Institute, and other funders. There is no evidence of financial or other material harm to publishers as a result of embargoed free public access to research articles. **If the publisher still balks, please contact [FUNDER] for assistance.**

Note that grant recipients should keep a copy of any publication agreement modifications in the event of a future copyright dispute. Your funder may require that you submit the final Publication Agreement as part of your routine progress reporting.

Submitting the SPARC Author Addendum (<http://www.arl.org/sparc/author/>) with the publication agreement is another option that reserves the author's right to publicly display the article in any medium for non-commercial purposes.

Step 4: Depositing Your Paper to PubMedCentral

Once your paper is published, a copy of the authors' final manuscript, including all modifications from the publishing and peer review process, must be deposited into PubMed Central. There are four possible methods to submit an article to PubMed Central in compliance with this policy.

Note: If the journal in which you are publishing deposits a paper on your behalf directly to PubMed Central under methods A or B below, you will still need to associate your grant with the manuscript using My NCBI (<http://www.ncbi.nlm.nih.gov/sites/myncbi/>). Choose “Sign in via Partner Organizations,” and then select the sign-in option (Google or eRA Commons) you used when you logged into gHRAsp to identify your grant(s). Once you are signed in, search for the article citation in PubMed and add it to your My Bibliography account (http://www.ncbi.nlm.nih.gov/books/NBK53595/#mybibliography.Creating_a_Bibliography). You may then associate your HRA funding to citations in My Bibliography by choosing the “Award” view option in the “Display settings” menu. Use the “Add award” hyperlink next to the appropriate citation to link the grant (see http://www.ncbi.nlm.nih.gov/books/NBK53595/#mybibliography.Associating_NIH_Awards_to).

Under methods C and D described below, you will link the publication to the grant using the NIH Manuscript Submission System.

- A. Automatic Deposit by Publisher:** Currently, more than 1,000 journals automatically deposit all articles to PMC after an embargo period, at no charge to the author. The only action required of you is to associate your grant with the manuscript using My NCBI (<http://www.ncbi.nlm.nih.gov/sites/myncbi/>). You can find a link to an updated list of these journals at <http://www.healthra.org/resources/publicaccess.html>.
- B. Publisher Requested Deposit:** Some publishers will deposit an individual final published article in PubMed Central upon author request, generally for a fee. Be aware that **FUNDER [does OR does not]** currently permit its grant funds to be used for such payments.
- C. Author Deposit:** Immediately upon acceptance for publication, provided you have already followed Step 1 above, you can deposit the paper directly to PubMed Central via the **NIH Manuscript Submission System/NIHMS** (<http://www.nihms.nih.gov>). (An **NIH eRA Commons account** [<https://commons.era.nih.gov/commons/>] or your Gmail account is needed.) This process usually takes less than 10 minutes. During this process, you will be asked to designate the number of months after publication when the manuscript may be made publicly available in PubMed Central, and you should list the lesser of the embargo period of the journal in which you are publishing or your funder's requirements. You will be asked to confirm that the deposit of the manuscript is consistent with any publication and copyright agreements, and that NIH may begin processing the manuscript for use in PubMed Central. The NIHMS will convert the deposited files into a standard PubMed Central format, and email you to approve the PubMed Central-formatted manuscript for public display. You then review and approve the PubMed Central-formatted manuscript via the NIHMS. Corrections to the manuscript, if necessary, may be requested at this time. Upon completion, PubMed Central will automatically make the paper publicly available after the designated delay period has expired.
Note: You must have completed Step 1 above (registering with your Gmail account or eRA Commons Account via the HRA Authentication Portal on gHRAsp) before depositing your manuscript using NIHMS. Please allow 24 hours between completing Step 1 and attempting to deposit your manuscript to NIHMS.
- D. Publisher Deposit with Author Follow-up:** In a variation of Method C above, some publishers deposit the manuscript files in the NIHMS for an author and designate the number of months after publication when the paper may be made publicly available in PubMed Central. The NIHMS will notify the corresponding author when the manuscript files are received from the publisher. At that point, you must link the paper to your grant, authorize NIH to process the manuscript and review and approve the PubMed Central-formatted manuscript via the NIHMS. Corrections to the manuscript, if necessary, may be requested at this time. Upon completion, PubMed Central will automatically make the paper publicly available after the designated delay.

Step 5: Demonstrating Compliance

The first step in demonstrating compliance is to create the tangible link between your grant, the gHRAsp database, and PubMed Central via the four steps outlined immediately above. This will

allow **FUNDER** to track compliance using their internal reporting tools. Beyond this, you should acknowledge **FUNDER'S** support by including the organization's name and the grant number in every article arising from such funding. You can demonstrate compliance with **FUNDER'S** access policy by providing the organization – at the earliest possible convenience – with the PubMed Central (PMC) reference number (e.g., PMC234567) for each paper that falls under the policy. The PMC ID is posted in PubMed as soon as an article has been successfully processed by PMC, which usually occurs around the time of publication. PMC IDs are listed in the lower right corner of the AbstractPlus view of PubMed (<http://www.ncbi.nlm.nih.gov/PubMed>) For more detail visit http://publicaccess.nih.gov/citation_methods.htm#locating .) If the PubMed Central reference number (PMCID) is not available because the paper has not yet been posted to PubMed Central, you can use the NIH Manuscript Submission reference number (e.g., NIHMS97531) for up to three months after publication.

You may also create links between your grant and PubMed citations using My Bibliography, a component of the free My NCBI service. Log into My NCBI using your registered Gmail account. Doing so will allow you to track all of your manuscripts submitted to NIHMS and to create new grant associations as necessary. My Bibliography is a handy tool that gives you a bird's-eye view into your citations and compliance with the policy. More details on My Bibliography can be found at <http://www.ncbi.nlm.nih.gov/books/NBK53595/> , the online help manual for My NCBI.

Awardee Frequently Asked Questions

Note: These responses should be read carefully by research funders before using this FAQ. In some instances they will need to be modified to reflect nuances in the organization's access policy.

My research funder requires me to deposit my paper in PubMed Central. How do I do this?

Many publications will automatically deposit articles in PubMed Central. For a list of such publications, see <http://www.healthra.org/resources/publicaccess.html> . If the journal in which you plan to publish your article does not appear on this list, you must reserve the rights to make your article available in PubMed Central within 12 months of its publication date, and then deposit the accepted manuscript via the NIH Manuscript Submission System (<http://www.nihms.nih.gov>). Most journal publishers are accustomed to similar requirements of other funders. For an introduction to copyright for authors, see <http://www.arl.org/sparc/author/copyrightintro.shtml> as well as the SPARC/Science Commons Author Addendum at this link: <http://www.arl.org/sparc/author/addendum.shtml> .

Depositing my manuscript sounds like a hassle. Why do I have to do this?

First, the hassle is minimal. Even if the journal in which you are publishing is not among those that may handle your PubMed Central deposit on your behalf, direct submission via the **NIH Manuscript Submission system** (<http://www.nihms.nih.gov>) usually takes less than 10 minutes. *Please note that you must log into the NIH Manuscript Submission system using your Gmail account or your eRA Commons account in order to bring up your grant numbers from HRA member*

organizations, to which your manuscript should be linked. The inconvenience of depositing manuscripts to PubMed Central is minimal compared to the benefits. **FUNDER'S** public access policy will increase exposure to your article, encourage follow-on research (and citations), and make your work available to practitioners, educators, and the general populace worldwide. This will help advance understanding and accelerate further research. *For a link to a list of journals that automatically deposit all articles to PubMedCentral, see <http://www.healthra.org/resources.publicaccess.html>.*

What do I do if the publisher refuses to accept modification of its standard author agreement?

You should not sign any publication agreement related to articles or other publications resulting from **FUNDER'S** funding unless you are certain that the agreement complies with this policy. The same advice applies to electronic click-through agreements that may be part of the journal's manuscript submission system. In the unlikely event the publisher balks at accepting a modification of its standard agreement, you should reiterate the conditions of your funding and remind them that the requirement is similar to that of the National Institutes of Health, Howard Hughes Medical Institute, and other funders. There is no evidence of financial or other material harm to publishers as a result of embargoed free public access to research articles. Authors should work with the publisher before any rights are transferred, to ensure that all conditions of **FUNDER'S** access policy can be met. As an additional resource you may contact **[[FUNDER PROVIDES CONTACT INFO, SUCH AS FUNDER'S DESIGNATED PUBLIC ACCESS CONTACT PERSON].**

My paper is based on research only partially funded by **FUNDER**. Does the access policy still apply?

Yes, the access policy applies to any manuscript that arises from any amount of direct funding from **FUNDER**.

What is the difference between a final peer-reviewed manuscript and final published article? Which version of my paper should I submit?

The final peer-reviewed manuscript before final formatting and typesetting is sometimes called a postprint. The postprint version is similar but not identical to the final published version of the article, which is the authoritative copy. **FUNDER'S** access policy requires grant recipients to submit the postprint (the final, peer-reviewed manuscript that includes all modifications from the publishing and peer review process) to PubMed Central.

I plan to publish in an Open Access journal. Do I still need to submit my paper to PubMed Central?

Yes, unless the journal has an agreement to deposit its papers in PubMed Central (see <http://www.healthra.org/resources.publicaccess.html> for a link to an updated list of these journals). Not all Open Access journals have agreements with PubMed Central.

My article is listed in PubMed. Why do I need to deposit it in PubMed Central?

PubMed is a citation database, while PubMed Central is a free digital database of full-text scientific literature in the biomedical and life sciences. **FUNDER'S** policy requires that the full text of

publications resulting from your award be made available in PubMed Central as a condition of your grant. The only way to comply with that requirement is to reserve the necessary rights under copyright and to deposit the publication as outlined in the instructions by **FUNDER**.

When does FUNDER'S access policy take effect?

This requirement applies to all grants awarded after **XX, XX, 20XX**, whether **FUNDER** funds the research in whole or in part.

How do I demonstrate compliance to the research funder?

First, you should acknowledge **FUNDER'S** support by including the organization's name and the grant number in every article arising from such funding. Your funder may require that you provide the final Publication Agreement as part of routine progress reporting, as well as the PMC ID to locate your article on PubMed Central. You can also demonstrate compliance with **FUNDER'S** public access policy by providing the organization – at the earliest possible convenience – with the PubMed Central (PMC) reference number (e.g., PMC234567) for each paper that falls under the policy. If the PubMed Central reference number (PMCID) is not available because the paper has not been posted to PubMed Central yet, you can use the NIH Manuscript Submission reference number (e.g., NIHMS97531).

Why do I need to have a Gmail or eRA Commons account?

Gmail (Google) and NIH's grant management system (eRA Commons) use a shared authentication technology. If you already have an eRA Commons account, you may log into gHRAsp with your eRA Commons account if you prefer. Logging in with your Gmail or eRA Commons account helps HRA and NIH assure that grants are linked to the correct researcher.

What if I can't find my grant when I log into the NIH Manuscript Submission System?

In order to find your grants listed when you log into PubMedCentral, you must have already logged into gHRAsp and linked your grants to your researcher profile. These grants will be available in PubMedCentral within 24 hours of saving to your profile. If you have linked your grants to your researcher profile in gHRAsp and at least 24 hours have elapsed, please email support@ghrasp.org.

Is there a time delay between when I add a grant to my gHRAsp profile and when it's available in the NIH Manuscript Submission System?

Yes – data from gHRAsp is transmitted to the National Library of Medicine each weeknight. Please allow 24 hours for your linked grants to be available in PubMedCentral.

Will the details of my grant be shared?

The only information from HRA/gHRAsp that will be transmitted to PubMedCentral is the following: Your name, your email, the name of your funder, your project title, and your funder's unique grant ID number.



Public Access Participation Request Form

In order to participate in the public access arrangements that the Health Research Alliance has made with the National Library of Medicine that will permit awardees to deposit to the PubMed Central repository publications resulting from research funded by your organization, you must complete and return this request form to HRA by fax (919-991-0695) or email/scan (ahuetter@bwfund.org). You will receive a confirmation and instructions from HRA when your participation request form has been processed.

<i>Organization Name:</i>	
<i>Name and email address of person completing this form:</i>	
<i>Date your organization's public access policy was adopted (or date you anticipate your organization's public access policy will be adopted):</i>	
<i>Effective date of your organization's public access policy:</i>	
<i>URL for your organization's public access policy (or you may submit a copy of your organization's policy with this form)</i>	
<i>Please estimate the items to the right to assist the National Library of Medicine in planning resources for this effort:</i>	<input style="width: 50px; height: 20px; margin-bottom: 5px;" type="text"/> <i>Average # grants your organization has active at any one time</i> <input style="width: 50px; height: 20px; margin-bottom: 5px;" type="text"/> <i>Average # new grants your organization makes each year</i> <input style="width: 50px; height: 20px; margin-bottom: 5px;" type="text"/> <i>Average # manuscripts you estimate are published each year related to your organization's awards</i> <input style="width: 50px; height: 20px; margin-bottom: 5px;" type="text"/> <i>Number of manuscripts above you estimate are co-funded by NIH</i>
<i>Please complete the sections below regarding your organization's designated public access contact person:</i>	<i>NOTE:</i> <i>The designated public access contact person is the person HRA will correspond with regarding public access program details, and is also the person to whom HRA will refer your awardees who have questions, if they first contact HRA.</i>
<i>Name of designated public access contact person:</i>	
<i>Title of designated public access contact person:</i>	
<i>Email of designated public access contact person:</i>	
<i>Telephone number for designated public access contact person:</i>	

"I understand that in order to participate in HRA's public access arrangements, my organization must send the required data for each grant to the gHRAsp database upon the completion of each award cycle."

Signature

Date

Printed or typed name

Title

Appendix A

Public Access Task Group of the HRA Discovery Science Working Group

Leadership:

Stephen Rose, Ph.D., Chief Research Officer, Foundation Fighting Blindness, Public Access Task Group Chair

Heather Snyder, Ph.D., Senior Associate Director, Medical & Scientific Relations, Alzheimer's Association and Co-Chair, Discovery Science Working Group

Members:

Lorraine Egan, J.D., President and CEO, Damon Runyon Cancer Research Foundation

Sindy Escobar-Alvarez, Ph.D., Program Officer for Medical Research, Doris Duke Charitable Foundation

Patricia Hinton, M.A., M.S., Director of Research Administration, American Heart Association

Sally McNagny, M.D., M.P.H., Vice President, The Medical Foundation, *a division of Health Resources in Action*

Rolly Simpson, Senior Program Officer, Burroughs Wellcome Fund

Anita Miller Sostek, Ph.D., Vice President for Scientific Review and Operations, Autism Speaks

Kate Ahlport, Executive Director, Health Research Alliance

Appendix B

The SPARC/Science Commons Author Addendum appears on the next page

(Note: This is the version in effect as of April, 2012 – for the most current version download the form directly from the SPARC website at <http://www.arl.org/sparc/author/>)

ADDENDUM TO PUBLICATION AGREEMENT

1. THIS ADDENDUM hereby modifies and supplements the attached Publication Agreement concerning the following Article:

(manuscript title)

(journal name)

2. The parties to the Publication Agreement as modified and supplemented by this Addendum are:

_____(corresponding author)

(Individually or, if more than one author, collectively, Author)

(Publisher)

3. This Addendum and the Publication Agreement, taken together, allocate all rights under copyright with respect to all versions of the Article. The parties agree that wherever there is any conflict between this Addendum and the Publication Agreement, the provisions of this Addendum are paramount and the Publication Agreement shall be construed accordingly.

4. **Author’s Retention of Rights.** Notwithstanding any terms in the Publication Agreement to the contrary, AUTHOR and PUBLISHER agree that in addition to any rights under copyright retained by Author in the Publication Agreement, Author retains: (i) the rights to reproduce, to distribute, to publicly perform, and to publicly display the Article in any medium for non-commercial purposes; (ii) the right to prepare derivative works from the Article; and (iii) the right to authorize others to make any non-commercial use of the Article so long as Author receives credit as author and the journal in which the Article has been published is cited as the source of first publication of the Article. For example, Author may make and distribute copies in the course of teaching and research and may post the Article on personal or institutional Web sites and in other open-access digital repositories.

5. **Publisher’s Additional Commitments.** Publisher agrees to provide to Author within 14 days of first publication and at no charge an electronic copy of the published Article in a format, such as the Portable Document Format (.pdf), that preserves final page layout, formatting, and content. No technical restriction, such as security settings, will be imposed to prevent copying or printing of the document.

6. **Acknowledgment of Prior License Grants.** In addition, where applicable and without limiting the retention of rights above, Publisher acknowledges that Author’s assignment of copyright or Author’s grant of exclusive rights in the Publication Agreement is subject to Author’s prior grant of a non-exclusive copyright license to Author’s employing institution and/or to a funding entity that financially supported the research reflected in the Article as part of an agreement between Author or Author’s employing institution and such funding entity, such as an agency of the United States government.

7. For record keeping purposes, Author requests that Publisher sign a copy of this Addendum and return it to Author. However, if Publisher publishes the Article in the journal or in any other form without signing a copy of this Addendum, such publication manifests Publisher’s assent to the terms of this Addendum.

AUTHOR

PUBLISHER

(corresponding author on behalf of all authors)

_____ (Date)

_____ (Date)