

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
NATIONAL INSTITUTES OF HEALTH
NATIONAL LIBRARY OF MEDICINE
NATIONAL CENTER FOR BIOTECHNOLOGY INFORMATION
PUBMED CENTRAL NATIONAL ADVISORY COMMITTEE**

Function of the PubMed Central National Advisory Committee

PubMed Central was established to support NIH's mission of disseminating the results of biomedical research widely to the public and to the scientific community. PubMed Central employs electronic publishing technology to archive, index and distribute peer-reviewed journal literature in the life sciences. The PubMed Central National Advisory Committee shall advise the Director, NIH, the Director, NLM, and the Director, NCBI, on the content and operation of the PubMed Central repository. Specifically, the Committee is charged to establish criteria to certify groups submitting materials to the system, monitoring its operation, and ensuring that PubMed Central evolves and remains responsive to the needs of researchers, publishers, librarians and the general public.

Summary of Meeting – June 17, 2008

The meeting of the PubMed Central National Advisory Committee was convened on June 17, 2008, from 9:30 a.m. to 3 p.m., in the Board Room of the National Library of Medicine (NLM), Bethesda, Maryland. The meeting was open to the public. Mr. Robert Kiley presided as Chair.

Members Present

Prue Adler, M.S., M.A., Association of Research Libraries
Camila Alire, Ed.D., University of New Mexico
John Hawley, B.A., American Society for Clinical Investigation
Cynthia Henderson, M.L.S., Morehouse School of Medicine
Robert Kiley, M.Sc., Wellcome Trust
Isaac Kohane, M.D., Ph.D., Harvard Medical School
Sarah Michalak, M.L.S., University of North Carolina
Hemai Parthasarathy, Ph.D., Feinstein Kean Healthcare
Mark Sobel, M.D., Ph.D., American Society for Investigative Pathology
Gary Ward, Ph.D., University of Vermont
Susan Weintraub, Ph.D., University of Texas Health Science Center
John Wilbanks, B.S., Science Commons
David J. Lipman, M.D., Director, National Center for Biotechnology Information, NLM,
NIH, and PubMed Central National Advisory Committee Executive Secretary

NIH Staff Present

Jeff Beck, IEB, NCBI
Abraham Becker, IEB, NCBI
Dennis Benson, Branch Chief, IRB, NCBI

Dale Berkley, OGC, NIH
Janet Coleman, NCBI
Jane Davenport, IEB, NCBI
Abigail Elbow, IEB, NCBI
David Gillikin, NLM
Al Graeff, NCBI
Ann Houser, OD
Betsy Humphreys, Deputy Director, NLM
Jennifer Jentsch, IEB, NCBI
Christopher Kelly, IEB, NCBI
Laura Kelly, IEB, NCBI
Andre Kolotev, IEB, NCBI
Sheldon Kotzin, Chief, BSD, NLM
Sergey Krasnov, IEB, NCBI
Kathy Kwan, IEB, NCBI
David Landsman, Branch Chief, CBB, NCBI
Dawn Lipshultz, NCBI
Adeline Manohar, IEB, NCBI
John Mullican, IEB, NCBI
Jim Ostell, Branch Chief, IEB, NCBI
Edwin Sequeira, IEB, NCBI
Jerry Sheehan, NLM
Konstantin Skorodumov, IEB, NCBI
Kent Smith, NCBI
Neil Thakur, OD
Bart Trawick, IEB, NCBI

Visitors Present

Mila Becker, American Society of Hematology
Jeff Boatright, Emory University
Laura Brockway-Lunardi, FASEB
Gary Ewart, American Thoracic Society
Martin Frank, American Physiological Society
Heather Joseph, M.A., SPARC
Jack Ochs, American Chemical Society
Jennifer Pesanelli, Federation of American Societies for Experimental Biology
Nancy Rodman, American Society for Biochemistry and Molecular Biology
Kristin Richardson, Elsevier
Janet Soller, American Psychological Association
Crispin Taylor, Executive Director, American Society of Plant Biologists
Andrew Tien, C&M International
Ellen Weiss, Biophysical Society

I. Call to Order and Opening Remarks – Robert Kiley, Betsy Humphreys

Mr. Kiley called the meeting to order at 9:30 a.m. The Committee approved the minutes from its April 19, 2007 meeting. Ms. Humphreys congratulated Dr. Lipman on his recent election to the American Academy of Arts and Sciences and provided a brief update on activities relevant to NLM, including passage of the Genetic Information Nondiscrimination Act, public information related to genetic testing, expanded requirements for the ClinicalTrials.gov database, and a Spanish edition of the MedlinePlus magazine.

II. PubMed Central (PMC) Update – David Lipman

PMC Statistics

Dr. Lipman reported that PMC has more than 1.5 million articles available, approximately 65% of which are from back digitization. The number of unique IPs accessing the system in May and June was approximately 240,000 per day, or about 500,000 unique users per day (based on an IP multiplier of 1.5 to 2).

PMC Participation Agreements

Dr. Lipman described the three main types of PMC agreements:

- 1) Full Participation -- The journal deposits its complete issues in PMC.
- 2) NIH Portfolio -- The journal deposits all NIH-funded articles. These agreements may include other articles, such as those funded by Wellcome Trust.
- 3) Selective Deposit – The publisher, through its open access program (which usually requires an author fee), deposits open-access articles in PMC. These publisher programs currently include Oxford Open, Springer Open Choice, Taylor & Francis *iOpenAccess*, and Wiley-Blackwell Online Open.

Submission of NIH-funded articles to PMC has increased greatly since the Public Access Policy became mandatory in April, Dr. Lipman said. The compliance rate is close to 60%, and is continuing to increase monthly.

PMC International

In February 2008, PMC modified its policy regarding participation in PMC International (PMCi). The prior policy had been that journals joining PMC would, as part of the PMC agreement, also agree to have their articles archived in future PMCi sites. Based on concerns expressed by some publishers for granting redistribution rights to unnamed future centers, as well as delays in establishing PMCi sites beyond the one in the UK (UKPMC), the policy was changed. Under the revised policy, the agreements for journals newly joining PMC provide for participation in only those PMCi sites authorized at the time the PMC agreement is signed (currently only UKPMC). Journals with prior agreements that covered all future PMCi sites also are being changed to apply only to UKPMC. As each new PMCi site comes on board, NLM will request approval from the existing PMC journals for the new site.

III. Public Access Policy – Neil Thakur, Dale Berkley

Neil Thakur – Training for Implementation of the Public Access Policy

Dr. Thakur provided an overview of the NIH Public Access Policy, which became mandatory as a result of the Appropriations Act of 2008 signed in December 2007. He described the benefits of the policy, its key definitions, who must comply, and other provisions. Dr. Thakur also explained how the policy is consistent with copyright law. He noted that NIH had an open meeting on the Public Access Policy on March 20, 2008, and that the transcript from that meeting will be posted in June. In September, NIH will issue a report and analysis of the approximately 200 comments it received on the Public Access Policy in response to a Request for Information this spring.

Dale Berkley – PMC Implementation Plan for NIH Intramural Staff

Dr. Berkley explained that the Office of the General Counsel was asked to help with the implementation of the Public Access Policy for NIH intramural staff. OGC's two objectives were to 1) develop provisions that would allow NIH authors to expressly reserve the right to deposit their manuscripts with PMC, and 2) address copyright and other provisions in publishers' agreements that are unacceptable to the government. Dr. Berkley described the process that was developed, which involves NIH authors sending publishers an NIH-developed "cover sheet" that serves two functions: to notify publishers about the author's right to deposit in PMC, and to modify the publisher's agreement. Signing the "cover sheet" and attaching it to the publisher's agreement constitutes execution of the publisher's agreement, subject to the provisions of the "cover sheet."

IV. Publisher's View of the NIH Portfolio Model – Mila Becker, American Society of Hematology

Ms. Becker described the background of how the American Society of Hematology's journal, Blood, and other journals decided to deposit NIH-funded articles in PMC through a program known as the "NIH Portfolio Model", one of the three standard ways for publisher participation in PMC. Calling the model a "win-win," as it benefits authors and NIH, Ms. Becker said the approach has several advantages, including that only one version of the article (the final published version) is provided to the public. The system also reduces administrative costs, increases compliance with the Public Access Policy, and enables articles to be rapidly archived. Under the program, ASH submits the final version of articles arising from NIH funding to PMC at the time of journal publication. The articles, however, are not publicly available in PMC until 12 months after publication. After the 12-month embargo period, PMC may provide access to an HTML version; the publisher's PDF version is provided only on ASH's website in an effort to help ensure traffic to the website, Ms. Becker said. She also described some of ASH's concerns with implementation of the Public Access Policy, including use of the "cover sheet" for NIH intramural authors. ASH outside counsel is currently reviewing the cover sheet. Ms. Becker closed by discussing the importance of NIH communication with publishers, as well as intramural and extramural researchers.

V. Journal of Clinical Investigation and PMC – John Hawley, American Society for Clinical Investigation (ASCI)

Mr. Hawley described the process of developing a Journal of Clinical Investigation website. The intent was to produce a site that would be a “fair equivalent” to Highwire and PMC (JCI has been on Highwire since 1996 and at PMC since 2003), that would provide access to the entire JCI archive, and that would allow ASCI to capture data on readership behavior. PMC helped JCI with the project by supplying its entire JCI archive and by providing advice on data design. The website has been functional since January 15, 2008. There are still some gaps, Mr. Hawley said. PMC is still serving as the host for PDFs and images, search functionality is “a work in progress,” and usage logging and analysis are proving to be difficult.

VI. UKPMC Update – Robert Kiley

Mr. Kiley presented results of a study that examined compliance with the Wellcome Trust (WT) open-access mandate. The study found that of 279 evaluated papers, almost all (91%, or 255) of the papers were published in a journal with a Wellcome Trust-compliant policy. 27% of the papers were accessible via PMC/UKPMC in accordance with the policy.. Elsevier was the largest single publisher in the cohort, accounting for 80 (29%) of papers. Only 14% of the papers published by Elsevier were deposited in PMC, largely because authors had not selected the open access (author pays) option. WT plans to work more closely with journals with author-pays policies to ensure that papers are deposited.

Mr. Kiley also updated the committee on other changes planned for UKPMC, such as a new funders’ home page and a grant look-up tool. “Phase 3” plans to develop UKPMC into a premier resource for the biomedical and health research communities include three “work-packages”: 1) Exposing documents in UKPMC to text and data mining technologies to extract facts from the literature (lead partners are the European Bioinformatics Institute (EBI) and the National Centre for Text Mining (NaCTeM) at the University of Manchester) 2) Providing access to additional relevant resources, such as clinical guidelines (lead partner is British Library), and 3) Providing access to comprehensive metadata (lead partners are EBI and University of Manchester).

WT will be exploring the possibility of transforming UKPMC into a single, Europe-wide repository for biomedical research, and may host a meeting on the topic in late 2008, Mr. Kiley said. Other activities include working with Universities UK to encourage establishment of central funds at the institutional level to meet OA costs.

VII. Modularization of PMC Software Architecture and PMC “Business Rules” – Jim Ostell

Dr. Ostell described an effort in development to modularize PMC so that instead of UKPMC inserting content into PMC pages, the system would allow insertion of PMC content into UKPMC (or other groups’) webpages. The service would allow customization of those elements of a page that can be customized, such as the navigation pathways or links to other forms of an article, while leaving intact the parts protected by PMC’s agreements with publishers. Elements

that cannot be customized include the article page banner and the actual content of the article, as well as the publisher acknowledgement and the watermark, for example.

VIII. Discovery Project – David Lipman

Dr. Lipman described the history and goals of the Discovery Project and some of the achievements to date. The re-engineered software for the Entrez retrieval system (the portal system) enables NCBI to better analyze user logs and evaluate experimental designs that are intended to aid users in the discovery process. The general approach is to test new pages or solutions with a small percentage of users and, if successful, to put the change into production. Under this initiative NCBI has added features, such as an automatic search for matching citations when a user enters a query that appears to be an article title. Once PMC is in the portal system, discovery-related features will be added there as well.

Adjournment

The PubMed Central National Advisory Committee adjourned at 2:50 p.m.

CERTIFICATION

I hereby certify that the foregoing minutes are accurate and complete.

Robert Kiley (Date)
Chair, PubMed Central National
Advisory Committee

David J. Lipman, M.D. (Date)
Director, National Center for
Biotechnology Information, NLM