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 4, 2010

The meeting of the PubMed Central National Advisory Committee was convened on June 4, 2010, from 9:30 a.m. to 12 p.m., in the Board Room of the National Library of Medicine (NLM), Bethesda, Maryland. The meeting was open to the public. Dr. Gary Ward presided as Chair. Following the meeting, a special program was held in the NLM Lister Hill Auditorium to commemorate the 10th anniversary of PMC.

Members Present

Gary Ward, Ph.D., University of Vermont (*PMC Advisory Committee Chair*)
Ivy Anderson, M.L.S., California Digital Library
Christopher Bird, B.A., Wellcome Trust
Ronald Blanton, M.D., Case Western Reserve University
Jan Fassler, Ph.D., University of Iowa
Cynthia Henderson, M.L.S., Louis Stokes Health Sciences Library, Howard University
Maricel Kann, Ph.D., University of Maryland
Delores Meglio, M.S., Knovel Corporation
Sarah Michalak, M.L.S., University of North Carolina
Mark Sobel, M.D., Ph.D., American Society for Investigative Pathology
Michael Tanner, Ph.D., University of Illinois at Chicago
Susan Weintraub, Ph.D., University of Texas Health Science Center
David J. Lipman, M.D., Director, National Center for Biotechnology Information, NLM, NIH (*PMC Advisory Committee Executive Secretary*)

Special Guests Present

Heather Joseph, M.A., Scholarly Publishing and Academic Resources Coalition
Robert Kiley, M.S., Wellcome Trust
Paul Ginsparg, Ph.D., Cornell University
Elizabeth Marincola, M.B.A., Society for Science & the Public
Sir Richard Roberts, Ph.D., New England Biolabs

NIH Staff Present
Jeff Beck, NCBI, NLM
Abraham Becker, NCBI, NLM
Dennis Benson, NCBI, NLM
Janet Coleman, NCBI, NLM
Kathel Dunn, LO, NLM
Martha Fishel, LO, NLM
Al Graeff, NCBI, NLM
Betsy Humphreys, OD, NLM
Lynn King, NIDCR
Sheldon Kotzin, LO, NLM
Sergey Krasnov, NCBI, NLM
Kathy Kwan, NCBI, NLM
Dianne McCutcheon, LO, NLM
John Mullican, NCBI, NLM
Jim Ostell, NCBI, NLM
Edwin Sequeira, NCBI, NLM
Jerry Sheehan, OD, NLM
Kent Smith, NCBI, NLM

Visitors Present
Mila Becker, American Society of Hematology
Kyle Brown, American Society for Biochemistry
Dori Gardner, Elsevier
Alice Ra'anan, American Physiological Society
Nancy Rodnan, American Society for Biochemistry and Molecular Biology
Tyrone Spady, Federation of American Societies for Experimental Biology
[Additional people attended who did not sign in or did not sign in legibly]

I. Call to Order and Opening Remarks – Dr. Gary Ward & Dr. David Lipman

Dr. Ward called the meeting to order at 9:30 a.m. Committee members and attendees introduced themselves. The committee voted to approve the minutes from the last meeting.

II. Report from the NLM Director's Office – Betsy Humphreys

Ms. Humphreys gave an update on some NLM activities potentially relevant to the Committee's mandate. She noted that ClinicalTrials.gov began adding study results data in 2008 and now has close to 2000 results summaries. Further clarification of results reporting requirements is expected in the coming months via a Notice of Proposed Rulemaking. Another upcoming rulemaking that may be of interest is a Final Rule on the Centers for Medicare and Medicaid Services' implementation of

Electronic Health Record incentive programs provided for under the Health Information Technology for Economic and Clinical Health Act.

III. Public Access-related Legislation and Policy – Jerry Sheehan

Mr. Sheehan described three recent or ongoing legislative activities related to public access, none of which are specific to NIH:

1) In December 2009, the White House Office of Science Policy (OSP) issued a Request for Information (RFI) on public access policies. The RFI sought comment on enhancing public access to archived publications resulting from research funded by federal science and technology agencies. The intent was to gather input on how public access policies similar to NIH's could be implemented in other federal agencies that fund research. OSP also established an online forum to obtain input, focusing on three main areas: implementation, features and technology, and management. The RFI and online forum generated about 500 different public comments. OSP is expected to prepare a written summary of the comments before taking further steps.

2) The second action involves Congressional legislation – the Federal Research Public Access Act (FRPAA) – that calls for federal agencies with extramural research budgets over $100 million to make available via the Internet the final manuscripts of articles resulting from research funded by the agencies. Senators Cornyn and Lieberman introduced the bill (S. 1373) in June 2009, and Representatives Waxman, Doyle and others introduced a House version (H.R. 5037) in April 2010. Under the bills the delay period for public release of articles would be limited to a maximum of 6 months, compared to the 12 months allowed under the NIH Public Access Policy.

3) The third activity is the American COMPETES Act (HR 5116), which passed in the House of Representative on May 28, 2010. Section 123 of the Act calls for creation of a committee across different science agencies that would develop and implement public access policies. The Senate is working on its version of the bill.

Members of the PMC Advisory Committee asked which bill would supersede the other. Mr. Sheehan responded that part of the issue would be the first bill to become law. Also, the provisions are somewhat complementary. For example, while FRPAA requires a public access policy for agencies with extramural research budgets over $100 million, the COMPETES Act doesn't have a public access mandate for agencies but requires the Office of Science and Technology Policy to establish a group to coordinate policies across agencies.

The Committee discussed the merits and feasibility of PMC being the venue for providing public access to published articles that result from other agencies' funding, should FRPAA be enacted. Dr. Lipman said it would be technically feasible and that there would be some advantages, such as the cost savings possible through use of the existing PMC infrastructure, and the ability to link information from different disciplines (e.g., chemistry and biophysics).

Several Committee members urged NCBI to be proactive and offer the services of PMC to other agencies that would be affected by FRPAA. Mr. Sheehan commented that agencies have begun to think about how they would provide public access to articles, but that because legislation has not yet passed

and requirements could change, the agencies would likely not want to get too far ahead in the process. Dr. Ginsparg, a special guest at the meeting and a former member of the PMC Advisory Committee, commented that the power of PMC is its integration coupled with domain-specific expertise at NCBI. He expressed concern that while other agencies might want to provide public access through PMC because of the ease of using an existing system, these other disciplines might suffer in the long term because they would not be developing their own integration based on domain-specific expertise. Dr. Lipman countered that if there was consolidation of databases, once the literature was in place it would become more obvious what was missing and other agencies might be stimulated to develop improved systems.

IV. PMC Update – Dr. Lipman

PMC Statistics

This June, PMC is expected to reach 2 million articles, 60% of which are from back issue digitization. There are more than 640 Full Participation PMC journals; about 220 more journals participate through NIH Portfolio agreements, and more than 800 journals participate through Selective Deposit. PMC usage continues to increase each year, with 400,000 to 450,000 unique users each day. Most of the articles in PMC are regularly retrieved, with 70% of articles having been accessed more than 10 times in 2009.

PMC International

UK PubMed Central (UKPMC) has made substantial progress since going online in January 2007, Dr. Lipman reported. It is sponsored by the Wellcome Trust, the UK Medical Research Council, and other funders, and operated by the British Library, the University of Manchester, and the European Bioinformatics Institute. Articles in UKPMC have been linked to other information, in some cases data from EMBL that would correspond to data from NCBI, but in other cases completely different resources that are unique to the UK. UKPMC is now beta testing a customized site design.

PMC Canada went online in October 2009. It is sponsored by the Canadian Institutes of Health Research and the National Research Council's Canada Institute for Scientific and Technical Information.

Committee members asked whether the international sites use the same software as PMC. Dr. Lipman responded affirmatively and explained that there are fixed elements that are identical on all of the sites, but that other elements can be customized.

NIH Public Access

More than 60,000 papers resulting from NIH funding in 2009 have been deposited in PMC, representing 68% of the estimated papers funded by NIH during the year, Dr. Lipman reported. Compliance with the NIH Public Access Policy has improved greatly since the policy became mandatory, and new compliance monitoring tools have been developed to assist grantee institutions. Using Medline tagging of funding acknowledgment statements and other processes, NCBI identifies NIH-funded papers and matches them to grants, principal investigators, and institutions. For each grantee institution, NCBI provides web-based access to a list of compliant (appropriately deposited) and non-compliant papers. Pilot testing of the monitoring tool began in late 2009 at Harvard schools and affiliated hospitals, and it has now been extended to 11 other institutions for further pilot testing expected to last about 3 months. NCBI's Ed Sequeira noted that research institutions have been very positive about the tool and find it

useful for determining their compliance. NCBI plans to refine the tool based on feedback from the pilot institutions, and expects to have it available for all grantee institutions in the fall of 2010. Committee member Ivy Anderson noted that she was asked to find out when the tool would be available, indicating interest in the community.

Audience member Nancy Rodnan, from the American Society for Biochemistry and Molecular Biology, noted that ASBMB originally was only depositing NIH-funded research articles but found it difficult to determine which articles were the result of NIH funding. The group subsequently switched to depositing all articles, which streamlined the process. Ms. Rodnan said there has been a lot of confusion with the PMC ID number and suggested NCBI provide some education about the issue. Dr. Ostell said NCBI could provide the Society with a feed of the PMC numbers for its articles; Ms. Rodnan said that would be very helpful. Dr. Lipman noted that starting this summer NIH grantees will need to use NCBI's My Bibliography, which has been linked to the NIH eRA system and will replace the eRA bibliography service. The new system will simplify the linking of grants to PMC IDs.

PMC Participation Policy

The current PMC Publisher Participation Policy has been in effect since June 2003. The Policy recommends a maximum 1-year embargo, but on request provides for up to 2 years for research articles and up to 3 years for other content. The PMC Advisory Committee proposed these limits in 2003 and affirmed them in 2004. There have been a couple of cases where journals have requested embargoes beyond the policy, so NCBI would like the Committee to again review the policy. Dr. Lipman noted that one of the reasons NCBI prefers shorter embargoes is that the content is being used more quickly, which enables quicker identification of problems. Ms. Michalak moved to reaffirm the existing policy and the Committee voted in favor of retaining the policy.

V. Reports from the Field – Committee Members

Dr. Ward congratulated NCBI on the high percentage of articles that were accessed 10 or more times. Ms. Michalak reported that reference librarians are having annual talks at research administrators' meetings and taking the opportunity to inquire about compliance with the NIH Public Access Policy and offer assistance. Ms. Henderson noted that NCBI's My Bibliography tool was discussed at the annual meeting of the MLA and that there is substantial interest in the tool.

VI. Adjournment

The meeting adjourned at 12 p.m.

CERTIFICATION

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

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Gary Ward (Date)	David J. Lipman, M.D. (Date)
Chair, PubMed Central National Advisory Committee	Director, National Center for Biotechnology Information, NLM