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Virtual Cochrane Governance Meeting June 2021

Open Access Strategic Session

22 June 2021

Trusted evidence.
Informed decisions.
Better health.

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Session Structure

- Introductions
- Open Access presentations – 30mins
- Question & Answer session – 10mins
- Breakout discussion groups – 30mins

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Presentations

1. Quick guide to Open Access - the key things you need to know about OA and Cochrane's current OA position – John Hilton
2. Cochrane's commitment to OA – understanding the strategic drivers and influences, the OA landscape, and the challenges from changing funder mandates – Chris Champion
3. Introducing the Open Access project to develop a roadmap to OA – overview of objectives, workstreams and timelines – Charlotte Pestridge
4. Introducing OA business models – the models we are researching, and understanding what will be Open – Rachel Craven

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Section 1 – Guide to Open Access

The key things you need to know about Open Access, and Cochrane's current OA position

John Hilton
Senior Editor, Publishing Operations

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What is open access?

- Open access (OA) is the **free**, **immediate**, online availability of research articles combined with the **rights to re-use** these outputs fully.
- Knowledge is open if it is free to access, use, modify and share.
- Open access publication has mostly been funded by payment of an **article processing charge** (APC), paid by:
  - **Authors**: pay out of grant funds
  - **Funders**: provide dedicated funds for open access publishing
  - **Institutions**: cover costs centrally with open access funds and/or payment arrangements with publishers

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Types of open access

There are two dominant types of open access:

Gold OA

- ‘Version of record’ is made freely accessible online, immediately and permanently, with full re-use rights.
- Free forever to everyone to read and re-use.

Green OA, also referred to as **self-archiving**

- A version of the article is placed in a repository after publishing in a journal.
- Freely available, usually with restricted re-use rights and after an embargo period.

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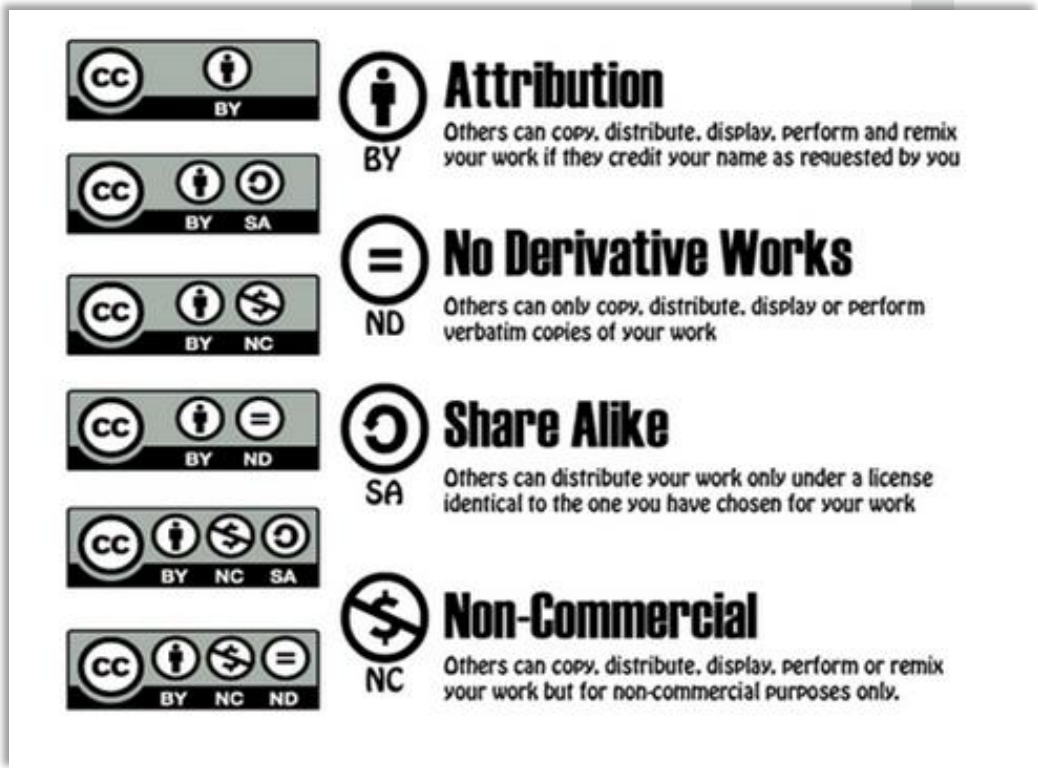
Open access re-use rights

To be **open** an article should be available for **re-use**. The recognised way to do this is to with a **Creative Commons (CC)** license.

The type of CC licence offered depends on the journal, publisher, or funder policy, or author preference.

The most open license is **CC-BY**, which allows others to modify, build upon and distribute work (including for commercial purposes) as long as the original authors are credited.



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What is the difference between free and open?

An article may be freely accessible when it is made **free to read** in a journal or in a repository.

But that does not necessarily satisfy the criteria for ‘open’.

To be **open**, an article should be available for **re-use**, usually via a creative commons license.

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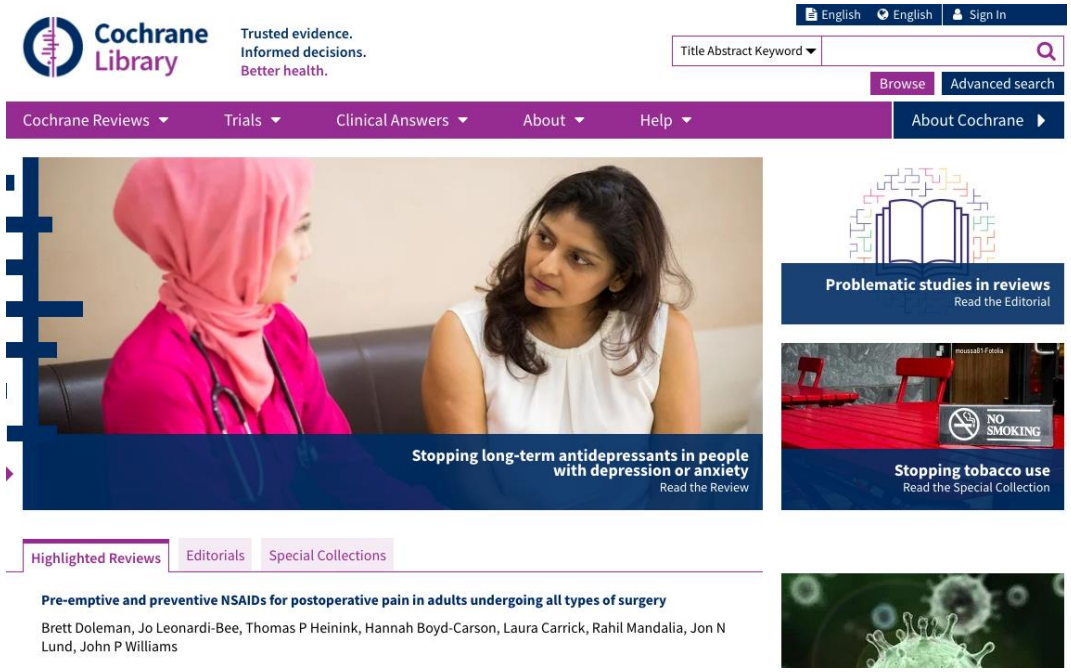
Cochrane's current publishing model

Cochrane Reviews are published in the *Cochrane Database of Systematic Reviews*, hosted on the Cochrane Library, alongside other content.

Cochrane Library available by subscription or regional license.



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Cochrane's current publishing model

Green OA

- Final published version (version of record) is free to access on the Cochrane Library after a 12-month embargo
- This version is deposited in PubMed Central
- Limited re-use rights
- 70% of Cochrane Reviews currently available free via this route

Gold OA

- Immediately free and 'open' with a variation of a Creative Commons license (CC-BY-NC or CC-BY-NC-ND)
- Low uptake: 193 Cochrane Reviews since 2013

The Cochrane Library has a subscription business model to access embargoed (paywalled) content, so *CDSR* is classified as a **hybrid journal**.

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Cochrane's current publishing model

Additional free access options

- All **Protocols** and **Editorials** are published as immediate free access.
- Reviews included in some Cochrane Library **Special Collections** available free access for limited time
- **COVID-19 reviews** continue to be available free access.

As of March 2021, 72.4% reviews available free

- 120 low- and middle-income countries have free access via the **HINARI** programme
- **National and regional licences** in 17 countries

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How open are Cochrane Reviews?

Reader rights
Reuse rights
Copyrights

Author posting rights
Automatic posting
Machine readability

ACCESS	READER RIGHTS	REUSE RIGHTS	COPYRIGHTS	AUTHOR POSTING RIGHTS	AUTOMATIC POSTING	MACHINE READABILITY	ACCESS
OPEN ACCESS	Free readership rights to all articles immediately upon publication	Generous reuse & remixing rights (e.g., CC BY license)	Author holds copyright with no restrictions	Author may post any version to any repository or website with no delay	Journals make copies of all articles automatically available in trusted third-party repositories (e.g.,PubMed Central, OpenAire, institutional) immediately upon publication	Article full text, metadata, supporting data (including format and semantic markup) & citations may be accessed via API, with instructions publicly posted	OPEN ACCESS
	Free readership rights to all articles after an embargo of no more than 6 months	Reuse, remixing, & further building upon the work subject to certain restrictions & conditions (e.g., CC BY-NC & CC BY-SA licenses)	Author retains/publisher grants broad rights, including author reuse (e.g., of figures in presentations/teaching, creation of derivatives) and authorization rights (for others to use)	Author may post some version (determined by publisher) to any repository or website with no delay	Journals make copies of all articles automatically available in trusted third-party repositories (e.g., PubMed Central, OpenAire, institutional) within 6 months	Article full text, metadata, & citations may be accessed via API, with instructions publicly posted	
	Free readership rights to all articles after an embargo greater than 6 months	Reuse (no remixing or further building upon the work) subject to certain restrictions and conditions (e.g., CC BY-ND license)	———	Author may post some version (determined by publisher) to any repository or website with some delay (determined by the publisher)	Journals make copies of all articles automatically available in trusted third-party repositories (e.g., PubMed Central, OpenAire, institutional) within 12 months	Article full text, metadata, & citations may be crawled without special permission or registration, with instructions publicly posted	
	Free and immediate readership rights to some, but not all, articles (including "hybrid" models)	Some reuse rights beyond fair use for some, but not all, articles (including "hybrid models")	Author retains/publisher grants limited rights for author reuse (e.g., of figures in presentations/ teaching, creation of derivatives)	Author may post some version (determined by publisher) to certain repositories or websites, with or without delays	Journals make copies of some, but not all, articles automatically available in trusted third-party repositories (e.g., PubMed Central, OpenAire, institutional) within 12 months	Article full text, metadata, & citations may be crawled with permission, with instructions publicly posted	
CLOSED ACCESS	Subscription, membership, pay-per-view, or other fees required to read all articles	No reuse rights beyond fair use/dealing or other limitations or exceptions to copyright (All Rights Reserved)	Publisher holds copyright, with no author reuse beyond fair use	Author may not deposit any versions to any repositories or websites at any time	No automatic posting in third-party repositories	No full text articles available for crawling	CLOSED ACCESS

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Questions?

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Section 2 – Cochrane's commitment to OA

Importance of OA to Cochrane, understanding changing funder mandates and challenges for Cochrane.

Chris Champion
Head of People Services

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Cochrane's commitment to Open Access

Strategic objective:

By 2025, Cochrane will achieve universal Open Access to Cochrane Systematic Reviews immediately on publication for both new and updated reviews

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Drivers for Open Access

OA is at the heart of Cochrane's mission.

Allows everyone to benefit from reading and using our evidence.	Enables results to be disseminated more rapidly and widely.	Accelerates research and the use of evidence in policy in practice.

COVID-19 has demonstrated the benefits of OA, which will accelerate the move to open research.

Responding to increasing funder mandate pressures

Innovation in Open Access funding models

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Changing global OA environment

- Funding policies and mandates are evolving rapidly in some regions of the world, less so in others.
- **Coalition S** is one of the major influences in the OA policy landscape and is driving rapid change across Europe through its **Plan S**.
- Plan S does not support the hybrid model of publishing.
- They have forced through the transition of hybrid journals to full OA through the use of time-limited Transformative Agreements including transformative journals.

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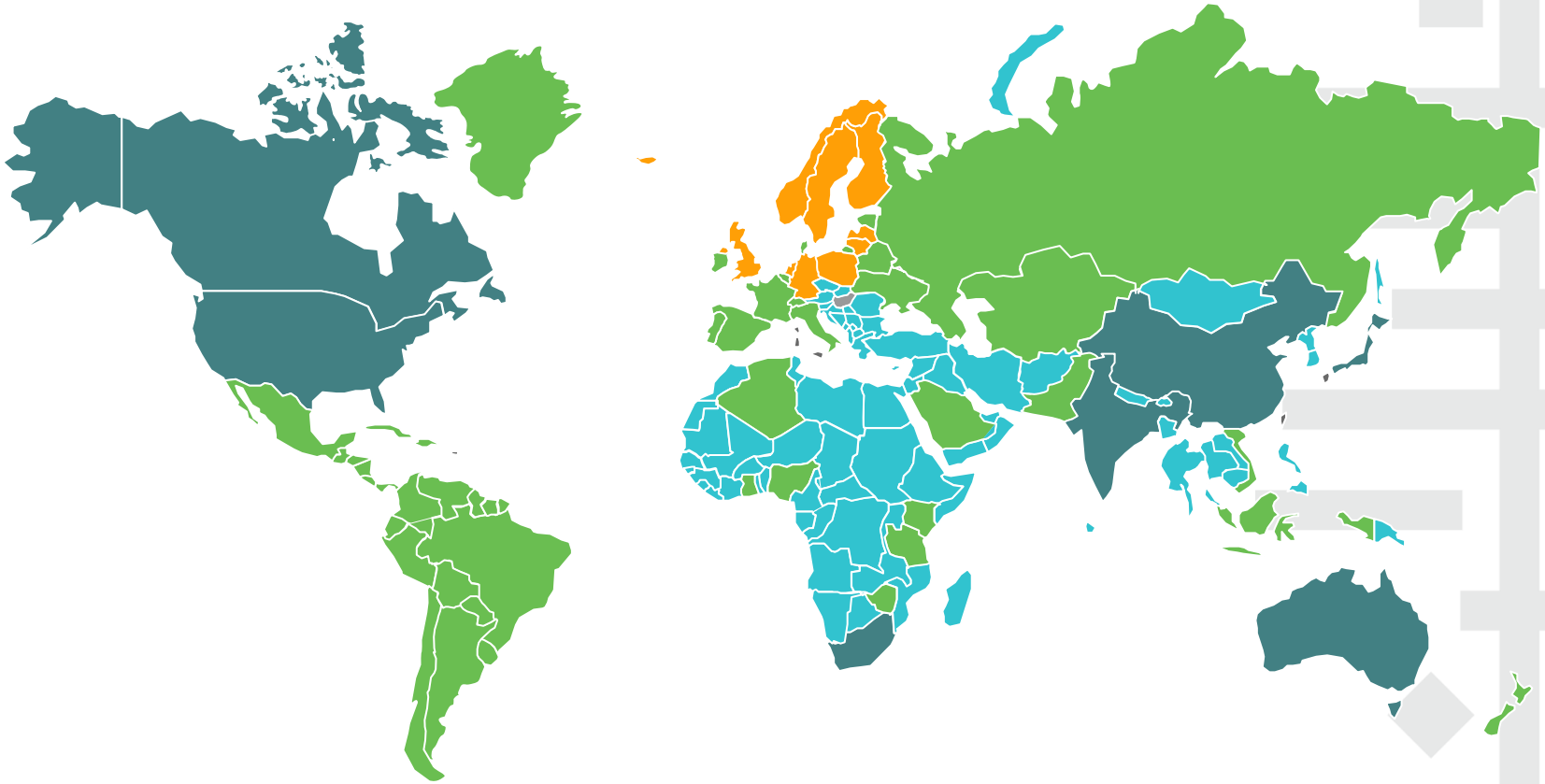
Global Open Access Policies and Initiatives



Established Green OA Policy with some Gold

Gold OA Policies

Green OA Policies

No designated policy

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Changing funder mandates: NIHR Case Study

- NIHR (UK) is expected to introduce a new OA policy aligned to Plan S from April 2022.
- NIHR have made it clear it will include infrastructure funding and grant funding.
- Future funding to UK CRGs will be at risk if we do not comply with the new NIHR OA Policy.
- We are still waiting for the new policy to be published – but have started discussions with NIHR to consult on our OA plans and options. Still unclear whether we will have to comply from April 2022 or from April 2023.

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Changing funder mandates: NHMRC Case Study

- NHMRC ran a consultation in April 2021.
- What we know from this consultation is that they are exploring an author rights retention strategy.
- This empowers the author to choose any publication route.
- We believe this will affect Cochrane sometime between January and July 2023.
- We still need to have a dialogue with NHMRC to understand whether this will cover infrastructure and grant funding.

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Impact of these mandates

1. Our 12 month embargo period will no longer be compliant.
2. We will need to remove barriers to full re-use (i.e. publication under a CC-BY creative commons attribution license).
3. Our hybrid journal approach will be non-compliant, unless the publication is part of an approved time-limited OA transformative arrangement or transition plan.
4. Our open access model will need to take account of Author Rights Retention strategies.

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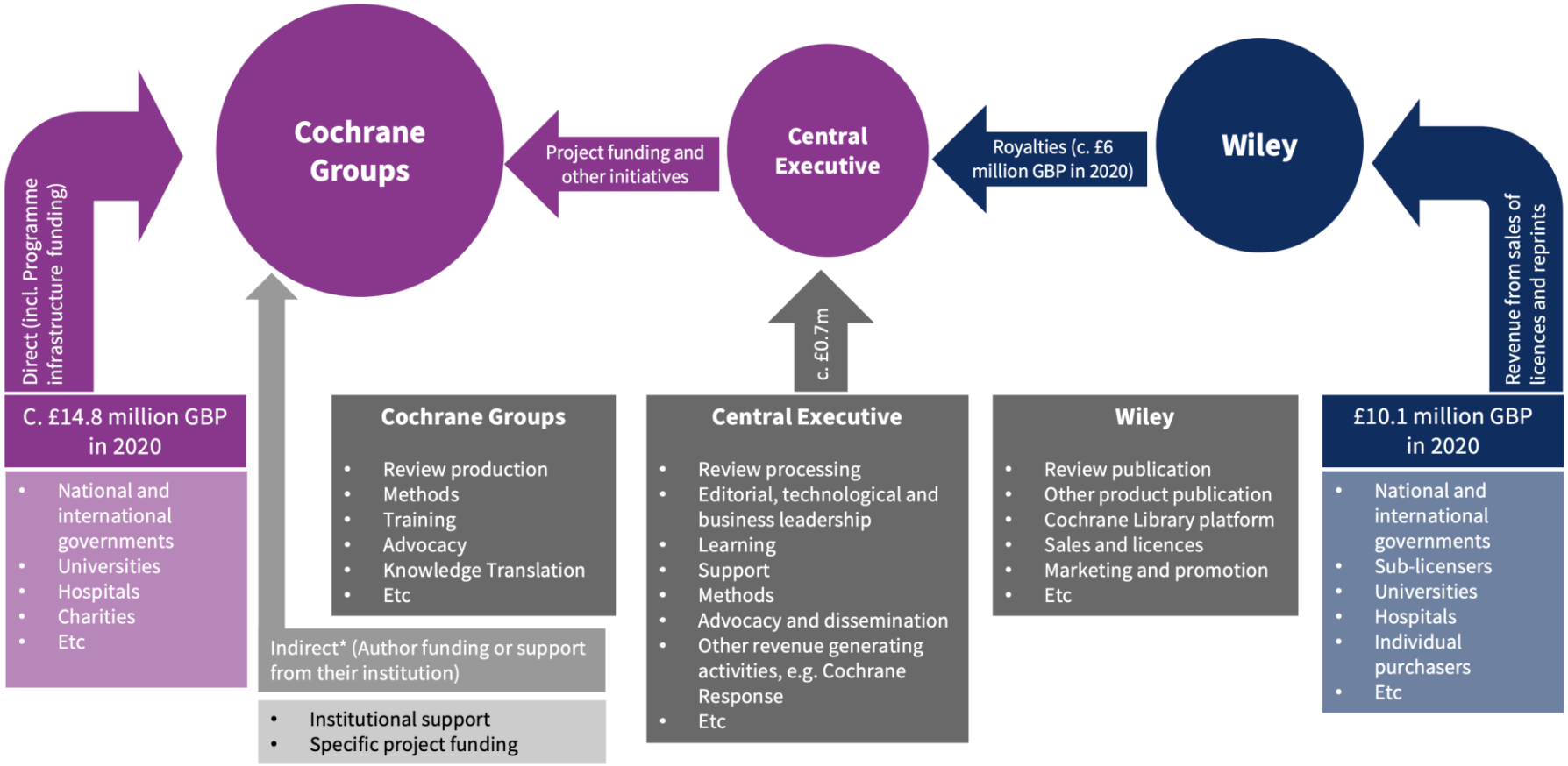
Impact of these mandates (cont.)

- These mandates apply to the outputs of 30 Review Groups who, in 2020, collectively published 385 reviews (71% of the annual total).
- This Group funding is at risk if we do not have a compliant OA publishing route.
- Any future publishing business model, whether subscription or Open Access, is at risk if we do not have systematic reviews to publish.

COCHRANE'S FUNDING 2020



** "Indirect" does not constitute income for Cochrane, but acknowledges the funding sources that pay for our authors' time when writing Cochrane reviews.*

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Challenges

- Expectation that any future OA business model will bring in less revenue than the current subscription model.
- We need an OA model that at the least covers our central review production and publishing costs.
- Other revenue sources will be needed to fund other Cochrane activities.

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Open Access project to develop a roadmap to OA.

Overview of objectives, scope and timelines.

Charlotte Pestridge
Head of Publishing, Research and Development

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Project objectives

- This is **a research and consultation** project to identify a sustainable and funder compliant route to full Open Access (OA) for all Cochrane Reviews.
- This phase of the project will run through to March 2022.
- We will **deliver an OA transition plan** confirming:
  - How Cochrane could deliver full OA by 2025.
  - How we can be compliant with OA funder mandates during this 3 years transition period.
  - The impact and implications this would have on Cochrane's future income and review production and publishing models.

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Research & consultation objectives

1. To understand the operational, financial and risk profile of a range of OA business models.
2. To validate the proposed Cochrane Library product strategy and development plan with key user and customer groups.
3. To define what content is open and what could be behind a paywall at both product and article level.
4. To understand the OA challenges and opportunities facing our review producing stakeholders and groups.

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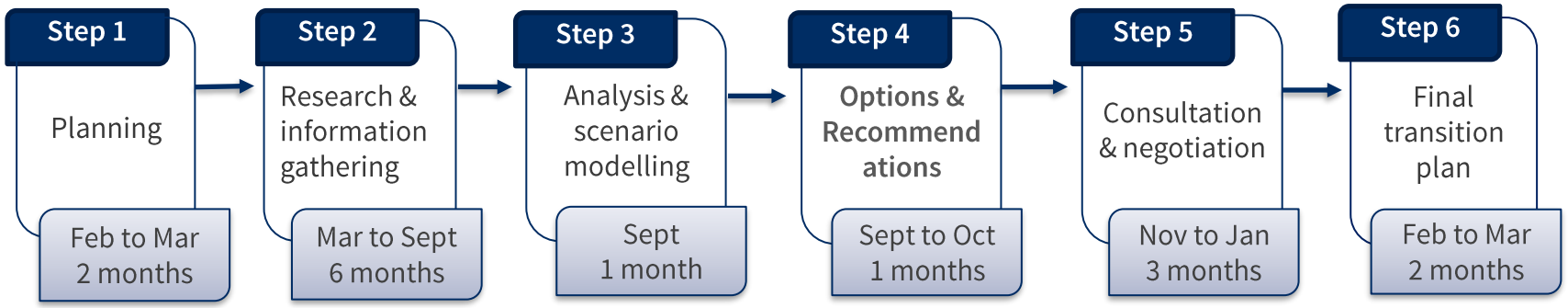
Project plan and schedule



	2021											2022		
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Step 1 **Planning**														
Step 2 **Research & information gathering**														
Step 3 **Analysis & scenario modelling**														
Step 4 **Options & recommendations**														
Step 5 **Consultation & negotiation**														
Step 6 **Final transition plan**														

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Why a 3 to 4-years roadmap to OA?

- Need time to manage a publishing business model change of this scale.
- This one business model change impacts up to 80% of the charities income.
- Need to complete due diligence and ensure we have the time to manage the financial, operational and organisational risks.
- Provide sufficient time to implement any changes required in our review production and publishing systems and models.
- We will work with funders to comply with new funder mandates during the 3 years roadmap.

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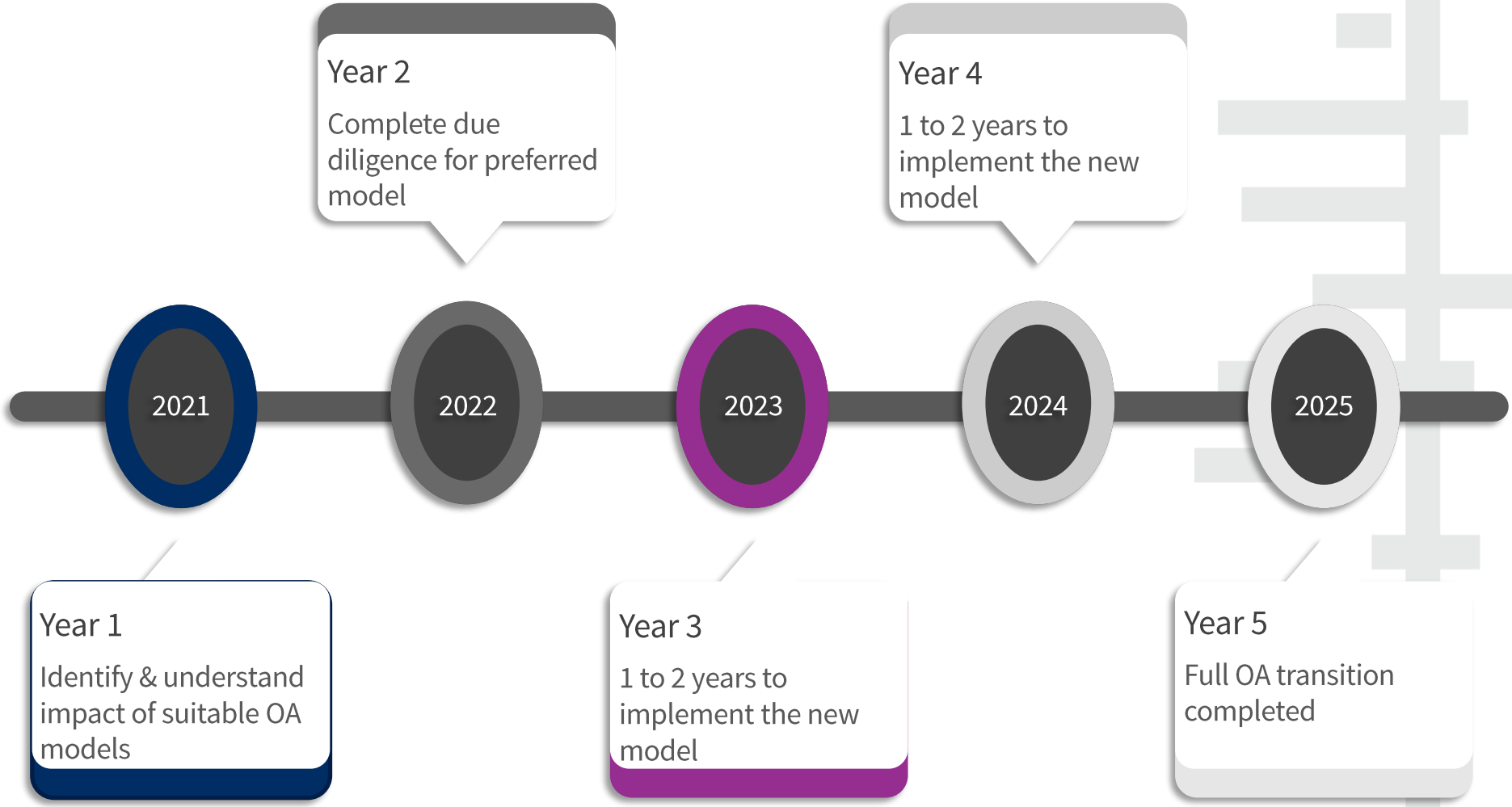
Proposed roadmap to OA



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Open Access business models

The models we are researching and clarifying what will be Open.

Rachel Craven
Product Lead

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Open Access business models under consideration

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Open Access & financial sustainability

Open Access means free to access on the day of publication

BUT quality editorial, publishing and dissemination (key to Cochrane mission) must be funded somehow, by someone…

OA business models under consideration in the coming months:

- Subscribe to Open
- APCs
- Freemium subscription model
- Funder community

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OA models under consideration

	Subscribe to Open	Article Processing Charges	Freemium	Funder Community
Who pays?	Subscribers pay to make Reviews open for all (as opposed to paying for access to Reviews only for their own institution)	Authors/funders pay to make a Review open	Cochrane Library subscription contributes substantially to making Reviews open	Research and national funding agencies sponsor making Reviews open via a funder community model.
What are they paying for?	Shared cost of publishing for all Reviews	Entire cost of publishing for one Review	Subscription content, resources & tools Shared cost of publishing for all Reviews	Shared cost of publishing for all Reviews
What's the current landscape?	Experimental No proven track record	Well-established Most publishers using this model for OA	Well-established Common pricing model for content providers and software companies	Well-established Common at a project-level, not common for infrastructure costs
Is it a good fit for Cochrane?	To be validated	To be validated NB. Does not map to Review author model	To be validated	To be validated

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Why APCs do not work for Cochrane

- Very low uptake of Gold APCs since introduction in 2013.
- Our authors do not have access to institutional and funder APCs.
- Higher APC rates would be required to support our central review production and publishing costs.
- We have relatively high review production costs due to the complex nature of systematic reviews and our quality standards.
- Lack of access to OA subsidies from other Cochrane funding sources.

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Open Access content

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What does it mean for the Library?

"Research publications […] must be **free to access on the day of publication**. In addition, the **right to reuse** the article is subject to a special type of open licence."

- Impact: research publications, data reusability, remove embargo

"The scope of Plan S is **primary peer reviewed** research across all disciplines […] Plan S applies to all peer-reviewed publications that are **based on results from research funded fully or partially by cOAlition S members**."

- Impact: Cochrane Reviews (but not CENTRAL, CCAs)

"With effect from 2021, all scholarly publications […] must be published in **Open Access Journals**, on **Open Access Platforms**."

- Impact: CDSR/Cochrane Library

cOAlition S,** updated **4 Nov 2020; www.coalition-s.org

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Future Cochrane Library?

Open Access	Paywalled
Open Access Reviews - article by article including article-level data - with free-to-use standard search	Cochrane Library with cross-article content and tools, and enhanced subscriber content, resources & tools

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	Open Access	Paywalled
Cochrane Reviews		
Review article - core	Open access	Open access
Review article - enhanced	---	Subscription only
Search		
Standard search	Open access	Open access
Advanced search	---	Subscription only
Search Manager	---	Subscription only
Mesh Search	---	Subscription only
PICO Search	---	Subscription only
Related content		
Protocols	Open access	Open access
PLS	Open access	Open access
Translations	Free	Free
Curated content and databases		
Editorials	Open access	Open access
Special Collections	Open access/Free	Open access/Free
Supplements	---	Subscription only
Cross-Review tools, etc.	---	Subscription only
Additional content & resources	---	Subscription only
Trials (CENTRAL)	---	Subscription only
CCAs	---	Subscription only

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OA Key principles

OA business model and transition plan needs to balance the following key principles

- Sustainable and work within the context of Cochrane's broader organisational funding model and strategic priorities.
- Support the core activities required to maintain and support the delivery of high quality, trusted, relevant and timely Systematic Reviews.
- Compliant with Cochrane's research funder OA mandates and expectations.
- Inclusive and equitable, supporting all authors irrespective of their geographic or institutional setting, or career level.
- Attracts authors and high quality reviews.

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Questions?

Thank you