Centers for Disease Control and Prevention

CDC Announcement (to all CDC and ATSDR Employees)

CDC¹ has developed the New Operational Policy: *Public Access to CDC Funded Publications*

- 1. Summary of Policy: This policy requires CDC-funded peer-reviewed publications be preserved in a stable archive and made freely available to the public, health care and public health providers, educators, and scientists. These goals are accomplished through 1) information systems to archive CDC-funded documents and provide a searchable interface for public access; and 2) CDC-funded authors uploading final versions of the manuscripts to the public access system. This policy applies to:
 - All peer-reviewed publications funded by CDC, regardless of the funding mechanism used (e.g., grant, cooperative agreement, contract)
 - All peer-reviewed publications authored or co-authored by CDC employees.
- 2. Related Issuances: none
- 3. Responsible Organization: Office of the Associate Director for Science (OADS)
- 4. Material Superseded: none
- **5. Recertification:** This document is scheduled for recertification on or before the last working day of July, 2018.
- **6. Points of Contact:** Robert Swain, OADS, 404-498-6873, and Jimmy A. Harrison, MASO, 770-488-4757.

To go directly to the Policy, enter the following URL into the location line of your browser: http://isp-v-maso-apps.cdc.gov/policy/Doc/policy596.pdf

/s/ Sherri A. Berger, M.S.P.H. Chief Operating Officer

¹ References to CDC also apply to the Agency for Toxic Substances and Disease Registry (ATSDR).

Category: General Administration

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Proponents: Office of the Director, and Office of the Associate Director for Science (OADS)

PUBLIC ACCESS TO CDC FUNDED PUBLICATIONS

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1. PURPOSE AND SCOPE

This policy requires CDC¹-funded peer-reviewed publications be preserved in a stable archive and made freely available to the public, health care and public health providers, educators, and scientists. These goals are accomplished through 1) information systems to archive CDC-funded documents and provide a searchable interface for public access; and 2) CDC-funded authors uploading final versions of the manuscripts to the public access system.

This policy applies to:

- All peer-reviewed publications funded by CDC, regardless of the funding mechanism used (e.g., grant, cooperative agreement, contract)
- All peer-reviewed publications authored or co-authored by CDC employees.

2. BACKGROUND

The results and accomplishments of the activities that CDC funds must be made available to the public. Widespread access to and sharing of peer-reviewed publications generated with CDC support advances science and improves communication of peer-reviewed, public health-related information to the public, health care and public health providers, educators, and scientists. This policy supports the CDC response to the February 22, 2013 Office of Science and Technology Policy (OSTP) memo, attached as a link in the Reference section below.

3. POLICY

A. Submission of Manuscripts

A CDC-funded author must submit an electronic version of the author's final manuscript upon acceptance for publication.

¹ References to CDC also apply to the Agency for Toxic Substances and Disease Registry

- 1) Manuscripts resulting from **extramural** work must be electronically submitted directly to the National Institutes of Health (NIH) Manuscript Submission System (NIHMS) http://www.nihms.nih.gov/.
- 2) Manuscripts resulting from Intramural work must be electronically submitted directly to the National Institutes of Health (NIH) Manuscript Submission System (NIHMS) http://www.nihms.nih.gov/. The NIH Manuscript Submission System Reference Number (NIHMSID) or PubMed Central Identification Number (PMCID) will then be entered into the eClearance system.
- 3) At the time of submission, the submitting author must specify the date the final manuscript will be publicly accessible through <u>PubMed Central (PMC)</u>. The submitting author must also post the manuscript through <u>PMC</u> within twelve months of the publisher's official date of final publication; however the author is strongly encouraged to make the subject manuscript available as soon as possible. It is recommended that authors review the publisher's instructions to authors to determine required embargo time.

B. Public Availability of Manuscripts

Extramural manuscripts must be made publicly available via <u>PMC</u> and <u>CDC Stacks</u> no later than 12 months after the official date of publication.

C. Additional Requirements.

This policy applies to all CDC extramural and intramural work, including grants and career development award mechanisms, cooperative agreements, and contracts.

CDC implements the public access policy in a manner consistent with federal copyright law, Title 17 of the United States Code.

All Funding Opportunity Announcements (FOA) for CDC grants or cooperative agreements as well as Requests for Proposals (RFP) for contracts must contain language that ensures compliance with the CDC Public Access policy.

This policy does not alter established requirements related to the transfer of official agency publications to the National Archives as required by Federal Records Management Requirements and as specified in the CDC Records Control Schedule.

4. RESPONSIBILITIES

A. Office of the Associate Director for Science (OADS)

OADS maintains the CDC Public Access policy and IT systems required to support the policy and promotes compliance. OADS manages intramural submissions to NIHMS and provides oversight for extramural submissions to NIHMS. OADS also monitors and reports compliance.

B. Centers, Institute and Offices (CIOs), OD Staff and Business Service Offices

CIO Associate Directors for Science (ADS) staff, in collaboration with OADS, are responsible for promoting compliance with the CDC Public Access Policy. The Office of Science Quality (OSQ), within OADS, provides tools such as post scientific clearance compliance reports to assist ADS staff with ensuring manuscripts are submitted properly.

C. Procurement and Grants Office (PGO)

PGO is responsible for including language that supports the CDC Public Access policy in all Funding Opportunity Announcements (FOAs) and Requests for Proposals (RFPs), and in accordance with applicable provisions found in the Department of Health and Human Services (HHS) grants regulations and policies, Office of Management and Budget circulars, and Federal Acquisitions Regulations.

D. Supervisors

Supervisors of publishing authors are responsible for ensuring compliance with the CDC Public Access Policy.

E. CDC Employees

CDC employees are responsible for uploading an electronic copy of final peer reviewed manuscripts accepted by a journal into the <u>NIHMS</u> system. The PMCID of the manuscript will then be entered into the <u>eClearance system</u>. The CDC lead author is responsible for proofing final manuscripts to ensure no errors were made during the conversion at <u>NIHMS</u>.

F. Contractors

In accordance with the provisions of their underlying contract, CDC contractors who author a publication are responsible for submitting the final peer reviewed manuscripts into the NIHMS system and will proof the final manuscripts to ensure no errors were made during the conversion in NIHMS.

G. Grantees

CDC grantees are responsible to submit the final peer reviewed manuscripts into the <u>NIHMS</u> system. CDC grantees will then proof the final manuscripts to ensure no errors were made during the conversion in <u>NIHMS</u>. CDC grantee manuscript submissions are covered under Section 36 of OMB Circular A-110(a) and applicable HHS grants regulations.

H. Authors

If the author's meaning was altered during the proofing phase, the lead author is responsible for ensuring corrections are made to the manuscript before posting to PMC. Grammatical, formatting, readability, or copy editing changes that do not alter the meaning of article are not required.

5. REFERENCES

- **A.** NIH Public Access Policy (NOT-OD-05-022) Division G, Title II, Section 218 of PL 110-161 (http://publicaccess.nih.gov/policy.htm
- **B.** National Institutes of Health http://www.nih.gov/
- C. Copyright Law of the United States, http://www.copyright.gov/title17/

- **D.** Section 36 of OMB Circular A-110(a) Intangible Property
- **E.** Policy on Enhancing Public Access to Achieved Publications Resulting from NIH Research http://grants.nih.gov/grants/guide/notice-files/not-od-05-022.html
- **F.** CDC Operational Policy: Funding Opportunity Announcements, CDC-GA-2012-03; http://isp-v-maso-apps.cdc.gov/policy/Doc/policy588.pdf
- G. February 22, 2013 OSTP Memo: Increasing Access to the Results of Federally Funded Scientific Research http://www.whitehouse.gov/sites/default/files/microsites/ostp/ostp public access memo 20 13.pdf

6. ABBREVIATIONS AND ACRONYMS

For the purpose of this policy, the following acronyms apply.

ADS – Associate Directors for Science

CDC – Centers for Disease Control and Prevention

CIOs – Centers, Institute, and Offices

FOA – Funding Opportunity Announcement

HHS – Department of Health and Human Services

NIH – National Institutes of Health

NLM - National Library of Medicine

NIHMS - National Institutes of Health Manuscript Submission System

NIHMSID - NIH Manuscript System Identification

OADS – Office of the Associate Director for Science

OMB – Office of Management and Budget

OSQ – Office for Science Quality

PMC – PubMed Central

PMCID – PubMed Center Identification Number

PGO – Procurement and Grants Office

RFP - Request for Proposals

7. DEFINITIONS

Final manuscript: The final version accepted for journal publication, and includes all modifications from the publishing peer review process.

Intramural Work: Work that occurs at the CDC.

Extramural Work: Activities funded through an assistance or acquisition mechanism (e.g., grant, cooperative agreement, or contract).

Official publication date: The date the article was published by the publisher.

NIHMSID: The NIH Manuscript Submission System reference number is the unique ID number given to a manuscript upon submission to NIHMS.

PMCID: The PubMed Central unique ID number for a manuscript.