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Open Access Journals: Free, Quality, Peer Reviewed Evidence Based Resources To Support Patient Care

Student Dissertation

How to cite:

Atiogbe, Potenza (2019). Open Access Journals: Free, Quality, Peer Reviewed Evidence Based Resources To Support Patient Care. Research Summary for the Open University module H818 The Networked Practitioner

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FRI: Open Access Journals: Free, Quality, Peer Reviewed Evidence Based Resources To Support Patient Care (Potenza Atiogbe)

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Potenza Atiogbe

6 January 2019

Extra content

The project setting is a UK hospital library. Underpinning the current work and direction of all UK hospital libraries is the Knowledge for Healthcare (KfH) strategy. The KfH aim for UK hospital libraries is to provide evidence based information to enable the provision of excellent patient care (Health Education England, 2015).

The 2013-14 statistics show a total investment of £50.9 million into hospital libraries to enable meeting the KfH aim. £17.8 million of this investment was spent on online journals which are only accessible with a password. Training is required to facilitate access (Health Education England, 2015). The unpublished 2017-18 statistics show a reduction in overall investment for hospital libraries at £45 million. £10 million was spent on journals (Reid, 2019).

Conversely, journal prices have increased by 5 - 6% in the last five years (Ebsco, 2018a). The projection for 2019 prices is the same (Ebsco, 2018b).

These statistics indicate that hospital libraries journal funds are contracting and do not match the increasing journal subscription costs. Librarians have to make difficult decisions about renewing or cancelling subscriptions based on usage and other metrics (Bosch, Albee and Henderson, 2018). Creative ways of meeting the KfH aim via journals provision are required.

Open Access Journals (OAJs) can help. OAJ initiatives feature in KfH related literature where the benefits including free access, no passwords, and increased quality are cited. To date, the national library work has focussed on data gathering about institutional repositories and on adding OAJs to the national link resolver (Gorring, 2019). The link resolver is an online tool which uses openurl data to direct users to online holdings/resources at their organisation (Drupal.org and Fenell, 2014). Users still need to use a password to access OAJs which serves as a barrier.

This project attempts to fill in a research gap by realising the potential benefits of advocating

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In Cloudscapes

OAJs use for patient care by introducing a new workshop. As part of the implementation theme of the Open University H818 2019 Conference, the initial results from the pilot workshop will be shared.

The focus of the workshop is to address and discuss barriers and misconceptions about the poor quality of OAJs which have been highlighted as a cause for concern despite the long and evidence based history of OAJs (Suber, 2013). The workshop will showcase how to search evidence based freely available OAJ repositories through the native interface without the need for the link resolver or passwords.

The conference presentation will demonstrate how good practice from advocating OAJ in the academic library sector has been used as an evidence base for this project.

The presentation will include an opportunity for attendees to feedback on the initial results of pilot workshop and inform future workshop presentations.

The goal post H818 is to implement the OAJ workshop into the regular training programme of the hospital library and write a case study to share with other hospital libraries.

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[Potenza Atiogbe](#)

17:19 on 15 January 2019



OU H818 'The Networked Practitioner' Online Conference 2019

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[Potenza Atiogbe](#)

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[Munir Moosa Sadruddin](#)

9:38am 25 January 2019 [Permalink](#)

Hi

Locked/paid resources is a common challenge across the world. I wonder why still the countries and publishers who support open learning charge fee?

It is good that OAJs are available but what are your views on its quality and content? What could be the drawback of password free resources, if completely made available? Is your target sample, nurse or health care professionals?

Munir



[patrick shearer](#)

12:05am 30 January 2019 [Permalink](#)

Potenza,

I was shocked to see the total costs involved for NHS libraries. I know it sounds very political but why does it have to cost this much? And how much profit is being made on the back of service that is already struggling to survive? I wouldnt expect people to work for nothing or give their ideas and work away to others without a cost but 10million on online

journals - frankly depresses me. Is it the case that the misconceptions about free OAJs are created by those that are charging for theirs? Its free so its bad. and who is saying that they are poor quality? Big publishing organisations. Very interesting topic and looking forward to finding out more - especailly if i have got the wrong end fo the stick. :)



[Potenza Atiogbe](#)

11:01am 1 February 2019 (Edited 11:13am 1 February 2019) [Permalink](#)

Thanks Munir for your comments, you are right open access models such as OAJs do on the whole have an article publication charge (APC). Via Twitter and reading blogs, I found evidence that indicates that in only 12% of cases are paid for by authors. APCs are usually paid for by the institutions/universities (24%) or by funders (59%). The fees are used for the platform costs for editorial teams, reviewers etc.

The quality of open access journals (OAJs) has actually improved dramatically over the years since the inception of the OA movement in 1966. A lot of OAJs are peer reviewed and the peer review process is published openly online to show the quality process. Through my networking activities, I have discovered that there are lots of models of OAJs, gold (where the whole journal is completely open access) e.g. PLOS Medicine, Gold hybrid where some of the articles within a traditional subscription based journal are open access. Examples include prestigious journals like Science and Lancet. These articles are then indexed in Open Access Databases like the one in my workshop PubMed Central to facilitate access. These open access articles raise the profile of the journals even more because usually they have wider reach with the links to articles being sent and being fully accessible via social media. They also have higher altmetric score another tool used to measure the impact of a paper. So a lot of authors cite their altmetric scores. If clinicians etc who are social media savvy are sharing OA papers via Twitter, Mendeley Groups etc it does I feel show that they are of a good quality and they want that research etc to be read by others in a similar field to build on that knowledge etc.

I think the quality of a scholarly journal is more to do with the quality of the authors, editors, and referees, not the business model or access policy. From my research I can see that even in my own service a substantial amount of the literature used to inform patient care is open access based which I think supports that these papers are of a high standard.

I can't see any really drawbacks of open access except for publishers perhaps who are noticing a decline in renewals of traditional subscription based journals. Publishers are diversifying their offer with other resources etc.

A quote from Free Medical Journals (one of the databases used in my workshop) sums up how much of a positive impact OAJ will have in the future on medical practice:

“Over the next years, the most important medical journals will be available online, free and in full-text. The unrestricted access to scientific knowledge - the new standard in medical publishing - will have a major impact on medical practice”.

I wholeheartedly believe in this and that is why I wanted to develop workshops to support all healthcare workers (doctors, nurses, physiotherapists) get access to OAJs at the point of care.

[Potenza Atiogbe](#)



12:00pm 1 February 2019 [Permalink](#)

Hi Patrick

Thanks for your comments :-).

It did make me chuckle when I read your opening two sentences. Yes there are a lot of costs involved in NHS libraries. NHS librarians are very skilled in literature searches, systematic reviews, facilitating access to evidence based resources to support patient care. Money saving too, there was research highlighted to show how much it cost for a medical consultant to carry out a search in comparison to a librarian. So some of this investment is into having a skilled workforce.

In addition having the right access to the right information at the right time avoids unneeded diagnostic tests, cost saving and reduces harm to the patients. This is what a librarian can do. Hence why I am passionate about facilitating access to OAJs.

A big cost as highlighted are the resources and having journals online has far greater costs than having print journals. The subscription costs also include having back file access up to a given number of years. OAJs are disrupting this traditional model and offer a good way to free up much needed funds for use on other services.

I think that there is some truth in what you say that big publishing organisations were guilty in the past of supporting the misconceptions of OAJs in terms of quality. However with the movement gaining a lot of momentum e.g. with Open Access Week a week in October (this year will be the 10th year) which is an opportunity to learn about and raise the profile of OA. Policy makers and funders mandating that any research funded by them is actually made OA whether it is in a full OAJ or a hybrid OAJ and/or an institutional (green) repository. Publishers are responding to the challenge in a number of ways. For example Wiley has a number of publications which are the most highly cited in the world. Most of these have some sort of OA whether full or hybrid. They offer full support with understanding what OA is with a video and explain article publication charges and how these usually do not need to be paid by authors but usually the funder or the institution (who may have a Wiley account for handling APCs of OA articles). So publishers are jumping on the OA bandwagon and are making a profit in different ways through institutional APC accounts.

Some healthcare workers themselves are guilty of assuming that free OAJs means poor quality so that is why I included the poll in my poster. I also do a variation of the poll at the beginning of the workshop so that those assumptions are surfaced and discussed.

There are so many aspects to the project which I have discovered through networking activities. Hopefully I have selected the salient points to present on the big day week after next :-).



[David Appel](#)

11:24am 10 February 2019 [Permalink](#)

Hi Potenza,

This sounds like a very interesting and important project. I was not aware of the scale of the issue of accessing relevant medical information for patient care. Your project description and your answers to the questions above have clarified a lot to me and I am looking forward to your presentation next week.

Do I understand correctly that you are running your pilot workshop with patient care workers prior to the conference and will present first results of this workshop at your presentation?



[Potenza Atiogbe](#)

10:19pm 10 February 2019 [Permalink](#)

Thanks David

I have run a few pilot workshops and initially I was going to focus on presenting the first results at the conference. I do touch on these but due to the time limits I have slightly changed the presentation and instead am focussing on the rationale for the topic and the workshop design. Primarily because a lot of networking facilitated putting together the workshop design and also solidifying the rationale and need for the topic. I will put fuller results of the pilot on Cloudworks post the conference.



[David Appel](#)

8:56pm 11 February 2019 [Permalink](#)

This is a bit similar to my project: i am currently also running a prototype (as you know) and will probably present some of the feedback I have already received, but will also use cloudworks to present final results of the prototype testing which will continue afert the conference.



[David Appel](#)

8:56pm 11 February 2019 [Permalink](#)

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[Munir Moosa Sadruddin](#)

7:54am 12 February 2019 [Permalink](#)

Hi

Thank you! I would like to share that institutions do not pay in all the countries. In countries like Pakistan, all faculty members have to publish papers with their own expense, so there might be many more countries where these practices of financial burden may exist. So publishers must also source fund to help such cases, which they don't. Many organization publish only open data of their faculty. Bill Gates Open data project is an example, who refused publishing my work because it was not affiliated with them. They do have billions

but their definition of open, i think means open money, open marketing and open promotion. :)

You will not find much open access journals in education and teacher education. You will find more of these in the field of medicine because those researches are mostly well-funded by organization. Many organizations are making their data open but not the latest one!

What are your views on Open Access Week. Is it a marketing strategy? What about your views on people chasing most cited journals?

I look forward for your presentation. All the best :)



[Potenza Atiogbe](#)

9:38am 13 February 2019 [Permalink](#)

Hi Munir

Thanks for your post. I agree with you it isn't the case in all countries and from my research there are some authors such as those in Pakistan that do indeed have to pay the APC from their own pockets.

I think in time this will change there have been many initiatives in the past such as the Map of Medicine and Hinari which facilitated low and middle income countries getting free access to biomedical and health literature. Again it is a health and medical example but that is the context I work in so I am more familiar with this. I believe and so do other researchers (through reading their blogs and PowerPoints) in low to middle income countries do believe there will be initiatives to help authors who have to pay APCs by providing some sort of fund in the future.

Sorry to hear about the Bill and Melinda Gates Foundation not funding your work but from what I have read about their Foundation they do indeed only publish works that are funded by them. As you said in your post that is indeed the case for other institutions. There does not appear to be an open fund for independent researchers such as yourself to apply for APC fees.

I like Open Access Week a lot. It gives a forum to discuss issues like those you are raising and others via Twitter, forums and more. It may be a marketing ploy too but I do see it as an opportunity to join the discussion and add your viewpoints.

I agree medicine and the sciences are where there are more open access journals. The Directory of Open Access Journals which is one of the repositories that is shown the attendees in my workshop does index some education full open access journals. Amongst them are 9 UK published ones, 15 US published titles, 46 published in Spain an incredible 154 published in Indonesia and more. I can not vouch for the quality of them though. There does appear to be some available but not as many as medicine and biosciences field as you stated. Have you ever looked at the Directory of Open Access Journals (DOAJ)? Any thoughts about it?

Yes people are chasing the most cited journals because they want a raised profile but a lot of these journals are now offering hybrid models of open access where some research is

locked behind a pay wall and some are available upon publication freely. Open Access Journals also raises profiles in different ways with altmetric scores etc.

I think open access journals is a really complex situation with lots of problems as you have pointed out but also lots of benefits. It is not a perfect system but at least there is a big movement and interest globally in the ethos and idea of making knowledge and information openly accessible.

When I first delved into the project a lot of other health librarians suggested focussing on encouraging healthcare workers/professionals to publish in open access journals similar to academic librarians. I thought showing them how to access full text open access journals was another way to inadvertently also encourage publication. If these clinicians could see the quality of the literature freely available out there it may encourage them to make their literature free and support the open access movement.

I don't know whether I have answered your questions fully but please do come back to me if not and hope the above helps :-).



[Annette Hendley](#)

6:44pm 13 February 2019 [Permalink](#)

Hi Potenza

This made for fascinating reading. I suppose if open resources are more promoted and become more popular, it might force the paid journals to either reduce costs or provide more open resources. Do you think that might happen? It is somewhat counterproductive to have great research available but only to the few who can afford it and especially in the medical field. Don't you want everybody to benefit from the results? Maybe I am viewing it too simplistically.



[Potenza Atiogbe](#)

10:16pm 13 February 2019 [Permalink](#)

Hi Annette, interesting that you should raise this point. I follow the Open Access Tracking Twitter account (@oatp) and have alerts for all their Tweets and also follow the OATP RSS feed which aims to tag all open access projects taking place tagged.

This morning one of the @oatp Tweets had the following headline: **"Nature boss warns Plan S could put journal out of business"**. Plan S is a consortium launched by the European Research Council and other major funders including The Wellcome Trust from 13 European countries. Plan S mandates that scientists and researchers who benefit from state-funded research organisations and institutions to publish their work in open repositories or in journals that are available to all by 2020. The Nature boss is concerned because once plan S is implemented researchers would be prevented from publishing in a traditional subscription based journal such as Nature. In addition he asks why would libraries need to subscribe to journals if current research is available free of charge via repositories like the ones I use in my workshop which aggregate open access journals. So it is very likely that in the near future most medical research will be open access.

Agreed it is counterproductive and everyone should benefit. That is why traditional publishers have submitted responses to plan S during the consultation process which

ended on the 1 February 2019 to raise their concerns! Open Access does have the potential to de-stabilize the traditional journal publication and subscription models.

Another repository that I show during the workshop is the "Free Medical Journals". The quote on the first page of the site I think says it all:

"Over the next years, the most important medical journals will be available online, free and in full-text. The unrestricted access to scientific knowledge - the new standard in medical publishing - will have a major impact on medical practice" Free Medical Journals (2019)

Free Medical Journals (2019) - Available at: <http://www.freemedicaljournals.com/>



[Sonia Pardos](#)

9:34am 14 February 2019 [Permalink](#)

An interesting project, well researched and well presented; great networking practice too. All the best for your presentation, Potenza!



[Dr Simon Ball](#)

3:33pm 18 February 2019 [Permalink](#)

Hi Potenza

Well done on a great presentation! Here is a summary of the comments and questions you received following your presentation (including those you may have addressed verbally). Please respond in whatever way you choose.

Best wishes

Simon

- ▶ Did you notice any trends between the participants role (seniority?) and willingness to adopt OAJ?
- ▶ Because of the financial interest in medical research, do you think this will hold back OER in this field?
- ▶ I think we often focus on trying to change individual minds, but maybe better a focus on cultural practice by targeting senior staff instead.



[Dr Simon Ball](#)

8:12am 28 February 2019 [Permalink](#)

Many Congratulations Potenza! Your presentation has been voted by delegates to be one of the most effective of the H818 Online Conference 2019 and you are officially one of our H818 Presentation Star Open Badge Winners! Please see how to Apply for your Badge here: <http://cloudworks.ac.uk/badge/view/33>

Well done!

Simon



[Potenza Atiogbe](#)

11:56pm 1 March 2019 [Permalink](#)

Dear all

Apologies with the delay with answering these questions. Thanks to everyone who attended my presentation and for these questions. Here are my responses:

▶ **Did you notice any trends between the participants role (seniority?) and willingness to adopt OAJ?**

Great questions thanks. I noticed via my survey prior to the workshop and during the workshop that a lot of higher grade doctors in training were interested in OAJs. Especially because they are interested in building up their publishing profile and OAJs have a wider reach and impact including altmetric scores.

They asked questions about OAJ publishing and also article processing charges and asked for follow up sessions which focus on OAJ publishing and how the library can support with article processing charges for OAJ journals.

▶ **Because of the financial interest in medical research, do you think this will hold back OER in this field?**

A really interesting question thank you. I do not think it will hold back OER in the medical field. In fact due to financial constraints of medical students studying and others everyone is looking for free resources and apps, revision tools etc. If anything I think it will encourage more innovative OERs to be created and utilised.

▶ **I think we often focus on trying to change individual minds, but maybe better a focus on cultural practice by targeting senior staff instead.**

This is a good point. One of the rationale's for starting this project was that because of the trend of decreasing investment in NHS libraries leading to a reduction in investment in online journals, there is a need to reposition what we do as NHS librarians in terms of purchasing resources like online journals.

To expand more if Plan S explained in the earlier post comes to fruition it will lead to libraries not needing to spend as much resource on online journals. This will and has been confirmed lead to top slicing of the online resource budget to be spent at a national level on creating a national repository to facilitate green OAJ publishing. Therefore, workshops like mine will be critical to show librarians changed role to enable OAJ publishing and support accessing un-pay walled journals. I have started to engage in conversations with some senior executives such as the medical directors to showcase OAJs and start to look at a cultural shift towards using OAJs and publishing in them. I agree it is the way to go to focus on changing organisational culture from the top down as opposed to bottom up. But great to have a two pronged approach which is what I am hoping to do. With senior executives they will see the benefit of cost savings and possible reduction of library services but it is important to show that librarians will still be required post Plan S implementation.



[Potenza Atiogbe](#)

12:07am 2 March 2019 [Permalink](#)

Thanks so much Simon, what a lovely surprise. Thanks everyone who voted for me. I am shocked, everyone's presentations were amazing and I am truly humbled and grateful to have been voted one of the most effective of the H818 Online Conference 2019.

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