

## **BRITISH JOURNAL OF GENERAL PRACTICE RESPONSE TO PLAN S**

The British Journal of General Practice (BJGP) supports the argument behind Plan S, which is that publicly-funded research should be made available immediately to anyone who needs to use it, including researchers, policymakers, commercial interests, and the public, with the costs of publication supplied, via Article Processing Charges (APCs), by the research funders. We recognise that this can be best achieved by publishing in open access journals or publicly-accessible repositories. However we wish to point out in our response to the Plan S Consultation that, without careful thought, rapid implementation of the requirements of Plan S may have serious adverse, no doubt unintended, consequences for research in general practice and primary care and quite possibly for disciplines sharing similar characteristics.

Research in general practice is concerned with establishing an evidence base for clinical practice by conducting research in and on general practice, and not relying on research findings and guidance developed in hospitals and other non-primary care settings. Between 80 and 90% of all clinical contacts in the UK take place in general practice so that evidence-based practice is of the highest importance. General practice and primary care research in the UK, northern Europe, North America, Australia and New Zealand is reasonably well developed, but has only been supported by significant public research funding for the last 30 years or so. In many, if not most, other countries, and certainly in the global south, where the role of general practice and primary care is arguably even more important than it is in northern European and other first world countries, general practice research is at a generally primitive stage with almost no funding. Even in the UK and our European neighbours, much important and excellent research takes place in NHS general practice outside university departments, and is not supported by major funders such as MRC, Wellcome, and NIHR. Indeed much of the absolutely fundamental work in general practice research in the UK has been undertaken by individuals working outside the universities, such as John Fry and Julian Tudor Hart.

Even within the universities, early stage academics in general practice, supported by Academic Clinical Fellowship NIHR funding, are more often than not unable to find funds to cover APCs in open access journals, and research funded by many medical research charities is also unlikely to include a budget for the costs of APCs.

These problems are reflected in the relatively low uptake of the open access option in the BJGP – many successful authors, whose research has a significant clinical impact, simply don't have access to the funds. Our APC is set at a very competitive £2000, but this is a considerable financial burden for those without major grant funding. Although many European institutions have signed up to Coalition S, our experience is that very few authors from the Netherlands and other European countries who publish in the BJGP either wish or have the resources to take up the open access option.

We appreciate that, in terms of the timing of the Finch report, we are still in a transitional phase, and also appreciate the concerns about "double dipping" when subscription income is still being received, but we are deeply concerned that the requirement to become a "pure" open access journal will very seriously affect the ability of many would-be authors of important primary care research papers to consider publishing with us, and could have the extremely undesirable effect of driving them

towards the predatory open access journals. Successful academic departments of general practice themselves will suffer if they are unable to see their research published in an appropriate journal, and these side-effects of the imposition of pure open access run the risk of leading to adverse consequences for patient care and public health.

The BJGP is published by the Royal College of General Practitioners and is one of only two journals published by the Society. The journal is currently hybrid and since the introduction of open access articles its subscription fees have been kept deliberately low.

We therefore urge Coalition S to look carefully and individually at journals in different segments of the academic publishing world, and the societies that publish them, and to recognise that one size will not fit all, at least in the short to medium term, and that over-hasty implementation and insistence on pure open access may have significant side-effects, which can be mitigated by taking a more measured, nuanced approach.

*The British Journal of General Practice (BJGP) is the second highest-ranked peer-reviewed research journal of general practice and family medicine in the world. It is sent to the 53,000 members of the Royal College of General Practitioners monthly and to other individuals and institutions around the globe. Issues contain between eight and 10 original research papers, published following the paper-short, online long model. The 2018 Impact Factor is 3.261. It offers open access facilities to authors, and at present around 25% of BJGP research papers are open access.*