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This summary document brings together all guidance on the open access policy in REF 2021, as set out in the Guidance on submissions (REF 2019/01) and the Audit guidance (REF 2019/04).

REF 2021: Overview of open access policy and guidance

Introduction

This summary document brings together all guidance on the open access policy in REF 2021, as set out in the Guidance on submissions (REF 2019/01) and the Audit guidance (REF 2019/04).

The Guidance on submissions was developed throughout the criteria-setting phase of the REF from April to December 2018, acting on recommendations from the independent review of the REF undertaken in Lord Stern, and agreed by the four UK higher education funding bodies and four REF main panels. The Audit guidance was issued in June 2019 and is intended to provide HEIs with further information about the verification and audit of REF submissions data, including the open access status of research outputs.

This overview extracts elements relevant to open access from the two documents with no further interpretation or commentary, retaining the original paragraph numbering. It provides a single source of information on open access arrangements in REF 2021, to support the development of REF submissions and to provide confidence to the research community that adherence to the open access policy will be verified equitably across submissions.

In addition to the previously published information that is reproduced in this document, this document includes a table setting out the maximum number of non-compliant open-access outputs that can be submitted in a Unit of assessment (UOA) without penalty. This is table 1 on page 16. Figure 1 on page 17 is a diagram that has been included to help clarify the approach to audit for open access.

Open Access in the Guidance on Submissions

Open access policy

105. The guidance on open access set out in this document supersedes the previously published open access policy, circular letter(s) regarding the policy, and the FAQs. This section sets out the policy intent. The detailed definitions and requirements are set out in paragraphs 223 to 255.

106. The four UK HE funding bodies believe that the outputs of publicly funded research should be freely accessible and widely available. Open access research brings benefits to researchers, students, institutions, governments, public bodies, professionals and practitioners, citizen scientists and many others. Open access has the potential to make research more efficient and impactful. In view of these benefits, and to embed open access as an intrinsic part of the research process, the funding bodies have introduced a policy requirement on open access in REF 2021.

107. The intent of the REF open access policy is to provide a set of minimum requirements for open access, while encouraging an environment where researchers and HEIs move beyond the minimum requirements. HEIs can demonstrate where they have gone beyond the requirements in the environment template (REF5b) in the research and impact strategy section (see the 'Panel criteria', paragraph 346). The funding bodies encourage institutions to take a proportionate view of the costs and benefits of making other types of outputs (including monographs) available as open access.

108. The open access policy applies to journal articles and conference contributions (with an International Standard Serial Number (ISSN)) which are accepted for publication from 1 April 2016 and published on or before 31 December 2020. It requires these research outputs to be made open access for those outputs to be eligible for submission in REF 2021. The outputs should be deposited, discoverable, and free to read, download and search within, by anyone with an internet connection. The funding bodies recommend that institutions fully consider the extent to which authors currently retain or transfer the copyright of works published by their researchers, as part of creating a healthy research environment.

109. Authors and institutions can meet the policy requirement without necessarily incurring any additional open access publication costs (such a through payment of an article processing charge).

110. Evidence gathered in 2017 indicates good progress is being made by the sector in implementing the policy, and a range of systems and tools are being developed to assist authors and institutions in making their outputs open. However, the funding bodies recognise that the current structures and software solutions are still at an early stage, and that it will take time to fully establish open access as an intrinsic part of the research process. The funding bodies expect the sector and service providers to continue the momentum to develop new tools to implement the policy, particularly relating to the deposit requirements. In view of this, there are

measures and exceptions which have been developed to provide a degree of tolerance of noncompliance.

111. The funding bodies recognise that information on deposit permissions, licences and embargoes can sometimes be unclear, complex, or hard to find. Until significant progress has been made to address this issue (including developing machine-readable licences and permissions), it is reasonable for the sector to rely on shared services, including those offered by SHERPA (Securing a Hybrid Environment for Research Preservation and Access). Authors and institutions should feel comfortable acting on the information provided by SHERPA in meeting REF 2021 open access requirements, and should not undertake additional work to verify this information.

112. Institutions are not expected to correspond with previous institutions to evidence that outputs published while a staff member was previously employed elsewhere fulfilled the requirements of the policy. This is the case even if the new employer intends to submit the output to REF 2021. For example, when a researcher moves from the institution where the output was published (X), to another institution (Y), the REF does not expect that institution Y corresponds with institution X to seek and retain evidence of the output's compliance. Where an institution is unable to ascertain themselves if an output is compliant with the policy, a policy exception can be applied (see paragraph 254.a).

113. The intent of this policy is for the output to be made freely available. The policy encourages outputs which are submitted with a deposit, technical, or other exception to be made open access as soon as possible. However, this is not a requirement of the policy.

114. The REF 2021 audit process will seek assurance that the information and data submitted regarding compliance are accurate and reliable⁸.

Open access

The scope of this policy

223. The requirement to comply with the open access policy applies to the following outputs that are listed in REF2:

a. the output type is a journal article with an ISSN or the output is a conference contribution in conference proceedings with an ISSN **and**

b. the date of acceptance of the output for publication (see paragraph 227) is after 1 April 2016.

224. Any submitted output that fits **both aspects** of this definition is an 'in-scope' output. Other than the exception in paragraph 231, in-scope outputs must fulfil the open access criteria set out below to be eligible for submission.

^{8.} Audit for the REF 2021 open access policy will be developed as part of the wider REF audit and data verification arrangements (see paragraphs 91 to 97).

225. Any output meeting the wider eligibility criteria, but that does not meet both aspects of this definition, may be listed in REF2 without meeting the open access policy requirement. For clarity, the open access requirement does not apply to output types such as:

- monographs and other long-form publications
- non-text outputs
- working papers or outputs submitted to pre-print systems that are not the version 'as accepted for publication'
- the data which underpins some research
- confidential reports that are not published because of commercial or other sensitivity.

226. The policy requirement does not apply to outputs underpinning research impact.

Key terms

227. 'Date of acceptance' means the date given in the acceptance letter or email from the publisher to the author as the 'firm' accepted date.

228. Outputs that are published by a journal or conference proceedings which do not require peer review are within the scope of this policy. In this instance, the author's final accepted version must be deposited. The date of acceptance in this instance should be taken as the date that the publisher confirms that the article has been received from the author and will subsequently be published.

229. 'Date of publication' means the date that the final 'version of record' is first made publicly available (such as on the publisher's website). This will usually mean that the 'early online' date, rather than the print publication date, should be taken as the date of publication¹³.

230. Author's accepted manuscript refers to the final peer-reviewed text which may otherwise be known as the 'author manuscript' or 'final author version' or 'post-print'.

Tolerance of non-compliance

231. For each submission to a unit of assessment, units may submit a maximum of five per cent non-compliant in-scope outputs, or one non-compliant in-scope output, whichever is higher, per submission. HEIs will be able to review the percentage of listed, in-scope outputs that they have identified as not compliant or as having an applicable exception, for each submission prior to the submission deadline. If an institution wishes to proceed with a submission exceeding the tolerated proportion/number of non-compliant in-scope outputs, the institution will be invited to identify which outputs should be removed as ineligible. An unclassified score will be added for the removed ('missing') outputs. Where an audit process demonstrates that outputs identified as compliant do not meet the open access requirements and exceed the tolerated proportion/number, these outputs will be removed, and an unclassified score added for the

^{13.} If this date is imprecise, for example MM/YYYY, the final day of the given month can be used as date of publication.

'missing' outputs. The maximum of five per cent of outputs will be rounded to the nearest whole output number. There is no minimum threshold of in-scope outputs in applying the tolerance band.

232. Other than as set out in paragraph 231, all in-scope outputs must fulfil the open access criteria set out in paragraphs 234 to 251, or have an applied exception.

233. Policy exceptions are detailed in paragraphs 252 to 255, and include: deposit exceptions, access exceptions, technical exceptions, further exceptions. Where an output is submitted to REF2 with an exception, HEIs should identify that an exception applies. There will not be a limit on the volume of exceptions to the policy for in-scope outputs submitted. Use of exceptions will not affect REF outcomes.

Criteria for open access

234. The criteria consist of three elements:

- a. Deposit requirements
- b. Discovery requirements
- c. Access requirements.

Deposit requirements

235. The output must have been deposited in an institutional repository¹⁴, a repository service shared between multiple institutions, or a subject repository¹⁵.

236. The output must be deposited within the repository within a specified timeframe, determined by the date of acceptance:

- a. Outputs accepted for publication from the 1 April 2016 to 31 March 2018. The output must have been deposited as soon after the point of acceptance as possible, and no later than three months after the date of publication.
- b. Outputs accepted for publication from the 1 April 2018 to 31 December 2020.

The output must have been deposited as soon after the point of acceptance as possible, and no later than three months after this date.

^{14.} Institutions which are submitting under 250 journal articles or conference contributions, or where these output types comprise less than 50 per cent of their total submitted outputs for REF 2021, can use institutional webpages to meet the policy requirements.

^{15.} Individuals depositing their outputs in a subject repository are advised to ensure that their chosen repository meets the requirements set out in paragraphs 234 to 251 in this policy. REF 2021 guidance will not certify the repositories which fulfil policy requirements. Institutions should be assured that if there is repository failure/circumstances outside of their control which impact on output compliance, REF 2021 will not restrict submission of outputs. In this case an exception to the policy is applicable (paragraph 254.b). Institutions' research information management systems that can support the open access requirements through repository-like functionality can be thought of as institutional repositories for the purposes of this policy.

237. The output must have been deposited as the author's accepted manuscript. Where the published 'version of record' is available for deposit within the required timeframe, and where the journal or conference publisher permits it, the 'version of record' may be deposited instead of the accepted manuscript. Outputs that have been provisionally accepted for publication, under the condition that the author makes revisions to the manuscript that result from peer review, are not considered as the final text.

238. The funding bodies recognise that many researchers derive value from sharing early versions of papers using a pre-print service. Institutions may submit pre-prints as eligible outputs to REF 2021 (see Annex K). Only outputs which have been 'accepted for publication' (such as a journal article or conference contribution with an ISSN) are within the scope of the REF 2021 open access policy. To take into account that the policy intent for 'open access' is met where a pre-print version is the same as the author-accepted manuscript, we have introduced additional flexibility into the open access requirement: if the 'accepted for publication' text, or near final version, is available on the pre-print service, and the output upload date of the pre-print is prior to the date of output publication, this will be considered as compliant with the open access criteria (deposit, discovery, and access).

239. Some UK funders have a preference for gold open access. 'Gold' open access usually means the immediate, permanent, and free to access availability of the published version of record on the publisher's website and with a licence that permits copying and reuse. Outputs that are made open access through the 'gold' route, at the point of first publication, in accordance with other funder's requirements and definitions, meet the requirement of the REF 2021 open access policy. HEIs will need to confirm that outputs were available immediately after publication via the gold route.

240. Where a deposited output is later replaced or augmented following its initial deposit, the updated manuscript may be deposited in place of the originally deposited output.

Discovery requirements

241. The output must be presented in a way that allows it to be discovered by readers and by automated tools such as search engines. The discovery requirements should typically be fulfilled through the storage and open presentation of a bibliographic or metadata record in the repository. Once discoverable, the output should remain so.

242. Where a deposited output is later replaced or augmented following its initial deposit, this must also meet the discovery requirements.

Access requirements

243. The output must be presented in a form that allows anyone with internet access to search electronically within the text, read it and download it without charge, while respecting any constraints on timing (as detailed in paragraphs 246 to 251). It is advised that outputs licensed under a Creative Commons Attribution Non-Commercial Non-Derivative (CC BY-NC-ND) licence would meet the minimum requirement. Once accessible, the output should remain so.

244. Outputs whose text is encoded only as a scanned image do not meet the requirement that the text be searchable electronically.

245. Where a deposited output is later replaced or augmented following its initial deposit, this must also meet the access requirements. Embargo periods may not re-start with subsequent deposits: they are linked to the date of publication.

Timing of compliance with access requirements and embargo periods

246. The policy allows authors to respect embargo periods set by publishers of: up to 12 months for Main Panels A and B; or 24 months for Main Panels C and D. Outputs that are under embargo at the submission deadline are compliant with the policy requirements (provided that the embargo lengths are within the policy requirements).

247. The required timing of compliance with the access requirements depends on whether an embargo period is specified.

248. The policy allows authors to respect embargo periods set by publishers, within specified maximum periods. Where a publisher specifies an embargo period, an output will be compliant with the policy requirements where it is deposited as a 'closed' deposit. Closed deposits must meet the deposit and discovery requirements (unless an exception applies). The full text should be available to read and download after the embargo period has elapsed.

249. The routes to determine the timing of compliance with the access requirements are set out below:

- a. **Route 1: For outputs deposited with no or 'zero' embargo.** Where the output has no or a 'zero' embargo period it must meet the access requirements as soon as possible and no later than one month after deposit.
- b. **Route 2: For outputs deposited under embargo.** Where the output is deposited under embargo, it must meet the access requirements as soon as possible and no later than one month after the end of the embargo period. The embargo period typically begins at the point of first publication (including 'early online' publication).
- 250. Embargo periods should not exceed the following maxima:
 - a. 12 months for Main Panel A and Main Panel B.
 - b. 24 months for Main Panel C and Main Panel D.

251. Interdisciplinary research outputs returned in a UOA in Main Panel A or B that span boundaries with a UOA in Main Panel C or D may respect the longer of the two embargo periods. The interdisciplinary identifier should be applied for these outputs (see paragraphs 273 to 274).

Exceptions to the open access requirements

Deposit exceptions

252. The following exceptions deal with cases where the output is unable to meet the deposit requirements. In the following cases, the output will not be required to meet any of the open access criteria (deposit, discovery or access requirements).

- a. At the point of acceptance, it was not possible to secure the use of a repository.
- b. There was a delay in securing the final peer-reviewed text (for instance, where a paper has multiple authors).
- c. The staff member to whom the output is attributed was not employed on a Category A eligible contract by a UK HEI (defined in paragraphs 52 to 63) at the time of submission for publication.
- d. It would be unlawful to deposit, or request the deposit of, the output.
- e. Depositing the output would present a security risk.

Access exceptions

253. The following exceptions deal with cases where deposit of the output is possible, but there are issues to do with meeting the access requirements. In the following cases, the output will still be required to meet the deposit and discovery requirements, but not the access requirements. A closed-access deposit, where allowed, will be required.

- a. The output depends on the reproduction of third-party content for which open access rights could not be granted (either within the specified timescales, or at all).
- b. The publication concerned requires an embargo period that exceeds the stated maxima, and was the most appropriate publication for the output.
- c. The publication concerned actively disallows open-access deposit in a repository, and was the most appropriate publication for the output.

Technical exceptions

254. The following exceptions deal with cases where an output is unable to meet the criteria due to a technical issue. In the following cases, the output will not be required to meet the open access criteria (deposit, discovery or access requirements).

a. At the point of acceptance, the staff member to whom the output is attributed was employed at a different UK HEI, and it has not been possible to determine compliance with the criteria.

- b. The repository experienced a short-term or transient technical failure that prevented compliance with the criteria (this should not apply to systemic issues).
- c. An external service provider failure prevented compliance (for instance, a subject repository did not enable open access at the end of the embargo period, or
- a. a subject repository ceased to operate).

Further exceptions

- 255. Two further exceptions to the policy are outlined below:
 - a. 'Other exception' should be used where an output is unable to meet the criteria due to circumstances beyond the control of the HEI, including extenuating personal circumstances of the author (such as periods of extended leave), industrial action, closure days, and software problems beyond those listed in the technical exceptions. If 'other' exception is selected, the output will not need to meet the open access criteria (deposit, discovery or access requirements).
 - The output was not deposited within three months of acceptance date, but was deposited within three months of the earliest date of publication. In this instance, the output will need to meet all other policy requirements. This exception does not need to be applied retrospectively to outputs compliant with the policy from 1 April 2016 to 1 April 2018 which fulfilled the policy requirements within three months of publication.

Open Access in the Audit Guidance

6. This audit guidance covers the full scope of audit for REF 2021, including the approach to auditing compliance with the REF open access (OA) policy. It therefore supersedes the document that the Higher Education Funding Council for England (HEFCE) published in October 2014: 'Open access in the post-2014 Research Excellence Framework: information and audit requirements'².

Definitions

7. **Controls audit:** This is the process of verifying the processes that an HEI follows when managing the open access compliance, and exceptions, of its research outputs. A controls audit will include an assessment both of the risks that the HEI has identified in its processes, and of the adequacy of the mitigations or controls that have been put in place.

Audit approach

12. Analysis of risk will be undertaken on the outputs data to determine compliance with the REF open access requirements. The detail of the approach is described in paragraph 46. Where HEIs are identified as higher-risk, we will request documentation of their process for managing open access as well as evidence that they are managing the process effectively.

Open access (REF2)

44. HEIs may wish to use online tools such as Jisc's Securing a Hybrid Environment for Research Preservation and Access (SHERPA) services to assist them with checking whether journals are generally compliant with the REF open access requirements. As described in paragraph 111 of the 'Guidance on submissions', where the information provided in SHERPA indicates that an output was published in a journal whose policies are compatible with REF requirements, this information will be sufficient to satisfy audit requirements. Where this is the case, HEIs should not undertake additional work to verify this information. Note that the HEIs should still have processes for checking the compliance of individual research outputs that are inscope of the policy where such outputs do not appear in a journal that is listed in SHERPA.

45. We will aim to assess compliance with the REF 2021 open access policy, as described in the following paragraph, in the first quarter of 2021. However, HEIs should be aware that open access compliance can be audited at any time during the assessment period (for example, as a result of a panel-instigated audit). Where outputs are individually queried, outside the risk-based process described in the following paragraph, they will be treated as sampled outputs according to the processes described in paragraph 50 and following.

^{2.} URL:

https://webarchive.nationalarchives.gov.uk/20180405125333/http://www.hefce.ac.uk/media/hefce//content/What,we,do/Research/OA/Open%20access%20in%20the%20next%20REF%20information%20and%20audit%20requirements.pdf

- 46. We will assess each HEIs' overall compliance with the REF 2021 open access policy by:
 - a. Identifying where more than one, and more than 5%, of in-scope outputs are not compliant with the REF open access policy and are not using an exception. This will be based on the data in the *Open access* field in the REF2 submission data.
 - b. Taking a risk-based approach to open access compliance. The risk identification does not itself form part of the audit, but will be used to inform the selection of HEIs and submissions for possible audit review. We will rank⁶ HEIs by:

i. The number of 'other' exceptions used (a higher proportion of 'other' exceptions will lead to a higher risk score). Note that use of 'deposit', 'access' or 'technical' exceptions, or the use of the exception for deposit within three months of publication, will not affect the risk score irrespective of how many times these exceptions are used.

ii. Using unpaywall.org to establish whether there is an OA copy of the output (based on the **is_oa** field).

iii. Using unpaywall.org to establish whether the output is a file with searchable text (based on the **url_for_pdf** field).

iv. Using Jisc CORE, comparing the **datePublished** and **depositedDate**and identifying where the number of days between the two dates is greater than92.

47. Where HEIs receive a high risk score, we will request documentation of their process for managing open access and evidence that they are managing compliance with the REF 2021 open access policy effectively. The audit will focus specifically on those parts of the process that determine compliance with the REF 2021 open access policy, rather than management of open access more broadly. We recognise that there is a range of practice in the sector, and it will be up to HEIs to determine what evidence to provide.

48. Note that we will not audit processes and data relating to outputs published by an individual while not employed by the submitting HEI. This includes outputs published while at a different UK HEI. Such outputs will either be compliant with the open access policy or covered by the exception in paragraph 254a of the 'Guidance on submissions'.

49. Where there is insufficient evidence to demonstrate a robust and well-managed process for open access, we will identify a set of outputs from each submission made by the HEI, and request further information to verify whether they are compliant with the policy, or whether an exception applies. Outputs may be selected randomly, or based on information in unpaywall.org

^{6.} The ranking method will seek to take into account any discipline variations that may affect each of the elements under paragraph 46.b.

or Jisc CORE, or a combination of the two. We will select outputs that have been returned as compliant with the policy, and/or outputs that have been returned with exceptions.

50. Where substantive sampling (see paragraph 49) identifies outputs that have been returned in the submission as compliant with the policy, but which are potentially non-compliant, these will initially be raised as queries with the submitting HEI. The HEI will be asked to respond with an explanation or supporting evidence. Similarly, where substantive sampling of outputs that have been returned with exceptions indicate that the exceptions may not be applicable, these will initially be raised as queries with the submitting HEI, who will be asked to respond with an explanation or supporting evidence. In both cases, evidence may be requested at the level of individual outputs.

51. The 'Guidance on submissions' (paragraph 255a) sets out the grounds for using the 'other' exception. HEIs should reference this guidance, and use this exception only in circumstances that they deem appropriate. Where the 'other' exception is used, HEIs should expect to be able to justify their decision to use the exception, in the context of both of the 'Guidance on submissions' and their own process for managing open access.

52. For identified individual outputs where the HEI cannot demonstrate policy compliance or an exception in terms of their process for managing open access, such outputs will be changed to non-compliant in the submission. Within each UOA, where this takes the total number of non-compliant outputs above one and above 5% for that submission, we will require the submitting HEI to select outputs equal to the number that exceed the tolerance for non-compliance. The selected outputs will be removed from the submission, and an unclassified score will be added for the 'missing' outputs. See paragraph 231 of the 'Guidance on submissions'.

53. Where this involves removing the only output associated with a Category A submitted staff member, and this calls into question the eligibility of the associated staff member, the REF team may audit the eligibility of the staff member, and review the submitted FTE accordingly⁷.

54. Outputs produced by staff that were accepted for publication when they were at a former employer should not be returned as non-compliant. Instead, they should be returned:

- a. as out-of-scope, if they are known to have been accepted for publication before the 1 April 2016; or
- b. as 'compliant' if this is known to be the case; or
- c. with the technical exception for outputs attributed to staff members employed at a different UK HEI at the point of acceptance, as described in paragraph 254(a) of the 'Guidance on submissions'.

55. We would expect HEIs' own process for managing open access to address 'Gold' open access, in agreement with funders' requirements and definitions and with paragraph 239 of the

^{7. &#}x27;Guidance on submissions', paragraph 210.

'Guidance on submissions', and to describe the decision-making process by which an output is determined to be, or not to be, open access via the 'Gold' route.

56. If the output in question has been made available immediately as 'Gold' open access in accordance with Wellcome, Research Council or other funders' requirements then we deem this to have met the policy need. In other instances we encourage the institution to assure themselves that they deem the output to be 'Gold' via the definition in their own process for managing open access.

Appendix: suggested process framework for open access

1. This is not intended to be a prescriptive description of the way that HEIs should manage their compliance with the REF open access policy, as we recognise that there will be a range of approaches across the sector. However, it provides some indicators of good practice which we would expect to see within a well-managed process.

2. The following are some general descriptors of characteristics that we would expect to see within a well-managed process for managing compliance with the REF open access policy:

- a. A description of the process, which may be narrative and/or diagrammatic. The process document does not need to be dated or version-controlled, as we recognise that these should be operational documents which will be reviewed and updated regularly. We would not expect an HEI's normal process for managing open access to be solely based on REF requirements, but it may contain REF-specific elements.
- b. A description of the sources of data that are used in the process, and of how these are verified.
- c. How the REF-specific elements of the process handle decisions about whether outputs are:
 - i. In or out of scope.
 - ii. Compliant or not compliant with the policy.
 - iii. Using a valid exception. In particular, how the process ensures that the appropriate exception is used, and avoids overly broad interpretations of exceptions, especially the 'other' exception.
- d. How the HEI addresses 'Gold' open access.
- e. Measures to train staff on the process, and the monitoring of the operation of the process.
- f. Communication strategies with authors regarding policy requirements.
- g. An assessment of risks in the management of open access (for example poor data collection, and inconsistent application of exceptions), and appropriate mitigations that the HEI has put in place.
- h. Processes for producing management information and/or reporting.

Table 1

HEIs can submit up to one or 5% (whichever is higher) of their in-scope outputs as non-compliant without penalty. The number of permissible non-compliant outputs is shown in the following table:

In-Scope Outputs	Maximum permitted non-compliant
1 - 29	1
30 - 49	2
50 - 69	3
70 - 89	4
90 – 109	5
For each additional 20 above 109	+ 1

Figure 1

The Three-Stage Verification Process

The following diagram has been used in presentations by the REF team to help clarify the approach to audit for open access, and is reproduced for this purpose here.

