

## From the Editor

### Open Access Publishing and New Perfusion Safety Initiative

To follow up on my last editorial, where I discussed the need for The Journal of ExtraCorporeal Technology (JECT) to modernize (1), the wheels are still turning, both journal and our sponsoring society leaders are still pondering options for our future directions. Both leaders and readers have expressed strong preferences for our articles to be more readily accessible. Like many journals before us, we need to figure out how to meet such demands while taking care of the business side of things. As it turns out, JECT is more fortunate than many other journals in that we have always had bedrock-solid support from our sponsoring society, the American Society of ExtraCorporeal Technology (AmSECT) since our inception. In a sense, JECT has actually been publishing like a Diamond Open Access (where all publication costs are borne by a sponsor), except we have not been Open Access in terms of article accessibility. As a matter of fact, JECT currently operates on a subscription-based model, with AmSECT members receiving free subscriptions and immediate article access as part of their membership benefits. Open Access publications, whereas use a pay-to-publish model. In return, ALL readers have full, free, immediate access to every article we publish.

JECT currently has a 6-month embargo before articles are fully accessible at PubMed Central and at our member-only journal website. Clearly, our current model is not allowing the full impact of our articles to be felt within and outside our perfusion community. As a society-sponsored journal however, AmSECT is considering adopting a hybrid Diamond/Gold Open Access model whereby AmSECT members benefit by not having to pay Article Publishing Charges (APCs). Non-members will, however, be required to pay APCs which can initially be discounted. In return for APC payments, non-member authors (as well as AmSECT members) will receive the modern features that we have been increasingly asked for, including but not limited to: visibility in major indexes, easy, immediate availability of full-text articles, article metrics including citations, DOIs (digital object identifiers), publication ahead-of-print, and even social media links. As you may or may not have noticed, JECT has increasingly been publishing articles by groups that do not include AmSECT members. Such



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submissions are something we proudly welcome and bodes well for our future, as non-member APCs could defray some of AmSECT's APC costs. Ultimately, all authors want their work to be readily seen, referenced and used to advance our field. An Open Access JECT would serve such needs best! Details continue to be deliberated and any input, comments or questions are welcomed and can be submitted to the JECT editorial staff.

Meanwhile in this issue, an article by Mike Colligan, et al, describes the development of the new perfusion-centric prospective incident reporting system to collect near-miss and patient harm incidents (2). The authors explain why it was necessary, for legal reasons, to create a U.S.-based system versus implementing one of the non-U.S. systems already in place. The three-phase process is explained in detail as well as the system testing and design.

Reports will be able to be submitted anonymously or with confidential contact information provided. The results of this work will yield recommendations for best practice and increases in safety measures. AmSECT's commitment to patient safety initiatives is reflected by a recently announced affiliation agreement with the Orrum Patient Safety Organization (PSO). The agreement, which was finalized in late January, makes the Orrum PSO the official incident reporting system of AmSECT, with AmSECT gaining the rights to distribute an annual report outlining some of the most critical safety themes that emerged during the year. In addition, both organizations will utilize their platforms to cross promote safety in extracorporeal support procedures. This

partnership will benefit the perfusion community and the care we give our patients.

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## REFERENCES

1. Wong RK. The Journal of ExtraCorporeal Technology to Modernize. *J Extra Corpor Technol.* 2022;54:105–6.
2. Colligan M, Paugh T, Murtha S. Developing a Prospective Incident Reporting System for Clinical Perfusion Practice in the United States. 2022;54:175–90.