

1.0 POLICY STATEMENT

- 1.1 Grant MacEwan University requires responsible conduct of research and scholarship in conformity with *Tri-Agency Framework: Responsible Conduct of Research*. The University will address allegations of policy breaches and will foster and maintain an environment that supports and promotes the responsible conduct of research and scholarly activity.

2.0 PURPOSE

- 2.1 The University strives to provide an environment that supports research/scholarly activity and that fosters researchers' abilities to act honestly, accountably, openly and fairly in the search for, and dissemination of, knowledge.
- 2.2 Researchers and scholars strive to follow the best research practices honestly, accountably, openly and fairly in the search for and in the dissemination of knowledge.
- 2.3 The primary responsibility for high standards of conduct in research and scholarship resides with the individuals carrying out these activities.
- 2.4 The maintenance of academic freedom in pursuit of research and scholarship is essential to the common good of both the University and society.
- 2.5 The University recognizes and acknowledges that research and scholarly activity can involve unintentional error, conflicting data, and scholarly differences in research design and interpretation of research findings.
- 2.6 Researchers and others play important roles in the process for addressing allegations of policy breaches and in helping to ensure that allegations are addressed appropriately and in a timely manner.

3.0 APPLICABILITY

- 3.1 This policy applies to all research and scholarship that is conducted with the university, or by members of the University within the capacity of their employment or registration at the University where the researcher involved is currently employed, enrolled as a student, or has a formal association.
- 3.2 Notwithstanding clause 3.1, if research is conducted by students for the purpose of fulfilling course requirements, the review of allegations of misconduct falls within the scope of policy C1000 (Academic Integrity). All other investigations of misconduct in respect to research and scholarly activity fall under the scope of this policy.
- 3.3 This policy's scope includes breaches of research integrity within three categories: breaches of responsible conduct of research/scholarly activity, misrepresentation in an application or related documents, and mismanagement of grants or award funds.

4.0 DEFINITIONS

Breaches of responsible conduct of research/scholarly activity include but are not limited to the following:

Fabrication

Making up data, source material, methodologies or findings, including graphs and images.

Falsification

Manipulation, changing, or omitting data, source material, methodologies or findings, including graphs and images, without acknowledgement and which results in inaccurate findings or conclusion.

Destruction of research records

The destruction of one's own or another's research data or records to specifically avoid the detection of wrongdoing or in contravention of the applicable funding agreement, institutional policy and/or laws, regulations and professional or disciplinary standards.

Plagiarism

Presenting another's published or unpublished work, including theories, concepts, data, source material, methodologies or findings, including graphs and images, as one's own, without appropriate referencing.

Redundant publications

The re-publication of one's own previously published work, section(s) or data, in the same or another language, without adequate acknowledgement of the source, or justification.

Invalid authorship

Inaccurate attribution of authorship, including attribution of authorship to persons other than those who have contributed sufficiently to take responsibility of the intellectual content, or agreeing to be listed as author to a publication of which one made little or no material contribution.

Invalid acknowledgement

Failure to appropriately recognize contributions of others.

Conflict of Interest

Failure to appropriately manage any real, potential or perceived conflict of interest, preventing one or more of policy C5051 (Responsible Conduct of Research and Scholarly Activity) regulations from being met.

Misrepresentation in an Application or Related Documents

- Providing incomplete, inaccurate or false information in a grant or award application or related document, such as a letter of support or a progress report.
- Listing of co-applicants, collaborators or partners without their agreement.
- Failing to disclose any past findings of one's breaches of Canadian or other research policies.

Mismanagement of Grants or Award Funds

Using grant or award funds for purposes inconsistent with the policies of the Tri-Agencies and other funding bodies; misappropriating grants and award funds; contravening funding bodies financial policies, such as the Tri-Agency Financial Administration Guide, Tri-Agency and other funding bodies' grants and awards guides; or providing incomplete, inaccurate or false information on documentation for expenditures from grant or award accounts.

5.0 POLICY ELEMENTS

5.1 Roles and Responsibilities

5.1.1 The Provost and Vice President Academic is responsible for this policy.

5.1.2 Institutional Responsibility

The University, through the Offices of the Provost and Vice President Academic, and Research Services is responsible for:

5.1.2.1 Promoting awareness of what constitutes the responsible conduct of research and scholarly activity, including Tri-Agency requirements and the consequences of failing to meet them, as well as the process for addressing allegations, to all those engaged in research and scholarly activities at the University.

5.1.2.2 Establishing, communicating and applying its policies and procedures about responsible conduct of research, which meet requirements of the *Tri-Agency Framework: Responsible Conduct of Research*. This includes making public statistical annual reports on confirmed findings of non-compliance with Tri-Agency policies and actions taken.

5.1.2.3 Communicating within the University, that the Provost and Vice President Academic is the central point of contact responsible for receiving confidential inquiries, allegations and information related to allegations of breaches of responsible conduct of research and scholarly activity.

5.1.2.4 Reporting to Tri-Agencies on allegations and findings of breaches of institutional research policies that also constitute a breach of Tri-Agency policies, when Tri-Agency funds or applications of Agency funds are involved.

5.1.3 Those engaged in research or scholarly activity (researchers/scholars) are responsible for adhering to codes of conduct for integrity in research and scholarly activity and for following the requirements of applicable institutional policies and professional or disciplinary standards and shall comply with applicable laws and regulations. At minimum researchers/scholars are responsible for the following:

5.1.3.1 Using a high level of rigour in proposing and performing research; in recording, analyzing, and interpreting data; and in reporting and publishing data and findings.

5.1.3.2 Keeping complete and accurate records of data, source material, methodologies and findings, including graph and images, in accordance with the applicable funding agreement, institutional policy and/or laws, regulations, and professional or disciplinary standards in a manner that will allow verification and replication of the work by others.

5.1.3.3 Referencing and, where applicable, obtaining permission for the use of all published and unpublished work, including data, source material, methodologies, findings, graphs and images.

- 5.1.3.4 Including as authors, with their contributed consent, all those and only those who have materially or conceptually to, and share responsibility for, the contents of the publication or document, in a manner consistent with their respective contributions and the practices of the relevant field.
 - 5.1.3.5 Acknowledging, in addition to authors, all contributors and contributions to research, including writers, funders and sponsors.
 - 5.1.3.6 Appropriately managing any real, potential or perceived conflict to interest, in order to ensure that the objectives of the *Tri-Agency Framework: Responsible Conduct of Research* are met. Those objectives are to:
 - a. Ensure that the funding decisions made by the Agencies are based on accurate and reliable information.
 - b. Ensure public funds for research are used responsibly and in accordance with funding agreements.
 - c. Promote and protect the quality, accuracy, and reliability of research funded by the Agencies.
 - d. Promote fairness in the conduct of research and in the process for addressing allegations of policy breaches.
 - 5.1.3.7 Not supporting or participating in research that violates basic human rights.
 - 5.1.3.8 Receiving approval from the MacEwan University Research Ethics Board before undertaking any research involving human subjects or animals and fully complying with the approved research protocols in the performance of the research (see policy C5052 (Ethical Review of Research with Human Participants)).
 - 5.1.3.9 Using research funds only for the purpose for which they are granted.
 - 5.1.3.10 Complying with external grant regulations such as Tri-Agency requirements as they relate to the operational and financial terms of research grants or contracts awarded to the researcher. These include but are not limited to TCPS2 *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans*, and Canadian Council on Animal Care Policies and Guidelines.
 - 5.1.3.11 Ensuring the responsible allocation and management of grant and award funds in accordance with sound research and sound principles. In cases where researchers are recipients of Tri-Agency funds they are responsible for complying with Tri-Agency grants and award guides, the Tri-Agency Financial Administration Guide and any other relevant financial policies, laws or regulations related to grants and awards.
- 5.1.4 Applicants for funding (including Tri-Agency funding) are responsible for:
- 5.1.4.1 Providing true, complete and accurate information in their funding applications and related documents and representing themselves, their research, and their accomplishments in a manner consistent with the norms of the relevant field.

- 5.1.4.2 In cases where applicants are primary investigators, for ensuring that others listed on applications have agreed to be included.
- 5.1.4.3 Disclosing whether they have even been found to have breached any Canadian or other research policies.
- 5.1.5 The principal investigator is responsible for overseeing the process of acquiring, recording, examining, interpreting, and storing data within research units/laboratories. The principal investigator should:
 - 5.1.5.1 provide each member of the research unit/laboratory with information about governmental and institutional requirements for the conduct of studies involving human subjects, animal, radioactive or other hazardous substances, as appropriate, as well as any other information which is directly relevant to the research activity
 - 5.1.5.2 develop guidelines within each research unit/laboratory regarding the conditions of authorship for research staff and undergraduate students, as appropriate

5.2 Conflicts of Interest

- 5.2.1 Researchers/scholars are responsible for avoiding real, perceived, or potential conflicts of interest that may lead to a discrepancy between the researcher's/scholar's personal interests and the interests of the University. Research integrity is compromised if an independent observer might reasonably question whether a researcher's/scholar's actions or decisions are determined by personal gain, financial or otherwise.
- 5.2.2 To protect the University all researchers/scholars must disclose conflicts of interest to their immediate supervisor and Research Services. Researchers/scholars should consult with their supervisor prior to embarking on activities that might be perceived as questionable or involving conflict of interest.
- 5.2.3 In cases when disclosure has occurred, the supervisor will consult with the Provost and Vice President Academic or designate to determine if a conflict of interest exists of sufficient magnitude to compromise research integrity. The researcher/scholars will receive a written response and a report will be filed.
- 5.2.4 If a conflict of interest exists appropriate steps will be taken by the University to manage and/or eliminate the conflict of interest prior to the research commencing. If appropriate, this may include consultation with the MacEwan University Research Ethics Board.
- 5.2.5 The Office of Research Services will develop forms, guidelines, and procedures to identify, eliminate, minimize, and manage conflict of interest.

5.3 Review of Allegations of Misconduct

- 5.3.1 Reporting Allegations

- 5.3.1.1 Individuals are expected to report in good faith any information pertaining to possible breaches of responsible conduct of research or scholarly activity including breaches of Tri-Agency policies where the researcher/scholar involved is currently employed, enrolled as a student, or has a formal association with MacEwan University.
 - 5.3.1.2 Allegations of misconduct in research and scholarly activity can be brought forward by faculty, staff, or students. In addition, a Tri-Agency may submit an allegation as a result of information obtained through institutional monitoring reviews or its peer review activities.
 - 5.3.1.3 Allegations of misconduct in research or scholarly activity should be submitted in writing to the Provost and Vice President Academic or designate; allegations must contain fully documented evidence and must be signed and dated by person(s) submitting the allegations (the Complainant(s)). Normally allegations should be submitted to the Provost and Vice President Academic within six months of the alleged misconduct.
 - 5.3.1.4 If allegations of misconduct in research or scholarly activity are reported by an employee to a supervisor (for example, by a faculty member to a Chair or Dean), these allegations must be expeditiously channeled to the Provost and Vice President Academic to ensure consistency in dealing with cases.
 - 5.3.1.5 Anonymous allegations will not normally be considered; however, if compelling evidence or misconduct in research or scholarly activity are presented to the Provost and Vice President Academic anonymously, he or she may initiate an initial inquiry process.
- 5.3.2 Initial Inquiry Process
- 5.3.2.1 The Provost and Vice President Academic is the University's designated point of contact for receiving allegations of misconduct in research or scholarly activity. Should the Provost and Vice President Academic be named as a complainant or be alleged to be the researcher/scholar suspected of the misconduct (the Respondent), or for any other reason feels it would be inappropriate to receive a particular allegation, he/she may refer the allegation to the President who shall name a replacement.
 - 5.3.2.2 The Provost and Vice President Academic will conduct the initial inquiry process including reporting within a two month time frame of date of receipt of written allegation. That time line may be extended if circumstances warrant, provided that if the allegation involves alleged breach of a Tri-Agency policy the appropriate agency will be consulted in regard to any extension and provided monthly updates until the investigation is complete.
 - 5.3.2.3 Upon receipt of a written allegation, the Provost and Vice President Academic or designate will conduct an inquiry process including consultations with the Complainant, the Respondent, as well as with third parties as appropriate. If the Provost and Vice President Academic, as a result of the inquiry process resolves

the matter or determines that a formal investigation is not required, he/she shall inform the Respondent, the Complainant, and the President confidentially in writing of this outcome.

- 5.3.2.4 In cases involving Tri-Agencies, the Provost and Vice President Academic reports to the agency the findings that a formal investigation is not required.
- 5.3.2.5 If the initial inquiry process fails to resolve the allegation, and/or determines further investigation is warranted, the Provost and Vice President Academic shall move the matter to the formal investigation process.
- 5.3.2.6 The University may independently, or at the Tri-Agency's request in exceptional circumstances, take immediate action to protect the administration of Tri-Agency funds. Immediate actions could include freezing grant accounts, requiring a second authorized signature from an institutional representative on all expenses charged to the researcher's grant accounts or other measures, as appropriate.

5.3.3 Formal Investigations

- 5.3.3.1 Investigations shall be conducted, judiciously, confidentially, and in a timely manner by an Investigations Committee.
- 5.3.3.2 The Provost and Vice President Academic will establish an Investigation Committee of members with the necessary expertise and who are free from conflict of interest. The designated senior administrator responsible for research will chair the Committee. At least one member must be an external member who has no current affiliation with the University. Two members shall be faculty members knowledgeable about research integrity.
- 5.3.3.3 The Investigation Committee has the authority to decide whether a breach occurred. The Investigation Committee is required to complete the investigation, report findings, recommend actions to be taken, and communicate with the parties involved within 90 days of receiving the allegation from the Provost and Vice President Academic at the conclusion of the initial inquiry phase of the process. The time line may be extended if circumstances warrant, provided that if the allegation involves alleged breach of a Tri-Agency policy the appropriate agency will be consulted in regard to any extension that may result in the investigation report not being concluded within 7 months of the receipt of the allegations by the Provost and Vice President Academic and provided with monthly updates until the investigation is completed.
- 5.3.3.4 Individuals involved in an investigation must follow the University's policy and process as a Complainant, a Respondent or a third party, as appropriate.
- 5.3.3.5 The University, to the extent possible, will protect the individuals making an allegation in good faith or providing information related to an allegation from reprisals in a manner consistent with relevant legislation.

- 5.3.3.6 The Respondent may be accompanied to meetings with the Investigation Committee with a representative of the Faculty Association (in cases where the Respondent is a faculty member) or by a support person.
- 5.3.3.7 The Investigation Committee may gather evidence through interviews with the Respondent, Complainant, and third parties as well as by seeking outside expert advice.
- 5.3.3.8 The Investigation Committee will maintain confidential records of the proceedings in keeping with the human resource and security of personal information policies of the University.
- 5.3.3.9 The Complainant and Respondent will both be given an opportunity to respond to evidence uncovered by the Investigation Committee.
- 5.3.3.10 The Investigation Committee will prepare a written report for the Provost and Vice President Academic. The report will include the original signed and dated allegation, the Respondent's responses, the findings of the investigation committee and recommendations for action.

Findings

- 5.3.3.11 The Investigation Committee may recommend recourse including:
 - sanctions against the Respondent found to have engaged in misconduct in relation to research or scholarly activity including but not limited to:
 - Issuing a letter of concern to the Respondent.
 - Requesting a letter of apology.
 - Requesting the Respondent correct the research record or results of the scholarly activity, and provide proof of this.
 - Terminating remaining amounts/installments of grant or awards.
 - Seeking a refund of all or part funds already paid, within a defined time frame.
 - actions to restore, if necessary, the reputation of a Respondent falsely accused
 - actions to protect a Complainant if necessary
- 5.3.3.12 After receiving the report of the investigation the designated senior administrator responsible for research will forward the report to the Provost and Vice President Academic who will make decisions as to what recourse will apply, and, where, the Respondent has been found to have engaged in misconduct in respect to research or scholarly activity what sanctions will apply, including, where the Respondent is an employee of MacEwan University, what, if any disciplinary action will be taken against the Respondent, taking into account the severity of the breach, and the Respondent's employment record. The implementation of any disciplinary action must follow processes as outlined in the Collective Agreement and other employment policies as appropriate.

- 5.3.3.13 The Provost and Vice President Academic will inform all parties involved of the decision reached by the investigation committee and of any recourse taken by the University.
- 5.3.3.14 Notwithstanding, should the designated senior administrator responsible for research be named as complainant or researcher, the University or Provost and Vice President Academic shall name replacements or designates to this process in keeping with the principles cited herein.
- 5.3.3.15 Notwithstanding, should the Provost and Vice President Academic be named as complainant or researcher, the President shall name replacements or designates to this process in keeping with the principles cited herein.

5.4 Appeals

- 5.4.1 Respondents who have been found to have engaged in misconduct in relation to research or scholarly activity, and who are employees of MacEwan University may appeal matters related to Investigation Committee process and disciplinary action arising therefrom in accordance with the applicable Collective Agreement or MacEwan University Employment Policy.
- 5.4.2 Respondents who have been found to have engaged in misconduct in relation to research or scholarly activity, and who are not employees of MacEwan University may appeal to the President in writing citing grounds within 10 days of the Provost and Vice President Academic informing parties of the decisions regarding the matter. The appeal shall be restricted to questions of Investigation Committee process, (such as improper interpretation of the policy, provision of fair process) and not to the substance of the Committee's findings.
 - 5.4.2.1 The President shall review the matter through a review of documents prepared by the Investigation Committee and Provost and Vice President Academic, and may at his/her discretion meet with the designated senior administrator responsible for research to assess facts of the appeal, the Investigation Committee's proceedings and findings.
 - 5.4.2.2 The decision of the President is final. It is communicated in writing within 15 days of receipt of the appeal to the Respondent, Complainant, and Provost and Vice President Academic.
- 5.4.3 Where decision and/or sanctions are overturned, all reasonable steps shall be taken to repair any damage that the Respondent's reputation for scholarly integrity may have suffered by virtue of the complaint.

5.5 Reporting to Tri-Agencies

- 5.5.1 A University investigation of a breach of scholarly integrity may be initiated at the request of a Tri-Agency or other funding agency that is providing full or partial funding to a researcher at the University.

- 5.5.2 Subject to any applicable laws, including privacy laws, the University shall advise the relevant Tri-Agency immediately of any allegations related to activities funded by that agency that may involve significant financial, health and safety, or other risks.
- 5.5.3 The University shall prepare a report on each inquiry or investigation it conducts in response to an allegation of policy breaches related to a funding application submitted to a Tri-Agency or an activity funded by a Tri-Agency. Subject to applicable laws each report shall include the following information:
- The specific allegation(s) and a summary of the finding(s)
 - The process and time lines followed for the inquiry and/or investigation
 - The Respondent's response to the allegations, investigation and findings and any measures the researcher has taken to rectify the breach
 - The Investigation Committee's decisions and recommendations and actions taken by the University
- 5.5.4 The report will not include:
- Personal information about the Respondent or any other person that is not material to the University's findings and its report to a Tri-Agency.
 - Information that is not related specifically to Tri-Agency funding and policies.
- 5.5.5 Inquiry and investigation reports shall be submitted to the relevant Tri-Agency within two and seven months respectively, of receipt of the allegations by the University, subject to extension if circumstances warrant, and the requirement consultation with the appropriate agency regarding extension has occurred.
- 5.5.6 The University and the researcher shall not enter into confidentiality agreements or other agreements related to an inquiry or investigation that prevents the University from reporting to Tri-Agencies.
- 5.5.7 Researchers with Tri-Agency funding are expected to be proactive in rectifying a breach. Examples include, but are not limited to: correcting the research record, providing a letter of apology to those impacted by the breach, or repaying funds, before the University submits its report to the agency.

6.0 ASSOCIATED PROCEDURES

7.0 RELATED POLICIES, FORMS, AND OTHER DOCUMENTS

- C1000 Academic Integrity
- C5040 Visiting Scholars
- C5045 Titled Chairs
- C5052 Ethical Review of Research with Human Participants
- C5053 Animal Research Ethics
- C5054 Academic Freedom

- C5056 Research Partnerships and Affiliations
- D1205 Conflict of Interest and Commitment
- E3101 Student Rights and Responsibilities

REFERENCE DOCUMENTS:

Tri-Agency Framework: Responsible Conduct of Research

Tri-Agency Research Integrity Policy

The Memorandum of Understanding (MOU) on the Roles and Responsibilities in the Management of Federal Grants and Awards

TCPS2: *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*

Policies on integrity in research from the following universities: Thompson Rivers University, University of Alberta, University of Calgary, University of the Fraser Valley, University of Northern British Columbia, and University of Saskatchewan.

8.0 ACCOUNTABILITY

Policy Sponsor

Provost and Vice President Academic

Responsible Office

Office of Research Services

9.0 HISTORY

Relevant Dates

Approved:	12.01.24
Effective:	12.07.01
Next Review:	17.01

Modification History

04.04.15:	Revisions approved by Board motion 01-04-15-2003/04. Policy implementation date is July 1, 2004.
06.06.08:	Amended as recommended by Academic Council 06/05/16, and approved 06/06/08 by Board motion 01-6-8-2005/06.
09.10.08:	Terminology updated to reflect name change to Grant MacEwan University. Approved by Board motion 01-10-8-2009/10.
10.12.21	Related policy numbers updated to reflect changes to E Policy Taxonomy.
12.01.24:	Revised as recommended by Academic Policies Committee, and approved by Academic Governance Council motion AGC-10-01-24-2012.
14.10.28:	Terminology updated to reflect housekeeping and textual changes, and approved by Academic Governance Council motion AGC-04-10-28-2014.
14.12.22:	Updated to reflect current policy names and numbers, references to retired policies, and Related Policy listings.
15.03.17:	Terminology updated to reflect housekeeping and textual changes, and approved by Academic Governance Council motion AGC-02-03-17-2015.
18.01.03:	Minor revisions to update position title and correct typos and grammatical issues approved by Policy Sponsor.