



Integrity in Research and Scholarship

Scope:	Faculty
Status:	Last reviewed and approved June, 2021
Policy Manager:	Director of Research and Provost/VPA
To be reviewed:	Summer 2024
Related Documents:	Research Ethics Review Policy Indirect Costs Policy Conflict of Interest Policy Internal Grants Policy External Grants Policy Use of Grant Funds Policy

Preamble

Redeemer University is committed to the highest standards of integrity in research and scholarship. This is an integral part of our mandate to engage in scholarly work under the Lordship of Jesus Christ and to serve Him through the conduct of that scholarly work.

This policy sets out the principles by which Redeemer University expects its researchers to abide and the internal procedures for investigating allegations of suspected misconduct in research, including guidelines for appropriate responses to such incidences. Although it is recognised that research and scholarship can involve honest error, conflicting data or valid differences in experimental design or in interpreting or judgement of information, this policy seeks only to deal with intentional misconduct.

In accordance with recently defined policy frameworks and expectations of the Tri-Council (NSERC, SSHRC and CIHR), the present document includes principles and actions related to carrying out research and scholarship at Redeemer University that exhibit integrity, accountability and responsibility, as laid out in the Tri-Agency Framework: Responsible Conduct of Research (RCR) and the Memorandum of Understanding. Although these policies and procedures are given by the Tri-Agency, they

are to be followed at all times regardless of the researcher's source of funding,

Allegations of misconduct may arise from anonymous or identified sources within or outside the University; the allegations may be well-founded, honestly erroneous, or mischievous. Whatever their source, motivation or accuracy, such allegations have the potential to cause harm to the respondent, to the complainant, to the University, and to research and scholarship in general. As a result, all cases shall be handled with the utmost respect, confidentiality, and professionalism, and RU shall protect the rights and reputations of all individuals involved.

2.0 SCOPE

This policy seeks to describe details regarding applying for and managing research grant funds, performing research, disseminating results, and the processes to follow in the event of an allegation of misconduct of research. This policy applies to all persons involved in research at the institution, and it is the responsibility of each individual researcher to carry out integrity in their research, as well as to bring forward concerns regarding possible acts of misconduct. In case of a breach of such integrity, the following procedures regarding a misconduct of research shall be followed, and allegations will be dealt with in a fair and confidential manner, with both the complainant and respondent's protection and privacy in mind.

3.0 PRINCIPLES AND RESPONSIBILITIES

Researchers at Redeemer University are obliged to conduct research with the utmost integrity. In addition to the principles laid out in 1.0 Introduction above, both the institution and its researchers are expected to uphold the principles and responsibilities outlined in the following sections.

3.1 Researcher Principles and Responsibilities

- a. To meticulously record, interpret and report data when conducting research.

- b. To keep complete and accurate records of all research conducted at the institution.
- c. To appropriately reference and obtain permission for the use of all published and unpublished work.
- d. To appropriately give credit to those who have contributed to their research, whether materially or conceptually.
- e. To appropriately acknowledge any funding sources that have contributed to their research.
- f. To follow institutional policy and disclose any real or perceived conflict of interest.
- g. To submit all planned research projects involving human participants to Research Ethics Review Committee (RERC) before commencing research and to fully comply with the approved protocols during the conduct of the research project.
- h. To obtain approval from the institution's Research Office prior to applying for any external funding when the research is being conducted under RU's name or by utilising RU's resources.
- i. To seek and obtain approval by the University's Animal Care Committee before commencing any research involving animal subjects and to fully comply with the approved protocols during the conduct of the research project.
- j. To follow all relevant policies, regulations and standards set by the institution.
- k. To provide accurate information in their funding applications and subsequent documents.
- l. To disclose if they are ineligible for any Tri-Council granting agency, or any other worldwide research agency for such reasons as a breach of misconduct (namely ethics, integrity, or financial management).
- m. To obtain permission from other contributors if they are to be listed on the application or in any public dissemination of the research.
- n. To spend all acquired research funds according to the approved budget or an approved amended budget and not on any ineligible items or in an unethical way.
- o. To assume responsibility for using all grant or award funds in accordance with the Use of Grant Funds Policy, as well as other grant and award guides as required by the specific funder
- p. To provide accurate information and documentation when reporting on grant or award expenditures

- q. To be proactive at correcting their record if an allegation of misconduct has occurred.

3.2 Institutional Principles and Responsibilities

- a. To ensure that all researchers, faculty, staff and students are aware of, and have access to, this policy and all other requirements and standards of research set out by the institution.
- b. To disseminate this policy through the institution's website on an ongoing basis and regularly in updated manuals and handbooks, and as needed or appropriate in information packages, workshops, meetings, and the faculty mentorship program.
- c. To ensure that this policy, and all institutional policies dealing with research and scholarship, are up-to-date with the expectations and policies on integrity of research and scholarship as set out by the Government of Canada's Tri-Council Research Agencies.
- d. To ensure that this policy, and all institutional policies dealing with research and scholarship, reflect best practice in Higher Education and professional academia.
- e. To investigate any potential misconduct in research in strict accordance to the procedures and process laid out in this policy and in no other ad hoc or other fashion.
- f. To keep accurate, confidential records of: all allegations of research misconduct, procedures and decisions taken to resolve such allegations, and the final resolution addressing such allegations.
- g. To ensure that all institutional financial risk management policies are upheld with respect to research grants, awards, external donations, and all other research funding.

4.0 PROCEDURES AND GUIDELINES ON RESEARCH MISCONDUCT

4.1 Definitions

Misconduct of research: Actions related to a lack of research integrity, and includes, but is not limited to:

Fabrication, or falsification of data
Plagiarism
Destruction of research records
Redundant publications
Invalid authorship
Inadequate acknowledgement
Mismanagement of Conflict of Interest
Misrepresentation in an application or related document
Mismanagement of grants or award funds
Other practices that seriously deviate from those that are commonly accepted within the scholarly community for proposing, conducting or reporting research

Complainant(s): Refers to the person(s) bringing the claim of misconduct of research to the attention of the institution; this person may or may not have been directly affected by the proposed allegations concerning the misconduct of research.

Conflict of Interest: occurs when activities or situations place an individual in a real, potential or perceived conflict between the duties or responsibilities related to research, and personal, institutional or other interests. These interests include, but are not limited to, business, commercial or financial interests pertaining to the individual, family members, or their former, current or prospective professional associates.

Respondent(s): Refers to the person(s) being accused of misconduct of Research by the complainant(s).

4.2 Procedure for Dealing with Allegations of Misconduct

4.2.1 Receiving Allegations Concerning Misconduct

- a. All allegations against a researcher must be submitted in writing and dated by the complainant(s) describing the misconduct in sufficient detail to form the basis of an enquiry.
- b. All allegations must be sent to the Vice President, Academic (VPA)

- c. Anonymous allegations will not be accepted.
- d. If the allegation of misconduct involves Tri-Agency funds, the complainant(s) shall also send a copy of the allegation to the Secretariat on Responsible Conduct of Research (SRCR).

4.2.2 Confidentiality

- a. All names of complainants, respondent(s), documents and records associated with the allegation shall be kept confidential by all parties involved during the investigation process
- b. RU will seek to protect all rights and reputations of both the complainant(s) and the respondent(s) involved.

4.2.3 Initial Response to Proposed Allegations

- a. The VPA shall have principal responsibility for responding to allegations of misconduct involving integrity in research and scholarship.
- b. Upon receiving the allegations, the VPA shall convene an ad hoc Misconduct Allegation Response Committee (MARC) composed of the VPA, the Director of Research and the Research Officer, for advice on policy and procedures, and for assistance in accurate, confidential record keeping.
- c. Taking into account the nature of the allegations, MARC shall determine whether it is appropriate to attempt to resolve the matter through informal processes and discussions or a formal investigation.
- d. The VPA on behalf of the institution may take immediate action to protect the administration of the grant funds, such as instructing the Research Office to freeze grant accounts.
If the MARC believes the allegation of misconduct to be severe (any allegations involving significant financial, health and safety, or other risks) with respect to a Tri-Council grant, he/she shall instruct the Research Office to advise the relevant Agency or SRCR immediately.
- e. If the MARC determines the allegations might be resolved through informal means, the VPA must then inform the Respondent(s) in writing within 10 business days of receiving the allegation. The VPA will then ordinarily have the appropriate Dean conduct confidential and informal discussions with both the complainant(s) and the respondent(s) to attempt to resolve the

allegation. Final resolution through informal means shall require the approval of the MARC.

- f. If the allegation can be resolved without a formal investigation, the file can be closed and, if Tri-Council funding is involved, a follow-up letter from the Research Office shall be sent to SRCR 2 months from receipt of allegation for reporting requirements. A copy of the file shall be maintained in the researcher's confidential personnel file and in the researcher's confidential research file in the Research Office.

4.2.4 Formal Investigations of Allegations of Misconduct

- a. If the matter is not resolved under the informal investigation, and if in the view of the MARC further proceedings are required, the VPA shall refer the allegation to an Investigation Committee within 15 business days of receiving the complaint with the request that the Committee make such factual enquiry, investigation, findings and recommendations to the VPA as seem appropriate to the circumstances.
- b. The Investigation Committee will be composed of at least 3 members appointed by the VPA, one of whom must be an external member with no direct affiliation with the institution, and the others being faculty members, all of whom have the appropriate level of expertise to determine if a breach occurred, and who are without a conflict of interest in the case.
- c. The complainant(s) and the respondent(s) shall be informed of the composition of the Investigation Committee
- d. Any objection to the composition of the Investigation Committee shall be made to the VPA within 2 business days of this notification. The only grounds for objection is alleged conflict of interest. The MARC shall discuss the validity of any such objection, but the final decision to uphold or reject the objection rests with the VPA who will respond within 2 business days of receiving the objection. If the objection is valid, the process restarts as above in 4.2.4.b.
- e. The Investigation Committee shall determine whether a misconduct of research has occurred, and if so, to what extent. The determination is made by a majority vote.
- f. The Investigation Committee shall invite the respondent(s) to make a submission in writing. Subject only to the need to respect the privacy of

third parties, all documentation submitted to the Investigation Committee shall be made available to the respondent(s) who shall be given the opportunity to respond to the evidence presented

- g. The Investigation Committee has the right to examine any records, data, information, documents, files, and associated materials related to the investigation and question any student or faculty or staff during its investigation. All faculty, staff and students approached by the Investigation Committee must cooperate and assist as needed.
- h. The complainant(s) and respondent(s) shall be given the opportunity to be interviewed, to comment on the allegations, and to respond to any evidence before the Investigation Committee.
- i. The Investigation Committee, after such further investigation, deliberations and proceedings as it deems appropriate or necessary, shall submit its report within 30 days to the VPA. The report shall contain:
 - The full allegation
 - The names of the members of the Investigation Committee and the rationale for their selection
 - The process followed in the investigation
 - A list of the person(s) who provided information
 - A list of the witness(es) interviewed
 - A summary of the relevant material
 - All copies of records, data, information, documents, files, and associated materials related to the investigation
 - A determination of whether or not scholarly misconduct occurred
 - If scholarly misconduct occurred, a statement of its extent and seriousness
 - A statement of the reasons for the finding including clear and convincing evidence that the conclusions reached are valid
 - Recommendations on any remedial action (such as letter of reprimand, probation, suspension, termination of employment, or expulsion of a student) to be taken in the matter in question and/or changes in policies and procedures to avoid similar situations in the future.
 - A proposed plan to protect the complainant(s) as outlined in Other Provisions Section A below

- A proposed plan to protect and restore the reputation of the respondent(s) if wrongly accused
 - Suggestions of how to prevent similar misconduct of research in the future
- i. The VPA shall seek comments on the report from the MARC and such other people as may seem appropriate. The VPA shall, in consultation with the appropriate Dean, decide the matter and take such action or make such recommendations as may be required. Sanctions may range, for example, from a letter of censure, to probation and monitoring, to termination of appointment. In the event that termination of employment is recommended, the procedure described in section 12 of the Faculty Handbook is followed, beginning at section 12.2. The faculty member has the right to appeal Senate's recommendation to terminate according to the procedures described in Section 13. [Senate, May 5, 1999]
 - j. The Research Office shall maintain records of any proceedings related to investigations of misconduct of research; A second copy shall be kept in the researcher's confidential personnel file in the VPA office. All other copies shall be destroyed.
 - k. Normally a decision from the VPA is made along with his/her final report within 10 days of receiving the report from the Investigation Committee. The final report shall contain the following:
 - Sanctions to be taken against the respondent(s) who are found to have engaged in misconduct.
 - Actions to be taken to protect or restore the reputation of the respondent if wrongly accused
 - Actions to protect a complainant found to have made a responsible accusation
 - Sanctions against a complainant found to have made an irresponsible or malicious allegation
 - l. The final report will be forwarded to the President, the respondent(s), the Divisional Dean, the Research Office, and the complainant(s).
 - m. The VPA, in consultation with the Dean, the Director of Research, and the President will determine if and how the information regarding a guilty party shall be made public, once an appeal has been adjudicated or the request of an appeal has elapsed.

- n. A report shall be forwarded to the appropriate agency by the VPA through the Research Office within 7 months from receipt of allegation (regardless of a breach of policy or not). This report is to include information on the process that was followed, the conclusions that were reached and the actions that were taken if a breach was determined to have occurred.
- o. The agency will consider the report and may request clarification or additional information. The agency will also consider imposing its/their own sanction(s) in relation to grants made to the individual(s) implicated, such as in accordance with Tri-Council policies. These sanctions may include, but are not limited to:
 - Refusing to consider future applications for a defined time period
 - Withdrawing remaining instalments of the grant or award
 - Seeking a refund of all or part of the funds already paid as a grant or award for the research or scholarship involved
 - Requesting that the researcher correct the research record and provide proof that the research record has been corrected

4.2.5 Appeals

- a. If the respondent(s) feel that the decision of the final report of the VPA was inaccurate, an appeal or grievance as appropriate may be filed according to the terms of the appeal or grievance mechanism applicable to that person. If no such mechanism is in place, an appeal may be filed with the President within 15 business days of the receipt of the report.
- b. In the event of an appeal to the President, the President shall convene an ad hoc appeal committee of the Redeemer University Senate that shall be composed of 5 persons, including the President, 1 Board member, 1 internal faculty member, 1 external Senator, 1 Dean (not the Divisional Dean involved). In the event of a conflict of interest the President shall substitute with alternative Senate members as he or she sees fit. The President shall inform the appellant of the appeal committee's composition and shall entertain any objections to that composition within 15 days of receiving the appeal. The President's decision to uphold or reject such objections shall be final.
- c. The Senate appeal committee shall review the entire file of the Misconduct of Research Allegation in light of the letter of appeal sent to the President.

The appeal committee's decision shall be limited to upholding or rejecting the appeal, shall be final, and shall be sent in writing to the VPA for dissemination as per 4.2.4 above.

4.3 Other Provisions for Dealing with Allegations of Misconduct

4.3.1 The Protection for Good Faith Claims

- a. The University will discipline those who purposefully, irresponsibly or maliciously make false allegations of misconduct against another person.
- b. No person may retaliate against a person(s) making allegations or providing information regarding an allegation in good faith.
- c. If such retaliation occurs, the University may take disciplinary action against such person if a complaint is filed to the VPA.

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