



## TRENT UNIVERSITY

### POLICY ON RESEARCH AND SCHOLARLY MISCONDUCT

#### I. Preamble

All members of Trent University share in a commitment to integrity in their research, and scholarship. This policy forms a part of Trent University's commitment to upholding integrity in research and scholarship and to meeting the University's obligations under the *Tri-Agency Framework: Responsible Conduct of Research* (hereafter the Framework)<sup>1</sup>. Integrity in research, and scholarship, includes the principles listed below.

Commitment to these principles is consistent with the acknowledgement that research can involve honest error, conflicting data or valid differences in experimental design or in interpretation or judgment of information. The principles of research and scholarly integrity overlap with other areas, such as financial integrity in the use of research funds, and the ethical issues involving the use of human or animal subjects in research, for which there are established Tri-Agency guidelines and requirements, as well as through Trent University's internal policies and procedures. This policy covers all University based research, whether funded or non-funded. It covers research and scholarship, of faculty and

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<sup>1</sup> Canada's research granting agencies—Canadian Institutes of Health Research (CIHR), Natural Sciences and Engineering Research Council of Canada (NSERC), and Social Sciences and Humanities Research Council of Canada (SSHRC) hereafter referred to as "Agencies"—are committed to fostering and maintaining an environment that supports and promotes the responsible conduct of research. On December 5, 2011, the Agencies officially launched the new Tri-Agency Framework: Responsible Conduct of Research. This new Framework sets out the responsibilities and corresponding policies for researchers, institutions, and the Agencies that together help support and promote a positive research environment.

It also replaces the previous integrity policy and related documents, including the *Tri-Agency Policy Statement: Integrity in Research and Scholarship* (TCPS-I, 1994), the *Framework for Tri-Council Review of Institutional Policies Dealing with Integrity in Research* (1996) and the *Tri-Agency Process for Addressing Allegations of Non-compliance with Tri-Agency Policies* (2010).

Those involved in research supported by these Agencies must comply with the Tri-Agency Framework: Responsible Conduct of Research, and other Tri-Agency policies as amended from time to time. One aspect of the policy is that any institution which receives grants from any of the Agencies is required to promote integrity in research and scholarship, and to have in place, procedures for investigating allegations of misconduct in research and scholarship.

students, post-doctoral fellows, emeritus professors, casual and contract employees, visiting scholars and students, and research grant and contract employees. It covers research of a scholarly, commercial, and consultative nature.

## II. Principles of Integrity in Research, and Scholarship

Academic freedom carries with it the duty to use that freedom in a manner consistent with the scholarly obligation to base research, and scholarship, on an honest search for knowledge. Researchers shall strive to follow the best research practices honestly, accountably, openly and fairly in the search for and in the dissemination of knowledge. In addition, researchers shall follow the requirements of all applicable institutional policies and professional or disciplinary standards, and shall comply with applicable laws and regulations. The University therefore holds its researchers and scholars responsible for upholding the following principles:

1. Recognizing the substantive contributions of all collaborators, students, funders and sponsors; using unpublished work of other researchers and scholars only with permission and with due acknowledgement; and using archival material in accordance with the rules of the archival source;
2. Obtaining the permission of the author before using new information, concepts or data originally obtained through access to confidential manuscripts or applications for funds for research or training that may have been seen as a result of processes such as peer review.
3. 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.
4. Ensuring that authorship of published work includes, with their consent, all those and only those who have materially or conceptually contributed to, and share responsibility for, the contents of the publication, in a manner consistent with their respective contributions and authorship policies of relevant publications.
5. Keeping complete and accurate records of data, methodologies and findings, including graphs and images, in accordance with the applicable funding agreement, institutional policies, and/or laws, regulations, and professional or disciplinary standards in a manner that will allow verification or replication of the work by others. Retaining original data records for a given study (by the researcher who generated the data) for at least five years after the research is published or otherwise publicly presented (if the form of the data permits this,

and if assurances have not been given that data would be destroyed to assure anonymity);

6. Retaining the personal information of research subjects in accordance with the data retention requirements of the Freedom of Information and Protection of Privacy Act;
7. Fostering a shared understanding about the ownership of, and access to, primary data, software, and other products of research amongst all collaborators, especially between supervisors and graduate students, before research is undertaken;
8. Appropriately managing any real, potential or perceived conflict of interest in accordance with Trent University's Conflict of Interest Policy;
9. Presenting accurately and completely one's scholarly and professional credentials and accomplishments when submitting grant applications, and when engaged in other professional duties and responsibilities where the invitation to do so is based at least in part on one's scholarly and professional credentials and accomplishments (e.g. sitting on a selection committee, NSERC committee);
10. Complying with federal or provincial statutes or regulations, and with University regulations for the protection of researchers, human subjects or the public or for the welfare of laboratory animals;
11. Complying with other reasonable legal and contractual requirements that relate to the conduct of research.

### III. Non-Compliance

In addition to violations of this policy, non-compliance shall include any departure from relevant research policies as outlined in the *Tri-Council Statement: Ethical Conduct for Research Involving Humans* and the *Tri-Agency Framework: Responsible Conduct of Research*, the *Tri-Agency Financial Administration Guide*, the *Trent University Senate Policy for Research Involving Human Participants*, the Trent University Conflict of Interest Policy, the standards set by the *Canadian Council on Animal Care*, and the *Public Health Agency of Canada Laboratory Biosafety Guidelines*, whether deliberate or inadvertent and, in particular, those that relate to the following issues:

1. Breach of research ethics and/or protocol
2. Financial mismanagement of public funds

### IV. Breaches of Research Integrity

Breaches include the following:

- a. *Fabrication*: Making up data, source material, methodologies or findings, including graphs and images.
- b. *Falsification*: Manipulating, changing, or omitting data, source material, methodologies or findings, including graphs and images, without acknowledgement and which results in inaccurate findings or conclusions.
- c. *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.
- d. *Plagiarism*: Presenting and using 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 and, if required, without permission.
- e. *Redundant publications*: The re-publication of one's own previously published work or part thereof, or data, in the same or another language, without adequate acknowledgment of the source, or justification.
- f. *Invalid authorship*: Inaccurate attribution of authorship, including attribution of authorship to persons other than those who have contributed sufficiently to take responsibility for the intellectual content, or agreeing to be listed as author to a publication for which one made little or no material contribution.
- g. *Inadequate acknowledgement*: Failure to appropriately recognize contributions of others in a manner consistent with their respective contributions and authorship policies of relevant publications.
- h. *Mismanagement of Conflict of Interest*: Failure to appropriately manage any real, potential or perceived conflict of interest, in accordance with Trent University's policy on conflict of interest in research, preventing one or more of the objectives of the Framework (Section 1.3) from being met.
- i. Misrepresentation in an Agency Application or Related Document which includes:
  - 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.
  - Applying for and/or holding an Agency award when deemed ineligible by NSERC, SSHRC, CIHR or any other research or research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.
  - Listing of co-applicants, collaborators or partners without their agreement.
- j. Mismanagement of Grants or Award Funds such as using grant or award funds for purposes inconsistent with the policies of the Agencies; misappropriating grants and award funds; contravening Agency financial policies, namely the Tri-Agency Financial Administration Guide, Agency grants and awards guides; or providing incomplete, inaccurate or false information on documentation for expenditures from grant or award accounts.

- k. Failing to meet Agency policy requirements or, to comply with relevant policies, laws or regulations, for the conduct of research activities, including for example failing to obtain the appropriate approvals, permits or certifications before conducting research.

## V. Procedures

The following procedures are intended to address non-compliance on the part of anyone involved in research within the University. They apply to all faculty, professional librarians, visiting scholars, postdoctoral fellows, research chairs, emeritus, adjuncts and staff. This policy also applies to undergraduate and graduate students insofar as they are involved in research. They do not limit the rights of persons whose terms and conditions of employment are governed by a collective agreement.

1. Members of the University community are encouraged to resolve misunderstandings or disputes among themselves or with informal assistance of Vice President Research or designate.
2. A formal allegation of non-compliance must be written, dated and signed, and directed to the Vice President Research within one month of the evidence on which it is based becoming known. An exact copy of the written allegation must be sent to the Secretariat for the Responsible Conduct of Research. The written allegation must include pertinent details and supporting evidence. When the Provost or Vice President Research is named in an allegation, the President shall replace the Provost or Vice President Research wherever they have a role in these procedures. When the President is named in an allegation, a designate from the Board of Governors shall replace the President wherever they have a role in these procedures.
3. Upon receiving or making a formal allegation, the Vice President Research or delegate shall notify the person named in the allegation. The Vice President of Research shall endeavour to clear up misunderstandings and to mediate disputes where possible, maintaining the highest degree of confidentiality so as to protect the reputations and careers of all involved. The Vice President Research shall form a judgment as to whether the allegation should proceed to a formal investigation.
4. If the Vice President Research judges that the allegation should not proceed to a formal investigation, the person named in the allegation, as well as the person making it, shall be advised that the matter is at an end. The file is destroyed.
5. If the Vice President Research judges that the allegation should proceed to a formal investigation, the person named shall be so informed, promptly and in

writing.

6. The formal investigation of the allegation begins upon receipt of written notice by the person named. The written notice shall include a copy of the signed allegation and shall invite the person named to respond to the allegation. Where the person named is a member of a bargaining unit, a copy of the signed allegation shall be sent at the same time to the appropriate bargaining agent, and the person named shall be informed that he or she may elect to be accompanied by the bargaining agent or any other willing person of their choosing in any of these procedures.
7. Within 30 days of the receipt of the formal complaint the Vice President of Research shall appoint a committee responsible for investigating the complaint. The committee will consist of three (3) persons from the University community that have appropriate knowledge and experience. The Vice President of Research will appoint a Chair from among the committee members. The committee will carry out a detailed examination of the facts relevant to the allegation. The committee will have access to all relevant documentation and will conduct interviews with (at a minimum) the complainant and the respondent. The Committee shall ensure that the person named in the allegation is allowed to know any evidence presented and has ample opportunity to respond to that evidence. The Committee will complete its investigation as quickly as possible, normally within 90 days of being appointed. The proceedings will be confidential. The report will contain a conclusion reached by the committee about whether the allegation had been substantiated.
8. The parties may extend the timelines with mutual consent. A copy of the report shall be sent at the same time to the person named in the allegation and to the appropriate bargaining agent if the person is a member of a bargaining unit.
9. If, after reviewing all appropriate evidence including the report, the Provost holds that clear and convincing evidence of scholarly misconduct (as provided by section II) is not found, the Provost shall so inform, in writing, the person named in the allegation, and the University shall take reasonable steps to protect and/or restore the reputation(s) and credibility of the person named and of any other person(s) wrongfully implicated during the procedures.
10. If after reviewing all appropriate evidence including the report the Provost holds that there is clear and convincing evidence of scholarly misconduct (as provided by section II), the Provost shall initiate the discipline process according to the applicable collective agreement or in the case of individuals not represented by a bargaining agent, the VP, Research shall determine appropriate sanctions.
11. If the University decides after formal investigation not to proceed against the

person named in the allegation, or if an arbitration decides in favour of the person, the University shall remove all documentation relating to the allegation from the person's personnel files or other equivalent files and, except for arbitration reports which shall be retained, shall at the discretion of that person destroy the documentation or transfer it to that person. The removal of documentation from a person's personnel file or other equivalent file does not prevent the University from meeting its reporting obligations as described in Section VI. Reporting Requirements.

12. No person who honestly and in good faith makes an allegation or gives evidence in accordance with this policy will be subject to reprisal. An individual making allegations or giving evidence recklessly, maliciously or in bad faith shall be subject to disciplinary action under the relevant collective agreement, where applicable, or to sanctions determined by the VP, Research.
13. This policy, insofar as it affects members of the Trent University Faculty Association bargaining unit, is extended by Article IV.12 of the Collective Agreement between the Board of Governors on behalf of Trent University and the Trent University Faculty Association.

## VI. Reporting Requirements

- a. Subject to any applicable laws, including privacy laws, the University shall advise the relevant Agency or the Secretariat on Responsible Conduct of Research (SRCR) immediately of any allegations related to activities funded by the Agency that may involve significant financial, health and safety, or other risks.
- b. The University shall advise SRCR confirming whether or not the Institution is proceeding with an investigation where the SRCR was copied on the allegation or advised as per Section 4.4.a. If a breach is confirmed at the inquiry stage, reporting requirements outlined in Section 4.4.c apply.
- c. The University shall prepare a report for the SRCR on each investigation it conducts in response to an allegation of policy breaches related to a funding application submitted to an Agency or to an activity funded by an Agency. Subject to any applicable laws, including privacy laws, each report shall include the following information:
  - the specific allegation(s), a summary of the finding(s) and reasons for the finding(s);
  - the process and time lines followed for the inquiry and/or investigation;
  - the researcher's response to the allegation, investigation and findings, and any measures the researcher has taken to rectify the breach; and
  - the investigation committee's decisions and recommendations and actions taken by the University.

The report should not include:

- information that is not related specifically to Agency funding and policies; or
    - personal information about the researcher, or any other person, that is not material to the Institution's findings and its report to the SRCR.
  - d. Inquiry letters and investigation reports should be submitted to the SRCR within two and seven months, respectively, of receipt of the allegation by the University. These timelines may be extended in consultation with the SRCR if circumstances warrant, and with monthly updates provided to the Agency until the investigation is complete.
  - e. The University and the researcher may not enter into confidentiality agreements or other agreements related to an inquiry or investigation that prevent the Institution from reporting to the Agencies through the SRCR.
  - f. In cases where the source of funding is unclear, the SRCR reserves the right to request information and reports from the Institution.
- VII. At all times, the University shall take reasonable steps to protect the funds of any external granting/contracting agencies involved.
- VIII. Where it is the Agency that initiates an investigation, the University will provide the Council with a comprehensive report of the process and findings.