Research Integrity Policy Orientation

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The Policy

- The *Research Integrity Policy* came into effect July 1, 2013.

- The *Research Integrity Policy* replaces the *Procedures for Inquiries and Hearings Regarding Allegations of Misconduct in Research For Faculty, Staff And Post-Doctoral Fellows at McMaster University*. 
Background on Policy Development

In 2012 the three Federal Funding Agencies (CIHR, NSERC and SSHRC) advised institutions that, in order to remain eligible for agency funding, each would have to comply with a new Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2) and Tri-Agency Framework: Responsible Conduct of Research (the Framework).

A small but representative Task Force was established to work on the necessary revisions to the policy. That Task Force reported through the Senate Committee on Appointments to Senate and the Board of Governors.
Background on Policy Development

In revising the *Procedures for Inquiries and Hearings Regarding Allegations of Misconduct In Research For Faculty, Staff And Post-Doctoral Fellows at McMaster University* the Task Force tried to provide as much information as possible for the university community with respect to the definition of research misconduct and the responsibilities of researchers, supervisors and members of the administration.

The Task Force also recommended that because of the increased focus on research integrity education and research misconduct prevention in the new policy, the title of that policy be simplified and changed to the *Research Integrity Policy*. 
The Office of Academic Integrity was identified as the appropriate office to receive concerns and questions regarding allegations of research misconduct.

Changes were made to how allegations of research misconduct are treated at the university. In recognition of the time involved in the investigation of such allegations, investigations are now carried out by a University Officer drawn from an Investigation Panel established by the Senate Executive Committee.

The Policy needed to be expanded to apply to not only to faculty, staff and post-doctoral fellows but also to students and others involved in research at McMaster.
Research Integrity Policy

Approval: July 1, 2013

“The University states unequivocally that it demands research integrity from all of its members. Research misconduct, in whatever form, is ultimately destructive to the values of the University; furthermore, it is unfair and discouraging to those who conduct their research with integrity.”

(Research Integrity Policy, page 4)
Related Policies

- Academic Integrity Policy
- Care and Use of Animals in Research and Teaching, Policy on
- Charitable Giving Policy (Donations to Research Accounts)
- Conflict of Interest in Research, Statement on
- Consulting Policy and Procedures, Statement on Dishonest or Fraudulent Activities Related to Funds or Property Owned by or in the Care of McMaster University
- Financial Procedure for Research Grants
- Indirect Costs Associated with Research Funding from the Private Sector, Policy on
  Internally Sponsored Research Accounts
- Joint Intellectual Property Policy – (McMaster University, Hamilton Health Sciences and St. Joseph’s Healthcare Hamilton)
Related Policies

- McMaster University Revised Policy and Regulations With Respect To Academic Appointment, Tenure And Promotion [2012] Tenure and Promotion Policy
- Ownership of Student Work
- Research Accounts Policy
- Research Ethics at McMaster University, Policy on
- Research Involving Human Participants, Policy Statement on
- Research Residuals Policy
- RMM #801 – Field Trip and Electives Planning and Approval Program (Safety During Academic or Research Field Work)
- Tri-Agency Framework: Responsible Conduct of Research
- Tri-Agency Policy Statement: Ethical Conduct for Research Involving Humans
- Use of University Facilities for Non-Academic Purposes, Policy on
Office of Academic Integrity

1. Education & Prevention
2. Provide advice with respect to research misconduct concerns
3. Determine where allegations fall
4. Provide advice, administrative support and resources to University Officers
5. Store documentation
6. Reporting
7. Statistical report
8. Ensuring reasonable allegations are investigated
Institutional Personnel

Defined as:

“Faculty, postdoctoral fellows, graduate students, undergraduate students who are taking part in research, directly or indirectly, and the other research support staff and any personnel, including senior administrations, involved directly or indirectly in research, including but not limited to, research associates, technical staff, adjunct professors, librarians, visiting professors, volunteers, observers and institutional administrations and officials representing McMaster University.” (Research Integrity Policy, page 4)
Institutional Personnel

All institutional personnel have the responsibility to:

- Be aware of the scope of the *Research Integrity Policy* and have knowledge of the *Research Integrity Policy*
- Report incidents of apparent research misconduct
- Provide assistance and co-operation in the investigation of allegations.

(*Research Integrity Policy*, page 7)
Research

“Research is an undertaking, or a commitment to an undertaking, intended to extend knowledge through a disciplined inquiry or systematic investigation.”

(Research Integrity Policy, page 11)
Research

This definition of research in this policy includes, but is not limited to, the following scholarly activities:

a) the preparation and publication, in either traditional or electronic format by academic publishers, of scholarly books, articles, reviews, translations, critical editions, bibliographies, textbooks, and pedagogical materials;

b) creative works in drama, music and the visual arts (including recordings, exhibitions, plays and musical compositions);

c) literary works in prose, poetry and drama; and

d) contract research and consultancy contracts.
Research Misconduct Offences

Research Misconduct, in the context of this Policy, includes, but is not limited to the following, in the proposing, conducting or reporting of scholarly activity:

a) Falsification of Credentials
b) Fabrication (data, source material, methodologies/findings, etc.)
c) Falsification
d) Suppression
e) Destruction of research records
Research Misconduct Offences

f) Plagiarism

g) Self –plagiarism

h) Redundant publications

i) Invalid authorship

j) Inadequate acknowledgement

k) Mismanagement of Conflict of Interest

l) Abuse of Confidentiality

m) Abuse of Authority

n) Misrepresentation to Funding Agencies
Research Misconduct Offences

o) Mismanagement of Grants or Award Funds

p) Breaching of Agency Policies or Requirements for Certain Types of Research

q) Non-compliance with the TCPS2

r) Other kinds of misconduct such as: violation of the regulations of the granting bodies; improper use of funds, equipment, supplies, facilities, or other resources
Stages in an Allegation:

1. Allegation received by the Academic Integrity Office
2. Academic Integrity Policy
   - No reasonable basis for any action to be taken
     - Hearings Committee
       - Receives Investigation Report & Complainant Statement
         - Concludes Investigation is incomplete
           - New University Officer assigned to continue investigation
         - Accepts conclusions of the Investigation Report
         - Sends to a Hearing
   - Reasonable basis upon which to initiate a Hearing
     - Hearings Committee
       - Receives Investigation Report
         - Accepts Recommendation
           - Determines Penalty
         - Rejects Recommendation
           - Sends to Hearing
         - Hearing before the Hearings Committee
         - Appeal to the Provost (procedural grounds only)
Stages in an Allegation

1. Allegation received by the Academic Integrity Office
   - Academic Integrity Policy
   - Research Integrity Policy
     - Investigation by University Officer
Possible Sanctions within McMaster’s Research Integrity Policy

Disciplinary action may include, but is not limited to:

a) issuing a letter of concern to the researcher. The Tribunal will identify any additional recipients, whether the letter is to be placed in the researcher’s file in the Faculty Dean’s office and the retention period of the letter in the file;

b) instructing the researcher to correct the research record and provide proof of that this action has occurred;

c) instructing the researcher to withdraw all pending relevant publications;
Possible Sanctions

d) notifying publishers of publications in which the involved research was reported;

e) notifying co-investigators and collaborators of the finding(s);

f) withdrawal of specific research privileges;

g) special monitoring of research work for a specified period;

h) requiring co-supervision of graduate students;

i) recommending to the AVP/Dean of Graduate Studies to restrict or remove supervisory privileges of graduate students;
Possible Sanctions

j) issuance of reports to appropriate administrative officers and/or committees considering tenure, promotion and/or career progress/merit changes;

k) a recommendation of Suspension, with or without pay, for a specified period;

l) a recommendation that the appropriate procedures for termination of employment or removal be initiated, in accordance with existing University policies;

m) any other recommendation or disciplinary action as the Hearings Committee deems appropriate.
Confirmed Findings of Policy Breach

Tri-Agency recourse may include but is not limited to:

- A letter of concern
- Requirement correction with proof
- Termination of remaining instalments
- Required refund of all or part of the funds already paid
- Refusal to accept applications for funding for a defined time period of indefinitely
- Refusal to allow service on agency committees
- Such other recourse available by law

The Agency will give consideration to affected research personnel.
Accountability and Reporting:

The Agency will:

• Inform the researchers and institution of decision
• Notify the appropriate authorities
• In cases of a serious breach, as determined by the Agency President, may publicly disclose the name of the researchers and the nature of the breach
• Post statistical data on the number of allegations and their outcomes on the website

In exceptional circumstances the Agency may:

• Take immediate action
• Undertake agency review or compliance audit
Tri-Agency Determination of “Serious Breaches”

As determined by the Agency President, examples of serious breaches may include:

- Recruiting human participants into a study with significant risks or harms without REB approval, or not following approved protocols
- Using animals in a study with significant risks or harms without Animal Care Committee approval, or not following approved protocols
- Deliberate misuse of grant funds for personal benefit not related to research
- Knowingly publishing research results based on fabricated data
- Obtaining grant/award funds from the Agencies by misrepresenting one’s credentials, qualifications and/or research contributions
Responsible Conduct of Research

Special Certifications/Approvals

Human participants, their records or tissues
   Medical: Hamilton Integrated Research Ethics Board
   http://fhs.mcmaster.ca/healthresearch/hireb/

Non-medical: McMaster Research Ethics Board
   http://reo.mcmaster.ca/

Animals and their tissues
   McMaster Animal Research Ethics Board
   http://fhs.mcmaster.ca/healthresearch/areb_introduction.html
Responsible Conduct of Research

Biohazardous materials
• viruses, bacteria or yeast, cancer or immortalized cell lines, parasites, toxins of a biological origin, plant or aquatic pathogens
  http://www.mcmaster.ca/biosafety/

Controlled goods
• weapons, ammunition, explosives, weapon design and testing equipment, missile technology, technology necessary for the development, production or use of a controlled good

Nuclear substances and radiation devices
  http://www.mcmaster.ca/healthphysics/
Responsible Conduct of Research

Environmental Assessment
- Research outside an office or lab, or involves construction, operation, modification, decommissioning, abandonment… in relation to a permanent physical structure

Use and disposal of pharmaceuticals or other products
- in accordance with Canada's Food and Drugs Act
- info@hc-sc.gc.ca or 1-866-225-0709
  http://www.workingatmcmaster.ca/eohss/
Responsible Conduct of Research

Licenses for Research in the Field

Information about research licenses can be found on provincial and territorial government websites
http://acuns.ca/website/awards/research-licensing

Examples

• Ontario Archaeologists Licence

• Parks Canada Research and Collection Permit must be obtained before leaving for the field

• International
  http://www.hhs.gov/ohrp/international/intlcompilation/intlcompilation.html
Responsible Conduct of Research

Declaration of Conflict of Interest

Required if members of the team have any affiliation or a commercial or contractual interest with or in any of the Sponsor(s). Could include:

- Seat on Board of Directors
- Seat on Scientific Advisory Board
- Shares in Sponsor
- Other Role within the Sponsor
- Pre-existing License/Option Agreement with Sponsor
- Pre-existing Consulting Agreement
- Received non-research cash/in-kind, also gifts exceeding $25 in past 3 years
- Family or intimate connections with any sponsor(s), subcontractor(s), suppliers or any other company associated with the project
The Tri-agency Framework: Responsible Conduct of Research can be found at:

Best Practices

• Orientation
• Communication
• Documentation

Be Proactive!
Orientation

Supervisors should start with an orientation for all new institutional personnel conducting research in their area. A review of the orientation should also be done with all current personnel.

Orientation should include:
- Review of the Research Integrity Policy (and the Academic Integrity Policy for students) and other related University policies and statements.
- Discussion of the ownership of work, intellectual property, research responsibilities, responsibility for the maintenance of records and ownership of those records (lab books)
- Publication expectations and authorship (who will be first author etc.)
- Discussion of the style to properly cite and acknowledge all directly or indirectly quoted material in accordance with the standards of the discipline.
Communication and Documentation

- Supervisors should clearly communicate to all institutional personnel what the expectations are for the responsible conduct of research (Orientation, one-on-one discussions, lab meetings, etc.).
- Document orientation sessions (checklists, letters of understanding etc.) that are signed by the supervisor and the researcher.
- Schedule annual meetings to discuss research integrity and to provide a brief review of expectations.
- Immediately address any research integrity concerns regarding a researcher’s performance or conduct. Follow up in writing summarizing the concern, what was done to address the concern and provide clear direction to the researcher on future expectations and conduct.
Communication and Documentation

- It is possible for allegations of research misconduct to occur within months or even years after publication. Keep all documentation surrounding orientation, research integrity expectations and clarifications. This documentation may be kept in an electronic format (on a network drive would be strongly suggested).

- Don’t rely on your memory! Follow up in writing (email) for conversations about research integrity expectations or concerns.

- When expectations are not clear, researchers should seek clarification from their supervisor and/or co-authors as applicable (order of authors, publication timelines, etc.)

- The Office of Academic Integrity may also be contacted to answer questions regarding the Research Integrity Policy.
Best Practices

Not Documented?
Not Done!
Questions, concerns or allegations related to the *Research Integrity Policy* should be directed to the Office of Academic Integrity

[acinteg@mcmaster.ca](mailto:acinteg@mcmaster.ca)

Extension: 24303

[www.mcmaster.ca/academicintegrity](http://www.mcmaster.ca/academicintegrity)