

<b>Procedure History</b>	
<b>Procedure No.</b> ED031 (B18)	Revised: 12 08 31
<b>Approving Jurisdiction</b> President	Reviewed:
<b>Original Signed By</b>  John McKendry	Effective: 12 08 31
<b>Administrative Responsibility</b> Associate Vice President, Research	Approved: 12 08 31

## Integrity in Research and Scholarship Procedure

### DEFINITIONS

- 1) **Misconduct in research:** Misconduct in research refers to conduct that deviates from that which is acceptable within the scholarly community, and includes, but is not limited to:
  - a. Plagiarism (i.e. presenting and using another's published or unpublished work, including theories, concepts, data, source material, methodologies or findings, including graphs and images, as one's own, without appropriate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);
  - b. Fabrication (i.e. the making up of data, source material, methodologies or findings including graphs and images) or falsification (i.e. manipulating, changing or omitting data, source material, methodologies or findings, including graphs and images, without acknowledgement and which results in inaccurate findings or conclusions) of research data;
  - c. Conflict of scholarly interest such as opposing the publication or compromising the work of another author, particularly in the publications and review forums, for the purposes of benefiting oneself directly or indirectly;
  - d. Failure to comply with the university policies and procedures with respect to research and scholarly activity;
  - e. Failure to recognize the substantive intellectual contributions of all collaborators by including in publications and reports those collaborators and no others;
  - f. Failure to comply with the university policies on conflict of interest or intellectual property rights;
  - g. Using unpublished work of other scholars and researchers without permission and/or due acknowledgement;

- h. Using research funds in a manner that is not consistent with the terms and conditions under which those funds were received;
- i. Failure to obtain all required approvals for research involving humans, or failure to conduct research in accordance with prescribed protocols;
- j. Failure to use archival material in accordance with the rules of the archival source;
- k. The use of materials and concepts obtained through confidential processes such as manuscript review or funding applications without prior written permission of the author;
- l. Failure to disclose to the university, journals, funding agencies, or those requesting opinions, any conflict of interest, financial or other;
- m. Failure to maintain guarantees of confidentiality to research participants subject to the limits prescribed by law;
- n. The use of redundant publications, i.e. the re-publication of one's own previously published work or part thereof, or data, in the same or another language, without adequate acknowledgement of the source, or justification;
- o. The destruction of research records, be they one's own or of 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;
- p. Using grant or award funds for purposes inconsistent with the policies of the funder; contravening funder financial policies; or providing incomplete, inaccurate or false information on documentation from expenditures from grant or award accounts.

Misconduct in research does not include situations of honest error despite due diligence, conflicting data, or valid differences in research design, or interpretation.

## **2) Complainant(s)**

The complainant(s) is/are the person(s) making an allegation of misconduct in research; the complainant(s) may or may not be directly affected by the alleged misconduct and may be a university administrator.

## **3) Respondent(s)**

The respondent(s) is/are the person(s) accused by the complainant(s) of misconduct in research.

#### **4) Data**

In addition to information gathered through research, data in this policy includes the methodology used to obtain results, the actual research results, and the analysis and interpretations by the researchers.

#### **5) Research**

Research as used in this policy includes research and scholarship.

## **PROCEDURES**

### **A. AUTHORITY OF THE AVP RESEARCH**

- 1) In cases of collaborative research involving other institutions, the AVP Research may modify these procedures to facilitate the conduct of parallel or joint investigations, or as otherwise deemed appropriate by the AVP Research.
- 2) At any time the AVP Research has the authority to:
  - a. Close down and declare “off limits” facilities used for research;
  - b. Protect the administration of university and external funds involved in the research;
  - c. Obtain and retain relevant documentation (e.g. lab notes, Computer disks, hard drives, proof of credentials) related to an investigation;
  - d. Request that members of the university appear before an Investigative Committee and that they answer the Investigative Committee’s questions or provide materials to it;
  - e. Dismiss the allegation if, based on reasonable information, the AVP Research believes that continued investigation will result in a determination that the alleged misconduct in research has not occurred; and
  - f. Take such other action as the AVP Research deems appropriate.

### **B. ALLEGATIONS**

- 1) Allegations of misconduct in research may be made by any person(s) within or outside the university. Anonymous allegations will not be investigated.
- 2) Allegations must be in writing, dated and signed by the complainant(s). Allegations must contain fully documented evidence and must normally be made within six months of the alleged misconduct.

- 3) The allegation shall be received by the AVP Research. Allegations received by others must be treated confidentially, and conveyed directly to the AVP Research.
- 4) If the AVP Research is a party to the alleged misconduct, the VP Academic will assume the AVP Research's role in applying this policy.
- 5) In the event of an allegation of misconduct being made that involves funds from the federal Tri-Agencies an exact copy of the allegation shall be forwarded to the Secretariat on Responsible Research Conduct of Research (SRCR).

## **C. CONFIDENTIALITY AND SECURITY OF RECORDS**

- 1) Throughout the informal and formal investigations the identities of the complainant(s) and the respondent(s) and any records, data, files, electronic recordings or information gathered during the proceedings shall be kept in confidence by all parties, except in the case of allegations involving federal Tri-Agency funds (see Section B.5 above).
- 2) The AVP Research will be responsible for retaining, in a secure location, and controlling appropriate access to any records, data, files, electronic recordings, or information arising from this policy. Any and all records, data, files, electronic recordings or information relating to an action under this policy will be handled by the university in accordance with the British Columbia Freedom of Information and Protection of Privacy Act, and applicable university policies and retention schedules.

## **D. INITIAL RESPONSE TO ALLEGATIONS**

- 1) Upon receipt and review of an allegation the AVP Research, or in his/her absence a person designated to act as the AVP Research by the VP Academic, shall proceed as outlined below, or shall appoint an individual to review the matter (the reviewer) and report to the AVP Research.
- 2) Within 5 working days of receiving the allegation, the AVP Research shall inform the respondent in writing of the allegation. The AVP Research or the reviewer will conduct confidential, informal consultations with the complainant(s) and the respondent(s) to determine if an informal resolution is possible. The AVP Research shall take such actions as required to protect university and external funds and resources.
- 3) If informal consultation fails to resolve the allegation, the AVP Research, shall convene a formal meeting(s) with the respondent(s) and the complainant(s) to discuss the allegation. The respondent(s) shall be informed of the right to be accompanied by a person of his or her choice at the meeting. If the respondent(s) is/are a member of any bargaining unit within the university, and if the respondent(s) consent(s), that organization will be promptly notified. Following this meeting, the AVP Research may:
  - a. Inquire into the allegation further, or

- b. Dismiss the allegation.
- 4) The AVP Research will decide whether or not a formal investigation is warranted and inform the respondent(s) and complainant(s) in writing, normally within 15 working days of the end of the meeting(s) provided in (3) above. If an employee association was notified, then it will be informed of the decision at the same time.
- 5) In the event that the allegation pertains to the use federal Tri-Agency funds, the AVP Research shall inform the SRCR confirming whether the investigation is proceeding or not.

## **E. FORMAL INVESTIGATION**

- 1) If the AVP Research determines that a formal investigation is warranted, he or she shall, within 10 working days of the decision, appoint an investigative committee of one to three members, none of whom shall have any conflict of interest with respect to either the complainant(s) or respondent(s). Members of the Investigative Committee shall have the appropriate expertise to evaluate the particulars of the allegation and may or may not be members of the university community. The complainant(s) and the respondent(s) shall be notified of the composition of the committee.
- 2) Any objection to the composition of the Investigative Committee shall be made to the AVP Research within 5 working days of this notification. The only grounds for objection are alleged bias or conflict of interest. The AVP Research's disposition of any such objection shall be final.
- 3) The mandate of the Investigative Committee is to determine on a balance of probabilities whether misconduct in research has occurred, and if so, its extent and seriousness. For a three person Investigative Committee, the determination is made by majority vote. For a two person Investigative Committee, the determination is made by consensus and if a consensus cannot be reached, the Investigative Committee is deemed to have determined that the alleged misconduct did not occur. The determination of the Investigative Committee is binding on the university...
- 4) The Investigative 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 Committee shall be made available to the respondent(s) who shall be given the opportunity to respond fully to the evidence presented.
- 5) The Investigative Committee has the right to examine any records, data, information, documents, files, and associated materials related to the investigation and question any student or member of faculty or staff during its investigation. All members of faculty, staff and students must cooperate fully with the Investigative Committee and make available any records, data, information, documents, files, and associated materials requested by the committee during its investigation. The Investigative Committee shall assemble and clearly identify all data, documents, files, records, and associated materials. The Office of Research and Scholarship will be responsible for keeping and controlling appropriate access to records, consistent with applicable policy and legislation.
- 6) The complainant(s) and respondent(s) shall be given an opportunity to be interviewed, to comment on the allegations, and to respond to any evidence before the Investigative Committee.

- 7) The investigation may include interviews, which will be held in camera. Evidence will not be given under oath. The Investigative Committee shall ensure that records of any interviews will be kept.
- 8) Records of meetings will be considered confidential to the extent permitted by law.
- 9) The Investigative Committee has the right to seek impartial expert opinions and advice, as it deems necessary, in order to ensure that the investigation is thorough and authoritative.
- 10) The Investigative Committee will submit a written report to the Associate Vice President, Research within 60 days of its appointment including the substantive evidence that was considered in its review and its recommendations. The report will contain:
  - a. The full allegation
  - b. The names of the members of the Investigative Committee and the rationale for their selection;
  - c. The process followed in the investigation;
  - d. A list of the person(s) who provided information;
  - e. A list of the witness(es) interviewed;
  - f. A summary of the relevant material;
  - g. All copies of records, data, information, documents, files, and associated materials related to the investigation;
  - h. A determination of whether or not scholarly misconduct occurred;
  - i. If scholarly misconduct occurred, a statement of its extent and seriousness; and
  - j. A statement of the reasons for the findings including clear and convincing evidence that the conclusions reached are valid;
  - k. Recommendations on any remedial action to be taken in the matter in question and/or changes in policies and procedures to avoid similar situations in the future;
  - l. A proposed plan to protect and restore the reputation of the respondent(s) if wrongly accused;
  - m. A proposed plan to protect the complainant(s) as outlined in Other Provisions section A below.
- 11) Normally within 20 days of the receipt of the Investigative Committee's report, the AVP, Research, shall reach a decision and prepare a final report containing:
  - a. A copy of the signed allegation;
  - b. The findings of the AVP Research as to whether the allegation has been upheld;
  - c. A statement of the reasons for the findings.

- 12) The final report shall also describe any actions that are to be taken including, but not limited to:
  - a. Sanctions to be taken against a respondent who is found to have engaged in misconduct;
  - b. Actions to be taken to protect or restore the reputation of the respondent if wrongly accused;
  - c. Actions to protect a complainant found to have made a responsible accusation (see Other Provisions section A below);
  - d. Sanctions against a complainant found to have made an irresponsible or malicious allegation.
- 13) Sanctions shall be consistent with Kwantlen policies and collective agreements.
- 14) The report of the Investigative Committee and the final report prepared by the AVP Research will be forwarded, within 5 days of the completion of the final report, to the President, the respondent(s) and his or her divisional dean, the complainant(s), and any bargaining unit informed of the proceedings. Any distribution of the report shall be consistent with the British Columbia Freedom of Information and Protection of Privacy Act.
- 15) The AVP Research is responsible for ensuring that any actions specified in the final report are carried out.
- 16) Where the finding is that misconduct has occurred, the AVP Research shall forward the report of the Investigative Committee and the final report within thirty days of the conclusion of the investigation, to any granting agency (in the case of federal Tri-Agency funds, to the SRCR) or sponsor known to have provided support for the scholarly activity and may inform other relevant persons or agencies in the interests of protecting the integrity of scholarly activity.
- 17) Where any granting agency or sponsor has requested an investigation under this policy, the AVP Research shall forward a copy of the Investigative Committee report and the final report to the agency or sponsor, whether or not misconduct is deemed to have occurred, within 30 days of the conclusion of the investigation.
- 18) Where the AVP Research dismisses an allegation, or determines that scholarly misconduct has not occurred, the Associate Vice President, Research shall maintain one copy of all materials in a secure place for a period of one year from the date of such determination. The secured copy of the materials shall be consulted only if a complaint of mischievous or malicious allegation is submitted regarding the original complaint. After one year, the remaining copy of materials will be destroyed.

## **OTHER PROVISIONS**

### **A. PROTECTION FOR GOOD FAITH CLAIMS**

- 1) The university will make every effort to protect from retaliation those making an allegation of misconduct in research or who have provided information to the university in good faith. Retaliation does not include actions of the university taken pursuant to section A(4).
- 2) No person(s) to whom this policy applies may retaliate against a person(s) making such allegations or providing such information in good faith.

- 3) If a person(s) who has made such an allegation or who has provided such information in good faith believes that they have suffered retaliation from a person(s) to whom this policy applies, they may file a written complaint to the AVP Research. The university will conduct an investigation of the alleged retaliation. Anyone who does engage in such retaliation is subject to disciplinary action. Where retaliation is found to have occurred, the university will act accordingly.
- 4) The university may take disciplinary action against individuals found to have made an irresponsible or malicious allegation of misconduct. This includes, but is not limited to, allegations that are based upon facts that the complainant(s) knew to be false, or allegations made with reckless disregard towards, or with willful ignorance of, facts that would disprove the allegation.
- 5) Any disciplinary action taken against an employee of the university pursuant to section A will follow the procedures outlined in any applicable collective agreement or agreement on conditions of employment that apply to that employee.

## **B. APPEAL PROCESS**

- 1) If an affected person believes that the decision of the final report of the AVP Research was reached improperly, 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, within 15 working days of the receipt of the report, with the President.

## **C. DATA**

- 1) Data must be organized in a manner that allows ready verification. Data must be gathered in accordance with principles governing the use of human and animal subjects.
- 2) Subject to exceptions based on a duty of confidentiality and the laws respecting intellectual property and access to information, after data are published, they must be made available to any party presenting a reasonable request to examine them. In cases where there is a disagreement between the researcher and the person requesting the data, the matter shall be referred to the Office of the AVP Research for resolution.
- 3) All original data must be retained for a reasonable length of time. A period of at least five years from the date of publication is recommended.

## **D. ATTRIBUTION OF AUTHORSHIP, AND OWNERSHIP OF COPYRIGHT AND OF COPYRIGHT IN DATA**

- 1) **Early Discussions:** Research collaborators should establish as early as possible, how the attribution of authorship and how the allocation of copyright and copyright in data are to be divided between them.
- 2) **Attribution of Authorship:** In the absence of an agreement between the researchers, the following rules governing the attribution of authorship apply:
  - a. authorship is attributed to all those persons who have made significant scholarly contributions to the work and who share responsibility and accountability for the results;



- b. an administrative relationship to the work does not of itself qualify a person for co-authorship;
  - c. the order of the names in a publication is decided according to the quality of the contribution, the extent of the responsibility and accountability for the results, and the custom of the discipline.
  - d. the attribution of authorship is not affected by whether researchers were paid for their contributions or by their employment status;
- 3) **Duties of the Principal Author:** In the absence of an agreement between the researchers, where there are co-authors, the following further rules apply:
  - a. the author who submits a manuscript for publication accepts the responsibility of having included as co-authors all persons who are entitled to co-authorship, and none who are inappropriate;
  - b. the submitting author should send each co-author a draft copy of the manuscript and should make a reasonable attempt to obtain consent to co-authorship, including the order of names; and
  - c. other contributions should be indicated in a footnote or an "Acknowledgements" section, in accordance with the standards of the discipline and the publisher.
- 4) **Ownership of Copyright and of Copyright in Data:** In the absence of an agreement between the researchers, the allocation of copyright and copyright in data are governed by university policy, provisions in relevant collective agreements, and the law.
- 5) **Student-Professor Collaborations:** The rules in (1) to (4) apply to the case where the collaborators are professor(s) and student(s). Further to those rules, a student should be granted due prominence on a list of co-authors of any multiple-authored article that is based primarily on the student's own dissertation/ thesis, according to the practice in the discipline.
- 6) **The Duty to Acknowledge Sources of Funding:** All internal and external funding sources (grants, contracts and gifts including endowed income that funds research chairs) used in the conduct of research should be acknowledged in resulting publications.

## E. RESEARCH INVOLVING BIOHAZARDOUS MATERIALS

- 1) The university is not, at present, approving, permitting or planning to approve or permit research involving biohazardous materials. If the university decides in the future to approve or permit such research the university will comply with the Public Health Agency of Canada Laboratory Biosafety Guidelines and will inform the Natural Sciences and Engineering Research Council (NSERC) of this change.

## **F. RESEARCH INVOLVING ANIMALS**

- 1) The university is not, at present, approving, permitting or planning to approve or permit any research involving animals. If the university decides in the future to approve or permit such research the university will obtain a Good Animal Practices certificate from the Canadian Council on Animal Care (CCAC) prior to approval of such research and will comply with CACC guidelines. The university will inform NSERC of this change.

## **G. GENERAL REPORTING**

- 1) The AVP Research will issue an annual report, with personal identifiers removed, of the number of allegations of misconduct in research, the timeframe for processing them and a brief description of the outcome.
- 2) The AVP Research will periodically issue summaries of the decisions, with personal identifiers removed, for the purpose of educating university members on acceptable practices for integrity in research.

## **RELATED POLICY**

Refer to [\*Integrity in Research and Scholarship Policy\*](#) ED031 (B18)