

Draft Policy for Consultation

Integrity in Research

Principle

Memorial University of Newfoundland is committed to excellence in Research, including scholarly and creative activities, and as such is committed to ensuring that the highest standards of ethical conduct and Research integrity are understood and practiced.

Purpose

To ensure that the University community understands and practices the highest standards of integrity in pursuing Research and meet [Tri-Agency requirements](#) for addressing allegations of misconduct in responsible conduct of Research.

Scope

All persons who pursue Research under the auspices of Memorial University and all Research conducted by those persons regardless of the geographic location of the Research.

Where required, the minimum requirements set out in the [Tri-Agency Framework: Responsible Conduct of Research](#) (the Framework), as is amended from time to time, must be met in the conduct of Research at Memorial University. The Framework describes Tri-Agency policies and requirements related to applying for and managing Tri-Agency funds, performing Research, and disseminating results, and the processes that signatory institutions follow in the event of an allegation of a breach of policy. The Tri-Agency requires that all researchers applying for, or in receipt of, Tri-Agency funds comply with the Framework.

In the case of students, the application of this policy is subject to the appropriate procedures governing [Academic Misconduct for Undergraduate Students](#) and [Academic Misconduct for Graduate Students](#) and, where required, the minimum requirements set out in the Framework.

Where United States Public Health Service (USPHS) funds are involved, allegations of Research misconduct involving any person, including students, shall be dealt with in accordance with the minimum requirements of the U.S. Office of Research Integrity or other appropriate offices of the U.S. Department of Health and Human Services, including U.S. Federal regulation 42 CFR Parts 50 and 93, as amended or replaced from time to time, and the “Statement on Dealing with Allegations of Research Misconduct Under USPHS Research-related Activities for Foreign Institutions”.

This policy should be read in conjunction with the [Framework](#) and the policy statements of the [U.S. National Institutes of Health on integrity in research](#), the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans \(2022\)](#), and Memorial University policies on

Ethics of Research Involving Human Participants and Institutional Animal Care, or the [guidelines regarding biosafety](#) and radiation safety.

Definitions

The Framework – The Tri-Agency Framework for Responsible Conduct of Research (2021).

Memorial Researcher: Any individual who is involved in the intellectual direction, control and/or conduct of **Research** under the auspices of Memorial University. When a **Memorial Researcher** is among a larger group based at another institution or other institutions, and are not the principal investigator of a project, the **Memorial Researcher** is responsible for their part of the work following this policy including any papers or datasets in which their name or work will appear

Research: An undertaking intended to extend knowledge through:

- (a) the conduct of research, scholarship, and critical, creative, professional or developmental work; and
- (b) the dissemination of such work through publication, demonstration, presentation, exhibition or performance, or by other means appropriate to the discipline

SRCR – The Secretariat on Responsible Conduct of Research, Government of Canada.

Tri-Agency - The general term representing the three major federal granting councils the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC) and the Social Sciences and Humanities Research Council of Canada (SSHRC). Memorial University is a signatory to, and bound by, the [Tri-Agency Agreement on the Administration of Agency Grants and Awards by Research Institutions](#).

University – Memorial University of Newfoundland.

Policy

1.0 Integrity in Scholarly Research

1.1 The nature of Research activity varies among the disciplines. Integrity is expected throughout the life cycle of a Research project – from the development of Research proposals, to the conduct of Research and the dissemination of Research, including engineering design and artistic creation or performance.

1.2 As a scholarly community, the University and all its individual members have a responsibility to maintain the highest standards of scholarship, specifically:

- citing the contributions of others;

- obtaining permission to use the unpublished work of others and duly acknowledging the work;
- respecting the privileged access to information or ideas obtained from confidential manuscripts or applications;
- ensuring that data resulting from scholarly activity are accessible for a reasonable period of time, except where such access could violate the anonymity of subjects or the confidentiality of data;
- using all University and Research resources responsibly, including support staff, funds, equipment, materials, and Research subjects.
- being rigorous in scholarly activity including experimental design and interpretation of Research results;
- Managing conflict of interests in accordance with University policy and Tri-Agency requirements.

1.3 Memorial Researchers are responsible for the safe storage of primary data resulting from Research activity. This includes ensuring that such material will be accessible (except where such access could violate the anonymity of subjects or the confidentiality of data) for a period of five years unless a funding council or agency specifies a longer time.

1.4 Researchers are responsible for reporting loss of Research data to their immediate supervisor.

1.5 Prior to leaving the University, a Memorial Researcher must arrange access and safe storage of records with his or her immediate supervisor.

1.6 Researchers are responsible for adhering to other research related policies such as Research Involving Indigenous Groups, which nurtures academic responsibility and integrity, as well as encourages new and better ways of conducting research on Indigenous Lands, with Indigenous peoples, and in Indigenous communities.

1.7 No member of the University community should exploit students. Specific examples of exploitation of students would be:

- a) engaging students to perform services not related to their program of study, or using students to participate as human subjects in Research without explicit clearance from a research ethics board;
- b) failing to give proper recognition to the ideas, work or assistance of individuals or to obtain, where appropriate, prior permission for the use of work done;
- c) encouraging graduate students to prolong Research beyond the point where an acceptable thesis could be submitted.

2.0 Gross Misconduct in Research

2.1 All accusations of misconduct in academic research are taken seriously, and dealt with under the [Procedure for Investigating Reports of Misconduct in Research](#).

2.2 Gross misconduct in academic Research means:

- a) fabrication, falsification, or plagiarism (including self-plagiarism) but not factors intrinsic to the process of academic Research, such as honest error, conflicting data or differences in interpretation or assessment of data or of experimental design; or
- b) willful or deliberate destruction or destruction resulting from the failure to take reasonable measures to ensure the safety of one's own Research data within a period of five (5) years after publication of the Research results, or the deliberate tampering with or destruction of the Research of another; or
- c) once the results of the Research have been published, refusal without good and sufficient reason, to provide access to the data that resulted in the published document, for the purpose of verification by bona fide academic Researchers for a period of five (5) years from the date of publication; or
- d) failure to respect agreements concerning privileged access to information or ideas obtained from confidential manuscripts or applications; or
- e) the use of unpublished scholarly work of others without their permission; or
- f) significant failure to comply with relevant federal or provincial statutes or regulations or national or international standards for the protection of Researchers, human subjects, or the health and safety of the public, or for the welfare of laboratory animals, or significant failure to meet other legal requirements that relate to the conduct of Research; or
- g) failure to disclose and manage any conflict of interest; or
- h) inaccurate attribution of authorship, including to individuals other than those who have made a substantial contribution to, and who accept responsibility for, the contents of a Research publication or document; or the undisclosed use of content generation tools, such as Generative AI; or
- i) failure to reveal to the University any material financial interest, either by the University member or a close relative, in a company that contracts with the University to undertake Research, or to supply goods or services directly pertaining to the University member's Research. Material financial interest includes ownership, substantial stock holding, a directorship, substantial honoraria or consulting fees but does not include routine stock holding in a large publicly traded company.

3.0 Responsibilities of Personnel who Supervise Research 3.1 The University will promote widespread awareness of responsible Research guidelines, including this policy and The Framework.

3.2 Research supervisors will inform rResearch staff, students and postdoctoral fellows of their responsibilities to maintain the highest levels of integrity. Research supervisors will ensure that research staff and students have appropriate guidance and instruction about experimental design, data recording and retention, and its interpretation.

4.0 Allegations of Misconduct

4.1 Allegations of breaches of this policy will be dealt with promptly, fairly and confidentially following the [Procedure for Investigating Reports of Misconduct in Research](#) or more detailed procedures that may be found in collective agreements covering some individuals.

4.2 Any allegations involving University administrators will be dealt with following the appropriate procedures, with the exception that if an allegation involves the President, the allegation will be directed to the Chair of the Board of Regents who will then follow the procedures.

4.3 The University will consider anonymous allegations if accompanied by sufficient information to enable the assessment of the allegation's credibility and evidence.

4.4 The University may independently, or at the request of the Tri-Agency 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 a University representative on all expenses charged to the Memorial Researcher's account, or other measures, as appropriate.

4.5 Where an allegation is related to conduct that occurred at another university or institution, the University will contact the other institution and determine collaboratively which institution is the best place to conduct an inquiry and investigation, if warranted.

5.0 Protection of Complainants

5.1 The University respects the sensitive nature of information provided in the course of making an allegation of misconduct. The University will protect, to the extent possible, the individual making an allegation in good faith or providing information related to an allegation from reprisals. However, if an allegation is substantiated then the University reserves the right to use or disclose information in accordance with the [Access to Information and Protection of Privacy Act, 2015](#).

4.2 The University shall use reasonable efforts:

a) to minimize disruption to the scholarly activities of a complainant and of any third party whose Research may be affected by the securing of evidence relevant to the allegation during the course of the formal investigation; and

b) to ensure that any such disruption not negatively affect future decisions concerning the careers of those referenced in (a) above.

6.0 Reporting Requirements

6.1 Subject to applicable laws, the University shall advise the relevant Tri-Agency or the SRCR immediately of any allegations related to activities funded by the Tri-Agency that may involve significant financial, health and safety or other risks.

6.2 The University shall write a letter to the SRCR confirming whether or not there will be a formal investigation where the SRCR was copied on the allegation or advised as above in 6.1.

6.3 In cases where a funding agency requires notification that an allegation has been made, the University shall promptly inform the funding body of the allegation and whether there will be an investigation.

6.4 The University will promptly disclose all confirmed misconduct to relevant funding agencies, journal editors, etc.

6.5 The University will provide annual to the SRCR on the total number of allegations received involving Agency funds, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including privacy laws, such as [Access to Information and Protection of Privacy Act, 2015](#).

7.0 Confidentiality

7.1 All persons involved in any process related to this Policy are required to maintain confidentiality. Confidential matters are handled in accordance with the [Access to Information and Protection of Privacy Act, 2015](#), SNL 2015, C A-1.2 (*ATIPPA*), other privacy legislation to which the University is subject, and University policies.

7.2 Only persons with a *bona fide* need to know the details of a situation will have access and such access is limited to the scope of their responsibilities. Third parties attempting to gain or gaining access to personal information with respect to a Protected Disclosure, where such information is not needed to perform the scope of their responsibilities, does so in violation of this Policy and may be in violation of the [ATIPPA](#).

7.3 A breach of confidentiality by persons involved in any process related to this Policy may be subject to discipline or other appropriate action.

Related Documents

[Tri-Agency Framework: Responsible Conduct of Research](#)

[Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans \(2022\)](#)

[Ethics of Research Involving Human Participants Policy](#)

[Research Involving Indigenous Groups](#)

[Institutional Animal Care Policy](#)

[U.S. National Institutes of Health on integrity in research](#)

[Academic Misconduct for Undergraduate Students](#)
[Academic Behaviour for Graduate Students](#)
[Procedures involving biohazards and radiation hazards](#)

Procedure for Investigating Reports of Misconduct in Research

All allegations of misconduct in Research must be made in writing, must specify the misconduct alleged, and must be signed either by the claimant or by a Union representative to ensure anonymity and directed to the President.

Regardless of the nature of the concern, the institution has a responsibility to examine the allegations and reach a conclusion, including cases where an accused leaves Memorial University before the matter is resolved.

The following procedures should be used except where they might conflict with more detailed procedures specified in a collective agreement. Where required, the University shall comply with the requirements set out in the [Tri-Agency Framework: Responsible Conduct of Research](#) as amended from time to time, which sets out the responsibilities of institutions, Researchers and the agencies in respect of the responsible conduct of Research, including the procedures to be followed in the event of a breach of an Agency requirement, or an allegation thereof.

Where an allegation of Research misconduct involves United States Public Health Service (USPHS) funds, the University shall comply with the requirements of the U.S. Office of Research Integrity (ORI) or other appropriate offices of the U.S. Department of Health and Human Services (HHS), including U.S. Federal regulation 42 CFR Parts 50 and 93, as amended or replaced from time to time. The President shall notify the ORI of all such allegations received and Memorial University shall then work with ORI or other appropriate offices of the HHS to develop and implement a process for responding to the Research misconduct allegations. The University will submit appropriate reports (in English) to ORI that describe the process followed in conducting the investigation, the evidence on which the conclusions of the investigation are based, and if a finding of Research misconduct is made, the administrative actions that are taken against the accused. The *Statement on Dealing with Allegations of Research Misconduct Under United States Public Health Service (USPHS) Research-related Activities for Foreign Institutions* is hereby incorporated by reference. The University shall comply with the process set out below except as otherwise necessary to comply with the foregoing.

Initial Inquiry

1. The President will undertake a preliminary consideration of the allegations based on the signed complaint and, if desired by the President, an interview with the complainant.
2. If, in the judgment of the President, there is not sufficient substance to warrant investigation, the President will inform the complainant and no further action will be taken.

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3. If, in the judgment of the President, there is sufficient substance to warrant investigation, the President will notify the person who is the subject of the allegations, in writing, that he or she is under investigation. Such notification will be within twenty (20) working days of receipt of the allegation. The President will explore whether the matter may be resolved without completion of the investigation.

Investigation Process

4. The investigation, if any, will be conducted by an impartial committee appointed by the President for this purpose. Individuals appointed may be from within or outside the university community. The individuals conducting an inquiry should be without conflict of interest, whether real, potential or perceived. (See Conflict of Interest Policy)

The investigation committee shall include members who have the necessary expertise and who are without conflict of interest, whether real or apparent, and at least one external member who has no current affiliation with the Institution. The Committee shall:

- a) Establish their mandate and terms of reference,
- b) Set reasonable investigation timelines, consistent with relevant collective agreements and
- c) Produce formal written findings or reports

5. A person accused of scholarly misconduct will not be required to meet with the investigator or investigators.

6. The written notice of the investigation, from the President, will include a copy of the allegation() to allow the accused an opportunity to respond, and will advise the accused of their right to be accompanied or represented in any meeting concerning the allegations. This copy will be in keeping with *ATIPPA*

7. The University member named in the allegations shall be given a draft copy of the investigation report by the investigators and will be given adequate opportunity to know any evidence presented in the report and to respond to that evidence if they choose to do so. The investigation will be conducted and the process concluded in a timely manner consistent with the circumstances of the case.

The Final Report is provided to the President after the respondent has had the opportunity to respond to the draft.

8. The President may take disciplinary action against those who make reckless, malicious or bad faith accusations against others involving misconduct in scholarly Research.

9. If, during the course of investigation, an outside agency or publisher has been informed of the allegations before a final decision has been rendered, the President will inform the agency or publisher of the final disposition of the allegations.

10. Reports of investigations that lead to discipline of employees or where employees are found culpable but no discipline is imposed, will be kept in the personal file of the employee subject only to any time limitations imposed by collective agreements.

11. If a formal investigation sustains an accusation of gross misconduct in Research in relation to Research that is funded by an outside agency or has been published or submitted for publication, the President shall so inform the agency or publisher concerned of the decision. Notice to such agencies or publishers shall be the only release of information permitted before the conclusion of all grievance and arbitration procedures arising from the case. Where appropriate, this notice shall inform those parties that the conclusion is subject to grievance and arbitration procedures.

12. Where there is a finding that no scholarly misconduct has occurred, or an arbitration board decides that no discipline is to be invoked, then the University will, at the sole discretion of the accused, ensure that all documentation is either destroyed or transferred to the accused, except that it will retain any arbitration report, which will be a public document. The University will take such steps as may be necessary and reasonable to protect the reputation and credibility of members of the University community who are wrongfully accused of misconduct in academic Research, including written notification of the decision to all agencies, publishers or individuals who were informed by the University of the investigation.