1. OVERVIEW AND PURPOSE

1.1. Good, original, and innovative research is a vital activity in a university and is integral to the mission of Huron University College (“Huron”). This policy outlines Huron’s expectations for the conduct of research, defines misconduct in research activities, and outlines procedures to be followed when misconduct is suspected.

1.2. This policy is consistent with the Tri-Agency Framework: Responsible Conduct of Research as required under the Agreement on the Administration of Agency Grants and Awards by Research Institutions between Huron and the Social Sciences and Humanities Research Council of Canada. This policy is consistent with, and complementary to, existing Huron and University of Western Ontario policies addressing related research ethics and academic integrity issues.

2. SCOPE

2.1. This policy applies to all faculty, staff and students of Huron. It also applies to any person (including, but not limited to, affiliated faculty, visiting professors or students, adjunct professors and postdoctoral associates and fellows) appointed or invited to engage in research activity at, or under the auspices of, Huron.

2.2. It is understood that all research activity and review of allegations of misconduct will be conducted within the framework of this policy, relevant university policies, relevant agreements, and relevant laws. If there is a conflict between this policy and the provisions of the agreement between Huron University College and the Huron University College Faculty Association, the agreement prevails. If there is a conflict between this policy or an agreement and the law, the law prevails.

2.3. In the case of an allegation of research misconduct against a student, when there is no outside agency funding involved, the allegation may be dealt with under the relevant Scholastic Discipline Policy rather than the procedures under this policy.
3. RESPONSIBILITIES

3.1. The responsibilities of all members of the Huron community include not only fulfilling the integrity expectations of this policy, but also reporting suspected misconduct according to the procedures defined.

3.2. The responsibilities of Huron include promoting integrity in research, investigating allegations of misconduct, imposing appropriate sanctions if misconduct has occurred, and reporting cases of misconduct as required.

3.3. Every faculty member, department, unit, and laboratory has an obligation to ensure that all individuals engaged in research activities are aware of this policy and other relevant policies concerning the conduct of academic work, and understand the expectations and requirements set out in these policies.

4. EXPECTATIONS

4.1. Huron expects all individuals engaged in academic work to conform to the highest standards of ethical practice in research. Individuals are personally responsible for the intellectual and ethical integrity of their work and must ensure that in research their conduct meets university standards and best practices, professional and disciplinary standards, applicable laws and regulations, and the integrity standards of any entities sponsoring any component of research work.

4.2. Those undertaking academic work must strive to follow the best research practices honestly, accountably, openly, and fairly in the search for, and in the dissemination of, knowledge.

4.3. At a minimum, researchers are responsible for:

i. 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;

ii. 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;

iii. Referencing and, where applicable, obtaining permission for the use of all published and unpublished work, including data, source material, methodologies, findings, graphs and images, in accordance with copyright and other intellectual property laws;

iv. Including as authors or creators, with their consent, all those and only those who have materially or conceptually contributed to, and share responsibility
for, the contents of the publication, academic presentation, document or creation, in a manner consistent with their respective contributions, and relevant authorship policies or intellectual property rights;

v. Acknowledging, in addition to authors and creators, all contributors and contributions to research, including, but not limited to, writers, funders and sponsors;

vi. Appropriately managing any real, potential or perceived conflict of interest, in accordance with Huron’s policies on conflict of interest;

vii. Providing true, complete and accurate information in their funding applications and related documents and representing themselves, their research and their accomplishments in a manner consistent with the norms of the relevant field;

viii. Certifying in applications that they are not currently ineligible to apply for, and/or hold, funds from any research or research funding organization worldwide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies;

ix. When they are principal funding applicants, ensuring that others listed on the application have agreed to be included;

x. Using grant or award funds in accordance with the policies of the agencies, including the Tri-Agency Guide on Financial Administration and funding agency grants and awards guides; and providing true, complete and accurate information on documentation for expenditures from grant or award accounts;

xi. Complying with all applicable funding agency requirements, university policy and legislation for the conduct of Research, including, but not limited to:

i. Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans - TCPS 2 (2022);

ii. Canadian Council on Animal Care Policies and Guidelines;

iii. Agency policies related to the Impact Assessment Act;

iv. Licenses for research in the field;

v. Laboratory Biosafety Guidelines;

vi. Controlled Goods Program;

vii. Canada's Food and Drugs Act;

viii. Canadian Nuclear Safety Commission (CNSC) Regulations;

ix. Western’s Biosafety Policies and Procedure; and

x. Western’s Animal Ethics and Care Program.
xii. Ensuring that all research involving human participants or animal subjects is approved by the appropriate Huron University College- or Western University-sanctioned review board; and,

xiii. Ensuring persons involved in the researcher’s lab are properly trained and supervised, and are made aware of applicable governmental and institutional requirements related to the practices in the lab.

4.4. Integrity in Research also includes (without limitation) the following:

i. recognizing the substantive contributions of collaborators and students; using unpublished work of other researchers, creators and scholars only with permission and with due acknowledgement; and using archival material in accordance with the rules of the archival source;

ii. obtaining the permission of the author or creator before using new information, concepts or data originally obtained through access to confidential manuscripts or research funding applications;

iii. using scholarly and scientific rigour and integrity in obtaining, recording and analyzing data, and in reporting and publishing results, including correcting or providing notice of work which is misleading or inaccurate;

iv. using published work only in accordance with copyright law, and ensuring that authorship of published work includes all those who have materially contributed to, and share responsibility for, the contents of the publication or presentation, and only those people;

v. revealing to sponsors, universities, journals or funding agencies, any material conflict of interest, financial or other, that might influence their decision on whether the individual should be asked to review manuscript or applications, test or use products or be permitted to undertake work sponsored from outside sources;

vi. using appropriate referencing and citation of resources used in academic work; and,

vii. ensuring one does not misrepresent one’s academic credentials or affiliations within or outside of the academic community.
Misconduct

4.5. Research misconduct is any research practice that deviates from the commonly accepted ethics/integrity standards or practices of the relevant research community. Research misconduct does not include honest error or differences of opinion. Definitions of research misconduct may vary depending on the applicable funding agency rules and expectations, or by virtue of negotiated agreements; however, generally, research misconduct includes, but is not limited to:

i. Fabrication: making up data, source material, methodologies or findings, including graphs and images;

ii. Falsification: manipulating, changing, or omitting data, source material, methodologies or findings, including graphs and images, without acknowledgement, resulting in inaccurate findings or conclusions, and including, but not limited to, tampering with the work of others to misrepresent or interfere with their research or use of the practice of “unblinding”;

iii. Destruction of research records: the destruction of one's own or another's research data or records specifically to avoid the detection of wrongdoing or in contravention of the applicable funding agreement, institutional policy and/or laws, regulations, and professional or disciplinary standards;

iv. Misappropriation or denial of access to research records: the use of data or research records in a way that results in misappropriation of the materials, or a loss of access or right of another person with a claim of access or ownership;

v. Plagiarism: presenting and using another's published or unpublished work, including theories, concepts, creations, data, source material, methodologies or findings, including graphs and images, as one's own, without appropriate referencing and, if required, without permission;

vi. Redundant publications or self-plagiarism: 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;

vii. Invalid authorship: inaccurate attribution of authorship or creatorship, including attribution 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 or creator of a work for which one made little or no material contribution;

viii. Inadequate acknowledgement: failure to recognize appropriately contributions of others in a manner consistent with their respective contributions and authorship policies of relevant publications, or other
copyright or intellectual property laws;

ix. Mismanagement of Conflict of Interest: failure to manage appropriately any real, potential or perceived conflict of interest, in accordance with the University’s policies on conflict of interest;

x. Misrepresentation in an Agency Application or Related Document: providing incomplete, inaccurate or false information in a grant or award application or related document; applying for and/or holding an award for which one is ineligible; or listing co-applicants, collaborators or partners without their agreement;

xi. Mismanagement of Grants or Award Funds: using grant or award funds for purposes inconsistent with the policies of the funding agency and/or Huron; misappropriating grants and award funds; contravening funder financial policies or providing incomplete, inaccurate or false information on documentation for expenditures from grant or award accounts;

xii. Breaches of Agency Policies or Requirements for Certain Types of Research: failing to meet funding agency policy requirements, or to comply with relevant policies, laws or regulations, for the conduct of certain types of research activities; failing to obtain appropriate approvals, permits or certifications before conducting these activities; and,

xiii. Breaches of Agency Review Processes: non-compliance with the Conflict of Interest and Confidentiality Policy of the Federal Research Funding Organizations or participating in an Agency review process while under investigation.

5. INQUIRIES & INVESTIGATIONS

Reporting of Allegations

5.1. Everyone in the Huron community plays an important role in the process for addressing allegations of research misconduct and in helping to ensure that allegations are addressed appropriately and in a timely manner. Anyone who has reasonable grounds to suspect misconduct in research is expected to bring forward the allegation promptly.

5.2. Huron will ensure that those making an allegation in good faith, or providing information related to an allegation, are protected from reprisals. Anyone making an allegation that is reckless, malicious, or not in good faith may be subject to discipline or other recourse.

5.3. Allegations of misconduct in research are to be submitted, in writing, to the Provost.
5.4. An anonymous allegation will be considered if accompanied by sufficient information to enable the assessment of the allegation and the credibility of the facts and evidence on which the allegation is based, without the need for further information from the complainant.

Notices and Confidentiality of Allegations

5.5. Huron is committed to protecting the privacy of complainants and respondents when an allegation is made, as far as is possible. Even still, an allegation cannot be fully confidential. Information must be given to those responsible for the investigation and review of the matter, to witnesses, and to the respondent to permit a fair and full process of review. Allegations and information arising from the review process will not be shared with persons who are not directly involved in the review and adjudication of the allegation except as required by law, a negotiated agreement, or an agency agreement.

5.6. Where financial misconduct is alleged, Huron’s finance office shall be notified. In such cases, the Provost shall advise those notified to maintain confidentiality in respect of the allegation.

5.7. Subject to any applicable laws, including privacy laws, the Provost shall advise any relevant agency immediately of any allegations related to activities funded by the agency that may involve significant financial, health and safety, or other risks, and shall provide such additional information relating to any allegations as may be required in compliance with Huron’s agency agreement.

5.8. Upon receiving the allegation, Huron may independently, or at the Agency’s request in exceptional circumstances, take immediate action to protect the administration of Agency funds. Immediate actions may include freezing grant accounts, requiring a second authorized signature from an institutional representative on all expenses charged to the researcher’s grant accounts, or other measures, as appropriate.

5.9. When an allegation is received by Huron that relates to conduct that occurred at another institution (whether as an employee, a student or in some other capacity), Huron will contact the other institution and determine with that institution’s designated point of contact which institution is best placed to conduct the inquiry and investigation, if warranted. If Huron initially received the allegation, it will communicate to the complainant which institution will be the point of contact for the allegation.
Initial Inquiry

5.10. After receipt of a complaint, an initial inquiry shall be held. Within ten (10) business days of receipt of an allegation, the Provost shall provide the respondent with a summary of the allegation(s) and written notice that the respondent may, within ten (10) business days of providing written notice, make preliminary submissions in respect of the allegation. The timeline for the respondent’s submissions may be extended by the Provost on request. The Provost will ensure that relevant requirements of any policy or agreement in relation to the respondent are met.

5.11. Once notified of an allegation, the respondent shall not destroy or discard or otherwise alter any potentially relevant data or other form of information relevant to the allegation. Subject to Huron’s internal policies and applicable law, Huron may take any action necessary to avoid spoliation of evidence and maintain the integrity of the initial inquiry and potential investigation.

5.12. Following the initial inquiry, the Provost shall determine whether Huron will investigate the allegation (see “Formal Investigation” below) or will decline to deal with the allegation further. The complainant and respondent, and, where notice was given to an agency, the agency, will be notified of this decision in writing within fifteen (15) business days of providing written notice to the respondent. Subject to any applicable laws, in exceptional circumstances, taking into account, among other things, the severity and urgency of the alleged breach, its possible consequences and the potential financial, health, safety or other risks involved, Huron shall immediately advise the relevant agency or Secretariat on Responsible Conduct of Research (SRCR) of the allegation before the conclusion of the Initial Inquiry.

5.13. Should the Provost decline to deal with the allegation further, no materials in relation to the allegation or preliminary review shall be placed in Huron’s official records related to the employment or student record of the respondent.

5.14. If the Provost decides that the complaint is responsible and there is sufficient evidence to indicate that research misconduct may have occurred, the allegation will proceed to a formal investigation.

5.15. If the respondent admits to the alleged misconduct, a decision will be issued by the Provost with copies to the complainant and the respondent. The file will be referred to the relevant dean’s office. Discipline will be determined in accordance with the disciplinary policy applicable to the respondent. Huron will issue any required reports relating to the misconduct.
Formal Investigation

5.16. If the alleged misconduct involves collaborative research conducted at multiple institutions or if the alleged breach is also being investigated at another institution, the following procedures may be modified to facilitate joint or parallel investigation processes.

5.17. At any point during an investigation, the Provost may elect to offer the parties mediation services to enable the resolution of matters arising from the investigation. However, mediation cannot replace adjudication of a matter involving agency funding.

5.18. The investigation shall be facilitated by the Provost’s Office, and shall be conducted by the Research Complaints Committee as constituted by the Academic Council (which membership includes at least one external member who has no current affiliation with the University). Members of the committee shall have no conflict of interest, real or apparent.

5.19. The Research Complaints Committee shall conduct an investigation, reasonable in the circumstances, which will include collecting and reviewing the evidence. Witnesses may be interviewed, including the respondent and the complainant, to the degree necessary to make a decision as to whether or not a breach of this policy has occurred. The committee may determine its own process in conducting the investigation, providing it is consistent with relevant university policy and/or negotiated agreements, and the principles of natural justice.

5.20. The Research Complaints Committee shall conduct the investigation in a timely manner. Where the investigation cannot be completed within 30 business days of its being initiated, the committee shall notify the Provost, the respondent and complainant of the reasons for delay and advise them of the expected completion date. Where the respondent has association representation, the association shall also be notified.

5.21. Investigative findings and the decision of the Research Complaints Committee shall be reported by the committee to the Provost, the respondent, and the complainant within ten (10) business days following receipt of the report of the committee, but no later than 7 (seven) months from receipt of the allegation. Should a breach of this policy be found, the Provost shall also refer the file to the appropriate office for disciplinary action. Any disciplinary action imposed shall take into account the severity of the breach. Recourse against a respondent will only be shared with the respondent, or those who are authorized to receive this personal information.
5.22. Where a policy breach is found in relation to a funding application submitted to an agency or to an activity funded by an agency, the Provost shall provide a report to the agency as required by Huron’s agency agreement.

5.23. Where the policy breach is found in relation to misuse of research funds, a report shall be made to Huron’s Finance and Audit Committee, through the finance office.

5.24. If an allegation is determined to be unfounded, every effort will be made by Huron to protect or restore the reputation of those wrongly subjected to an allegation.

Grievance/Appeal Proceedings

5.25. Appeals or grievances in relation to findings of misconduct under this policy or disciplinary actions assessed are to be undertaken in accordance with the appeal or grievance procedures established under the applicable disciplinary policy.

Reporting to Granting Agencies

5.26. Subject to any applicable laws, including privacy laws, the institution will immediately advise the relevant granting agency or the SRCR of any allegations related to activities funded by the agency that may involve significant financial, health, or safety, or other risks. The institution will write a letter to the SRCR confirming whether or not the institution is proceeding with an investigation where the SRCR was copied on an allegation. If a breach is confirmed at the inquiry stage, a report will be prepared for SRCR in cases where the breach is in relation 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 findings and reasons for the findings; the process and timelines followed; the researcher’s response to the allegation, investigation, and findings, and any measures the researcher has taken to rectify the breach; and the Research Complaints Committee’s decisions and recommendations, and actions taken by the institution.

6. POLICY REVIEW

6.1. This policy shall be reviewed no more than 3 years from the date it is initially approved.