



Procedures for Addressing Allegations of a Breach of the Research Integrity Policy

Category: Research;

Jurisdiction: Vice President, Research & Innovation;

Approval Authority: Executive Team;

Established on: May 22, 2018;

Amendments: None;

Reviews: None.

These procedures are established pursuant to the University's Research Integrity Policy. Certain terms in these procedures are defined in the Research Integrity Policy.

These procedures apply to all University Members, save and except members of the LUFA bargaining Unit. For greater certainty:

- Allegations that a University Member who is also a LUFA member has breached this policy shall be handled using the process set out in Article 39 of the LUFA Collective Agreement, and
- If an allegation is made against an Agency funded researcher affiliated with the Northern Ontario School of Medicine (NOSM) and is received by Lakehead University (the "University"), the Provost and Vice-President (Academic) will notify the Dean of NOSM who will be responsible for undertaking the Inquiry and the Investigation (if required) in accordance with the NOSM's Research Integrity Policy. If an allegation made against a Lakehead Agency funded NOSM researcher is reported directly to NOSM, the Dean or his/her designate at NOSM will inform the University Provost and Vice-President (Academic) immediately. Information collected by NOSM shall be shared with Lakehead University's Provost and Vice-

President (Academic) and Vice-President Research and Innovation, who will be responsible for reporting to the Agencies in accordance with the timelines as outlined in Appendix A.

Allegations that any other University Member (i.e., adjunct professors, postdoctoral fellows, graduate students and undergraduate students, research associates, staff, visiting professors, visiting students, etc.) has breached this policy shall be handled as set out below. In the event of any inconsistency between these procedures and any applicable Lakehead University collective agreement, the terms of the applicable collective agreement govern and shall prevail.

Allegations of a breach of the Research Integrity Policy made against a University Member shall be dealt with promptly and through effective procedures that ensure fairness and protect both those whose integrity is brought into question, and those who bring forward allegations of a breach. The following procedures are intended to ensure that due process, natural justice and the rules of procedural fairness are achieved.

Lakehead University and University Members are subject to the application of the Tri-Agency Framework: Responsible Conduct of Research, as amended from time to time (hereinafter referred to as the “Framework”), and the Lakehead University Research Integrity Policy. In the event of an inconsistency between the Framework, the Research Integrity Policy and the following procedures, the Framework will govern.

Formal Process and Timelines

Please refer to Appendix A for specific requirements and timelines for reporting breaches to the Research Integrity Policy to Agencies (if applicable).

Consultation

- (A) Before making a written allegation of a breach of research integrity, the Complainant(s) shall consult with the Vice-President (Research and Innovation), it being understood

that this consultation will remain confidential. The Vice-President (Research and Innovation) shall exercise discretion and respect confidentiality in dealing with the allegation so as to protect the reputation and careers of all involved, as well as the reputation of the University.

If the allegations are against the Vice-President (Research and Innovation) the Complainant(s) must consult with the Provost and Vice-President (Academic) who shall follow the same process as outlined below for the Vice-President (Research and Innovation).

If the allegations are against the Provost and Vice-President (Academic) the Complainant(s) must consult with the Vice-President (Research and Innovation) who shall follow the process as outlined below.

Inquiry

A responsible allegation is defined as an allegation made in good faith, confidentially and without malice, that is based on facts which have not been the subject of a previous allegation, and which falls within one (1) or more breaches set out in Section 3 of the Framework.

- (A) Upon receiving an allegation, the Vice-President (Research and Innovation) shall determine within ten (10) business days whether the allegation is responsible.
- (B) If it is determined that the allegation is not responsible, the Vice-President (Research and Innovation) shall inform the Complainant(s) and the Respondent(s), as well as individuals consulted by the Vice-President (Research and Innovation) of his/her determination. No reference to the allegation shall be retained in the official personnel/student file of the Respondent(s). The Complainant(s) may discuss the issue in confidence with the Provost and Vice-President (Academic) if he/she believes that the consultation has not adequately dealt with the allegation.

(C) If it is determined that the allegation is responsible, the Vice-President (Research and Innovation) shall forward to the Provost and Vice-President (Academic) a letter which includes the rationale for his/her finding that the allegation is responsible and a recommendation for further investigation. These recommendations and potential outcomes from the inquiry may include:

- i) The allegation is determined to be responsible and the breach is not substantiated: the allegation is dismissed and the matter concludes at inquiry;
- ii) A breach is substantiated AND the Respondent accepts responsibility AND further investigation would not uncover any new information pertinent to the matter: the matter concludes at inquiry;
- iii) A breach is substantiated BUT the Respondent does not accept responsibility: an investigation is initiated; or
- iv) If any issues identified through the inquiry warrant an investigation (e.g., other individuals in addition to the Respondent(s) involved in the breach or other possible breaches suspected) an investigation is initiated.
- v) A breach is substantiated AND the Respondent accepts responsibility AND further investigation would not uncover any new information pertinent to the matter: the matter concludes at inquiry;
- vi) A breach is substantiated BUT the Respondent does not accept responsibility: an investigation is initiated; or
- vii) If any issues identified through the inquiry warrant an investigation (e.g., other individuals in addition to the Respondent(s) involved in the breach or other possible breaches suspected) an investigation is initiated.

¹ Panel on Responsible Conduct of Research website: RCR Framework Interpretations – Inquiry vs. Investigations – retrieved November 3, 2016, www.rcr.ethics.gc.ca

- (D) If the Provost and Vice-President (Academic) has determined that a formal investigation should not proceed, he/she shall inform the Complainant(s) and the Respondent(s), and other individuals consulted by the Vice-President (Research and Innovation) of his /her determination. No reference to the allegation shall be retained in the official personnel/student file of the Respondent.
- (E) The Provost and Vice-President (Academic) shall take reasonable measures to protect the Complainant(s) from coercion or retribution. Any act of coercion or retribution will be subject to disciplinary action.

Formal Investigation

When the Provost and Vice-President (Academic) has determined that a formal investigation should be initiated, he/she (or their designate) shall establish an Investigative Committee within fifteen (15) business days. The Investigative Committee shall be appointed by the Provost and Vice-President (Academic), or their designate, and shall have the authority to decide whether a breach to the Research Integrity Policy occurred.

- (A) The Investigative Committee shall be comprised of three (3) members, two (2) of which shall be internal to the University. The Respondent(s) is/are entitled to nominate one (1) internal member of the Investigative Committee. The Provost and Vice-President (Academic) shall make the final decision regarding the appointment of Investigative Committee members, including the second internal member and a third external member who has no current affiliation with the University. The Investigative Committee members shall have the necessary expertise and shall not have any conflict of interest, whether real or apparent. Any objection to the composition of the Investigative Committee shall be made in writing to the Provost and Vice-President (Academic), within five (5) business days of being informed of the composition of the Investigation Committee.
- (B) The Provost and Vice-President (Academic) shall present the Investigative Committee with the written allegation and relevant materials. The Respondent(s) has/have the right to full disclosure of all information or evidence relevant to the case in order to prepare a defence and to submit materials to the Investigative Committee. The Respondent(s)

has/have the right be accompanied by a legal representative or support person throughout all proceedings. The Respondent(s) and Complainant(s) shall have the opportunity to be heard by the Investigative Committee and to hear each other.

- (C) The Investigative Committee shall address the allegation that a breach of research integrity has taken place and determine whether or not the allegation has validity.
- (D) The Investigative Committee shall conduct its investigation in accordance with principles of natural justice and due process.
- (E) The Investigative Committee shall take into account real or apparent conflicts of interest on the part of those involved in the investigation.
- (F) The Investigative Committee may seek impartial expert opinions, as necessary and appropriate, to ensure that the investigation is thorough and authoritative.
- (G) The Investigative Committee shall keep, on file in the Office of the Provost and the Vice-President (Academic), copies of all materials relevant to its deliberation.
- (H) The Investigative Committee shall review, where appropriate, all research with which the Respondent has been involved during the period of time considered pertinent to the allegation. A special audit of research accounts may be performed.
- (I) The Investigative Committee shall provide a draft report on its finding to the Respondent(s) who shall have five (5) business days to review and comment on a draft of the report. Their remarks shall be included as appendices in the final report.
- (J) The Investigative Committee shall provide a final report on its findings to the Vice-Provost Student Affairs in the case of a student, or the President in all other cases, with a copy to the Provost and Vice-President Academic within forty (40) business days of the Committee being established.

Subsequent Actions from the Formal Investigation of the Investigative Committee

- (A) Within ten (10) business days following the receipt of the Investigative Committee's report, upon reviewing all the elements, the President shall inform the Respondent(s), and any other affected party of the finding of the Investigative Committee and any recourse that is to be taken. In all proceedings and subsequent to a final decision, the

University shall undertake to (a) assure that those making an allegation in good faith and without demonstrably malicious intent will be protected from reprisals or harassment, (b) consider disciplinary action against those who make allegations of breaches of research integrity which are reckless, malicious and not in good faith.

(B) The University shall take such steps as may be necessary and reasonable to:

- a) protect the reputation and credibility of persons wrongfully accused of a breach of research integrity, including written notification of the decision to all agencies, publishers, or individuals who were informed by the University of the investigation;
- b) protect the rights, positions and reputations of persons who in good faith and without demonstrably malicious intent make allegations of a breach of research integrity, or who it calls as witnesses in an investigation. Such protection may include legal representation in accordance with the University's Indemnification Policy;
- c) minimize disruption to the research of the person making the allegation and of any third party whose research may be affected by the securing of evidence relevant to the allegation during the course of the investigation; and
- d) ensure that any disruption in research, teaching or community service resulting from allegations of a breach of research integrity does not adversely affect future decisions concerning the careers of those referenced in (a), (b), (c) above.

(C) A statement from the President that a University Member is guilty of a breach of research integrity with or without any formal sanctions constitutes discipline. Any disciplinary action imposed on a University Member for a breach of research integrity shall be subject to the Appeals/Grievance procedures noted below.

Retention of Research and Scholarly Activity Materials

(A) University Members shall only be responsible for providing the Investigative Committee and an arbitration board access to research and scholarly activity materials which are in their possession and not for research materials which may be stored in archives, libraries or other institutions which the University may consult at its expense.

- (B) University Members shall keep 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.
- (C) If there are non-trivial financial costs involved in retention of such materials, these costs shall be borne by the University.

Appeal Process

Lakehead University Students

If the Respondent is a student, appealing a decision shall follow the appeal process outlined in the Lakehead University Code of Student Behaviour and Disciplinary Procedures.

Lakehead University Employees subject to the Employee Code of Conduct (excluding LUFA)

If the Respondent is an employee, appealing a decision shall follow the appeal process outlined in the Lakehead University Employee Code of Conduct.

Other University Members

Within twenty (20) business days of receiving the letter from the President summarizing any actions including disciplinary actions to be taken, the Respondent(s) may appeal the decision to the Provost and Vice-President (Academic).

To be admissible a Respondent's appeal must be made in writing and must adduce, and demonstrate the validity of, one or more of the following substantive grounds for appeal:

- evidence of substantial procedural error made by the Investigation Committee in reaching their decision;
- evidence of bias or other unfairness on the part of the Investigation Committee in reaching their decision;
- significant new information about the case that was not accessible by reasonable effort prior to the Investigation Committee's decision; or

- an excessive penalty/sanction imposed by the University.

Upon receiving the Respondent's appeal, the Provost and Vice-President (Academic) or designate will determine if there are valid grounds under these procedures for an appeal. If not, the appeal will be dismissed.

If there are grounds for appeal, the Provost will assign a "Reviewer" external to the University to determine the appeal. The Reviewer shall have full access to all evidence considered by the Investigation Committee as well as the Investigation Committee's final report and the President's letter summarizing any disciplinary actions.

In reviewing an appeal the Reviewer shall have full discretion to uphold, overturn, or vary the Investigation Committee's findings.

Within ten (10) business days of receiving and reviewing an appeal, the Reviewer shall inform in writing both the Respondent(s) and the Provost and Vice-President Academic of his or her decision, with reasons for the decision, concerning the appeal.

Subject to applicable rights of grievance in collective agreements, the decision of the Reviewer in response to an appeal shall be final and binding on all concerned.

Appendix A: Reporting to Agencies and Public Disclosure

A. Tri-Agency Funded Research

i. Reporting Allegations of a Breach of the Research Integrity Policy to the Tri-Agencies:

Subject to any applicable laws, including privacy laws, the Vice-President Research and Innovation shall advise the relevant Tri-Agency or the SRCR immediately of any allegations related to activities funded by the Tri-Agencies that may involve a Serious Breach to the Research Integrity Policy and poses significant financial, health and safety or other risks as defined in the *Tri-Agency Framework: Responsible Conduct of Research*.

ii. Reporting an Investigation to the Tri-Agencies:

If an allegation is related to research activities funded by the Tri-Agencies, the Provost and Vice-President (Academic) shall inform the SRCR in writing confirming whether or not the University is proceeding with an investigation within two (2) months of the receipt of the allegation.

iii. Reporting Results of an Investigation to the Tri-Agencies:

The Provost and Vice-President (Academic) 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 a Tri-Agency or to an activity funded by a Tri-Agency. A report will be submitted by the Provost and Vice-President (Academic) to the appropriate Agency within seven (7) months of the date of receipt of the allegation that results in an investigation by the University. These timelines may be extended in consultation with the SRCR if circumstances warrant, and with periodic updates provided to the SRCR until the investigation is complete.

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 timelines followed for the inquiry and/or investigation;
- The Respondent's response to the allegation, investigation and findings, and any measures the researcher has taken to rectify the breach; and
- The Investigative Committee's conclusions and actions, including disciplinary actions taken by the University.

The University's report should not include:

- Information that is not related specifically to Tri-Agency funding and policies; or
- Personal information about the Respondent or any other person, that is not material to the University's findings and its report to the SRCR.

The Provost and Vice-President (Academic) will report annually to the SRCR on the total number of allegations received involving Tri-Agency funds, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including privacy laws.

iv. **Tri-Agency Recourse:**

University Members please note the following recourse that the SRCR or Tri-Agency may follow. If the SRCR determines that there has been a breach of ***the Tri-Agency Framework: Responsible Conduct of Research***, it will exercise the recourse it considers appropriate to commensurate with the severity of the breach as outlined in detail in the Framework. In cases of a serious breach of Tri-Agency policy, as determined by the Tri-Agency President, the Tri-Agency may publicly disclose any information relevant to the breach that is in the public interest, including the name of the researcher subject to the decision, the nature of the breach, the Institution where the researcher was employed at the time of the breach, the Institution where the researcher is currently employed and the recourse imposed. In determining

whether a breach is serious, the Tri-Agency will consider the extent to which the breach jeopardizes the safety of the public or would bring the conduct of research into disrepute.

B. Institutional Public Disclosure

Annually, the Office of Research Services will post on its website information on confirmed findings of breaches of this Policy (e.g., the number and general nature of the breaches), subject to applicable laws, including privacy laws.

C. Other Sponsors and Funding Agencies

Other Agencies that require notification will be informed in accordance with the procedures identified by the specific Agency or funding agreement.

Review Period: When required;

Date for Next Review: To be determined;

Related Policies and Procedures: [Research Integrity Policy](#);

Policy Superseded by this Policy: None

The University Secretariat manages the development of policies through an impartial, fair governance process. Please contact the University Secretariat for additional information on University policies and procedures and/or if you require this information in another format:

Open: Monday through Friday from 8:30am to 4:30pm;

Location: University Centre, Thunder Bay Campus, Room UC2002;

Phone: 807-346-7929 or Email: univsec@lakeheadu.ca.