



Policy Name: Integrity in Research

Classification:

General Administration _____
Academic X
Unit _____

Issued by: _____ (Signature)
_____ (Title/Authority)

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*In order to keep the policy up to date, the Senate Research Committee shall endeavour to review this document every two years and make recommendations to Senate regarding any necessary revisions.

*Throughout this document, wherever the word “research” is used, it shall be understood to refer to research, scholarly, and creative activities as defined by University’s Full-Time Collective Agreement.

1.0 Preamble

“St. Thomas University recognizes the importance of scholarly research to achieving its goal of excellence in undergraduate liberal arts education and in making a distinctive contribution to society. Through our research and creative activities, St. Thomas University is committed to being a positive and transforming presence in society. We foster scholarship and research because we recognize their role in the advancement of knowledge and in sustaining the quality of teaching and the intellectual life of the University.” (St. Thomas University Strategic Plan, 2013-2018).

The pursuit of scholarly research must be conducted with the highest degree of honesty and integrity. In keeping with the University’s commitment to abide by the policies and

directions provided by the Secretariat for Responsible Conduct of Research (RCR), the University requires that, where applicable, research, scholarship, and creative output must be reviewed and approved by the University Research Ethics Board and adhere to the latest edition of the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans*.

In order to protect individuals and the University, policy and procedures are required both to support integrity in research, and to deal with allegations of misconduct in these matters.

This policy and procedures document describes the manner in which integrity and misconduct in research are dealt with at St. Thomas University. This policy aligns with the *Tri-Agency Framework: Responsible Conduct of Research* (2016). It draws primarily upon similar policies at Mount Allison University and St. Francis Xavier University and incorporates language, clauses, statements and approaches that appear in the *Tri-Agency Framework* and in other institutional policies including policies created by Mount Saint Vincent University, Bishop's University, the University of Lethbridge, and the University of Manitoba.

This policy does not supersede or replace provisions in the Collective Agreements between St. Thomas University and the Faculty Association of the University of St. Thomas (FAUST).

This policy is in relation to research and scholarly integrity, and does not replace other policy statements and procedures pertaining to issues that may overlap with the contents of this policy.

2.0 Definitions

Breach: refers to any conduct, actions or omissions which are violations of the Integrity in Research policy.

Committee of Investigation: refers to the Committee appointed to carry out an investigation and determine whether or not a breach has taken place and can be substantiated; the Committee shall consist of faculty with the necessary expertise and independence to carry out an inquiry under the University's policy and at least one external member who has no current affiliation with St. Thomas University.

Complainant: refers to any individual or group that alleges a member of the St. Thomas University community has breached the Integrity in Research Policy.

Day: refers to any workday exclusive of Saturday, Sunday and any holidays identified in the St. Thomas University Full-Time Collective Agreement.

Disclosure: refers to an allegation or complaint that a breach has, or is likely to have, occurred.

Funding Agency (or Agencies): refers to any agency or organization that provides grants and/or contracts in support of research, including Canada's three federal granting agencies (the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council, and the Social Sciences and Humanities Research Council).

Investigation: refers to an investigation of an alleged breach.

Research: refers to research, scholarly and creative works, whether funded or not, and regardless of where that research takes place; research constitutes the systematic investigation of phenomena, the purpose of which is to discover, create or extend knowledge; and included in research is its dissemination. The routine development of teaching materials is not considered research, nor is administrative work considered research. This policy does not apply to research conducted as part of student course work, which shall be addressed in accordance with the University's policies on student discipline; see, for example, the University's "Academic Misconduct" policy which sets out procedures for dealing with allegations of cheating or plagiarism.

Researcher: refers to any member of the St. Thomas University community, including faculty members (full- and part-time), professors emeritae/emeriti, adjunct appointees, visiting researchers, post-doctoral fellows, research associates, research assistants, laboratory assistants, students (undergraduate or graduate), or any other person in a similar position who is involved in research.

Respondent: refers to any individual accused of a breach.

3.0 Principles of Practice and the Responsibilities of Researchers

St. Thomas University is committed to the highest standards of research integrity. Integrity in research requires honesty and rigour in the pursuit of new knowledge and creative expression while adhering to applicable policies, regulations, procedures, and laws. The primary responsibility for research integrity rests with individuals carrying out these activities.

In accordance with the *Tri-Agency Framework: Responsible Conduct of Research* (2016), article 2.1.2:

“Researchers shall strive to follow the best research practices honestly, accountably, openly and fairly in the search for and in the dissemination of knowledge. In addition, researchers shall follow the requirements of applicable institutional policies and professional or disciplinary standards and shall comply with applicable laws and regulations. At a minimum, researchers are responsible for the following:

a) Rigour: Scholarly and scientific rigour in proposing and performing research; in recording, analyzing, and interpreting data; and in reporting and publishing data and

findings.

b) Record keeping: Keeping complete and accurate records of data, methodologies and findings, including graphs and images, in accordance with the applicable funding agreement, institutional policies, laws, regulations, and professional or disciplinary standards in a manner that will allow verification or replication of the work by others.

c) Accurate referencing: Referencing and, where applicable, obtaining permission for the use of all published and unpublished work, including theories, concepts, data, source material, methodologies, findings, graphs and images.

d) Authorship: Including as authors, with their consent, all those and only those who have made a substantial contribution to, and who accept responsibility for, the contents of the publication or document. The substantial contribution may be conceptual or material.

e) Acknowledgement: Acknowledging appropriately all those and only those who have contributed to research, including funders and sponsors.

f) Conflict of interest¹ management: Appropriately identifying and addressing any real, potential or perceived conflict of interest, in accordance with the institution's policy on conflict of interest in research, in order to ensure that the objectives of the RCR Framework are met.”

These principles shall guide all aspects of research, including but not limited to the conduct of research, the publication of original work, artistic creations, performance in the arts or in professional areas and other activities.

4.0 The Responsibilities of the University

St. Thomas University, through the office of the Vice-President (Academic and Research), is obliged to comply with the *Tri-Agency Framework: Responsible Conduct of Research*. The University undertakes to ensure that all researchers are informed about the policies and procedures related to the responsible conduct of research. Such actions will include posting relevant policies and resources on the University website and periodically communicating such material to faculty via workshops and/or electronic communication. Overall, St. Thomas University will provide an environment conducive to the best

¹ Per the Tri-Agency Framework Responsible Conduct of Research, “A conflict of interest may arise when activities or situations place an individual in a real, potential or perceived conflict between the duties or responsibilities related to research, and personal, institutional or other interests. These interests include, but are not limited to, business, commercial or financial interests pertaining to the individual, their family members, friends, or their former, current or prospective professional associates. (Based on the second edition of the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans* [TCPS 2] Chapter 7).”

research practices, where researchers are honest, accountable, open, and fair in the search for, and dissemination of, knowledge.

St. Thomas University will not tolerate any breaches of policy in the conduct of research or its dissemination, and the University will take all necessary measures to promote and maintain research integrity. Where breaches of the policy are alleged to have occurred, the University has an obligation to determine, as expeditiously as possible, whether or not a breach has occurred, and the severity of the breach. The University shall apply and enforce this policy while guided by the following principles:

- a. **academic freedom** in research, publication, and creative practice is fundamental to the work of the University, and is important for the common good of society;
- b. **effective procedures** shall be used **that ensure fairness** to those whose integrity is brought into question; this includes giving a researcher a full opportunity to respond to the allegations in accordance with the **principles of due process and natural justice**;
- c. **strict confidentiality** for a person alleged to be guilty of a breach in order to minimize the potential damage that can be done if allegations are ultimately not substantiated; and
- d. those who make an allegation of misconduct and those who may be involved in the investigation of an allegation that a breach has occurred shall be protected by the University; this involves assurances of **confidentiality** to the extent possible and **an institutional commitment to prevent retaliation** against those persons.

5.0 Breaches of Research Policy

As the RCR Framework indicates, a breach “*is a failure to comply with any Agency policy throughout the life cycle of a research project – from application for funding, to the conduct of the research and the dissemination of research results. In determining whether an individual has breached an Agency policy, it is not relevant to consider whether a breach was intentional or a result of honest error. However, intent is a consideration in deciding on the severity of the recourse that may be imposed. Breaches of Agency policies include the following:*”

“Breach of Tri-Agency Research Integrity Policy

- a. *Fabrication: Making up data, source material, methodologies or findings, including graphs and images.*
- b. *Falsification: Manipulating, changing, or omitting data, source material, methodologies or findings, including graphs and images, without acknowledgement and which results in inaccurate findings or conclusions.*
- c. *Destruction of research records: The destruction of one’s own or 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.

d. Plagiarism: 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.

e. Redundant publication or self-plagiarism: The re-publication of one's own previously published work or part thereof, including data, in any language, without adequate acknowledgment of the source, or justification.

f. Invalid authorship: Inaccurate attribution of authorship, including attribution of authorship to persons other than those who have made a substantial contribution to, and who accept responsibility for, the contents of a publication or document.

g. Inadequate acknowledgement: Failure to appropriately recognize contributors.

h. Mismanagement of conflict of interest: Failure to appropriately identify and address any real, potential or perceived conflict of interest, in accordance with the institution's policy on conflict of interest in research, preventing one or more of the objectives of the RCR Framework ... from being met."

"Misrepresentation in an Agency Application or Related Document

- a. Providing incomplete, inaccurate or false information in a grant or award application or related document, such as a letter of support or a progress report.*
- b. Applying for and/or holding an Agency award when deemed ineligible by NSERC, SSHRC, CIHR or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.*
- c. Listing of co-applicants, collaborators or partners without their agreement."*

"Mismanagement of Grants or Award Funds

Using grant or award funds for purposes inconsistent with the policies of the Agencies; misappropriating grants and award funds; contravening Agency financial policies, namely the Tri-Agency Financial Administration Guide, Agency grants and awards guides; or providing incomplete, inaccurate or false information on documentation for expenditures from grant or award accounts."

"Breach of Agency Policies or Requirements for Certain Types of Research

Failing to meet 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."

“Breach of Agency Review Processes

- a. *Non-compliance with the Conflict of Interest and Confidentiality Policy of the Federal Research Funding Organizations.*
- b. *Participating in an Agency review processes while under investigation”*

(NOTE: Breaches listed above are extracted directly from the *Tri-Agency Framework*.)

Breaches shall be deemed to have occurred also when a researcher:

- Fails to comply with applicable federal or provincial statutes, regulations, or guidelines and policies of funding agencies or the University for the protection of researchers, human subjects, or the health and safety of the public, or for the welfare of laboratory animals; or failure to meet other legal requirements (or generally accepted standards) that relate to the conduct or reporting of research.
- Disposes of intellectual property outside the University without due benefit to those entitled to some return on the investment in such intellectual property.
- Intentionally misuses funds designated for research purposes.

6.0 Exploitation of Students

In addition to the breaches of policy outlined above, researchers (whether they be faculty, staff, or students) have a responsibility to ensure that there will be no exploitation of students. Specific examples of exploitation include:

- a. Engaging students as research assistants or as research participants where they might reasonably fear that to refuse would be detrimental to their interests;
- b. Failure to give proper recognition to the ideas, work or assistance of individuals or to obtain, where appropriate, prior permission for the work to be done; and/or
- c. Encouraging students to prolong research beyond the point where an acceptable thesis, project, or term paper could be submitted, in order solely to further the interests of the faculty member.

7.0 Procedures for Addressing Allegations of Breaches of Policy

The procedures outline how the University will manage allegations and investigate allegations of breaches of policy. As the Administrative Officer with the responsibility for the policy and procedures related to research integrity, the Vice-President (Academic and Research) shall receive any and all allegations, shall manage all allegations, and shall maintain all files related to allegations and investigations. The Associate Vice-President (Research) may provide support and assist with these duties. In the event that the Administrative Officer is unable or unwilling to fulfill their responsibilities under the

policy and procedures, they shall request that the President appoint an interim Administrative Officer to manage a particular allegation and/or investigation.

7.1 Making an Allegation

A person may make an allegation and must do so in writing. An allegation is to be submitted to the Vice-President (Academic and Research). An allegation, which has been dated, shall contain the following information:

- a. The name and contact information of the person making the allegation;
- b. The description of the alleged breach and the approximate date(s) when the alleged breach occurred;
- c. The name(s) of the individual(s) suspected in the breach; and
- d. Any other relevant information.

Anonymous allegations can only be considered if accompanied by sufficient information to enable the assessment of this allegation and the credibility of the facts and evidence on which the allegation is based, without the need for further information from the Complainant. The University will maintain an online allegation form to facilitate such anonymous allegation submissions.

The ultimate responsibility for the policy and procedures rests with the Vice-President (Academic and Research). All allegations shall be made to the Vice-President (Academic and Research). All allegations will be treated as confidential in order to protect the privacy of the Complainant(s) and Respondent(s) as far as is possible.

To the extent possible, the university shall protect the individual making an allegation in good faith or providing information related to an allegation from reprisals.

An allegation made by an external party (e.g., a journal editor, a funding agency) will be treated in accordance with the procedures outlined in this policy.

A person who makes an allegation that is found to be frivolous or vexatious may be subject to disciplinary action. Where the allegation relates to conduct that occurred at another institution (whether as an employee, student or in some other capacity) the Vice-President (Academic and Research) will contact the other institution and determine with that institution's designated point of contact which institution is best placed to conduct an inquiry and investigation, if warranted. The Vice-President (Academic and Research) will advise the person who made the allegation which institution will have carriage over the allegation.

7.2 Initial Review of an Allegation

As a first step, and within 20 days of receiving an allegation in accordance with section 7.1, the Vice-President (Academic and Research) shall undertake to determine if the allegation:

- a. was made in good faith;

- b. is not frivolous or vexatious;
- c. deals with a breach of the policy (outlined in section 5); and
- d. is not a matter being dealt with under another University policy or procedure.

This initial review may involve confidential consultation with appropriate officers at the University (e.g., the Associate Vice-President (Research), the Chair of the Research Ethics Board, staff in Financial Services or the Office of Research Services, etc.). Where appropriate, the Vice-President (Academic and Research) may also consult, confidentially, with relevant experts and authorities.

If the initial review of an allegation leads to a conclusion that no breach has occurred, the Complainant shall be advised of this conclusion and that no further action is to be taken. The individual alleged to have breached the policy (the Respondent) shall also be informed that an allegation was received, the essential nature of the allegation, and the reasons why no further action is to be taken.

If the allegation warrants further investigation, the Vice-President (Academic and Research) shall follow the procedures outlined in this policy to investigate the matter. The Vice-President (Academic and Research) shall inform the Complainant that the matter will be the subject of the procedures outlined in this policy. The Respondent will also be notified of the allegation and informed of the process that will be undertaken to investigate the allegation.

In the event that the allegation relates to research funded by a Tri-Council Agency, and is a breach of policy that may involve financial, health, safety or other risks, the Vice-President (Academic and Research) shall report (in writing) the nature of the allegations to the Secretariat, Panel on Responsible Conduct of Research*, whether or not an investigation will proceed in accordance with the University's policy and procedures. Normally, such reports shall be made within 60 days after an allegation has been received.

In determining whether the Secretariat must be informed of the allegation, the Vice-President (Academic and Research) shall be guided by RCR Framework (2016).

The Vice-President (Academic and Research) may take actions to protect the administration of research funds which may include, but are not limited to, freezing a grant account or requiring oversight of expenses charged to a grant account. Where a breach involving Agency funds is found to have occurred, this shall be communicated to the Secretariat, Panel on Responsible Conduct of Research.

7.3 Establishing a Committee of Investigation

Where the Vice-President (Academic and Research) determines that an investigation is required, they will appoint a Committee of Investigation consisting of four (4) faculty members to conduct an investigation. The individuals selected shall have the requisite knowledge and expertise to conduct the investigation, and be without a conflict of interest

(real or perceived).

The Committee of Investigation shall include:

- a. three (3) faculty members holding tenured academic appointments at St. Thomas University; and
- b. one (1) faculty member external to St. Thomas University, who has no current affiliation with St. Thomas University.

The Committee of Investigation will choose one of its members to serve as Chair. The Chair will participate fully in deliberations but will only vote in the case of a tie.

If an individual appointed to serve on a Committee of Investigation is unable or unwilling to fulfill his/her duties, the Committee may continue its work provided that it has at least three (3) members, one of which must be an external member. If necessary, the Vice-President (Academic and Research) may add a replacement member to a Committee of Investigation.

The Complainant and Respondent shall be advised in writing by the Vice-President (Academic and Research) of the members appointed to the Committee of Investigation. Within 10 days of receiving such notification, either party may notify the Vice-President (Academic and Research) of their objection to the appointment of a Committee of Investigation member on the basis of a potential bias or conflict of interest. The Vice-President (Academic and Research) shall determine if a potential bias or conflict of interest exists. The decision of the Vice-President (Academic and Research) regarding such an objection shall be final.

7.4 The Investigation Process

The Committee of Investigation shall decide its own process for determining whether an allegation can be substantiated and whether such an allegation may constitute a serious breach of the policy. The Committee shall be provided with any documentation known to exist concerning the allegation, and the University will enable the Committee to conduct a fair and thorough investigation. The Committee of Investigation may also, as appropriate,

- a. interview witnesses;
- b. gather information in writing (including by e-mail) from witnesses;
- c. review documents and other relevant exhibits;
- d. examine physical evidence;
- e. arrange for the testing of physical evidence;
- f. request access to electronic systems that may contain relevant evidence; and/or
- g. in all cases, the Committee shall consider the credibility and reliability of evidence.

The Complainant shall have an opportunity to explain and provide evidence in support of the allegation. The Respondent, who will have been provided with information on the essential nature of the allegation, shall have an opportunity to respond to the allegation, and any evidence submitted in support of the allegation. Personal information may be redacted from the evidence to protect the privacy of individuals. Any witnesses (including the Complainant and the Respondent) shall be able to consult with an advocate (including legal counsel or a union representative, as may be appropriate).

The Committee shall undertake its investigation within a reasonable period of time. Normally, an investigation shall be completed within 60 days of the allegation being assigned to the Committee. The Committee may seek an extension of its deadline through a request to the Vice-President (Academic and Research).

In the course of its investigation, should the Committee discover other breaches of the policy and/or the involvement of other individuals in the breach of the policy, the Committee (through the Chair) shall request of the Vice-President (Academic and Research) that the scope of the investigation be enlarged and that the timeline for completing its investigation be extended by up to 30 days.

The investigation shall be conducted in the strictest confidence. Committee members will be required to sign confidentiality agreements. Committee members breaching the confidentiality agreement may be dismissed from the Committee, and may be subject to disciplinary action.

Provided that the alleged breach does not involve a significant financial, health and safety, or other risk, and provided that there are no legal, contractual, or Funding Agency requirements to pursue a formal process, an informal resolution may be sought, if and only if, both the Complainant and the Respondent agree to pursue such a course of action. An informal resolution may occur prior to or during a formal investigation process. If a formal investigation is underway, the Vice-President (Academic and Research) may pause that process in order that an informal resolution takes place. If an informal resolution is not achieved, the formal process shall proceed in accordance with the procedures outlined in this document.

7.5 The Report of the Committee of Investigation

After the Committee has completed its investigation, it will submit a report of its findings to the Vice-President (Academic and Research) within 15 days. The report shall include the following:

- a. a copy of the allegations;
- b. a summary description of the investigation process;
- c. a written response (if any) of the Respondent(s);
- d. a summary of the key evidence obtained through the investigation, including the response(s) of the individual(s) alleged to have breached the policy;
- e. a statement of the Committee's findings as to whether or not an allegation has been substantiated, and the reasons for the finding;

- f. a summary of any remedial measures taken in regard to the breach; and
- g. recommendations regarding mitigation steps, remedial measures, and due diligence against future breaches.
- h. all documents and materials examined by the Committee.

The report must be supported by a majority of the members of the Committee of Investigation. The Vice-President (Academic and Research) may request that the Chair of the Committee prepare a redacted version of the report in order to protect confidentiality and to protect the identity of persons involved in the investigation. Redactions shall be in accordance with applicable privacy legislation and these procedures.

The report in its entirety (including all documents and materials examined by the Committee of Investigation) shall be retained by the Vice-President (Academic and Research) for a period of seven (7) years, after which the report in its entirety shall be destroyed.

Upon the completion of the investigation process, including any appeal of the Committee's findings, Committee of Investigation members will forward any documentation related to their investigation activities to the Office of the Vice-President (Academic and Research) for destruction.

The Vice-President (Academic and Research) will provide a summary of the report, within 15 days of the conclusion of the investigation to all persons accused of causing or contributing to a breach of the policy.

The University and the respondent may not enter into confidentiality agreements or other agreements related to an inquiry or an investigation that prevent the University from reporting to the Agencies or to the Secretariat, Panel on Responsible Conduct of Research.

If the Committee of Investigation concludes that the allegation is not substantiated, no reference to the allegation shall be placed in the Respondent's Academic file. Where a Committee of Investigation finds that a researcher has been wrongfully accused of a breach of the policy, the University shall take reasonable steps to restore the individual's reputation. If an allegation is substantiated, the Vice-President (Academic & Research) will determine the appropriate corrective measures, which may include discipline in accordance with the relevant Collective Agreement.

7.6 Appeals

If the Committee of Investigation concludes that a breach has occurred, the individual shall have an opportunity to appeal the decision through the Office of the President. Any appeal must be submitted within 20 days of the notice of the Committee's findings. Upon receiving such an appeal, the Office of the President will inform the Complainant that an appeal has been filed. Appeals may be made on either procedural or substantive grounds. The appellant shall submit in writing the case for appeal, outlining the reasons

and evidence to support the appeal. The President shall be provided a copy of the complete report prepared by the Committee of Investigation as well as the appeal and accompanying documentation. The President shall have the discretion to interview any individuals involved in the case, including members of the Committee of Investigation and the Vice-President (Academic and Research). Normally within 10 days, the President shall inform the appellant as to whether the appeal is granted or denied.

In cases where an appeal on procedural grounds is granted, the Vice-President (Academic and Research) shall refer the case back to the Committee of Investigation so that the procedural error may be corrected. Alternatively, the Vice-President (Academic and Research) may decide to establish a new Committee of Investigation. Whether or not a new Committee of Investigation is established shall be at the discretion of the Vice-President (Academic and Research), and informed by the nature and severity of the procedural error. In cases where an appeal on substantive grounds is granted, the Vice-President (Academic and Research) shall proceed as in the case of a Committee of Investigation concluding that an allegation is not substantiated (see section 7.5).

In cases where an appeal on procedural or substantive grounds is not granted, there shall be no further appeals.

7.7 Reporting on the Outcome of an Investigation

In cases where an individual who was found to have breached the policy does not appeal the Committee's decision, or if any such appeal is denied, then within 10 days of receiving confirmation of the Respondent's decision not to appeal the Committee's findings, the Vice-President (Academic and Research) will provide a summary of the report to:

- a. the Complainant;
- b. if relevant, any collaborators of the researcher(s) who are accused of causing or contributing to a breach (including individuals at other institutions);
- c. all such individuals (including individuals at other institutions) who may be involved in deciding upon discipline, mitigation steps, remedial actions, or due diligence to prevent similar or related breaches in the future;
- d. all such individuals who may protect or restore the reputation of those wrongfully accused of causing or contributing to a breach; and
- e. any other person required in order to comply with legal, regulatory, or contractual obligations.

Also within 10 days of the receipt of the Committee's report on the investigation, the Vice-President (Academic and Research) shall submit a summary of the investigation and any steps to be taken to the Funding Agency (if appropriate) and to the Secretariat, Panel on Responsible Conduct of Research. The summary shall include:

- a. the specific allegation(s), including the names of any researcher(s) alleged to have breached the policy, a summary of the finding(s) and reasons for the

- finding(s);
- b. the process and timelines followed for the investigation;
- c. the researcher's response to the allegation, investigation and findings, and any measures the researcher has taken to rectify the breach; and
- d. the Committee's decisions and recommendations and actions taken by St. Thomas University.

Regardless of the result of the investigation, all parties involved are bound by confidentiality.

7.8 Discipline / Penalties

Any discipline will be implemented pursuant to, and in accordance with, the relevant Collective Agreement. Breaches of the policies and regulations of a Funding Agency may result in additional penalties imposed by the Funding Agency.

SUMMARY OF PROCESS

The attached flow-chart outlines the process in connection with breaches of the Policy on Integrity in Research. Below, the timeframe for the process is outlined.

- Within 20 days of receiving a complaint, an initial assessment of the allegation is made by the Vice-President (Academic and Research).
- If the allegation relates to research funded by a Tri-Council Agency, the Vice-President (Academic and Research) shall, within 60 days of receiving the allegation, report the nature of the allegations to the Secretariat, Panel on Responsible Conduct of Research, and whether or not an investigation will proceed in accordance with the University's policy and procedures.
- Within 10 days of receiving notification as to the members of the Committee of Investigations, either party may notify the Vice-President (Academic and Research) of their objection to the appointment of a member of the Committee of Investigation on the basis of a conflict of interest.
- If a Committee of Investigation is established, it shall normally have 60 days to carry out its investigations.
- The Committee of Investigation shall submit a report to the Vice-President (Academic and Research) within 15 days after the conclusion of its investigations. (Upon receipt of the Committee of Investigation's report, the discipline provisions of the collective agreements shall be initiated, as appropriate.)
- Within 15 days of receiving the report of the Committee of Investigation, the Vice-President (Academic and Research) shall provide an appropriate version of the report to the individual accused of causing or contributing to a breach of the policy.
- The individual accused of the breach shall exercise their right to appeal the decision of the Committee of Investigation within 30 days of the notice of the Committee's findings.
- Upon receiving an appeal, the Office of the President will inform the Complainant

that an appeal has been filed.

- The President shall render a decision to grant or deny the appeal normally within 10 days of receiving the appeal.
- If the individual found to have breached the policy does not appeal, or if the individual's appeal is denied by the President, the Vice-President (Academic and Research) shall, within 10 days of receiving word of such developments, report on the findings to the appropriate persons (outlined in the policy) and to the Secretariat, Panel on Responsible Conduct of Research.

In circumstances where discipline is imposed, the timelines shall conform to the provisions of the relevant collective agreement.