



St. Lawrence College

POLICY TITLE: Research Integrity Policy

POLICY NUMBER: CR502

EFFECTIVE: October 5, 2017

APPROVED BY: SLC Board of Governors

REFERENCE: Memorandum of Understanding: Roles and Responsibilities in the Management of Federal Grants and Awards (2008); Agreement on the Administration of Agency Grants and Awards by Research Institutions (2012); Secretariat on the Responsible Conduct of Research (SRCR) *Tri-Agency Framework: Responsible Conduct of Research (2016)* and any bona fide amendments from time to time found at found at URL: <http://www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/#a7-B>

LINKS TO OTHER POLICY: SLC Ethical Conduct of Research Involving Humans (CR501)

Attachment:

Owner: Applied Research

PREAMBLE

St. Lawrence College champions applied research activities that will serve to enhance academic professional growth, student learning, innovation and economic development. The College recognizes that teaching and applied research will flourish in a climate of academic freedom.

Since the conditions for proper teaching and applied research differ depending on the discipline, it is the duty of individual investigators to assume responsibility for the intellectual and ethical quality of their work.

The College has developed this policy to communicate expectations, increase awareness of integrity issues, and encourage scholars (be they students, faculty or staff) to assume personal responsibility for their actions. The College expects all researchers to adhere to this policy.



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BACKGROUND

On April 11th, 2008, then SLC President and CEO, Chris Whitaker, signed the Memorandum of Understanding (MOU) with the Federal Granting Agency (Agency), specifically, the Natural Sciences and Engineering Research Council (NSERC). By signing the MOU, the President and CEO committed the College and its researchers (regardless of whether their research is Agency funded or not) to complying with the most current versions of the Tri-Agency policies: the *Tri-Agency Framework: Responsible Conduct of Research (RCR Framework)* and the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans (TCPS)*.

DEFINITIONS

- **Allegation:** A declaration, statement, or assertion communicated in writing to an institution or Agency to the effect that there has been, or continues to be, a breach of one or more Agency policies or modes of behavior, the validity of which has not been established.
- **Breach:** A breach of the RCR Framework is the 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. It includes all activities related to the research, including the management of Agency funds. For examples of breaches.
- **Complainant:** An individual or representative from an organization who has notified an institution or Agency of a potential breach.
- **Conflict of interest:** 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.



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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.

- **Inquiry:** The process of reviewing an allegation to determine whether the allegation is responsible, the particular policy or policies that may have been breached, and whether an investigation is warranted based on the information provided in the allegation.
- **Investigation:** A systematic process, conducted by an institution's investigation committee, of examining an allegation, collecting and examining the evidence related to the allegation, and making a decision as to whether a breach of a policy(ies) has occurred.
- **Research:** An undertaking intended to extend knowledge through a disciplined inquiry or systematic investigation.¹
- **Respondent:** An individual who is identified in an allegation as having possibly breached Agency and/or institutional policy.
- **Serious breach:** In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public or brings the conduct of research into disrepute. This determination will be based on an assessment of the nature of the breach, the level of experience of the researcher, whether there is a pattern of breaches by the researcher, and other factors as appropriate. Examples of serious breaches may include:
 - recruiting human participants into a study with significant risks or harms without Research Ethics Board approval, or not following approved protocols;

¹ Research is an undertaking intended to extend knowledge through a disciplined inquiry and/or systematic investigation. The conduct of research in the context of this RCR Framework includes applying for and managing Agency funds, performing research, and disseminating results (based on the 2nd edition of the Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans [TCPS2]).



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- using animals in a study with significant risks or harms without Animal Care Committee approval, or not following approved protocols;
- deliberate misuse of research grant funds for personal benefit not related to research;
- knowingly publishing research results based on fabricated data;
- obtaining grant/award funds from the Agencies by misrepresenting one's credentials, qualifications and/or research contributions in an application.

PURPOSE

The purpose of this College's policy is to:

1. Promote scholarly integrity among researchers;
2. Proscribe activities that breach generally acceptable standards of scholarly conduct; and
3. Provide a process for dealing with allegations of scholarly misconduct.

SCOPE:

This policy applies to all researchers conducting research under the auspices St. Lawrence College, irrespective of the source of financial support (if any) or the location of the project. It applies to all allegations and complaints of misconduct in research and scholarship against any non-student member of the College community including faculty, staff, research assistants, and visiting researchers, irrespective of the present source of their salary or stipend. Allegations against students are governed by the procedures dealing with Academic Honesty and Integrity found in the *SLC Academic Policy Manual*.



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SECTION A. POLICY STATEMENTS

The College holds researchers responsible for conducting their research in strict observance of ethical standards according to the most current versions of *Tri-Agency Framework: Responsible Conduct of Research* and the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans*, as well as the following modes of behavior.

Researchers shall:

1. Employ scholarly and scientific rigour and integrity in obtaining, recording and analyzing data, retaining data, and in reporting and publishing results;
2. Recognize the substantive contributions of all collaborators;
3. Use archival material in accordance with the rules of the archival source;
4. Ensure that authorship of published work includes all persons who have materially contributed to, and share responsibility for, the contents of the publication, and only those persons;
5. Obtain the written permission of the author before using new information, concepts or data originally obtained through access to confidential manuscripts or applications for funds for research or training that may have been seen as a result of processes such as peer review;
6. Seek and obtain the required certificates and approvals before engaging in any research involving human participants, animals, or biohazardous materials.
7. Comply fully with the approved research protocols in the performance of the research;
8. Comply with SLC financial policies and funding agencies' or sponsors' administration of funds requirements as they apply to grant and contract research, ensuring good stewardship of financial resources;



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9. Report in writing to the College any material financial conflict of interest in a company that contracts with the College to undertake research, particularly research involving the company's products. Material financial interest includes ownership, substantial stock holding, directorship, significant honoraria or consulting fees, but does not include minor stock holding in a large, publicly traded company; and,
10. Report in writing to sponsors, this and other colleges, 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 manuscripts or application, test products or be permitted to undertake worksponsored from outside sources.

Researchers shall not:

1. Be dishonest or deceitful;
2. Fabricate or falsify data or results;
3. Plagiarize or use unpublished work of other researchers and scholars without permission and without due acknowledgment;

A breach in research integrity and scholarship includes, but is not limited to, any deviation from the modes of behaviour listed above or as outlined in the *Tri-Agency Framework: Responsible Conduct of Research and the Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans*. The College investigates allegations of scholarly misconduct in a timely, impartial, and accountable manner. The College will take appropriate action when it finds that scholarly misconduct or a breach has occurred, including any necessary steps to preserve evidence.



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If it is found that there is a continuum of behaviours ranging from incompetence to harmful negligence, from carelessness to deliberate dishonesty, then the Senior Vice-President, Academic, acting on behalf of the President and CEO of St. Lawrence College, is authorized to take the necessary disciplinary actions against the researcher(s) (including dismissal and legal actions) to rectify any harm done.

1. Promotion of Integrity in Research and Scholarship

- 1.1 SLC has developed *Institutional Guidelines* (see Section B below) for researchers on supervision of research personnel, data gathering, storage and retention, and authorship, including student contributors.
- 1.2 The College recognizes that integrity in research and scholarship is best encouraged by developing awareness among all involved of the need for the highest standards of integrity, accountability and responsibility.
- 1.3 Deans and Associate Deans shall provide an environment conducive to this goal and actively promote this policy and the *Institutional Guidelines*, in particular to new faculty members, research staff, and research trainees.

2. Allegations

- 2.1 All allegations shall be forwarded to the Senior Vice-President, Academic.
- 2.2 Where a Respondent is the Senior Vice-President, Academic, all allegations shall in respect of all Respondents be forwarded to the SLC President and CEO who shall then be responsible for ensuring that these procedures are followed with such variations as are necessary.



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3. Responsibilities of the Senior Vice-President, Academic

- 3.1 The Senior Vice-President, Academic, may delegate any function specified in these procedures but is ultimately responsible for ensuring that the procedures are complied with, and that all allegations and complaints are properly investigated, documented and disposed. However, where the Senior Vice-President, Academic, personally formulates the complaint in writing, another Senior Vice-President from the College shall be responsible for ensuring compliance with this provision.

4. Authority of the Senior Vice-President, Academic

The Senior Vice-President, Academic, has the authority to:

- i. close down facilities used for research;
- ii. protect the administration of College and outside funds involved in the research;
- iii. obtain and retain relevant documentation (e.g., lab notes, computer disks, hard drives) related to an investigation;
- iv. request that members of the College Community appear before a Preliminary Inquiry Committee or a Research Integrity Investigation Committee and answer the Committee's questions or supply materials to it.

5. Formal Complaint Procedures

Formal procedures for the investigation of allegations of a breach of research integrity or scholarly misconduct are essential to assure the protection of the rights of all those involved in the case until the basis of the allegations can be examined and a resolution of the problem can be determined.

- 5.1 Instances of alleged breaches in research may be resolvable through informal consultation; departments are encouraged to establish mechanisms for such



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informal resolution. It is acknowledged that there may be a power imbalance in the relationship between the parties (e.g., between a student and a supervisor) that might prevent this. If the complaint is not carried beyond this stage, the College shall maintain no written record of the names of the parties or of the precise particulars of the allegation.

- 5.2 On receipt of an allegation of a possible breach in research or scholarly misconduct, the Senior Vice-President, Academic, shall determine if it is possible to formulate a complaint in writing. Such a complaint may be formulated by any person who has reviewed the relevant documentation, including the Senior Vice-President, Academic. If for any reason a complaint in writing cannot be formulated, then no further steps shall be taken against the Respondent under these procedures.
- 5.3 Anonymous allegations will not normally be considered; however if compelling evidence is received anonymously by the VP Academic, the investigation process may be initiated.
- 5.4 All complaints of breaches or scholarly misconduct must be put in writing.
- 5.5 A complaint shall identify the complainant and provide sufficient information to enable the Respondent to understand the alleged breach or scholarly misconduct that is under investigation. Complainant's identity will be kept confidential unless that person has explicitly agreed to waive confidentiality.
- 5.6 Whereas the Senior Vice-President, Academic, determines it necessary for a proper evaluation or resolution of the complaint to be achieved that the complainant or any person who supports the complaint be identified, the Senior Vice-President, Academic, or the designee, will obtain in writing explicit consent to reveal the identity of the complainant and/or party.



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- 5.7 As soon as possible after a complaint has been formulated in writing, and in any event within ten days of receipt of an allegation, the Senior Vice-President, Academic, shall create a Preliminary Inquiry Committee (PIC) consisting of three members to conduct the inquiry into the allegation(s).
- 5.8 The Senior Vice-President, Academic, shall forthwith upon sending a complaint to a PIC send a copy of the complaint to the Respondent. The letter to the Respondent shall also include the composition of the PIC. The Senior Vice-President, Academic, shall also send a letter to any person who is identified in the complaint to inform them of the preliminary inquiry.
- 5.9 Any objection by the Complainant or the Respondent to the composition of the PIC and its ability to conduct an impartial inquiry shall be made to the Senior Vice-President, Academic, within seven days. The disposition of any such objection by the Senior Vice-President, Academic, shall be final.

6. Preliminary Inquiry Committee

- 6.1 The Preliminary Inquiry Committee (PIC) shall consist of:
- three experienced members from the SLC Community with the requisite expertise to address the issues involved to conduct the initial inquiry;
 - all at arms-length from both the person(s) alleging misconduct and the Respondent; and
 - the PIC shall elect one of its members as Chair.
- 6.2 The PIC shall proceed informally and in complete confidentiality to determine whether or not the complaint warrants an investigation.



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- 6.3 The PIC shall advise the Respondent in sufficient detail of the evidence being considered by the PIC and shall invite the Respondent, accompanied by an advisor if the Respondent so desires, to meet with it and respond to that evidence orally and/or in writing.
- 6.4 Prior to receiving evidence from any person not already identified in the complaint in writing, the PIC shall obtain written consent from any person that it deems necessary in the interests of achieving a resolution to reveal that person's identity to the Respondent.
- 6.5 Within thirty days of being appointed, the PIC shall complete its inquiry and shall determine whether or not it finds that the complaint warrants an investigation.
- 6.6 The PIC's inquiry findings:
- Shall be reported in writing to the Senior Vice-President, Academic;
 - Shall provide the Senior Vice-President, Academic, with the information used to reach its decision, which the Senior Vice-President, Academic, shall convey to any subsequent Research Integrity Investigation Committee; and
- 6.6 If the complaint is not found to be a serious breach (e.g., carelessness would not warrant an investigation), the PIC may recommend to the Senior Vice-President, Academic, a way to resolve the complaint.
- 6.7 If the PIC reports that the complaint does not warrant an investigation, the Senior Vice-President, Academic, shall advise the Respondent and any person identified in the complaint that the complaint is dismissed.



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7. Research Integrity Investigation Committee

- 7.1 Upon being advised by the PIC that there is a complaint warranting an investigation, the Senior Vice-President, Academic, shall within 10 days appoint a Research Integrity Investigation Committee (RIIC) to conduct the investigation.
- 7.2 The Senior Vice-President, Academic, shall inform in writing the Respondent, the Complainant, and any person identified in the complaint, of their rights and the ensuing investigation by the RIIC.
- 7.3 Any objection to the composition of the RIIC and its ability to conduct an impartial inquiry shall be made to the Senior Vice-President, Academic, within seven days. The disposition of any such objection by the Senior Vice-President, Academic, shall be final.
- 7.4 The RIIC shall forthwith thereafter communicate with the Complainant, the Respondent, and any person identified in the complaint of the composition of that RIIC and its process of investigation.
- 7.5 The Research Integrity Investigation Committee shall consist of:
 - three experienced members who did not serve on the PIC to conduct the initial inquiry;
 - at least one external to SLC, with the requisite expertise to address the issues involved;
 - all at arms-length from both the person(s) alleging misconduct and the Respondent; and
 - the RIIC shall elect one of its members as Chair.
- 7.6 In cases of collaborative research involving other institutions, it may be desirable to conduct either parallel investigations or a joint investigation, with appropriate



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changes to the procedures outlined below. Whichever method is chosen, SLC will cooperate fully with other institutions.

- 7.7 The RIIC has the authority to see any College documents and question any students or members of faculty and staff during its investigation.
- 7.8 The RIIC may seek impartial expert opinions, as necessary and appropriate, to ensure the investigation is thorough and authoritative.
- 7.9 The RIIC shall review all scholarly activity with which the Respondent has been involved during the period of time considered pertinent in relation to the allegation, including any abstracts, papers or other methods of scholarly communication. A special audit of accounts may also be performed on the sponsored research accounts of the Respondent.
- 7.1.0 The RIIC shall ensure that it is cognizant of all real or apparent conflicts of interest on the part of those involved in the inquiry, including both the Respondent and those making the allegations.
- 7.1.1 The RIIC shall provide the opportunity for a person who made an allegation leading to the complaint, accompanied by an advisor, if desired, to address it in speech or in writing.
- 7.1.2 The RIIC shall advise the Respondent in sufficient detail of the evidence being considered by the RIIC and shall invite the Respondent, accompanied by an advisor if the Respondent so desires, to meet with it and respond fully to that evidence orally and/or in writing.
- 7.1.3 Within sixty days (60) of determining that an investigation is warranted, the RIIC shall complete its investigation and submit its written report to the Senior Vice-President, Academic. The report shall detail the full allegation(s), the investigative



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steps taken by the RIIC, including the individuals with whom it communicated and what their evidence was, its finding of whether or not scholarly misconduct occurred, and, if so, its extent and seriousness, and any remedial action it is recommending. For example:

- withdrawing all pending relevant publications;
- notifying editors of publications in which the involved research was reported;
- ensuring that the school(s) involved is informed about appropriate practices for promoting the proper conduct of research.

7.1.4 The Senior Vice-President, Academic, shall, upon receipt of the report, forthwith as appropriate:

- a) Advise the Respondent and any person identified to the Respondent that the complaint is dismissed;
- b) Advise the Respondent and any person identified to the Respondent that the complaint is substantiated as misconduct which can appropriately be dealt with under the existing disciplinary powers of the Senior Vice-President, Academic;
- c) Advise the Respondent and any person identified to the Respondent that the complaint is substantiated as a gross misconduct in research and scholarship. This means that the conduct is judged to be deliberate or reckless, going beyond negligence, and of sufficient gravity to justify the initiation of dismissal proceedings. The Senior Vice-President, Academic, will then refer the matter to the SLC President and CEO for further proceedings in accordance with College employment policies for Academic Staff.

7.1.5 Where the complaint is not substantiated, the Senior Vice-President, Academic, in consultation with the Respondent and the RIIC, shall take all reasonable steps to



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repair any damage that the Respondent's reputation for scholarly integrity may have suffered by virtue of the complaint.

7.1.6 Whatever the outcome, the Senior Vice-President, Academic, shall also take all reasonable steps to mitigate the consequences of the process for individuals who have been unintentionally adversely affected by it.

8. Materials from the PIC and the RIIC

8.1 The Chairs of both committees shall keep copies of all material, records and notes of interviews with individuals involved in a secure and confidential manner and hand them over to the Senior Vice-President, Academic, along with their committee reports. The reports and related materials shall be stored for a period of seven years in a secure location at the College.

8.2 No person shall make any use of the reports or any part of the related materials save for the purposes of these procedures or for related purposes respecting terms and conditions of employment.

9. Appeals

9.1 A Respondent whose appointment is covered by the SLC Collective Agreement may appeal in accordance with that Agreement.

9.2 For other Respondents, appeals shall be made to the SLC President and CEO who will form an Appeal Committee (AC) to hear the appeal. The President and CEO's decision on the appeal is final and binding.



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10. Notification of Funding Agencies

10.1 When a Preliminary Inquiry Committee has completed its inquiry and reports to the Senior Vice-President, Academic, that an investigation is warranted, the Senior Vice-President, Academic, shall inform any granting agency or sponsor of the research and scholarship in question of this finding if either:

- i The granting agency or sponsor requests this information; or
- ii When all reporting of such findings are required by the granting agency's or sponsor's policies as they existed at the time of the signing of the grant or sponsorship.

10.2 When the Research Integrity Investigation Committee has completed its investigation and reports its conclusions to the Senior Vice-President, Academic, the Senior Vice-President, Academic, shall inform any granting agency or sponsor, that has already been informed under the clause 10.1 (above), of the conclusion of the investigation.

10.3 Furthermore, where the RIIC decision is that a serious breach or a gross misconduct is substantiated, the Senior Vice-President, Academic, shall within 30 days provide the RIIC report and decision regarding discipline/remedies to the appropriate granting agency or sponsor, and may inform other stakeholders in the interests of protecting the integrity of research and scholarship.

11. Institutional Responsibility

Whenever a RIIC concludes that a serious breach or gross misconduct is substantiated, appropriate arrangements shall be made to ensure that all other research and



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scholarship previously undertaken by the Respondent at this College is evaluated to determine its integrity.

12. Good Faith

In all proceedings leading to and following a final decision, the College will undertake to assure that those making an allegation in good faith and without demonstrably malicious intent are protected from reprisals or harassment. False allegations made purposefully will give lead to discipline for the individual making the allegation by the College.

13. Reporting to the Academic Council

13.1 The Senior Vice-President, Academic, shall provide an annual report summarizing the facts of cases of serious breaches or scholarly misconduct and their disposition to the Academic Council.

13.2 A copy of this report shall also be forwarded to the granting agencies.

14. Time Limits

All time limits in these procedures may be extended for good reason of which a formal record is kept. The Respondent shall be advised of both the extension of time and the reasons therefore.



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SECTION B. INSTITUTIONAL GUIDELINES

1. Supervision of Research Personnel

The Principal Investigator (PI) has ultimate responsibility for a research project, funded or unfunded, and for careful supervision which considers the best interest of the research project, the research team, the institution, the research sponsor, the academic community, and the public. Accordingly, the PI(s) must:

- a. Provide effective and appropriate supervision of all aspects of the project;
- b. Ensure effective communication and continuous supervision of all aspects of the project, and an appropriate ratio of research personnel, especially students, to the Principal Investigator(s);
- c. Review, edit, and approve the design of the research and the processes of acquiring, recording, examining, interpreting, and storing data;
- d. Edit all research reports prior to publication;
- e. Provide each new member of the research team with applicable governmental and institutional requirements for the conduct of studies involving human participants, animals, radioactive or other hazardous substances or recombinant DNA, the College's Policies and Guidelines for the Ethical Conduct of Research, and any other information directly relevant to the research activity;
- f. Clarify the relationship among members of the research team which may include a Memorandum of Understanding outlining roles and responsibilities;
- g. Hold regular collegial discussions among all personnel in a research team in order to contribute to the scholarly efforts of members, monitor progress, and provide informal review.



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2. Data Collection, Transmission, Storage, and Retention

The PI is responsible for the collection, management and retention of research data. The management of accurately recorded and retrievable results is essential to any research project. Accordingly:

- PIs should adopt an orderly system of data organization and should communicate the chosen system to all members of a research team and to the appropriate administrative personnel, where applicable;
- All research data shall be appropriately recorded in a manner that allows verification of its authenticity and accuracy;
- If research data contains sensitive, confidential, or private information, then it must be appropriately safeguarded to ensure its protection;
- If research data contains sensitive, confidential, or private information and it is to be transported on a mobile device (USB key, laptop, external hard drive, cellular phone, recording device, etc.) the data must be encrypted and the mobile device must be password protected;
- If research data contains sensitive, confidential, or private information and it is transmitted digitally, it must be encrypted;
- Research data shall be retained for a period of time that is either determined by the research discipline, research purpose, or kind of data involved, or stipulated by a funding agency, sponsor, regulation, journal, professional standard (e.g., Canada Revenue Agency and the Tri-Agency require a minimum of 7 years; Health Canada requires 25 years for registered clinical trials; most hospitals and some professions require 10 years; while most publications require only 5 years).



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- The PI is responsible for knowing the data retention period requirements for their research project and for ensuring the secure, long term, storage of their research data.

3. Access

The PI will determine (usually in agreement with the research team) who on the research team will have access to the research data. Those identified must be listed on a research project's approved ethics application.

- 3.1 The PI may also share the research data for the sole purpose of aiding the research project with anyone who has signed a Confidentiality Agreement.
- 3.2 The PI may share the research data with another researcher for the purpose of a secondary use of it as long as the P.I. complies with the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans* requirements concerning the secondary use of data.
- 3.3 Where a Data Sharing Agreement is signed by the PI, (e.g., community-based participatory research project with a First-Nation community, sponsored research) ownership and control of the research data may be shared or retained by the original owner or sponsor;
- 3.4 The PI shall permit monitoring and auditing by the College, a sponsor, and inspection by the appropriate regulatory authorities.
- 3.5 Where necessary to ensure needed and appropriate access, for example, to facilitate a response to an allegation of research misconduct, the College has the option to take custody of the data in a manner specified by the Senior Vice-President, Academic.



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4. Data Access Disputes

- 4.1 If a dispute arises concerning a researcher's access to data, an initial effort to resolve the dispute will be made to the Chair of the St. Lawrence College Research Ethics Board.
- 4.2 Any subsequent appeals will be forwarded to the Senior Vice-President, Academic, or their designee.

5. Transfer in the Event a Researcher Leaves St. Lawrence College

- 5.1 When individuals involved in research projects at SLC leave the College, they may take copies of research data for projects on which they have worked. Original data, however, must be retained at SLC by the PI.
- 5.2 If a PI leaves SLC, and a project is to be moved to another institution, ownership of the data may be transferred with the approval of the Senior Vice-President, Academic, and with a written Institutional Authorization Agreement from the PI's new institution that guarantees: 1) its acceptance of custodial responsibilities for the data, and 2) St. Lawrence College's access to the data, should that become necessary.

6. Authorship

The attribution of authorship in all research publications must accurately reflect the intellectual contributions of all members of a research team.



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6.1 Eligibility

- a. The co-authors of a publication are all those persons who have made significant intellectual contributions to the results. An administrative relationship to the investigation does not by itself qualify a person for co-authorship. Authorship decisions should not be affected by whether participants were paid for their contributions, or by their employment status. The author who submits a manuscript or report for publication is responsible for including all appropriate co-authors, for sending each co-author a draft copy of the manuscript for comment, and for obtaining consent on co-authorship, including the order of names.
- b. Purely formal association with a research project, such as the directorship of a laboratory or an administrative position in a School, does not constitute authorship, but may be recognized in an acknowledgement. General supervision of the research group, technical help, data collection, or critical reviews of manuscripts or reports prior to publication are not sufficient for authorship, but may be acknowledged in a separate paragraph. There shall be no honorary co-authorship. Authorship must be based entirely on significant intellectual, professional or immediate supervisory contribution. Other contributions should be indicated in a footnote or in an Acknowledgements section.

6.2 Student Contributors

- a. In student/professor collaborations as co-authors of a joint publication, both should:
 - i. Make a significant scholarly contribution that is creative and intellectual in nature;



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- ii. Be integral to the completion of the paper or report.
- b. A student should be granted due prominence on the list of co-authors for any multiple authored article or report that is based primarily on the student's own work, according to the commonly accepted practice in the field.

6.3 Resolution of Conflict

In the event of a conflict between co-authors on technical content, number of co-authors, or order of names in co-authorship, every attempt should be made to resolve the matter informally. If unavoidable, mediation by the Senior Vice-President, Academic, may be required. In case the conflict cannot be resolved, the conflict must be reported to the Academic Council.

MONITORING

This policy will be reviewed and revised as needed but no less than every 5 years.

POLICY REVISION HISTORY

- Previous version ACR-2007-05-#001, May 08, 2007

ACKNOWLEDGMENT

This policy was developed based on information from the *Tri-Agency Framework: Responsible Conduct of Research*, the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans* and St. Lawrence College's previous policies (using the format of the SLC Meta Policy, 2011) and the University of Ontario Institute of Technology Researcher Guidelines (2007).