

## **Policy on Integrity in Research and Scholarship Algoma University**

### **PREAMBLE**

The implementation of basic ethical principles and responsibilities is essential to the effective functioning of a university.

The document is based on the understanding that scholarly activity includes research, theory development, teaching and learning, and the production, performance, presentation or publication of scholarly papers, works of art, or other forms of expression. It assumes the development and maintenance of a culture of equity in the University, a culture where the standard operating procedures are rooted in principles of fairness and justice. It doesn't replace other means of determining fairness, procedures such as student appeals, employee grievances, or any existing collective agreements. Instead, this Policy complements these and other Algoma University policies and procedures, including those governing the ethics or research with human subjects, animals, biohazard, radioactive substances, occupational health and safety, and student conduct.

The general public has a legitimate interest in the maintenance of standards of scholarly conduct at the University. Therefore, Algoma University is responsible for maintaining such standards in a way that is open to scrutiny. This University is responsible for promoting a clear understanding of the issues involved in maintaining the highest standards in research, teaching, learning and other aspects of scholarship. The University is also responsible for providing an environment that encourages recognition of ethical standards. Algoma University must respond appropriately to allegation of misconduct involving its administrators, personnel or students. Finally, the University is accountable for assessing and reviewing policies and practices to ensure that the highest ethical standards are maintained over time.

### **PRINCIPLES**

The pursuit of excellence in all forms of scholarship, teaching and research occurs in the context of the following principles.

#### **1. Accountability**

Individuals involved in research and scholarship at Algoma University are to familiarize themselves with the principles and responsibilities outlined in the document, and are held accountable for their behaviour in carrying out these activities. The University provides mechanisms to assist and support members of the University Community in their endeavours to exercise a high level of integrity in research and scholarship.

#### **2. Social Responsibility**

Individuals involved in research and scholarship at Algoma University are responsible to the community and the society in which they work and live. They are to consider, as much as possible, the broader effects of their scholarly activities, and take steps to

minimize any negative social and environmental outcomes that may arise from their work.

### **3. Respect for Dignity of Persons**

Individuals involved in research and scholarship at Algoma University are to accord appropriate respect to the fundamental rights, dignity and worth of all people. They are to respect the rights of individuals to privacy, self-determination and autonomy. They are to be sensitive to individual differences including those related to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socio-economic status.

### **MISCONDUCT**

Failure to adhere to the principles of this policy constitutes misconduct, as do other acts described specifically throughout this policy. Misconduct in scholarship and research is contrary to the goals of Algoma University. Whenever a person believes that misconduct has occurred, he or she is expected to report it promptly according to the procedures described in this policy. Algoma University's response to alleged misconduct shall be characterized by impartiality of process and judgment, respect for due process and principles of natural justice, and the protection of both accused and accuser from undue privacy violation and from undeserved harm to reputation. When misconduct is shown to have occurred, however, Algoma University is committed to the imposition of appropriate sanctions, and when possible, to rehabilitation of the offender.

**Misconduct** in this document means, but is not limited to, any or all of the dishonest behaviors identified below.

- a. Falsifying or fabricating data;
- b. Plagiarism (i.e. copying large body of copyrighted material without acknowledging the author and the source);
- c. Willfully misrepresenting and misinterpreting (for any reason) findings resulting from conducting research and scholar activities;
- d. Failure to recognize relevant contributions (contribution of an idea that leads to a concrete improvement of results, time spent in collecting and analyzing data, writing paper on a particular subject, etc.) of others in the authorship of the papers or invention disclosures;
- e. Failure to honor the confidentiality that the researcher promised or was contracted to as a way to gain valuable information from a party internal or external to the institution;
- f. Failure to adhere to terms and conditions of contracts with a third party (in most cases external to the institution) sponsoring research;
- g. Failure to report an involvement in research dealing with human subjects, biohazardous materials or animals; and/or
- h. Failure to disclose conflict of interest.

Misconduct does not include honest errors, differences in opinion or different interpretations of scientific discoveries.

## **STANDARDS**

The primary responsibility for high standards of conduct in research, teaching, learning, publishing and other areas of scholarship rests with the individuals carrying out these activities, including administrators, faculty, students, and support staff. Therefore, Algoma University holds them responsible for upholding the standards listed below.

### **Permission and Acknowledgment when Using Information**

The work of other researchers and scholars, including their expression of ideas, whether obtained formally or informally shall be used only with due acknowledgment, and only with formal permission unless publicly available. Archival material shall be used only in accordance with the rules of the archival source. Also, information obtained as a result of the peer review process must be treated as confidential by the reviewer.

### **Quality Assurance**

Faculty, students and support staff are to exhibit honesty, accuracy and scholarly rigour that meets the standards of the discipline involved in obtaining, recording, and analysing data, and in reporting and publishing results. They are to keep original data accessible for a reasonable period (usually five years) after study completion and publication.

### **Intellectual Property and Authorship**

Administrators, faculty, students and support staff must understand and respect the guidelines for ownership and authorship of intellectual property. Authorship with regard to the publication of all scholarly work (including articles, oral presentations, and completed Bachelor's, Master's or Doctoral theses), is to be attributed to all those and only those, who have made a substantial scholarly contribution to, and share responsibility for, the contents of the publication. Authorship is not attributable to individuals who only provide encouragement, physical facilities, financial support, critiques, or editorial contributions. (See Appendix A).

### **Conflicts of Interest**

Researchers and scholars must reveal to potential or committed sponsors, including this or other universities, journals or funding agencies, any financial or other conflict of interest, that might influence the decision of sponsors about whether the individual should review manuscripts or applications, test products or undertake work available through those sponsors. (See Appendix B).

### **Financial and Research Accountability**

Research funds must be used for the purpose for which they were given, and in accordance with Algoma University policies and guidelines governing the use of and record-keeping for such funds. University and other policies on research involving human subjects, animal care, biohazards, and radioactive substances, etc. must be followed.

### **Protection of Third Parties**

Researchers must ensure that third parties (those who are affected by research but do not fall within the traditional definition of “research subjects”) are protected from undue exposure to physical or psychological risk (including loss of confidentiality or privacy), using the same standards for weighing risks and benefits as are used for human subjects of research. Researchers should identify potential third parties and should describe research procedures which will be implemented to ensure protection of those parties.

### **Power Imbalances**

Faculty, students and support staff must recognize and ensure the protection from coercion of individuals with less power (such as research subjects, third parties, students, junior or untenured faculty, staff and technicians) participating in research, teaching, learning, publication or other scholarly activity.

### **Teaching and Learning**

Recognizing the academic freedom of both teachers and students, we also recognize that whatever is taught or asserted in the teaching and learning environment as an established truth or fact, by either teacher or student, should be derived from scholarly investigation and appropriately analysed empirical information, including that from experimentation, reviews of scholarly literature, interviews, lived experience, or participant observation. In teaching and learning settings, faculty, staff and students have a mutual obligation for respectful recognition of individuals or groups, including those who have been historically marginalized. All those present share responsibility for acting with mutual respect, and for contributing to a climate of inclusion. Persons in authority should redress rather than perpetuate inequities.

## **RATIONALE FOR IMPLEMENTING THESE PRINCIPLES AND STANDARDS**

Algoma University actively encourages the application of these standards to teaching, research and other forms of scholarship, recognising that:

- Individuals must understand clearly what constitutes ethically-based behaviour in a university environment
- Simply displaying ethical guidelines does not mean that the University Community will take them seriously;
- Individuals are not always aware that their behaviour is an infringement of guidelines, or cognisant of the potential ramifications of their actions;
- Individual interests and perspectives may influence how ethical guidelines are interpreted;
- An institutional culture which emphasizes the value of competition may encourage some members of the University Community to place productivity above issues of integrity. A university culture must be founded on ethical principles and responsibilities.

Given these underlying assumptions, Algoma University accepts its responsibility to establish mechanisms to:

1. Inform all individuals associated with research and other forms of scholarly activity about policy, standards and procedures available to address problems of integrity.
2. Establish a process to facilitate the resolution of queries or misunderstandings involving no apparent violation of the Integrity Policy.
3. Establish a process for identifying infractions when they occur.
4. Specify and implement sanctions where appropriate.
5. Ensure protection of students and others from reprisal.
6. Review and when necessary revise these policies and procedures.

### **DISSEMINATION OF THIS POLICY**

Information on this policy and its implementation procedures must be made available to the University Community, and also to those outside the University.

Those who will be most heavily involved in providing information about the Policy, and in implementing it, (Academic Administrators, especially the Dean and the staff in their offices) must understand and be committed to its implementation.

### **Material on Integrity in University Handbooks and Guides**

Appropriate information about the Policy on Integrity in Research and scholarship should be incorporated into the Undergraduate student handbook, the Laurentian University Graduate Studies Handbook, the University Calendar and the Laurentian University School of Graduate Studies Calendar. The Policy will also form part of the Guidelines for the Preparation and administration of Research Grants and Contracts, published by the School of Graduate Studies and Research at Laurentian University.

### **Workshop to Members of the University Community**

The Faculties will develop and deliver workshops about issues and problem-solving involving integrity to new and existing members of the following groups, in conjunction with existing orientation sessions and with classes on research methods:

- Academic and other administrators who will be involved in the process of advising and performing the task related to implementation of the Policy:
- Faculty and support staff
- Undergraduate students
- Graduate students

### **Students Associations and Faculty, Staff and other Employee Associations**

The Student and Employee Associations, and Unions play a vital role in the dissemination of information about the Policy. They will in some cases serve as the first source of advice for those who are considering approaching a Dean or Academic Head. Should any staff member (other than the Dean) on campus receive a complaint, they are required to forward it to the Dean. As such, knowledge and commitment to the Policy on the part of associations and their

representatives are very important. Information from these sources will complement the printed text available in their handbooks and elsewhere.

### **Dissemination Outside the University Community**

Persons outside the University Community also need to have access to information about this Policy. They may have questions about the Policy, disputes with the University or persons from the University Community, or allegations about the conduct of persons from the University Community. For those who involved as subjects of research, the consent form they sign should inform them about how to contact the Office of the Dean. Personnel at the University Switchboard should also be informed about how to direct callers to sources of information of the Policy.

### **Educational Material Development**

Written materials, slides or videos should be developed or collected, based on sources from ethics committees of various disciplines such as the Educational Psychological Association, Canadian Research Institute for the Advancement of Women, or the Canadian Nurses' Association.

### **Conferences on Integrity Issues**

Conferences in which papers and case studies about integrity issues are presented, from the perspective of community groups, agencies, business, industry, educational institutions, health institutions and the university should be promoted.

### **Scholarly Publication Related to Integrity Issues**

Publication of papers in professional and scholarly journals about integrity should also be encouraged.

## **PROCEDURES FOR RESPONDING TO INQUIRIES RELATED TO INTEGRITY**

The University will attempt to protect the reputation of all those involved, as well as the reputation of the University at all stages of any inquiry related to integrity. When an inquiry is finished, if allegations of misconduct have been substantiated, appropriate officials or research funding sources will be notified. At that time, it may also be appropriate to publicize the findings.

### **Introduction**

These procedures have been designed to encourage informal discussions and interventions in order to resolve problems efficiently, without confrontation or unwarranted penalty, and to maintain privacy of information as much as possible.

Algoma University will promote compliance with this Policy, and will ensure that impartial and informal advice on this Policy can be accessed easily. Algoma University will also ensure that

violations of the Policy will be dealt with fairly and expeditiously. Therefore, University officials will act appropriately whenever a violation of the Policy occurs.

### **1) Information/Advice**

Anyone who wishes to obtain information or advice on the interpretation or application of the Policy should direct their inquiries to the Dean.

Requests of this sort may arise from individuals within the University Community, individuals outside the University community, funding agencies, etc. They may also come from the University through its administrators.

It is contemplated that from time to time individuals will require advice for their personal information, will seek dispute settlement between themselves and another member of the University community, or will have concerns with respect to the conduct of another member of the University community as it relates to this Policy. It is the responsibility of the Dean at this point to determine the basis of the query and to direct the individual accordingly.

- When the individual requests information about this Policy or its implementation, the Dean should provide assistance to the individual directly or should refer the individual to another resource within the University.
- When the individual identifies a conflict or misunderstanding between themselves and another member of the University community, (e.g. another faculty member, administrator, student or researcher), and there is no serious infraction of the Policy, the Dean will direct the individual to an appropriate faculty member who is prepared to act as a mediator between the individuals involved.
- When, in the opinion of the Dean the matter could be resolved by communicating with the person who has allegedly violated the Policy, the Dean shall do so as quickly and as privately as possible. The individual making an inquiry may request anonymity and the Dean shall make every reasonable effort to provide privacy. The Dean will inform the individual making the inquiry that anonymity will be respected as much as possible.

Using an informal approach, the Dean shall bring the concern raised to the attention of the person who has allegedly contravened the Policy, clarify the nature of the issue and provide advice on how the Policy would be interpreted and applied. In many cases, it is hoped that such a meeting between the Dean and the individual will result in satisfactory resolution. The outcome of this informal meeting and the satisfactory resolution of the issue will be communicated to the individual who made the original inquiry.

**False Allegations.** Mischievous or malicious allegations, however, are themselves a form of misconduct, are offenses under this policy, and will be subject to the same procedures and sanctions as other forms of misconduct. Anyone who believes that misconduct under this policy has been committed may lodge a complaint by submitting a written account of the alleged offense to the Dean. The complaint must identify the accused and must contain sufficient detail about the nature of the alleged misconduct, as well as the location and time of its occurrence, as to permit an evaluation of whether the alleged conduct plausibly constitutes an offense under this policy and to permit further information-gathering about the alleged conduct.

## 2) Formal Procedures

**Notice of Formal Complaints.** For formal complaints, complainants must identify themselves, sign the complaint, and include a means by which they can be contacted and by which materials can be delivered to them. Anonymous allegations will be considered and may become complaints under this policy, but only when justified by special circumstances and when sufficient information is provided to permit the collection of independent corroborative evidence. In particular, anonymous allegations will be considered when complainant identification would place the complainant in plausible jeopardy of retaliation or other harm that could not be averted through means other than anonymity. Complaints will be accepted with the identity of the complainant kept confidential under special circumstances, as when there is a plausible risk of harm that would accrue from the complainant's identity being public and such risk cannot be managed effectively through other means. Due process requirements, however, may require that a complainant whose identity initially is held in confidence eventually identify himself or herself if the complainant's personal knowledge or evidence constitutes the substance of the complaint.

Occasionally, an alleged violation of the Policy will be serious or complex enough that a formal review is warranted. For example, some allegations may require a complex review of financial records or a detailed review of research methodology or result. In such case, the Dean/Director shall notify the individual alleged to have breached the Policy that an allegation exists, and shall designate one or more persons to review the situation. The reviewer(s) may be internal or external to the University, as appropriate to the case. The reviewer(s) shall be an independent fact-finder(s) who have expert knowledge, and who can approach the question without preconceived notions of the outcome. The reviewer(s) shall not act as an advocate or representative of any party.

### Investigative Committee

- (a) There shall be an Investigative Committee of three (3) persons, consisting of one (1) person designated by the AUFA, one (1) person designated by the AUSA and one (1) person designated by the Board of Governors. Members will be appointed as individuals on the basis of their individual expertise, and will not represent their organizations or associations directly. These persons shall elect a chairperson, like themselves a member of the Algoma University community, and the three (3) shall constitute the Investigative Committee and shall serve for a three-year period. Should a member of the Committee resign for reason, the party designating that person shall designate a replacement to serve for the remainder of the term. Should any member of the Committee have been involved in an effort to resolve the complaint at an earlier step or have any real or apparent conflict of interest, or should the complainant be a member of the Committee, the party designating that person shall designate a replacement to serve for the remainder of the complaint. Should the chairperson resign, the two (2) members nominated by the parties shall choose a replacement. Should a member lack the experience and expertise to evaluate a complaint, the party designating that person shall designate a replacement to serve for the remainder of the complaint.



- (b) The chairperson selected by the Committee shall preside at all of its meetings, but shall not participate in discussion during its formal hearings. A quorum shall be the entire membership of the Committee. It is expected that the Committee will normally reach decisions by consensus; however, if a vote is required, decisions shall be made by simple majority. The chairman shall vote only in the case of a tie.
- (c) The Committee may hear and receive all relevant evidence and make decisions on matters of substance and procedure. The committee may determine that additional expertise external to the University may be required on the review of material; hence, they may call upon a member external to the University to provide appropriate expertise to the specifics of the matter in question. The role of the external member shall be consultative rather than voting.
- (d) To lodge a formal complaint, the Dean shall notify the Committee in writing setting forth the complaint and, if a violation of the Policy is alleged, setting forth the principles alleged to have been violated; the Dean shall also outline the attempts that have been made to settle the dispute. The Committee shall hear the case within seven (7) calendar days of notification of the complaint, giving fair hearing to each party in the dispute. The Committee shall notify in writing the parties, the AUFA and the President of its recommendations within five (5) calendar days of the conclusion of the hearing; but, in any event, shall notify the parties of its recommendations within thirty (30) calendar days of the date of the lodging of the formal complaint unless both parties agree to an extension of these time limits.

During the first phase of the Investigation, the investigator(s) shall:

- a. Issue a Notice of Investigation to accused and complainant within two (2) working days of Investigation authorization. The Notice shall include a reminder about maintaining materials of potential relevance to the Complaint, the proper cataloguing and identification of materials and documents, confidentiality of the proceedings and participants, privacy and reputation protections, and the proscription against improper acts of retaliation.
- b. Invite the Respondent to submit a written reply to the Complaint and to offer suggestions regarding sources of exculpatory information (eg, persons to interview, documentary evidence to examine), such written reply to be received by the investigator within twenty (20) working days of receipt of the Notice.
- c. Offer to meet with the Respondent within twenty (20) working days of receipt of the Notice.
- d. Invite the Complainant to submit written suggestions regarding sources of misconduct evidence (eg, persons to interview, documentary evidence to examine), such written submission to be received by the investigator within twenty (20) working days of receipt of the Notice.
- e. Offer to meet with the Complainant within twenty (20) working days of receipt of the Notice.

f. Where necessary arrange for the security and maintenance of relevant information not already identified and secured by the adjudicator.

g. Examine all sources of evidence that he/she deems relevant to the Complaint, such examination to be completed within twenty (20) working days of the final meeting with complainant and/or accused.

During the second phase of the Investigation, the investigator(s) shall:

a. Offer in writing to review the evidence with the accused within ten (10) working days.

b. Offer in writing to review the evidence with the complainant within ten (10) working days.

c. Write a report summarizing the Complaint, the investigation process followed, sources of evidence consulted, meetings held, and a conclusion as to whether or not the accused committed the act(s) of alleged misconduct. Where the report is written by a person other than the adjudicator, the report will be submitted to the adjudicator immediately upon its completion.

d. Upon completion of the report, and receipt by the adjudicator when he or she is not the report's author, the adjudicator shall distribute the report to the Respondent and the Complainant. Should misconduct be concluded, the Respondent will be given an opportunity for rebuttal.

Rebuttal Opportunity. A respondent whom the committee has concluded is responsible for misconduct may appeal on grounds of incorrect evaluation of substantive material considered by the Investigative Committee. The person who chooses to appeal shall, within 14 calendar days of the receipt of the official notice of the decision, file an appeal with the Office of the Dean.

An Appeals Tribunal shall be a tribunal consisting of one person chosen by the appellant, one person chosen by the University, and one person chosen by the AUFA. No person involved in the Investigative Committee in any way shall serve on the Appeals Tribunal. The Tribunal shall be constituted and shall meet within fourteen (14) calendar days of the filing of an appeal. It must report the decision within an additional 28 days. The Appeals Tribunal may sustain an appeal on the grounds of incorrect evaluation of substantive material considered by the Investigative Committee. The Appeals Tribunal may decide to:

- (a) Uphold the decision of the Investigative Committee on the grounds that any identifiable incorrect evaluation of substantive material is not of a gravity to materially affect the prior decision.
- (b) Overturn the decision of the Investigative Committee on the grounds that an identifiable incorrect evaluation of substantive material is of a gravity to materially affect the prior decision.

e. After receiving any reports, the adjudicator shall offer to meet with the accused person to discuss the report. Both the adjudicator and the accused may have an adviser present at the

meeting. When the adjudicator and/or accused choose(s) to have an adviser present at the meeting, notice will be given to the other party as to who the adviser will be at least one working day prior to the meeting.

f. The adjudicator shall then either dismiss the Complaint or initiate disciplinary procedures. The adjudicator's/committee's decision as to whether or not misconduct occurred is binding upon the institution.

g. In the case of dismissed Complaints, the adjudicator shall in writing so advise the accused person and the complainant. The adjudicator likewise shall so inform the Vice-President (Research), and shall provide the Vice-President (Research) with a copy of the Investigation

f the Complaint is dismissed or overturned at any time following commencement of the investigation phase, all copies of letters and other documents and items shall be delivered within five (5) working days to the adjudicator. The adjudicator shall maintain one copy of all materials in a secure place for one year, and will cause the others to be destroyed immediately. The secured copy of the materials shall be consulted only if a Complaint of mischievous or malicious allegation is lodged regarding the original Complaint. After one year, the archival copy of materials will be destroyed immediately.

Written justification of the Tribunal's decision shall be forwarded to the appellant and the Dean. The decision of the Appeals Tribunal shall be final and binding and shall be implemented by the Dean.

In all cases, the University shall take reasonable steps to protect persons providing information about violations of the Policy against acts of retribution. This is particularly important if a power differential exists between the person providing information and the person who has been alleged to have violated the Policy. The University shall take responsibility to provide legal defense in the event that anyone who has provided this information without malice or bad faith, becomes the object of litigation as a result.

**Maintenance of Documentation.** Documentation resulting from each level in the Formal Process (including witness statements, investigative notes, etc.) will be forwarded to, and maintained by, the Office of the Dean. Investigative records are not to be maintained or considered as part of a student or faculty record. Documentation regarding corrective action is considered part of the documentation.

**Confidentiality of Complaint/Persons.** Every effort will be made by the university to protect the confidentiality of the parties during the processing of complaints under this procedure.

**Confidentiality of Proceedings.** Records will be maintained in a confidential manner to the extent permitted by law and insofar as they do not interfere with the University's legal obligation to investigate and resolve issues of the matter of complaint.

**Records of Interviews.** Records of interviews shall be maintained; as such, notes will be taken during interviews to reflect the testimony of complaint, respondent and any witnesses. The

offer of an interview will be documented, and should the offer be declined, a note will be made of this fact.

### **SANCTIONS AND ACCOUNTABILITY**

The Dean is responsible for reporting the appropriate sanctions to the President, based on the findings of the Investigative Committee. The Dean retain final authority concerning sanctions and will review any sanction involving suspension, dismissal, or termination before it is implemented.

Listed below are some possible sanctions of varying degrees of severity. These or other sanctions should be chosen on the principle of appropriateness to the infraction(s);

1. monitoring of an individual's research activities by the Dean for a specified time; and/or required completion of educational programs related to these guidelines;
2. monitoring of an individual's teaching activities by the Dean for a specified time; and/or required completion of educational programs related to these guidelines;
3. an appropriate financial penalty for a specific purpose, e.g. to reimburse the University for the costs of an audit or for improper expenses, in compliance with Collective Agreements;
4. written record of the proceedings and findings in the personnel file of an employee or the student file of a student either permanently or for a limited period of time;
5. temporary suspension of responsibilities in the case of a university employee or of enrollment in the case of a student;
6. public disclosure of the infraction;
7. dismissal in the case of a university employee or expulsion in the case of as student;

If the University is found to be responsible for the infraction, the same type of sanctions may be applied to the administrative officers responsible for the said infraction.

The University affirms the guidelines of the Granting Councils on Integrity, and will inform them and other appropriate organizations when a determination of misconduct has been made. If the respondent is funded directly or indirectly by one of the Tri-Council Agencies (CIHR, NSERC or SSHRC), a full copy of the report will be sent to the Agency within 30 days of its issuance, regardless of whether or not research misconduct is found to have occurred.

To protect agency funding, the Dean may authorize the withholding of research funds until such time as the Tri-Council Agency considers imposing its own sanction(s) in relation to grants made to the individual(s) implicated, in accordance with Council policies. These sanctions may include, but are not limited to:

- refusing to consider future applications for a defined time period;
- withdrawing remaining installments of the grant or award;
- seeking a refund of all or part of the funds already paid as a grant or award for the research or scholarship involved.

As with other types of cases, the procedure on reporting in specific cases where an investigation is requested by SSHRC or the other Tri-Council Agencies, is the same; that is, a full copy of the report shall be sent to the Agency within 30 days of the conclusion of the investigation, whether misconduct is deemed to have occurred or not.

The University shall take all reasonable steps to repair any damage that may have resulted from misconduct on the part of its employees, students or administrators, and to repair any damage that the person alleged to have contravened the Policy’s reputation for scholarly integrity may have suffered by virtue of an unfounded allegation. The University will also undertake disciplinary action against persons proven to have made allegations of misconduct in malice or bad faith.

**REVIEW AND REVISION**

Experience with procedures and policies may indicate the need for revision and refinement. Therefore, administrative procedures should be established to facilitate review and revision.

Annually, the Dean, or another authority appointed by the Senate to oversee Integrity in Research and Scholarship will report to Senate on the following:

1. number of queries/disputes/allegations handled at both informal and formal levels;
2. the nature and number of cases in which there has been a finding of misconduct;
3. types of sanctions employed
4. the educational activities carried out to promote integrity in research and scholarship;
5. number of attendees at educational activities;
6. nature and number of requests for information regarding integrity issues from within and outside the University;
7. whether assessors or negotiators are external or internal to the University.

This information will help the University to evaluate and revise the Policy and enhance integrity in research and scholarship activities.

**TABLE 1: Procedures for responding to inquiries related to integrity**

	<b>Informal Procedures</b>	
Information or advice	Dean	<ul style="list-style-type: none"> <li>• Provides information requested, or</li> <li>• Directs individuals to appropriate faculty members who will serve as mediator, or</li> <li>• Communicates with individual who has allegedly violated policy, clarifies issue and provides advice on interpretation of policy</li> </ul>
	<b>Formal Procedures</b>	
Initial step	Dean	<ul style="list-style-type: none"> <li>• Notifies person that allegation exists</li> <li>• Designates independent reviewer (individual or panel)</li> </ul>

Review (Normally within six weeks)	Reviewer or Review Panel	<ul style="list-style-type: none"> <li>• Delivers to person written allegations</li> <li>• Meets with person to identify matters requiring response.*</li> <li>• Meets with others and reviews documents or materials as required</li> <li>• Submits report of finding and recommendation for/against further action to Dean</li> </ul>
Report and action	Dean	<ul style="list-style-type: none"> <li>• Summarizes report to protect privacy of individuals.</li> <li>• Delivers summary to subject of review</li> <li>• Delivers summary to person initiating inquiry</li> <li>• If necessary: Takes remedial/disciplinary action appropriate and authorized under collective agreement etc; If suspension or discharge is contemplated, convenes hearing at which parties are the University and the person alleged to have violated policy</li> </ul>
	<b>Suspension/Discharge Procedure</b>	
External Review	Dean	Chooses person outside University community to hear allegations ( in consultation with bargaining units, student associations, employee associations as appropriate).
External Review Process	Person chosen to hear allegations	<ul style="list-style-type: none"> <li>• Convenes hearing at which allegations heard (The parties are University and person alleged to have violated policy).</li> <li>• Makes final decision as to culpability</li> <li>• Reports on decision to Dean</li> </ul>
Final Decision	Dean	Final decision on sanctions

*\* at all meetings with the person alleged to have violated the policy, the person shall have the option to be accompanied by advisors, such as peers, student council or union representatives or even legal counsel.*

## **Appendix A**

### **Guidelines for ownership and authorship of intellectual property**

#### **1. Definition**

Intellectual Property is the expression of ideas and can exist in a multitude of forms, including poems, inventions, computer programs, books, articles, essays, reports, plays, music scores, videos, etc.

#### **2. Ownership**

Ownership of intellectual property is vested in the author/creator, unless that person has been specifically employed to create a work and ownership as defined by the terms of a contract. Ownership may be formalized through copyrighting, patenting or registry. Terms of publication may alter ownership.

#### **3. Shared Benefits**

Where institutional support (financial or other) has directly aided in the creation of intellectual property, material benefits will be shared between the creator and the institution. Although they may have received scholarships or other awards relating to their studies, students are nevertheless assumed to be the sole creators of the theses and dissertations which they have produced.

#### **4. Authorship—acknowledgement of contributions**

In accordance with the Intellectual Property and Authorship standard on page 3, faculty, students, staff, assistants, technicians, and administrators must acknowledge legitimate contributions to the creation of intellectual property. Technical support should be acknowledged as a courtesy.

#### **5. Ownership of Intellectual property in team or collaborative work**

When intellectual property is created collaboratively, difficulties may arise as to ownership. Attempts should be made early in the collaboration process to establish criteria for acknowledgment of contributions (issues of first author, order of names and type of acknowledgment).

#### **6. Ownership of data in team or collaborative work**

Just as authorship needs to be clarified in team or collaborative work, so too does ownership of, and access to, data. It is recommended that teams attempt to establish at the outset rules and procedures for the use of data, particularly, in the case where a member who has contributed has left the team or the University, or joins a project already in progress.

#### **7. Resolution of misunderstandings and disputes**

To resolve disputes regarding intellectual property, an informal process will be attempted via the offices of the appropriate Dean or Director of the Library.



## **Appendix B**

### **Guidelines on Conflict of Interest**

A potential conflict of interest situation arises when an employee or student of Algoma University is in a position to use research, knowledge, authority or influence to which they have access as a function of their relationship with the university, for personal gain or benefit (financial or otherwise). It is also a conflict of interest when a family member of an employee or student of the university is in a position to obtain personal gain or benefits.

The credibility of research and scholarship can be undermined by even the appearance of conflict of interest. Algoma University requires that employees and students acknowledge and disclose potential or real conflicts of interest in which they find themselves.

Research granting councils, publishers and other interested parties must also be informed by employees or students when a conflict of interest might affect or might be perceived to affect the impartiality of a reviewing process.

### **Procedures**

Researchers must reveal potential or real conflicts of interest to their immediate supervisors and also to co-researchers and to sponsors, as soon as they become aware of these conflicts, and discuss with these people ways in which the conflicts may be managed. Supervisors must consider whether a conflict of interest can be managed or whether it must be disallowed. They must also follow up on their assessment and periodically update their knowledge of the conflict situation.

### **Examples of conflict situations**

#### **Favouring of outside interests for personal gain:**

- Entering into research contracts with companies employing a faculty member or a member of that faculty member's immediate family
- Directing research toward developments of potential benefit to private firms in which the researcher has an interest
- Influencing the purchase of equipment or materials from a company in which the person has a personal interest

#### **Inappropriate use of University personnel, resources, assets, or good name:**

- Faculty/staff requiring students supervised by them to undertake work of personal benefit to them or a company in which they have an interest
- Unauthorized and unreimbursed use of University property or resources for the benefit of themselves or a company in which they have an interest
- Participating in the review or hiring process when the university employee has a marital, familial or intimate relationship with the person being hired

- Utilizing the name of the University when presenting ideas, implying that the ideas represent the University's position, or identifying publicly with the University when carrying out private, non-University business

**Inappropriate use of Information:**

- Use of privileged information acquired as a result of University-supported activities for private gain (for instance, in obtaining a contract for a company in which one has a financial interest)
- Unreasonable delay of publication of research results or premature announcement of research results for personal gain

**Other Potential Conflicts**

- Conflict between the goals of research funded by two different sources
- Conflict between Codes of Ethics for Research and those for practice within a particular profession

Policy approved by AU Senate—January 9<sup>th</sup>, 2009

