1. Purpose

George Brown College (referred to herein as “GBC” or the “College”) aspires to attain the highest standards of integrity in scholarly research for its faculty, staff and students. While GBC begins from the premise that all members of the College community are committed both individually and institutionally to integrity in scholarly activity, this policy has been developed to address any concerns about responsibility and accountability in research and scholarship. In addition to adherence to College policies, all research conducted by members of the College community must follow the responsibilities and corresponding policies for researchers, Institutions, and the Agencies contained in the Tri-Agency Framework: Responsible Conduct of Research. The Framework officially launched on Dec 5, 2011, is an umbrella document that describes Tri-Agency policies and requirements related to applying for and managing Agency funds, performing research and disseminating results. It also outlines the process that institutions and Agencies follow in the event of an allegation of a breach of Agency policy.

2. Scope

2.1. This policy applies to all full-time and part-time faculty of the College and any person who teaches, conducts research, or works at or under the auspices of the College. Students participating in scholarly research at the College will also be subject to this policy. It applies equally to all research projects, led either by the College or by other institutions, in which GBC personnel or students are participants.

2.2. At this time, GBC does not plan on engaging in research that would involve biohazardous materials. The College will continue to comply with the Health Canada Laboratory Biosafety Guidelines, and notify all funding agencies if the College plans to engage in research involving biohazardous materials.

2.3. At this time, GBC does not plan on engaging in research or training involving animals. The College will continue to comply with the Canadian Council on Animal Care Guidelines, and will notify all funding agencies if the College plans to engage in research involving animals.

2.4. The college endorses and takes as its guide, the Tri-Agency Framework: Responsible Conduct of Research. If there are any issues or discrepancies regarding the College policy, the Framework shall be referred to. The procedures in this policy may be amended from time to time to accommodate future approved amendments to the Framework or as otherwise deemed appropriate.

3. Acknowledgement

3.1. This policy is based upon the Scholarly Integrity Policies of the University of British Columbia, the University of Calgary, the University of Ontario Institute of Technology, Centennial College and Fanshawe College. The definitions in Section 4 are based on those in the Tri-Agency Framework, 2011.
4. Definitions

**Allegation:** Information that indicates misconduct in research and scholarship has occurred or an allegation of such misconduct.

**AVP:** The Assistant Vice President of Applied and Institutional Research.

**Conflict of Interest:** Occurs when a person’s judgment may be influenced, or appear to be influenced, by private or personal interests.

**Destruction of research record:** 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 law as regulations and professional or disciplinary standards.

**Fabrication:** Making up data, source material, methodologies or findings including graphs and images.

**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.

**Gross misconduct:** ‘Misconduct’ judged to be deliberate or reckless, going beyond negligence, and of sufficient gravity to justify initiation of dismissal proceedings.

**Inadequate acknowledgement:** Failure to appropriately recognize contributions of others in a manner consistent with their respective contributions and authorship policies of relevant publications.

**Initiator:** A person who provides information to the College that indicates that misconduct in research and scholarship may have occurred or who makes an allegation of such misconduct to the College.

**Invalid authorship:** Inaccurate attribution of authorship, including attribution of authorship to persons other than those who have contributed sufficiently to take responsibility for the intellectual content, or agreeing to be listed as author to a publication for which one made little or no material contribution.

**Investigative Committee:** Has the meaning ascribed thereto in section 13 of this policy.

**Misconduct in Scholarly Research:** The intentional violation of professional standards in the performance of research and scholarly activities: These include, but are not limited to:

- a) Fabrication or falsification of research data;
- b) Plagiarism, theft of ideas or intellectual property, or appropriation of another’s work;
- c) Willfully misrepresenting and misinterpreting (for any reason) of findings resulting from conducting research and scholarly activities;

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d) Failure to acknowledge or recognize the contribution of others, including co-researchers, students, and research assistants;
e) Attribution of authorship to persons other than those who have participated sufficiently in the work to take public responsibility for its intellectual content;
f) Use of the unpublished works of others without permission;
g) Use of material in violation of the Copyright Act;
h) Abuse of supervisory power affecting collaborators, assistants, students and others associated with the research;
i) Financial misconduct, including the failure to account for or misapplication or misuse of funds acquired for support of research. Failure to comply with the terms of conditions of grants and contracts;
j) Failure to honour 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 College;
k) Failure to adhere to terms and conditions of contracts with a third party (in most cases external to the College) that is sponsoring research;
l) Material failure to comply with relevant Federal or Provincial statutes or regulations or other agency and College policies for the protection of researchers, human subjects, or the health and safety of the public, or for the welfare of laboratory animals.
m) Failure to comply with Health Canada Laboratory Biosafety Guidelines.
n) Failure to reveal any material conflict of interest, as defined below, to sponsors or to those who commission work.
o) Deliberate destruction of one’s own research data in order to avoid the detection of wrongdoing, or tampering with or destroying the research of another person, either for personal gain or out of malicious intent.

*Misconduct shall not include*: Situations of honest error despite due diligence, conflicting data or valid differences in experimental design or interpretation.

*Mismanagement of Conflict of Interest*: Failure to appropriately manage any real, potential or perceived conflict of interest, in accordance with the College’s policy on conflict of interest in research.

*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.

*Redundant publications*: The re-publication of one’s own previously published work or part thereof, or data, in the same or another language, without adequate acknowledgment of the source, or justification.

*Research and scholarly activities*: Any internally or externally funded research or scholarly activities which the College and the academic community in general, consider to be research or scholarly activities: These include:

a) Finding solutions to practical problems through the application of knowledge
b) Experimental discovery

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c) Activities leading to the publication of books, monographs, and contributions to edited books.
d) Consulting and contracting work under the auspices of the College, and other professional activities involving research.

Respondent: A person of whom the College has received information relating to possible misconduct in research and scholarship.

SRCR: The Secretariat on Responsible Conduct of Research. The SRCR provides substantive and administrative support for the Panel on Research Ethics (PRE), the Panel on Responsible Conduct of Research (PRCR), and for the Tri-Agencies with respect to the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, 2nd edition (TCPS 2), and the Tri-Agency Framework: Responsible Conduct of Research (the Framework).

Tri-Agencies: The three federal research granting Agencies – the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council (NSERC), and the Social Sciences and Humanities Research Council (SSHRC).

5. Conflict of Interest

5.1. All persons covered under the scope of this policy, or who become involved in any way in the investigation of an Allegation, shall immediately disclose any real or potential conflict of interest.

6. Responsibility of Researchers

6.1. Individuals are personally responsible for the intellectual and ethical quality of their work and must ensure that their scholarly activity meets College standards. Appropriate behaviour for scholarly research includes ensuring the honesty of researchers, respect for others, scholarly competence, and stewardship of resources.

6.2. All faculty researchers, students, research assistants and staff have an obligation to report, to the AVP, any circumstances which they believe involve a breach of the Research Integrity Policy of George Brown College.

6.3. Members of the College community involved in scholarly research must not commit scholarly misconduct. Upon and Allegation of scholarly misconduct being made, individuals shall comply with all procedures as laid out in this policy.

6.4. The principal researcher has ultimate responsibility for a research project, funded or unfunded, and for careful supervision of all aspects of the project. The principal investigator is responsible for:

6.4.1. Providing their collaborators, students, staff and assistants with all reasonable information necessary to prevent misconduct as defined in this policy.

6.4.2. Monitoring the work of students, staff and research assistants and to oversee the designing of research methodology and the processes of acquiring, recording, examining, interpreting and storing data. Simply editing the results of a research project does not constitute supervision.
6.4.3. Verifying the authenticity of all data or other factual information generated in the research.

6.4.4. Ensuring that there is no misuse of research funds and that project expenditures are in compliance with the terms, conditions and policies of the Granting Agency(s) and of the College.

6.4.5. If the principal researcher has complied with the above requirements, they shall not be held accountable for the misconduct of any students, staff or research assistants who participate in the study.

7. Responsibilities of the College

7.1. The College, through the Office of Applied Research, will promote the understanding of research ethics and integrity issues, the distribution of research policies and the organization of seminars and workshops for members of the College community.

7.2. The College may make information about its research policies available in a variety of ways, including by posting such policies on its website and making such policies available through the Office of Applied Research.

7.3. The College will investigate Allegations of scholarly misconduct in a timely, impartial and accountable manner and take appropriate action, including any necessary steps to preserve evidence, when it becomes aware of Allegations of scholarly misconduct.

8. Data Collection and Retention Standards

8.1. All primary data should be recorded promptly in clear, adequate, original and permanent form. Primary data should normally remain in the relevant department at all times and should be preserved as long as there is a reasonable need to refer to them. The duration of storage shall be for at least five years. If during this period, the principal investigator leaves the College, the College must maintain these files for the remainder of the five-year period.

8.2. Entitlement to ownership, copyright, reproduction, publication and moral rights of primary data, software and other research results and products will vary according to the circumstances under which research is conducted, and is subject to the College’s Intellectual Property Policy. Ownership should be clarified among collaborators, supervisors, students, sponsors and the College before the research begins.

8.3. The principal investigator and all co-investigators must have free access to all original data and products of the research at all times, subject to any limitations imposed by the terms of grants, contracts or other arrangements for the conduct of research. With the knowledge of the principal investigator, any member of the research team may make copies of the primary data for her/his own use.
9. Authorship

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

9.2. All authors listed in a publication should have been involved in the research. Each is expected to have made a significant intellectual or practical contribution, understand the significance of the conclusions, and be able to share responsibility for the content and reliability of the reported data. The concept of ‘honorary authorship’ is unacceptable. Funding contributions do not constitute authorship, nor does a solely administrative relationship to the investigation.

10. Information/Allegations

10.1. Allegations of scholarly misconduct may come from various sources inside or outside the College. For example, the Allegation may come from a member of faculty or staff, a University administrator, a granting source, a student, a member of the general public, or a media report. Anonymous Allegations will not normally be considered; however, if compelling evidence is received anonymously by the Director or AVP, the investigation process may be initiated.

10.2. All Allegations shall be forwarded to the AVP.

10.3. When the Respondent is the AVP, all Allegations shall be forwarded to the President.

11. Responsibilities of the AVP

11.1. The AVP may delegate any function specified in these procedures but is ultimately responsible for ensuring that the procedures are complied with, and that all Allegations of scholarly misconduct are properly investigated, documented and disposed of.

11.2. The AVP and the President both have the authority to:

11.2.1. Close down facilities used for research

11.2.2. Protect the administration of the College and outside funds involved in the research

11.2.3. Obtain and retain relevant documentation related to an investigation

11.2.4. Request that members of the College community appear before a committee of inquiry or investigation and answer its questions or supply materials to it.

11.3. The AVP shall take such steps as may be reasonable to protect Initiators, including students, staff and research assistants under the supervision of faculty members whose conduct is the subject of an Allegation, against retribution or coercion.
12. Response to Allegations

12.1. Upon receipt of an Allegation, the AVP shall determine if it is possible to formulate a complaint in writing. Prior to formulating a written complaint, all information and allegations shall be kept confidential by the AVP.

12.2. Upon receipt and review of an Allegation, the AVP may do any or all of the following:
   12.2.1. Dismiss the Allegation;
   12.2.2. Inform the Respondent in writing of the Allegation and appoint an Investigative Committee, if in the judgment of the AVP the Allegation has sufficient substance to warrant an investigation; or
   12.2.3. Take such other action as the AVP deems appropriate.

12.3. Prior to making a decision pursuant to Section 12.1, the AVP may do any or all of the following:
   12.3.1. Request additional information regarding the Allegation;
   12.3.2. Inquire into the Allegation further;
   12.3.3. Request that the relevant unit of the College review the matter, or some aspect of the matter, and report to the AVP; and
   12.3.4. Appoint an individual(s) to review the matter, or some aspect of the matter, and report to the AVP.

12.4. A written complaint may be formulated by any person who has reviewed the relevant documentation, including the AVP. If for any reason a complaint in writing cannot be formulated, no further steps shall be taken against the Respondent.

12.5. The written complaint must contain sufficient details to enable the Respondent to understand the matter that is to be investigated.

12.6. The written complaint will contain the name of the Initiator except where the AVP, in his or her sole discretion, decides that the identity of the Initiator will be kept confidential. In deciding whether or not the identity of the Initiator will be kept confidential, the AVP shall consider factors which include but are not limited to:
   12.6.1. an express request by the Initiator to keep his or her identity confidential;
   12.6.2. the risk of harm or injury to the Initiator, members of the College community or any other person or persons if the identity of the Initiator is not kept confidential;
   12.6.3. the College’s responsibility to provide a safe environment conducive to the carrying out of research and scholarly activities;
   12.6.4. the risk to the College of incurring civil or criminal liability, or having sanctions imposed on it, or damaging its goodwill or its ability to attract and maintain funding for research and scholarly activities if it does not keep the identity of the Initiator confidential; and
   12.6.5. the nature of the relationship between the Initiator and the Respondent, including any actual or perceived authority of the Respondent in regard to the academic standing or promotion of the Initiator.

12.6.6. If, in the opinion of the AVP, a satisfactory resolution can be accomplished, the AVP may attempt such a resolution.
12.7. Upon reaching a decision, the AVP shall write a letter to the SRCR confirming whether or not the College is proceeding with an investigation.

13. Investigative Committee

13.1. If the AVP determines that an investigation is warranted, he or she will appoint an ad hoc Investigative Committee no later than fifteen days after an Allegation is made in writing. The Investigative Committee shall be comprised of three individuals, at least one of whom shall be a member of the faculty of the College, with expertise in conducting research and scholarly activities. One of the three members shall be recruited for the Investigative Committee from another Ontario college or university. This external member will have expertise in conducting research and scholarly activities, but no current affiliations with the College. The Investigative Committee shall elect one of its members as its Chair.

13.2. It is the responsibility of each appointed member of the Investigative Committee to reveal any perceived conflict of interest he or she may have with the research project or the investigation.

13.3. Any objection to the composition of the Investigative Committee shall be made to the AVP within seven days following receipt of notice of the constituency of the Investigative Committee.

13.4. The mandate of the Investigative Committee is to determine, on a balance of probabilities, whether scholarly misconduct has occurred, and if so, its extent and seriousness.

13.5. The Investigative Committee may conduct any of the following activities in connection with its investigation:
   13.5.1. The review of any scholarly activity relevant to the Allegation, including College documents, abstracts, papers or other methods of scholarly communication.
   13.5.2. A special audit of accounts on the sponsored research accounts of the involved individuals.
   13.5.3. Request proof of credentials from any individuals.
   13.5.4. Seek impartial expert opinions
   13.5.5. Conduct interviews with the Initiator, Respondent and other individuals as it deems appropriate. All interviews will be documented and included in the Report of the Investigative Committee. During any meeting with the Respondent, the Respondent is entitled to be accompanied by a representative of the Respondent's choosing.
   13.5.6. During the investigation process, the Respondent has the right to know the allegations under investigation and to respond fully.

13.6. The Investigative Committee shall complete all of its work within seven months of receipt of the allegation by the College. If circumstances require a longer timeline, the SRCR will be consulted and kept apprised of monthly progress.

14.1. Upon completion of its investigation, the Investigative Committee will prepare a written report addressed to the AVP on its findings and recommendations. The report will contain:

14.1.1. The full Allegation;
14.1.2. A list of the individuals interviewed;
14.1.3. A summary of relevant material;
14.1.4. A determination of whether on the balance of probabilities, scholarly misconduct has occurred; and
14.1.5. Recommendations on any actions to be taken in the matter.

14.2. Recommendations of the Investigative Committee may include:

14.2.1. Taking no further action;
14.2.2. Withdrawing all pending relevant publications;
14.2.3. Notifying publications in which the involved research was reported; and
14.2.4. Informing any outside funding agency of the results of the investigation and any actions to be taken.

14.3. Prior to completing its final report, the Investigative Committee will provide the respondent and the Initiator with an opportunity to review and comment on a draft report. Where the AVP has decided that the identity of the Initiator will remain confidential, the AVP shall provide a copy of the draft report to the Initiator. The Respondent and the Initiator shall each have five working days to submit any written comments to the Committee.

14.4. The final report of the Investigative Committee shall not identify the Initiator and where the finding of the Investigative Committee is that no scholarly misconduct has occurred, the final report shall not identify the Respondent.

14.5. The Investigative Committee will normally deliver its final report to the AVP within 90 days of the striking of the Investigative Committee.

14.6. The final report of the Investigative Committee and records relating to the investigation will be kept by the Office of Applied Research for a period of ten years. Access to the report and records will be by application to the AVP and is subject to the Freedom of Information and Protection of Privacy Act (Ontario).

15. Decision of the AVP

15.1. Upon receipt of the final report of the Investigative Committee, the AVP shall take one of the following actions:

15.1.1. Advise the Respondent and the Initiator that the complaint is dismissed;
15.1.2. Advise the Respondent and the Initiator that the complaint is substantiated as scholarly misconduct which can appropriately be dealt with under the existing disciplinary power of the AVP. This could include any sanctions imposed, as referred to in Section 15.1 of this policy;
15.1.3. Advise the Respondent, the Initiator, and the President that the complaint is substantiated as gross misconduct in research and

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15.2 Where the complaint is unsubstantiated, the AVP shall, in consultation with the Respondent, take all reasonable steps to repair any damage to the reputation of the Respondent that may have occurred by virtue of the complaint.

15.3 Whatever the outcome, the AVP shall take all reasonable steps to mitigate the consequences of the process for any individuals who have been unintentionally adversely affected by it.

16 Sanctions for Misconduct

16.1 In cases where the Investigative Committee determines that scholarly misconduct has occurred, such a determination could be cause for sanctions. Any sanctions imposed will be commensurate with the severity of the offence. Sanctions may include, but are not limited to:
   16.1.1. Verbal warning
   16.1.2. Special monitoring of future work
   16.1.3. Letter of reprimand to an individual’s permanent personnel file
   16.1.4. Withdrawal of special privileges
   16.1.5. Removal of specific responsibilities
   16.1.6. Suspension or steps to terminate the appointment.

16.2 If sanctions are to be taken, they will be imposed by the appropriate academic Dean.

17 Appeals

17.1 An employee of the College subject to disciplinary action, who believes a decision on scholarly misconduct was reached improperly, may file an appeal through the grievance procedure outlined in the relevant collective agreement(s).

17.2 A student subject to disciplinary action, who believes a decision on scholarly misconduct was reached improperly, may file an appeal in accordance with the GBC Appeals Policy.

17.3 For other Respondents, an appeal may be made to the President who will strike an appropriate committee to hear the appeal.

18 Claims in Good Faith

18.1 GBC will make every effort to protect Initiators and any other individual who makes Allegations to the College in good faith from retaliation or harassment.

18.2 No person to whom this policy applies may retaliate against an Initiator or any other person making an Allegation where the Allegation is made in good faith.

18.3 Any Allegation that is not made in good faith will be taken seriously and may result in disciplinary action.

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19. Notification of Funding Agency

19.1. When the AVP concludes that an investigation is warranted, the AVP shall inform any granting agency or sponsor of the research and scholarship in question of the fact of the investigation. The AVP shall also inform that granting agency or sponsor, of the conclusions of the report of the Investigative Committee upon receipt of said report.

19.2. All federal agency funding related to a research project under investigation shall be frozen until the matter is resolved.

19.3. When an Investigative Committee has conducted an investigation and has concluded that misconduct or gross misconduct has occurred, the AVP shall within 30 days provide the investigative report and decision regarding discipline to any granting agency or sponsor known to have provided support for the research and scholarship in question.

20. Reporting

20.1. An annual report summarizing the facts of cases of scholarly misconduct and their disposition shall be provided to the President.

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