



Responsible Conduct of Research			
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Policy Sponsor	Vice-President, Academic Affairs	Last Revised:	
Administrative Responsibility	Research Committee	Review Scheduled:	December 2024
Approver	General Faculties Council		

1. Purpose

1.1. Ambrose University (“Ambrose”) is committed to the highest standards of integrity in research and scholarship, based on its Christian commitments and its adherence to the policies of the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council of Canada and the Social Sciences and Humanities Research Council of Canada. Ambrose defines and governs integrity in research and scholarship by means of three related policies, each of which reflects a Tri-Council or other national policy statement:

1.1.1 The Ambrose policy on Responsible Conduct of Research is based on the Tri-Agency Framework: Responsible Conduct of Research – see:

<https://rcr.ethics.gc.ca/eng/framework-cadre-2021.html>

1.1.2 The Ambrose policy on Ethical Research Involving Humans is based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans. - see:

http://www.pre.ethics.gc.ca/eng/policy-politique_tcps2-eptc2_2018.html.

1.1.3. The Ambrose Animal Care Committee is based on the Canadian Council on Animal Care’s Terms of Reference – see:

https://www.ccac.ca/Documents/Standards/Policies/Ethics_of_animal_investigation.pdf

2. Scope

2.1 This policy is about the responsible conduct of research. Responsible Conduct of Research¹ is the behavior expected of anyone who conducts or supports research activities throughout the life cycle of a

¹ This proposed definition is from the 2021 Tri-Agency Framework: Responsible Conduct of Research. It is based on text drawn from the following sources: [The Hong Kong Principles for assessing researchers: Fostering research integrity \(2020\)](#), 6th World Conference on Research Integrity (June 2-5, 2019); the U.S. National Institutes of Health (NIH) definition of RCR (2009); and CCA (2010). [Honesty, Accountability and Trust: Fostering Research Integrity in Canada](#). Ottawa: Council of Canadian Academies.

research project (i.e., from the formulation of the research question, through the design, conduct, collection of data, and analysis of the research, to its reporting, publication and dissemination, as well as the management of research funds). It involves the awareness and application of established professional norms, as well as values and ethical principles that are essential in the performance of all activities related to research. These values include honesty, fairness, trust, accountability, and openness.

This policy provides principles and the process to follow in the event of an allegation of misconduct of research. This policy applies to all persons involved in research under the auspices of Ambrose. It is the responsibility of each individual researcher to conduct their research with academic integrity and to forward concerns regarding possible acts of research misconduct. This is true whether the researcher is a student or paid employee of Ambrose or under the auspices of Ambrose. In the case of a breach of such integrity, the procedures in this document regarding misconduct of research shall be followed. Allegations of misconduct shall be dealt with in an impartial, equitable, and timely manner, with due regard to the privacy and confidentiality rights of all parties involved. Ambrose University will protect personal information and deal with records in accordance with the *Personal Information Protection Act (Alberta)*.

3. Responsibilities of Researchers²

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

3.1.1. *Rigour*: Scholarly and scientific rigour in proposing and performing research; in recording, analyzing, and interpreting data; and in reporting and publishing data and findings.

3.1.2. *Record keeping*: Keeping complete and accurate records of data, methodologies and findings, including graphs and images, in accordance with the applicable funding agreement, institutional policies, laws, regulations, and professional or disciplinary standards in a manner that will allow verification or replication of the work by others (within the standards for confidentiality related to ethical research). Original data must be accessible for 5 years after study completion and publication.

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

3.1.4. *Authorship*: Including as authors, with their consent, all those and only those who have made a substantial contribution to, and who accept responsibility for, the contents of the publication or document. The substantial contribution may be conceptual or material. Authorship with regard to the publication of all scholarly work (including that of students) is to

² This section is based on the Tri-Agency Framework: Responsible Conduct of Research 2.1.2 “Promoting Research Integrity”, 3.

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.

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

3.1.6. *Conflict of interest management*: Appropriately identifying and addressing any real, potential or perceived conflict of interest, in accordance with the institution's policy on conflict of interest in research, in order to ensure that the objectives of the RCR Framework (Article 1.3) are met. A conflict of interest may arise when activities or situations place an individual in a real, potential or perceived conflict between the duties or responsibilities related to research, and personal, institutional or other interests. These interests include, but are not limited to, business, commercial or financial interests pertaining to the individual, their family members, friends, or their former, current or prospective professional associates.³

3.1.7. *Research with Human Subjects*: Seeking and obtaining approval by the Ambrose Research Ethics Board before engaging in any research involving humans and then complying fully with the approved research protocols and policies in the performance of the research.

3.1.8. *Research with Animals*: Complying with the Ambrose Animal Care Committee policies before engaging in any research involving animals and complying with approved research protocols in the performance of the research.

3.1.9. *External Grant Regulations*: Complying with External Grant regulations as they relate to the operational and financial terms of research grants and/or contracts awarded to the researcher.

3.1.10. *Intellectual Property*: Complying with standards regarding intellectual property and licensing agreements of Ambrose and the relevant funding agency as they pertain to the commercialization of research. Regarding intellectual property, faculty, students, administrators, and support staff must understand and respect the guidelines for ownership and authorship of intellectual property.

3.1.11. *Power Imbalances*: Faculty, students, administrators, 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.

³ Based on the second edition of the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans* [TCPS 2] Chapter 7.

3.1.12. *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 analyzed empirical information, including, for example, 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.

3.2. Engaging with Funding Agencies

3.2.1. Applicants and holders of grants and awards will provide true, complete and accurate information in their in their funding applications and represent themselves, their research and their accomplishments in a manner consistent with the norms of the relevant field.

3.2.2. Applicants must ensure that others listed on the applications have agreed to be included.

3.2.3. Researchers are responsible to use awarded funds in accordance with the policies of the funders and their institution and for providing true, complete and accurate information regarding expenditures from the grant or award accounts.

3.2.4. Researchers must comply with all applicable legislation for the conduct of research that are relevant to the funding agency as well as their own institution.

3.2.5. Researchers in breach of an agency policy are expected to be proactive in rectifying the breach in collaboration with their institution.

3.2.6. Participants who engage in funding agency review processes must report conflict of interests (real, perceived or potential).⁴

3.3. All researchers are responsible for familiarizing themselves with principles of responsible conduct of research and for the application of these principles to foster a positive and constructive research- working environment. Researchers with oversight roles should provide appropriate supervision of, and training to, their trainees and research personnel in responsible conduct of research.

4. Scholarly Misconduct

4.1. Ambrose researchers must not be involved in scholarly misconduct. Acts of Scholarly Misconduct may be committed with varying degrees of intent. It is recognized that the borderline between scholarly incompetence, carelessness and negligence, on the one hand, and intentional dishonesty, on the other,

⁴ An informative resource is the “Conflict of Interest and Confidentiality Policy of the Federal Research Funding Organizations” found at www.science.gc.ca.

may be very narrow. The result is objectionable in any case, even if different degrees of discipline are appropriate.

4.2. “Scholarly Misconduct” means conduct that breaches the scholarly standards and practices that are generally accepted within the relevant scholarly field. This may include a failure to meet any of the expectations set out in section 3.1 of this Policy, and also includes the following:⁵

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

4.2.2. *Falsification*: Manipulating, changing, or omitting data, source material, methodologies or findings, including graphs and images, without appropriate acknowledgement such that the research record is not accurately represented.

4.2.3. *Destruction of research data or records*: The destruction of one’s own or another’s research data or records or in contravention of the applicable funding agreement, institutional policy and/or laws, regulations and professional or disciplinary standards. This also includes the destruction of data or records to avoid the detection of wrongdoing.

4.2.4. *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.

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

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

4.2.7. *Inadequate acknowledgement*: Failure to appropriately recognize contributors.

4.2.8. *Mismanagement of conflict of interest*: Failure to appropriately identify and address any real, potential or perceived conflict of interest, in accordance with the institution’s policy on conflict of interest in research, preventing one or more of the objectives of the RCR Framework (Article 1.3) from being met.

4.2.9 *Misrepresentation in an Agency Application or Related Document*: Providing incomplete, inaccurate or false information in a grant or award application or related document, such as a

⁵ The definitions in this section have drawn from the following sources: the Tri-Agency Framework: Responsible Conduct of Research (2016); CCA (2010). *Honesty, Accountability and Trust: Fostering Research Integrity in Canada*. Ottawa: Council of Canadian Academies; the Singapore Statement on Research Integrity, 2nd World Conference on Research Integrity, 21-24 July 2010; the Committee on Publication Ethics (COPE) www.publicationethics.org; and the University of Toronto, ‘Framework to Address Allegations Of Research Misconduct’ Nov. 7 2006.

letter of support or a progress report, applying for and/or holding an Agency award when deemed ineligible by NSERC, SSHRC, CIHR or any other research funding organization worldwide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies, listing of co-applicants, collaborators or partners without their agreement.

4.2.10. But does not include situations of: honest and reasonable error; conflicting data; valid differences in experimental design; or in interpretation or evaluation of information.

4.2.11. Financial resources must be used for the purposes for which they were given. Using financial resources for other uses constitutes inaccurate use of grant funding and is considered scholarly misconduct.

4.2.12. Researchers must obtain required approvals for research and follow the protocols prescribed. Failure to obtain such required approvals for research, or failure to conduct research in accordance with the protocols prescribed, or failure to comply with policies on research constitute scholarly misconduct.

4.3. The University will investigate allegations of Scholarly Misconduct made against those to whom this Policy applies in accordance with the procedures established under this Policy.

4.4. Ambrose researchers are expected to report in good faith any information pertaining to possible Scholarly Misconduct to the University, and must cooperate fully with the University in any process under this Policy. The University will not tolerate any retaliation against anyone who, in good faith, makes an allegation, gives evidence, or otherwise participates in a process under this Policy.

4.5. If an Ambrose researcher breaches Tri-Council Agency policy, they are expected to be proactive in rectifying any Scholarly Misconduct, for example, by correcting the research record, providing a letter of apology to those impacted by the Scholarly Misconduct, or repaying funds.

5. Responsibilities of the Institution⁶

5.1. To ensure that all researchers, faculty, staff and students are aware of, and have access to, this policy and all other requirements and standards of research set out by the institution.

5.2. To disseminate this policy through the institution's website, information packages, and relevant meetings. This policy will be referenced in the Ambrose faculty handbook and academic calendar, in order to promote a culture of scholarly integrity and to encourage accountability among the entire Ambrose University community.

5.3. To ensure that this policy, and all institutional policies dealing with research and scholarship, align with the expectations and policies on the responsible conduct of research as set by the Tri-Council Research Agencies.

⁶ This section is based on two documents: The Tri-Agency Framework: Responsible Conduct of Research (2016) and the Tyndale University College and Seminary Policy on the Responsible Conduct of Research (2018).

5.4. To investigate any potential misconduct in research in strict accordance to the procedures and process laid out in this policy.

5.5. To ensure, in the event of an allegation of research misconduct, that all parties are advised of the procedures available to them.

5.6. To keep accurate, confidential records of: all allegations of research misconduct, procedures and decisions taken to resolve such allegations, and the final resolution addressing such allegations.

5.7. To ensure that all institutional financial risk management policies are upheld with respect to research grants, awards, external donations, and all other research funding.

6. Procedure for Dealing with Allegations of Research Misconduct

6.1. Receiving Allegations of Scholarly Misconduct

6.1.1. Allegations of scholarly misconduct may come from various sources inside or outside the University. For example, an allegation may come from a member of faculty or support staff, an administrator, a granting source, a student, a member of the general public, or a media report, or an anonymous source. Allegations will be forwarded to the Vice President for Academic Affairs.

6.1.2. The ability of the University to investigate an allegation may be hampered if it is from an anonymous source, or if an allegation is not made in writing, and in some cases the University may be unable to proceed.

6.1.3. The Vice-President will advise the relevant Tri-Council Agency or the Secretariat on Responsible Conduct of Research immediately if any credible allegations are received that are related to activities funded by a Tri-Council Agency that may involve significant financial, health and safety, or other risks. The notification will include the name of the Ambrose researcher alleged to have committed the Scholarly Misconduct and the nature of the allegation.

6.2. Investigating Allegations of Scholarly Misconduct

6.2.1. Definitions of terms: *The complainant* is the person making an allegation of misconduct in research; the complainant may or may not be directly affected by the alleged misconduct and may be an administrator.

6.2.2. *The respondent* is the person accused by the complainant of misconduct in research.

6.2.3. Ambrose University 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. Investigations will be subject to the principles of natural justice, meaning that decision-makers shall remain impartial and that respondents shall be provided with a fair hearing. Respondents will be informed of the allegations made against them, provided with an opportunity to respond to the allegations, having also the right to be represented.

6.3 Responding to Allegations

6.3.1. The Vice President for Academic Affairs will receive allegations associated with scholarly misconduct. Confidentiality regarding these allegations is required under the Protection of Privacy Act of Alberta and other confidentiality policies of Ambrose.

6.3.2. Upon receipt and review of an allegation, the Vice President for Academic Affairs may do any or all of the following:

- Dismiss the allegation;
- Inform the person(s) named in the allegation in writing of the allegation and appoint an investigative committee, if in the judgement of the Vice President for Academic Affairs the allegation has sufficient substance to warrant an investigation; and
- Take such other action as the Vice President for Academic Affairs deems appropriate.

6.3.3. Prior to making any decision, the Vice President for Academic Affairs may do any or all of the following:

- Request additional information regarding the allegation;
- Obtain and retain relevant documentation (e.g. lab notes, electronic data, proof of credentials) related to an investigation;
- Close down and declare “off limits” facilities used for research;
- Freeze funds involved in the research and controlled by the University;
- Request that the relevant unit of the University review the matter, or some aspect of the matter, and report to the Vice President for Academic Affairs.

6.3.4. For situations where the allegation related to conduct that occurred at another institution (whether as an employee, a student or in some other capacity), the institution that receives the allegation will contact the other institution and determine with that institution’s designated point of contact which institution is best placed to conduct the inquiry and investigation, if warranted. The institution that received the allegation must communicate to the complainant which institution will be the point of contact for the allegation.

6.4 Investigative Committee

6.4.1. If the Vice President for Academic Affairs has determined that an investigation is warranted, he or she will appoint an Investigative Committee comprised of three individuals. The members of the Investigative Committee must be at arm’s length from both individuals or groups alleged to have committed the scholarly misconduct and the individuals or groups making the allegation. The member or members of the Investigative Committee will be selected in such a manner so that the Investigative Committee has appropriate expertise. Emeritus academics or persons external to the University are eligible to be members of an Investigative Committee. At least one member of the Investigative Committee must be an external member who has no current affiliation with the institution.

6.4.2. Within 24 hours of striking an Investigative Committee, the Vice President for Academic Affairs will inform the individuals or groups under investigation in writing, explaining the basis for and scope of the investigation. Those alleged to have committed scholarly misconduct will have the right to respond to the Investigative Committee.

6.4.3. 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. The decision of the Investigative Committee will be determined by majority vote.

6.4.4. The Investigative Committee may review any scholarly activity relevant 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 individuals or groups involved. Individuals may be required to prove credentials.

6.4.5. The Investigative Committee has the right to examine any University documents and question any student or member of faculty and staff during its investigation. All members of faculty, staff and students must cooperate fully with the Investigative Committee and make available any documents requested by the Investigative Committee in the course of its investigation.

6.4.6. The Investigative Committee must attempt to 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 individuals or groups alleged to have committed the scholarly misconduct and the individuals or groups making the allegation.

6.4.7. The Investigative Committee may seek impartial expert opinions and advice, as it deems necessary or appropriate, to ensure the investigation is thorough and authoritative.

6.4.8. The Investigative Committee and anyone questioned by or interacting with it are bound to strict confidentiality concerning all aspects of the investigation.

6.4.9. The Investigative Committee's report, including final decision, is provided to the Vice President Academic Affairs within a timeframe stipulated by the Vice President Academic Affairs.

6.5 Authority of the Vice President for Academic Affairs

6.5.1. At any time, the Vice President for Academic Affairs has the authority to:

- Require members of the Ambrose University community to appear before an Investigative Committee and to answer the Investigative Committee's questions or provide materials to it; and
- Dismiss the allegation if, based on reasonable information, the Vice President for Academic Affairs believes that continued investigation will result in a determination that the alleged scholarly misconduct has not occurred.

6.5.2. In cases of collaborative research involving other institutions, the Vice President for Academic Affairs may modify these procedures to facilitate the conduct of parallel or joint investigations.

6.5.3. If the Vice President for Academic Affairs is the subject of allegations of scholarly misconduct, the President will appoint someone to function in the place of and with the full powers of the Vice President for Academic Affairs, as pertains to this policy.

6.6 Report of the Investigative Committee

6.6.1. Upon completion of its review of the material gathered in the investigation, the Investigative Committee will prepare a written report addressed to the Vice President for Academic Affairs on its finding and recommendations. The report will contain:

- The full allegation;
- A list of the witnesses interviewed;
- A summary of relevant material;
- A determination of whether scholarly misconduct occurred;
- If scholarly misconduct has occurred, its extent and seriousness; and
- Recommendations on any remedial action to be taken in the matter in question and/or changes to procedures or practices to avoid similar situations in the future.

6.6.2. Recommendations of the Investigative Committee may include, without limitation:

- Withdrawing all pending relevant publications;
- Notifying publications in which the involved research was reported;
- Ensuring that the unit or units involved are informed of appropriate practices for promoting the proper conduct of research; and
- Informing any outside funding sponsors of the results of the inquiry and of actions to be taken.

6.6.3. Prior to completing its final report, the Investigative Committee will provide the individuals or groups alleged to have committed the scholarly misconduct and those making the allegation with an opportunity to review and comment on a draft report.

6.6.4. The Investigative Committee will normally deliver its final report to the Vice President for Academic Affairs within four months of the reception of its mandate.

6.6.5. The individuals or groups alleged to have committed the scholarly misconduct will receive a copy of the final report from the Vice President for Academic Affairs and be given one week to submit a written response.

6.7. Decision of the Vice President for Academic Affairs

6.7.1. If the Investigative Committee determines that scholarly misconduct has not occurred, the Vice President for Academic Affairs will make a final determination on what action, if any, is necessary in light of the Investigative Committee's report and will communicate that decision to the President, any individuals or groups alleged to have committed the scholarly misconduct, and the Deans and Chairs connected to any individuals named in the allegation. In such instances, every reasonable effort will be made by the Vice President for Academic Affairs to protect the reputations of any individuals alleged to have committed the scholarly misconduct.

6.7.2. If the Investigative Committee determines that scholarly misconduct has occurred, the Vice President for Academic Affairs will forward the Investigative Committee's report to the President, who will consult with the Vice President for Academic Affairs, Deans and Chairs or Directors of those involved in the allegation and then make a final determination of what discipline or other action, if any, is appropriate and will communicate that decision in writing to the individuals or groups deemed to have committed the scholarly misconduct, as well as the

Vice President for Academic Affairs and Deans and Chairs or Directors of those involved in the allegation. In the case of faculty members engaged in scholarly misconduct, the discipline provisions of the faculty handbook will apply.

6.7.3. Where scholarly misconduct is found to have occurred, the Vice President for Academic Affairs will send copies of the Investigative Committee's report and the final decision within thirty days of receipt of the final decision to any organization that has funded the research.

6.7.4. The Vice-President will prepare a report for the Secretariat on Responsible Conduct of Research on each investigation it conducts in response to an allegation of Scholarly Misconduct related to a funding application submitted to a Tri-Council Agency or to an activity funded by a Tri-Council Agency. The report will include the information required by the Secretariat on Responsible Conduct of Research, as set out under the reporting requirements in the *Tri-Agency Framework: Responsible Conduct of Research*.

6.7.5. The Vice-President will publish anonymized, statistical annual reports on confirmed findings of breaches of this Policy and any actions taken.

6.8. Appeal of Discipline

6.8.1. Discipline imposed for scholarly misconduct may be appealed:

- By faculty members, according to the Appeal Procedures in the Faculty Handbook;
- By staff members, according to the Appeals section of the General Grievance Policy posted on Sharepoint;
- By students, according to the Procedure of Appeals (of decisions relating to academic dishonesty) in the Academic Calendar.

6.9. Protection for Good Faith Claims

6.9.1. Ambrose University will make every effort to protect those making an allegation of scholarly misconduct or who have provided information to the University in good faith from retaliation.

6.9.2. No person to whom this policy applies may retaliate against a person making such allegations or providing such information in good faith.

6.9.3. If a person who has made such an allegation or who has provided such information in good faith believes they have suffered retaliation from a person to whom this policy applies, they may file a written complaint with the Vice President for Academic Affairs. The University will conduct an investigation of the alleged retaliation. Anyone who does engage in such retaliation is subject to disciplinary action. Where retaliation is found to have occurred, the University will act accordingly.

6.9.4. The University may take disciplinary action against individuals or groups found to have made allegations of scholarly misconduct pursuant to this policy where such allegations were not made in good faith. This includes, but is not limited to, allegations that are based upon facts that complainants know to be false, or allegations made with reckless disregard towards, or willful ignorance of, facts that would disprove the allegations.

6.9.5. Any disciplinary action taken against an employee of Ambrose University pursuant to this section will follow the procedures outlined in any applicable agreements on conditions of employment that apply to that employee.

7. Accountability

7.1. The University will provide affected parties with relevant information about the process and outcome of the inquiry and investigation. This information may also include measures the university is taking to improve the management of reported allegations of misconduct. Where appropriate faculty training will be provided about lessons learned as a result of the allegation. Any information provided will be in a manner consistent with applicable privacy legislation. Recourse against a respondent will be shared only with the respondent, or those who are authorized to receive this personal information.

7.2. For allegations determined to be unfounded all reasonable efforts will be made by the University to protect and restore the reputation of any individual subjected to an unfounded allegation.

Sources

This policy draws from Ambrose University's Integrity of Scholarship and Research policy (2010), which drew from integrity policies at the University of British Columbia, Algoma University, and Kwantlen Polytechnic University.

Additionally, this policy has drawn from the policies at Tyndale University College and Seminary and Mount Royal University.