

UNIVERSITY COUNCIL
RESEARCH SCHOLARLY AND ARTISTIC WORK COMMITTEE
REQUEST FOR INPUT

PRESENTED BY: Marjorie Delbaere, chair, Research, Scholarly, and Artistic Work Committee

DATE OF MEETING: May 20, 2021

SUBJECT: **Revisions to the Responsible Conduct of Research Policy**

DISCUSSION SUMMARY:

To be eligible to receive Tri-Agency funding, the University of Saskatchewan is required to have a Responsible Conduct of Research (RCR) Policy that meets the minimum requirements of the Tri-Agency Responsible Conduct of Research Framework. USask has signed the Agreement on the Administration of Agency Grants and Awards by Research Institutions and is required to apply its RCR Policy to all research conducted under its auspices or jurisdiction.

The existing USask Policy was approved in 2013 and does not meet the minimum requirements of the 2016 [Tri-Agency Framework](#). Section 6.0 Breaches of this revised Policy is revised to match the breaches in the RCR Framework. The revised policy now also meets the requirements for yearly public institutional reporting and a central point of contact at a senior administrative level, the Associate Vice President Research (AVPR) to receive all confidential enquiries, allegations of breaches of policies, and information related to allegations. The revised policy also clarifies that student breaches are handled under the RCR Policy as required by the Tri-Agencies.

In addition, after eight years of implementing the 2013 Policy, experience has shown the need to address a number of issues. Consultation on a revised policy began in August 2019 with discussion with University administrators who had experience with implementing the 2013 Policy, former hearing board chairs and the University of Saskatchewan Faculty Association (USFA). These consultations brought out the following issues that were raised multiple times:

- **the need to address potential conflicts of interest** – In the 2013 policy, a Senior Administrator could be responsible for submitting an allegation, managing an inquiry, managing a hearing and also determining discipline. In the revised policy, the potential for conflicts of interest is reduced since the AVPR is only responsible for the inquiry and investigation, the Senior Administrator is responsible for discipline for employee groups as determined by collective agreements. Student discipline would be determined by the Hearing Board as required by the University of Saskatchewan Act.
- **the need for an improved process for Students** -The 2013 policy required two hearing boards when investigating a breach by a student. It is extremely difficult for a student to endure two hearing boards, so the revised policy allows the allegation to be heard and if

needed, discipline to be decided with one hearing board. **Hearing boards involving students will be revised and include student perspective.** Student supports are also addressed by centralized management of the Policy and Procedures and relationship building with the CGPS, GSA and Student Affairs to ensure supports for students are in place.

The following concerns, which were raised multiple times by many, are addressed by changes to the Policy which centralize the management of the RCR Policy and Procedures with the AVPR. The OVPR has allocated additional resources to support effective implementation, communication and education.

- **the need for clarification of the roles and responsibilities in the Policy to make the process more transparent** - rather than inquiries and investigations being handled by senior administrators in each of the Colleges, these will be handled by a single point of contact - the AVPR - who will manage the Inquiry and Investigation stages of the Procedures. Potential consequences would still be determined by the Senior Administrator.
- **clarity on how to initiate a complaint** - addressed by a single point of contact (AVPR) and supported by website development and improved education and communication on the Policy and Procedures.
- **inconsistent application of the Policy, Procedures and discipline for students and faculty** - addressed by having management of the RCR Policy and Procedures for both faculty and students in one office. Discipline will be managed as required by collective agreements and the University of Saskatchewan Act.
- **need for reduction in the length of time for the Procedures to be completed** - addressed by dedicated support to complete the Procedures in a timely way and revising timelines to adhere to the Tri-Agency Framework.
- **the need for support for Senior Administrators and Hearing Board Chairs** – addressed by the creating of a RCR Specialist Position reporting to the AVPR who supports investigation procedures and reporting to University and the Tri-Agencies.
- **challenges in finding Hearing Board Chairs and Members** – addressed by creating a group of Hearing Board Chairs and Members who will have experience and education to serve in these roles.
- **Centralized management of the Policy in a single office** will also address concerns about where to access advice, information and education; correct implementation of collective agreement processes; improved use of University resources and supports; and clarity on the intersection of university policies.

Consultation on drafts of the Policy raised the following major issues:

- **The need to retain the hearing board as part of the procedures rather than move to an investigation committee similar to other U15 Universities** - addressed by retaining the Hearing Board to conduct an investigation of an allegation.
- **The need to define which student activities are considered research so allegations that a student has breached either the Student Academic Misconduct Regulations or the RCR Policy are addressed under the appropriate policy. This is important as there are specific hearing board composition, timelines and reporting requirements for allegations of an RCR breach required by the Tri-Agencies** - addressed by creation of a standard operating procedure in consultation with CGPS and the Associate Deans Academic that defines research to facilitate an allegation being heard through the correct Policy.
- **Reduction of the required number of people on a hearing board to reduce administrative burden** - addressed by reducing the number of people on a hearing board to between 3 and 5.

- **Reduction of Conflicts of Interest that may arise when inquiries, investigations and appeals are all handled by the OVPR** - addressed by having appeals addressed by the Governance Office.
- **Concerns that the breaches in the Policy do not reflect the full range of Research, Scholarly and Artistic work undertaken by researchers at USask** – the RCR Policy is required to reflect the breaches in the Tri-Agency RCR Framework as a condition of funding. These breaches are broadly defined in an attempt to encompass the range of research activity and are informed through national consultation processes. Every hearing board is required to include at least one subject matter expert to ensure that disciplinary perspectives are heard and considered. As well, the revised policy empowers the AVPR to consult with experts at the Inquiry stage. In recognition of this issue and with extensive consultation with legal opinions and faculty relations, new language has been inserted into the revised policy.
- **Concerns that the Policy does not reflect new initiatives at USask on Indigenization and Equity, Diversity and Inclusion** These are emerging initiatives and consultation is ongoing to consider how to better reflect them in this Policy, and other policies dealing with administrative justice practices.

CONSULTATION:

Consultation has included the following individuals, groups and committees:

An initial consultation to seek advice on revisions to the 2013 RCR Policy was held with the following:

University Administration

- Anthony Vanelli, Provost and Vice President Academic
- Jim Basinger, Acting Vice Provost Faculty Relations, former AVP Research
- Mary Buhr, Dean, College of Agriculture and BioResources
- Trever Crowe, Acting Dean, College of Graduate and Postdoctoral Studies
- Beth Bilson, University Secretary
- Amanda Storey, Academic Programs/Student Hearings and Appeals Coordinator
- Ana Crespo-Martin, Labour and Faculty Relations Specialist, Human Resources

Previous Hearing Board Chairs

- Brent Cotter, Faculty Member, Law, former Dean of Law.
- Jack Gray, Vice Dean Research, College of Arts and Science.

USask Grievance Committee

- Fran Walley, Vice Dean, College of Agriculture and BioResources

USFA Representatives

- Patricia Farnese, Faculty Member, Law, Senior Grievance Officer, USFA (2 meetings)
- Maureen Fryett, Professional Officer, USFA
- Sina Adl, Faculty Member, College of Agriculture and BioResources, Executive Committee Member, USFA
- Doug Chivers, Chair, USFA.

Following this round of consultations, a revised RCR policy was prepared. Consultations on the revised policy began in January 2020 as follows:

Office / Organization	Date
Governance Office	
Amanda Storey	15 Apr 2020 (email)
Amanda Storey	07 Dec 2020
Chelsea Willness, Jacquie Thomarat	01 Dec 2020
Chelsea Willness, Jacquie Thomarat, Amanda Storey	11 Feb 2021
Access and Privacy Officer (Rayelle Johnson)	10 Mar 2020 (email)
Committees of Council	
Research, Scholarly and Artistic Work	30 Jan 2020
	10 Dec 2020
	29 Apr 2021
Policy Oversight Committee	05 Feb 2020
	18 May 2021
Centres' Subcommittee	07 Dec 2020
Governance Committee	11 May 2020
VP Research Office	
VPR Executive Committee	29 Jan 2020
	17 Feb 2021
	14 Apr 2021
Associate Deans Research Forum	26 Feb 2020
	Dec 16, 2020
	28 Apr 2021
VP Finance and Resources Office	
Controller's Office Trevor Batters)	13 Mar 2020
IT Security, Risk and Compliance (Jason Hlady & Jon Collier)	06 Apr 2020 (email)
Provosts' Office	
Vice Provost Faculty Relations (Ken Wilson, Ana Crespo-Martin)	18 Feb 2020
Vice Provost Teaching, Learning and Student Experience (Patti McDougall)	01 Dec 2020
Student Affairs and Outreach (Tracy Spencer and Peter Hedley)	10 Feb 2021
Associate Deans Academic	17 Dec 2020
	18 Feb 2021
College of Graduate and Postdoctoral Studies	
Dean Debbie Burshtyn	01 Dec 2020
Vice Dean Ryan Walker	03 Mar 2021 (email)
Grad Chairs Cttee	21 Apr 2021
USSU President (Kiefer Roberts)	22 Jan 2021 (email)
GSA President (Humaira Iman)	01 Feb 2021 (email)
USFA (Chivers, Adl, Fryett)	03 Mar 2020
Others	
David Stack and Robert Affleck, McKercher LLP	May 2020 to present
Secretariate on Responsible Conduct of Research (Susan Zimmerman)	03 May 2021

RSAW reviewed the policy at its May 13, 2021 meeting and a motion by majority vote to recommend it to Council for approval. Concerns listed above, specifically concerns that the policy do not reflect the full range of Research, Scholarly and Artistic work undertaken by researchers at USask, concerns about the lack of consideration of EDI, and concerns about the level of consultation with USFA and legal counsel were raised.

FURTHER ACTION REQUIRED:

This policy and associated procedures will come to Council for decision at a future meeting.

ATTACHMENTS:

- **Responsible Conduct of Research Policy**
- **Responsible Conduct of Research Procedures**
- **Responsible Conduct of Research Procedures Flowchart**
- **Responsible Conduct of Research Outline of Changes**
- **Responsibly Conduct of Research Policy and its application to students**

1 **Responsible Conduct of Research Policy (effective TBD)**

Category: Research and Scholarly Activities

Responsibility: Vice-President Research

Authorization: University Council

Approval Date: TBD, effective date TBD Complaints received on or after the effective date will be considered under this Policy and Procedures.

2

DRAFT

3 1.0 Purpose:

4 To set forth the standards for responsible conduct of research and the procedures to assess
5 allegations of a breach of those standards for all those involved in any capacity in all research
6 conducted at the University of Saskatchewan.

7 2.0 Principles

8 The research, scholarly and artistic work of university members must be held in the highest
9 regard and be seen as rigorous and scrupulously honest. Research, scholarly and artistic work is
10 expected to be conducted in an exemplary fashion, be ethically sound, and contribute to the
11 creation, application and refinement of knowledge. Stewardship of resources associated with
12 research must be transparent and comply with all university and funding agency policies and
13 regulatory requirements.

14 Allegations of breaches of this Policy at the University will be dealt with by prompt, effective
15 procedures that ensure fairness and protect both those whose integrity is brought into
16 question and those who bring forward allegations of breaches or misconduct. The university
17 will provide an environment that supports the best research and that fosters researchers'
18 "abilities to act honestly, accountably, openly and fairly in the search for and dissemination of
19 knowledge"¹ including but not limited to providing ongoing educational opportunities in
20 research integrity.

21 3.0 Definitions for the purpose of the Policy and associated 22 Procedures.

23 "**Advocate**" means an advocate or advisor selected by a bargaining unit, or a friend, advisor or
24 legal counsel. Where the person is a member of a bargaining unit, the Advocate may be
25 selected by the appropriate bargaining unit; where the person is not a member of a bargaining
26 unit, this may be a friend, advisor or legal counsel.

27
28 "**Agencies**" and "**Tri-Agency**" means Canada's three federal granting Agencies: the Canadian
29 Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council
30 (NSERC), and the Social Sciences and Humanities Research Council (SSHRC).

31
32 "**Allegation**" means a declaration, statement, or assertion communicated in writing to the
33 University or one of the Agencies to the effect that there has been, or continues to be, a breach
34 of one or more University or Agency policies, the validity of which has not been established.

35

¹ From the CCA (2010). Honesty, Accountability and Trust: Fostering Research Integrity in Canada. Ottawa: Council of Canadian Academies as cited in The Tri-Agency Framework: Responsible Conduct of Research, section 4.2. www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/

36 **“Appeal Board”** means a committee established by the University Council pursuant to section
37 61 of *The University of Saskatchewan Act, 1995* to hear appeals of decisions made pursuant to
38 this Policy and/or the related Procedures.
39

40 **“Associate Vice-President Research” and “AVPR”** mean the Associate Vice President Research
41 identified as the University’s central point of contact to the Tri-Agency on matters related to
42 Responsible Conduct of Research or their designate.
43

44 **“Complainant”** means the individual who has notified the University or one of the Agencies
45 with an Allegation of a breach of this Policy.
46

47 **“Hearing Board”** means a committee established by University Council pursuant to section 61
48 of *The University of Saskatchewan Act, 1995* to conduct hearings into alleged breaches of this
49 Policy for the purpose of determining the validity of an allegation.

50 **“Inquiry”** means the process of reviewing an Allegation to determine whether the Allegation is
51 responsible (as defined below), the particular policy or policies that may have been breached,
52 and whether an Investigation is warranted based on the information provided in the Allegation.

53 **“Investigation”** means the process of examining an allegation, collecting and examining the
54 evidence related to the allegation, providing both Complainants and Respondents with an
55 opportunity to be heard at a hearing before a Hearing Board and making a decision as to
56 whether a breach of the Policy has occurred.

57 **“Policy”** means the Responsible Conduct of Research Policy.
58

59 **“Procedures”** mean the Procedures for Addressing Allegations of Breaches of the Responsible
60 Conduct of Research Policy.
61

62 **“Regulations”** mean the Regulations on Student Academic Misconduct.
63

64 **“Research”** is an undertaking or a commitment to an undertaking, intended to extend
65 knowledge through a disciplined inquiry or systematic investigation. Research includes but is
66 not limited to the following scholarly activities:

- 67 a. the preparation and publication, in either traditional or electronic format of scholarly
68 books, articles, theses, reviews, translations, critical editions, bibliographies, textbooks
69 and pedagogical materials;
- 70 b. creative works in drama, music and the visual arts, including recordings, exhibitions,
71 plays and musical compositions in all forms;
- 72 c. literary works in prose, poetry and drama; and
- 73 d. contract research and consultancy contracts.

74 **“Respondent”** means an individual who is identified in an Allegation as having possibly
75 breached this Policy and/or Agency policy.
76

77 **“Responsible Allegation”** means an Allegation which corresponds to the definition of a
78 Responsible Allegation in the Tri-Agency Framework on Responsible Conduct of Research.

79 **“Secretariat on Responsible Conduct of Research”** and **“SRCR”** means the Canadian
80 government agency which provides substantive and administrative support for the Panel on
81 Responsible Conduct of Research (PRCR), and the Agencies (CIHR, NSERC and SSHRC) with
82 respect to the *Tri-Agency Framework: Responsible Conduct of Research* (the Framework).
83

84 **“Senior Administrator”** means deans or executive directors (when Respondents are faculty
85 members, sessional lecturers, staff or undergraduate students in a college); directors, executive
86 directors or associate vice-presidents in charge of an administrative Unit (when Respondents
87 are employees); the provost (when Respondents are Deans or visiting professors); the Dean of
88 Graduate and Postdoctoral Studies (when Respondents are adjunct professors, postdoctoral
89 fellows, graduate students, or professional affiliates); vice-presidents (when Respondents are
90 directors of an administrative unit or associate vice-presidents), the president (when
91 Respondents are vice-presidents); and the Board of Governors (when the Respondent is the
92 President).
93

94 **“Tri-Agency Framework”** and **“RCR Framework”** means the Tri-Agency Framework: Responsible
95 Conduct of Research which describes policies and requirements for researchers,
96 institutions, and the Agencies related to applying for and managing Tri-Agency funds,
97 performing research, and disseminating results, as well as the processes that institutions and
98 agencies receiving Tri-Agency funding must follow in the event of an Allegation of a breach of
99 an Agency policy.

100 **“University”** means the University of Saskatchewan.

101 **“University Members”** means those participating in Research at or under the auspices of the
102 University. This includes, but is not limited to faculty, librarians, professors emeriti, sessional
103 lecturers, staff, trainees, clinical faculty, graduate and undergraduate students, adjunct
104 professors, visiting professors, visiting scholars, professional affiliates, associate members,
105 residents, and postdoctoral fellows (PDFs).
106

107 **“University Officials”** include Senior Administrators, department heads, directors, and
108 managers.
109

110 4.0 Scope of this Policy

111 This Policy applies to all University Members involved in Research, in any capacity
112 whatsoever. Nothing in this Policy and related Procedures will limit or amend the provisions of
113 any existing collective agreement at the University. The Procedures in this Policy will not be
114 used if an Allegation is, or has been addressed using another University procedure.

115 Lack of awareness of the Policy and/or impairment by alcohol or drugs are not defenses for a
116 breach of this Policy.

117 5.0 Responsibilities

118 Research at the University will be conducted in accordance with the following assigned
119 responsibilities and as required by the Tri-Agency Framework on Responsible Conduct of
120 Research:

121 **University Members** are responsible for conducting their Research according to the highest
122 standards of research integrity. University Members are responsible for:

- 123 a. Obtaining all required University and respective agency approvals for Research including,
124 but not limited to Research involving human participants or animal subjects, fieldwork,
125 biohazards, radioisotopes, or environmental impact.
- 126 b. Ensuring that their Research is conducted in accordance with approved protocols and that
127 they adhere to all reporting requirements.
- 128 c. Ensuring students and research staff are carefully supervised and trained in the conduct
129 of Research, including experiments, processing of acquired data, recording of data and
130 other results, interpretation of results, publication, and the storage and protection of
131 Research records and materials.
- 132 d. Exercising scholarly and scientific rigour and integrity in recording, analyzing and
133 interpreting data, and in reporting and publishing data and findings. This includes
134 keeping complete and accurate records of data, methodologies and findings, including
135 graphs and images, in accordance with the applicable funding agreements, institutional
136 policies, laws, regulations and professional or disciplinary standards in a manner that will
137 allow verification or replication of the work by others.
- 138 e. Ensuring institutional expert resources and supports are accessed to secure data and to
139 protect the privacy of any individuals whose personal information has been obtained as
140 part of any Research activities as required under the University's *Freedom of Information*
141 *and Protection of Privacy Policy*, *The Local Authority Freedom of Information and*
142 *Protection of Privacy Act*, *The Health Information Protection Act*, and the *Tri-Council Policy*
143 *Statement: Ethical Conduct of Research Involving Humans (TCPS 2, 2018)*.
- 144 f. Managing funds acquired for the support of Research as required by the Tri-Agency Guide
145 on Financial Administration, research funding agreements and University policies on
146 Research Administration. Grant fund expenditures must contribute to the direct costs of
147 the research/activities for which the funds were awarded, with benefits directly
148 attributable to the grant; not be provided by the administering institution to their
149 research personnel; be effective and economical and not result in personal gain for
150 members of the research team.
- 151 g. Including as authors, with their consent, all those and only those who have materially or
152 conceptually contributed to, and share responsibility for, the contents of the publication
153 or document, in a manner consistent with their respective contributions and authorship

- 154 policies of relevant publications.
- 155 h. Acknowledging, in addition to authors, all contributors and contributions to research,
156 including writers, funders and sponsors.
- 157 i. Reporting conflicts of interest as per the University's policy on Conflict of Interest.
- 158 j. Disclosing to the Associate Vice-President Research any breach of this Policy of which
159 they have become aware.

160

161 **University Officials** are responsible for:

- 162 a. Promoting and overseeing Research that is conducted with the highest standards of
163 research integrity.
- 164 b. Encouraging activities that support research integrity among University Members.
- 165 c. Participating in Inquiries and Investigations as defined in these Procedures.

166

167 **The Associate Vice-President Research** is responsible for:

- 168 a. Initiating, directing and overseeing an Inquiry, as outlined in the Procedures.
- 169 b. Determining whether an Investigation will occur and overseeing that Investigation as
170 outlined in the Procedures.
- 171 c. Other responsibilities as defined in the Procedures.

172

173 6.0 Breaches of this Policy

174 Breaches of this Policy (as defined by the Tri-Agency Framework: Responsible Conduct of
175 Research) include, but are not limited to:

- 176 a. *Fabrication*: making up data, source material, methodologies or findings, including graphs
177 and images.
- 178 b. *Falsification*: manipulating, changing, or omitting data, source material, methodologies
179 or findings, including graphs and images, without acknowledgement and which results in
180 inaccurate findings or conclusions.
- 181 c. *Destruction of research records*: the destruction of one's own or another's research data
182 or records to specifically avoid the detection of wrongdoing or in contravention of the
183 applicable funding agreement, institutional policy and/or laws, regulations and
184 professional or disciplinary standards.
- 185 d. *Plagiarism*: presenting and using another's published or unpublished work, including
186 theories, concepts, data, source material, methodologies or findings, including graphs and
187 images, as one's own, without appropriate referencing and, if required, without
188 permission.
- 189 e. *Redundant publications*: the re-publication of one's own previously published work or
190 part thereof, or data, in any language, without adequate acknowledgment of the source,
191 or justification.
- 192 f. *Invalid authorship*: inaccurate attribution of authorship, including failing to include as an
193 author someone who has materially or conceptually contributed to and shares
194 responsibility for, the contents of the publication or document and/or attribution of

- 195 authorship to persons other than those who have made a substantial contribution to and
196 who accept responsibility for, the contents of a publication or document in a manner
197 consistent with the authorship policies of relevant publications.
- 198 g. *Inadequate acknowledgement*: failure to appropriately recognize contributors in a
199 manner consistent with the authorship policies of relevant publications.
- 200 h. *Mismanagement of Conflict of Interest*: failure to appropriately identify and address any
201 real, potential or perceived conflict of interest, in accordance with the University's policy
202 on Conflict of Interest.
- 203 i. Failure to comply with applicable policies, laws or regulations for the conduct of Research
204 including, but not limited to:
- 205 i. Tri-Agency policies or requirements;
- 206 ii. Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS
207 2, 2018);
- 208 iii. Canadian Council on Animal Care guidelines and policies;
- 209 iv. Applicable environmental protection legislation;
- 210 v. Licenses from appropriate governing bodies for research in the field;
- 211 vi. Laboratory biosafety guidelines;
- 212 vii. Canadian Nuclear Safety Commission (CNSC) regulations, and Radiation Safety
213 guidelines;
- 214 viii. Controlled Goods Program;
- 215 ix. Public Health Agency of Canada guidelines;
- 216 x. Canada Food Inspection Agency guidelines and Canada's Food and Drugs Act; and
217 xi. All applicable University Policies.
- 218 j. *Misrepresentation in a Funding Application or Related Document*:
- 219 i. providing incomplete, inaccurate, or false information in a funding application or
220 related document, such as a letter of support or progress report;
- 221 ii. Applying for and/or holding a Tri-Agency award when deemed ineligible by NSERC,
222 SSHRC, CIHR or any other research funding organization world-wide for reasons of breach
223 of responsible conduct of research policies such as ethics, integrity or financial
224 management policies.
- 225 iii. listing of co-applicants, collaborators, or partners without their agreement.
- 226 k. *Mismanagement of Funds*: using grant and award funds for purposes inconsistent with
227 the policies of the funding agency or University policies, misappropriating grant and
228 award funds, contravening funding agency financial policies, for example the Tri-Agency
229 Guide on Financial Administration, funding agency grants and awards guidelines, or
230 providing inaccurate or false documentation for expenditures from grant or award
231 accounts.
- 232 l. *Breach of Tri-Agency Review Processes*
- 233 i. Non-compliance with the Conflict of Interest and Confidentiality Policy of the Federal
234 Research Funding Organizations.
- 235 ii. Participating in Tri-Agency review processes while under Investigation for a breach of
236 this Policy.

237 Breaches of this Policy should not be interpreted as including disciplinary differences of opinion
238 regarding research methodologies, theoretical frameworks, data sources, data analysis, or
239 publication conventions.

240

241 7.0 Privacy

242 University Members will protect the privacy of individuals involved in an Inquiry or Investigation
243 under this Policy as far as is possible. However, if an Allegation is substantiated, the University
244 reserves the right to use or disclose information in accordance with *The Local Authority*
245 *Freedom of Information and Protection of Privacy Act*, as noted in Section 10.0 of this Policy.

246

247 8.0 Education

248 To promote a greater understanding of responsible conduct of research and research ethics,
249 the University will offer workshops, seminars, web-based materials, courses, and research
250 ethics training for University Members along with orientation for those members who are new
251 to the university. When examples of Investigations at the University are used for the purpose
252 of educating University Members on acceptable practices for scholarly integrity and research
253 ethics, personal identifiers will be removed from these cases in order to maintain
254 confidentiality.

255 9.0 Procedures

256 This Policy is supported by two procedural documents entitled *Procedures for Addressing*
257 *Allegations of Breaches of the Responsible Conduct of Research Policy at the University of*
258 *Saskatchewan* and *Procedures for Stewardship of Research Records and Materials at the*
259 *University of Saskatchewan*.

260 Responsibility for the implementation and maintenance of these Procedures is delegated to the
261 Office of the Vice-President Research. Revisions to the Procedures will be approved by Council.

262 10.0 Reporting

263 The OVPR will report annually to Council relevant data resulting from the application of this
264 Policy through the Research Scholarly and Artistical Works Committee of Council.

265 The OVPR will post annually on its web site, information on confirmed findings of breaches of
266 this Policy (e.g., the number, general nature of the breaches and outcomes), subject to
267 applicable laws, including privacy laws.

268

269 Subject to any applicable laws, including privacy laws, the OVPR shall comply with the

270 requirements of funding agencies regarding reporting of breaches of this Policy in accordance
271 with the procedures identified by the specific agency. The University and the researcher may
272 not enter into confidentiality agreements or other agreements related to an Allegation, Inquiry
273 Investigation or Appeal that prevent the University from reporting to funding agencies.
274

275 In the case of a breach of this Policy, and subject to applicable privacy laws, the President may
276 disclose any information relevant to the breach that is in the public interest including the name
277 of the researcher subject to the decision, the nature of the breach, and the recourse imposed.
278 To inform disclosure of this information, the extent to which the breach jeopardizes the safety
279 of the public, potentially damages the integrity of or brings the conduct of research and/or the
280 University into disrepute will be considered.

281 11.0 Contact

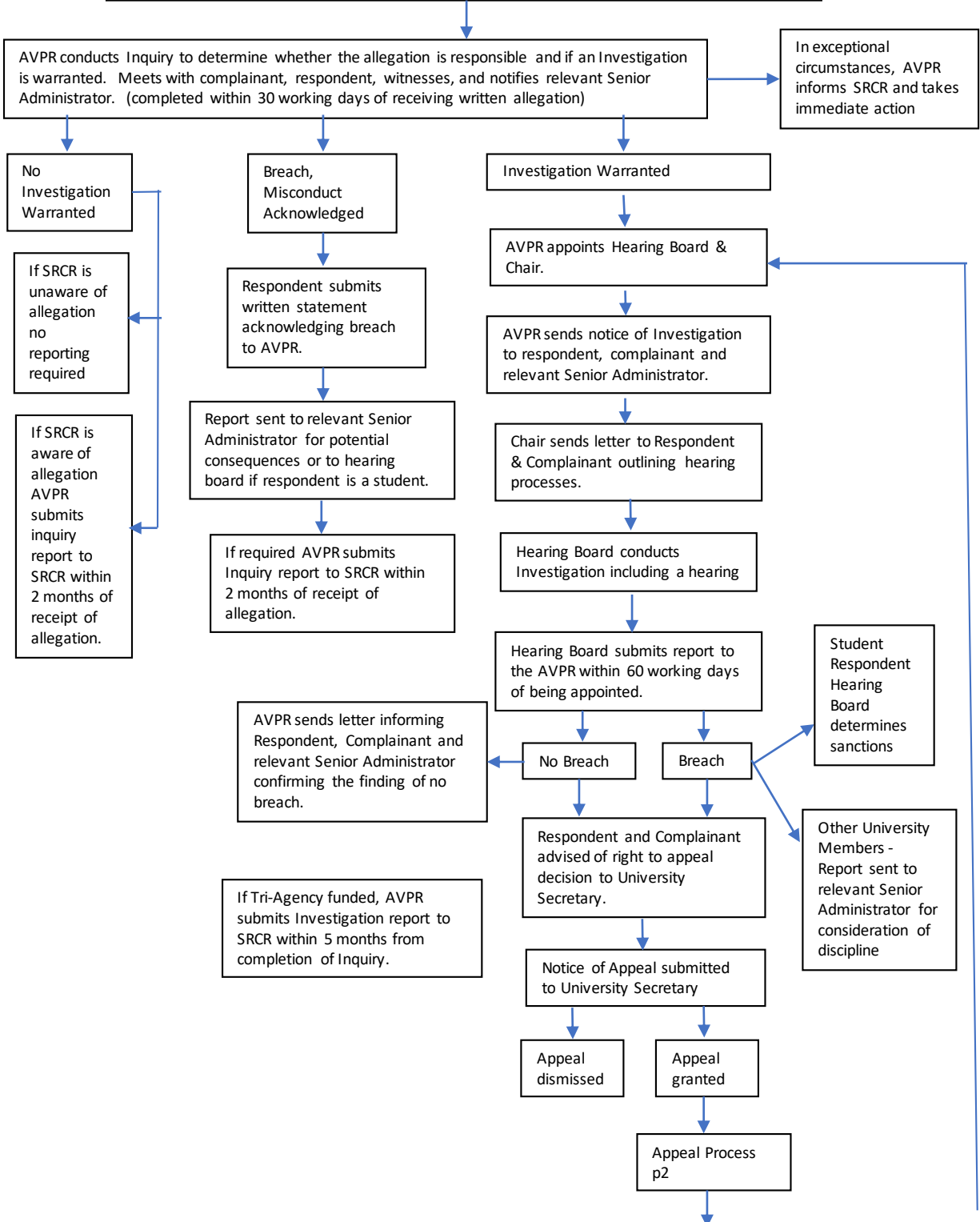
282 For further information please contact the Associate Vice-President Research at +1 (306) 844-
283 1148.

284 *Effective date TBD*
285

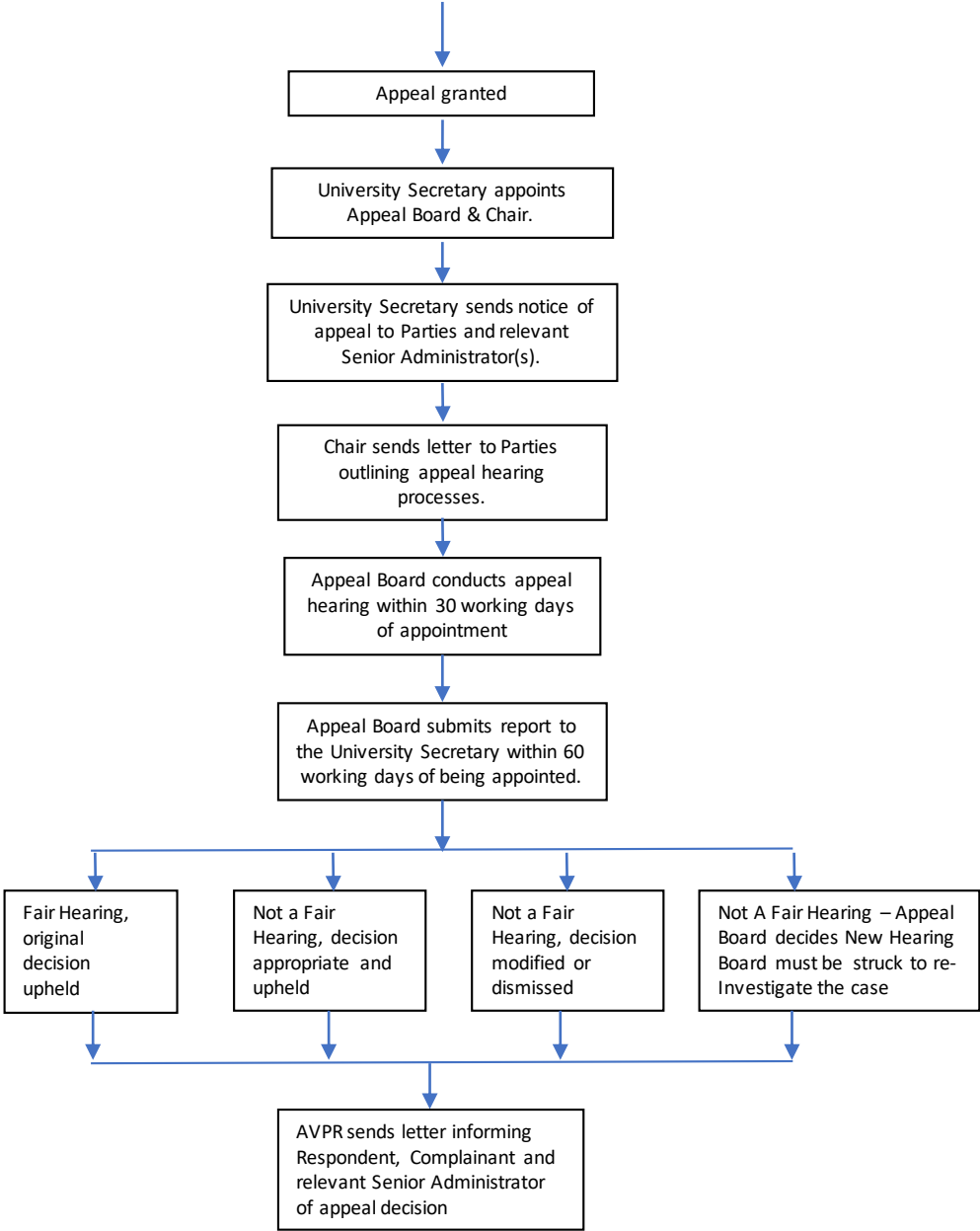
DRAFT

Procedures for addressing an alleged breach of the Responsible Conduct of Research policy by a Researcher at the U of S

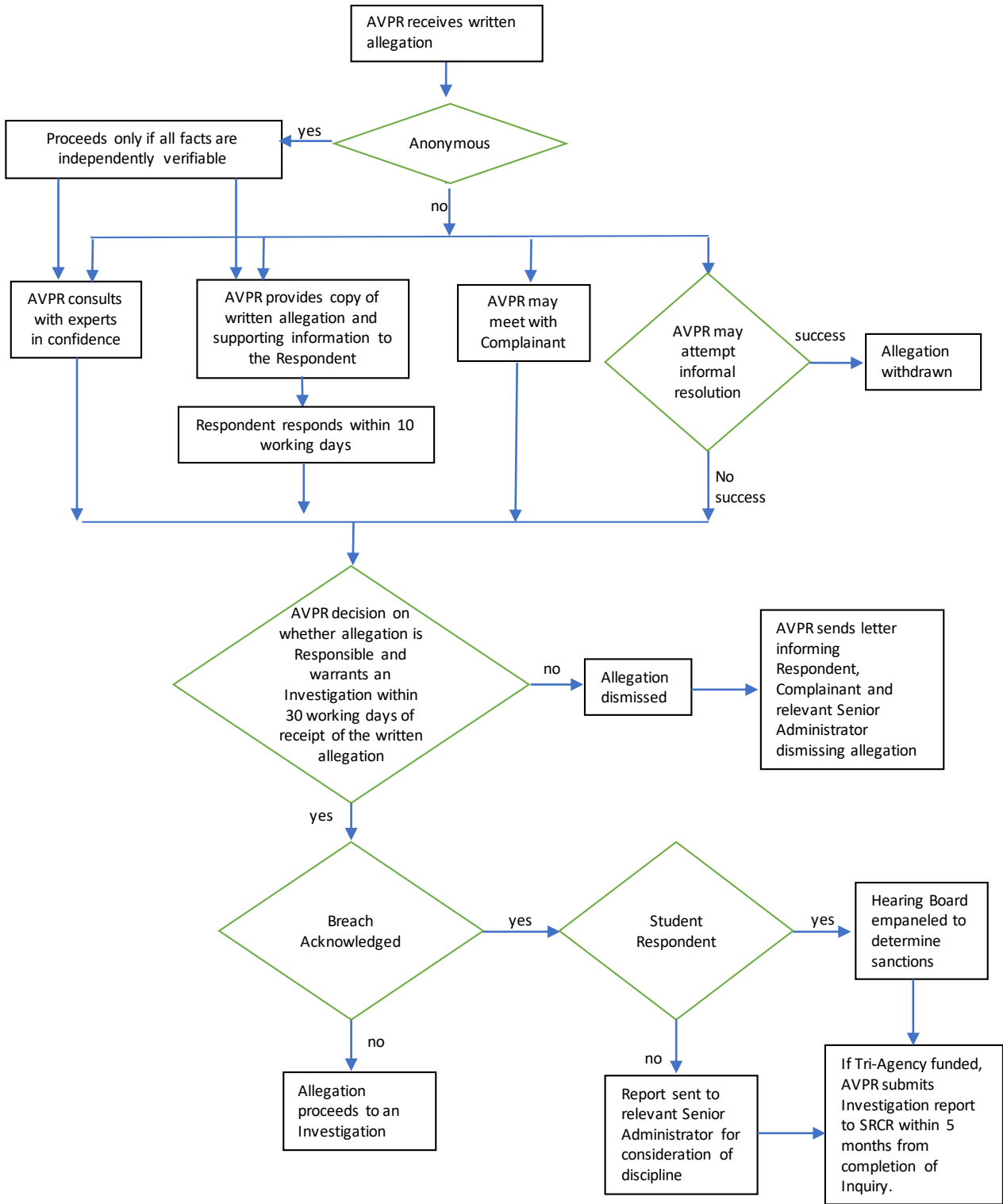
Complainant sends written allegation to the AVPR (may copy to Secretariat on Responsible Conduct of Research (SRCR)). Anonymous allegations considered only if all relevant facts are independently verifiable.



Appeal Process under the USask Responsible Conduct of Research Policy



Inquiry Process under the USask Responsible Conduct of Research Policy



Procedures for Addressing Allegations of Breaches of the University of Saskatchewan Responsible Conduct of Research Policy

1.0 Application

These Procedures accompany the Responsible Conduct of Research Policy (the “Policy”) and apply to all Allegations of breaches of the Policy by University Members.¹ Responsibility for the development, maintenance and oversight of these Procedures is delegated to the Office of the Vice-President Research (OVPR).

These Procedures shall be consistent with applicable clauses in collective agreements including University of Saskatchewan Faculty Association (USFA), Canadian Union of Public Employees (CUPE) Local 1975, the Administrative and Supervisory Personnel Association (ASPA), Canadian Union of Public Employees (CUPE) Local 3287, the Resident Doctors of Saskatchewan (RDoS), the Public Service Alliance of Canada, Local 40004 (Postdoctoral Fellows (PSAC)), and the Public Service Alliance of Canada, Local 40004 (Graduate Student Employees (PSAC)).

2.0 Reporting Breaches of the Responsible Conduct of Research Policy

- a. Any person, including a representative of a funding agency, who believes they have knowledge of a breach of the Policy should immediately report their Allegation in writing to the Associate Vice-President Research (AVPR). They may also send a copy of their Allegation to the Secretariat on Responsible Conduct of Research (SRCR). The AVPR will notify the relevant Senior Administrator(s) that an Allegation of a breach of the Policy involving a University Member from their unit(s) has been received.
- b. If the AVPR receives an Allegation that a student may be in breach of the Policy, the AVPR will consult with the appropriate Senior Administrator to determine whether the Allegation relates to a breach of the Policy or is a matter under the *Regulations on Student Academic Misconduct*.
- c. Anonymous Allegations will be considered only if all relevant facts are publicly available or otherwise independently verifiable. If all relevant facts are verifiable, the AVPR will initiate an Inquiry to determine whether the complaint should be dismissed or investigated. Anonymous Complainants are not entitled to participate or receive information on any part of the outcome.

¹ These Procedures adopt and incorporate the Definitions from the Policy.

- 33 d. Allegations should be in writing, with sufficient detail about the nature of the alleged
34 breach, the location and time of its occurrence. It should be supported by all available
35 documentation and contain enough information to permit a determination of whether the
36 alleged conduct, if substantiated, would constitute a breach of the Policy and to permit
37 further information gathering about the alleged breach.
- 38 e. If an Allegation is received related to conduct that occurred at another institution (whether
39 as an employee, a student or in some other capacity), the AVPR will contact the other
40 institution and consult to determine which institution is best placed to conduct the Inquiry
41 and Investigation if warranted. The AVPR will communicate to the Complainant which
42 institution will be responsible for responding to the Allegation.
43

44 3.0 Procedures for Inquiry

45 Subject to the provisions in section 4.0 of the Policy, the AVPR will conduct an Inquiry into the
46 Allegations.

- 47 a. The AVPR will assess whether the Allegation:
 - 48 i. is outside the jurisdiction of these Procedures as outlined in section 4.0 of the Policy;
 - 49 ii. involves Allegations that, if proven, would constitute a breach as defined in section
50 6.0 of the Policy and/or in the Tri-Agency Framework on Responsible Conduct of
51 Research;
 - 52 iii. is frivolous, vexatious, or in bad faith;
 - 53 iv. has been previously determined under the Policy and these Procedures, under
54 another University policy, or other comparable proceeding;
 - 55 v. warrants an Investigation; or
 - 56 vi. may involve significant financial, health and safety or other risks. If the allegation
57 involves significant financial, health and safety or other risks and is related to activities
58 funded by the Tri-Agencies, the AVPR is required to advise the relevant Tri-Agency or
59 the SRCR as outlined in section 7.0 of these Procedures.
- 60 b. The AVPR may discuss the Allegation with the Complainant and request additional
61 information.
- 62 c. The AVPR will provide a copy of the Allegation and supporting information in writing to the
63 Respondent and inform the Respondent of their right to submit a written response to the
64 Allegation and/or request a meeting with the AVPR within ten (10) working days of receipt
65 of the Allegation. The Respondent and Complainant will be advised they are entitled to
66 consult with an Advocate. The Respondent and Complainant will be instructed in writing to
67 preserve all evidence and not to communicate with each other about the Allegation until
68 further notice.
- 69 d. During the Inquiry, the AVPR may consult in confidence with University Members, including
70 accessing University records; with outside experts; and where the research involves human
71 participants or animal subjects with the Research Ethics Board Chair responsible for
72 approval of the research.

- 73 e. The AVPR may consult with both the Complainant and Respondent to determine whether
74 an informal resolution is possible. Where appropriate, and with the consent of the
75 Complainant and Respondent, other parties affected by the underlying Allegation may
76 participate in efforts towards an informal resolution. Discussions around informal
77 resolutions may not be included as evidence if the Allegation proceeds to an Investigation.
78 f. The AVPR will inform the Complainant and the Respondent in writing of their decision as to
79 whether the Allegation is a Responsible Allegation and whether an Investigation is
80 warranted within thirty (30) working days of having received the written Allegation. This
81 period may be extended with justification and if required, the AVPR will consult with the
82 SRCR regarding extensions.
83 g. If deemed necessary, the AVPR may restrict research and/or related activities until the
84 Allegation is resolved.
85

86 3.1 Acknowledgement of Misconduct

87
88 If the Respondent agrees to the facts alleged in the Allegation, the AVPR may conclude the
89 Inquiry or Investigation. The AVPR must be confident there is sufficient evidence in support of
90 the acknowledgement.

- 91 a. The AVPR must obtain a written statement from the Respondent attesting to the
92 occurrence and extent of the breach, acknowledging that the statement was voluntary and
93 stating that the Respondent was advised of the right to consult an Advocate.
94 b. The AVPR will forward a report along with the Respondent's statement to the responsible
95 Senior Administrator(s) who will make a decision as to what discipline or other
96 consequences are warranted.
97 c. If the Respondent is a student, the AVPR will empanel a Hearing Board to determine what
98 discipline or other consequences are warranted as outlined in section 4.3.1 of these
99 Procedures after receiving written statements regarding potential consequences and/or
100 sanctions from each of the parties.
101

102 4.0 Procedures for Investigations

103 When it has been determined that an Allegation should proceed to an Investigation, the
104 following steps will be taken.

- 105 a. The AVPR shall appoint a Hearing Board within a reasonable time frame composed of
106 three to five members, one of whom will be designated as chair, at least two of whom will
107 be senior members of the University², and at least one of whom will be external and with

² Senior members of the university include senior administrators, full professors, associate professors and adjunct professors of equivalent seniority.

- 108 no current student, employment, contractual or academic affiliation to the University³. If
109 the Respondent is a student, the Hearing Board shall include a student member in
110 addition to the above-mentioned members. The chair will be appointed by the AVPR.
- 111 b. The members of the Hearing Board will have no actual or perceived conflicts of interest or
112 bias and will jointly have appropriate subject matter expertise and administrative
113 background to evaluate the Allegation and the response to it. Each member of the
114 Hearing Board must sign a declaration denying any conflicts of interest and must sign a
115 confidential non-disclosure agreement.
- 116 c. The AVPR will provide the Respondent and the Complainant with the names and positions
117 of the chair and members of the Hearing Board. If the Complainant or Respondent have
118 any objection to the composition of the Hearing Board, an objection must be made in
119 writing to the AVPR within five (5) working days of receiving that information. The AVPR
120 will make the final decision as to whether a reasonable apprehension of bias or conflict of
121 interest exists.
- 122 d. The AVPR will provide the Hearing Board with a copy of the Allegation, the Respondent's
123 written response from the Inquiry (section 3.0) and any other information gathered at the
124 Inquiry that is pertinent to the Investigation. The AVPR will provide guidance and suitable
125 administrative support for the Investigation.
- 126 e. Once appointed, the chair will, within ten (10) working days, send a letter to the
127 Respondent and the Complainant. This letter will convey the following information and
128 documentation:
- 129 i. the right of both the Respondent and the Complainant to jointly appear at a hearing to
130 make submissions to the Hearing Board within thirty (30) working days of receipt of
131 this letter, or such other time as determined by the chair;
- 132 ii. a copy of the Allegation, the Respondent's written response from the Inquiry, and any
133 other information gathered during the Inquiry that is pertinent to the Investigation.
- 134 iii. a statement of confidentiality of the proceedings for the protection of privacy and
135 reputation of the Respondent and the Complainant;
- 136 iv. the requirement to preserve evidence;
- 137 v. a proscription against improper acts of retaliation;
- 138 vi. that the Respondent, Complainant and witnesses have a right to be advised during the
139 Investigation and accompanied by an Advocate at the hearing;
- 140 vii. that both the Respondent and the Complainant should, at least ten (10) working days
141 prior to the hearing or such other time as determined by the chair, provide the
142 Hearing Board with any additional written materials, evidence, as well as names and
143 statements of potential witnesses they propose to include as part of the hearing;
- 144 viii. a copy of these Procedures; and
- 145 ix. anything else that the chair deems necessary to facilitate the commencement of the
146 hearing.
- 147 f. The role of the Hearing Board is to examine the Allegation, collect and examine the

³ Tri-Agency Framework: Responsible Conduct of Research www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/

148 evidence related to the Allegation, make a decision as to whether a breach of this Policy
149 has occurred including the severity of the breach and if so, make recommendations in
150 accordance with sections 4.1 b and 4.1 c of these Procedures.

151 g. The Hearing Board is not bound to observe strict legal procedures or rules of evidence but
152 shall establish its own procedures, including but not limited to determining what evidence
153 it will hear and/or accept. Further, and without limitation, the Hearing Board may:

154 i. ask questions of the Complainant and Respondent;
155 ii. ask questions of witnesses;
156 iii. request and examine any documents, data, records, or equipment they deem relevant
157 to the Allegation;
158 iv. arrange for the testing of physical evidence relevant to the Allegation.

159 h. The Hearing Board will conduct the hearing in accordance with the principles of
160 procedural fairness, and the following requirements must be followed in the
161 Investigation:

162 i. a University Member against whom an Allegation is made is to be treated as being
163 innocent until it has been established, on the balance of probabilities and before a
164 Hearing Board of impartial and unbiased decision-makers, that they have committed a
165 breach of the Policy;

166 ii. Respondents must be informed of the details of the alleged breach, including having
167 access to all documentary and other evidence relevant to the alleged breach;

168 iii. Respondents who are alleged to have caused or contribute to a breach must be given
169 an opportunity to respond to the Allegations;

170 iv. the Respondent, Complainant and witnesses have a right to be advised and /or
171 accompanied by an Advocate at the hearing. The Advocate may speak as an advocate
172 on behalf of the Respondent or Complainant, but the Hearing Board expects that it
173 will hear directly from the Complainant and/or Respondent wherever possible. This
174 right is subject to the provision that the names of any Advocates are provided to the
175 Chair at least five (5) working days prior to the hearing;

176 v. while strict rules of evidence do not apply, appropriate weight must be given to
177 evidence based on its credibility and reliability;

178 vi. if one or both of the parties chooses not to appear at the hearing, the Hearing Board
179 may proceed to make its decision based on the material and information already
180 gathered;

181 vii. while it is generally intended that all of the evidence from the witnesses will be
182 gathered and shared with the parties prior to the hearing, the chair has the discretion
183 to allow witnesses to present their evidence at the hearing if the fairness of the
184 process requires it. The chair may also adjourn proceedings to allow a party an
185 appropriate opportunity to respond to new evidence;

186 viii. the chair has authority to extend the Investigation timelines when necessary in the
187 circumstances to conduct a fair process. The chair may also permit any and all of the
188 participants to the hearing to appear by way of telephone or videoconference.

189 i. If, during the course of the hearing, the evidence discloses a new related instance of a
190 breach of the Policy that was not part of the original Allegation or which implicates
191 additional Respondents, the Hearing Board may expand the hearing, provided that the

192 Complainant and Respondent are notified and are given an opportunity to respond to the
193 new Allegations. If the expanded hearing involves new Respondents, they will be
194 provided with reasonable notice and shall for the purpose of these Procedures, be
195 entitled to all rights as Respondents.

196 j. The chair shall notify the AVPR of interim findings, if any, that they believe should be
197 reported because of the University's obligations to students, staff, and faculty members,
198 funding agencies and sponsors or, where there are compelling issues of public safety. Any
199 interim report shall be in writing and copied to all members of the Hearing Board, to the
200 Complainant and Respondent, and the AVPR. The interim report shall set out the
201 findings, the reason for the interim report, and a recommendation regarding appropriate
202 administrative action.
203

204 4.1 Decision of the Hearing Board

205 The Investigation will normally be completed within sixty (60) working days of the Hearing
206 Board being appointed. In exceptional circumstances, the chair may apply to the AVPR for an
207 extension of twenty (20) working days. Further extensions may be granted for twenty (20)
208 working days at a time. If an Investigation is anticipated to take longer than one hundred (100)
209 working days from the time the board is appointed, if required by the Tri-Agencies, the AVPR
210 will consult with the relevant Tri-Agency and/or SRCR. The AVPR will inform the Respondent
211 and Complainant in writing of any extensions granted. Where required, the AVPR will also
212 provide periodic updates to the relevant Tri-Agency and/or SRCR until the Investigation is
213 complete. The frequency of the periodic updates will be determined jointly by the SRCR and
214 the AVPR.

- 215 a. The Hearing Board shall complete its Investigation and shall report its decision in writing
216 to the AVPR. The AVPR shall advise the Respondent, the Complainant, and the relevant
217 Senior Administrator(s) of the decision.
- 218 b. If there is more than one Respondent or Complainant, reasonable efforts will be made to
219 provide each with parts of the report that are pertinent to them. It is recommended that
220 the format of the Hearing Board report contain the following:
- 221 i. the full Allegation of a breach of the Policy;
 - 222 ii. a list of Hearing Board members and their credentials;
 - 223 iii. a summary of the Complainant's position including reference to relevant witnesses
224 and/or evidence put forward;
 - 225 iv. a summary of the Respondent's position including reference to relevant witnesses
226 and/or evidence put forward;
 - 227 v. a determination of whether a breach of the Policy occurred;
 - 228 vi. if a breach has occurred, its extent and seriousness; and
 - 229 vii. recommendations of changes to procedures or practices, if any, to avoid similar
230 situations in the future.
- 231 c. Recommendations of the Hearing Board may also include, without limitation:
- 232 i. withdrawing all pending relevant publications;
 - 233 ii. notifying publishers of publications in which the involved research was reported;

- 234 iii. notifying co-investigators, collaborators, students and other project personnel of the
235 decision;
- 236 iv. ensuring the unit(s) involved is informed of appropriate practices for promoting the
237 proper conduct of research;
- 238 v. informing any outside funding sponsor(s) of the results of the Inquiry and of actions to
239 be taken.
- 240 d. The Hearing Board's decision is based on majority vote. No minority reports shall be
241 allowed.
- 242 e. The Hearing Board report is final and not subject to revision.
243

244 4.2 Dismissal of the Allegation

- 245
- 246 a. If the Hearing Board advises that the Allegation should be dismissed, the AVPR shall so
247 advise any person identified in the Allegation, the Respondent, the Complainant and other
248 appropriate University Officials. In addition, the notification requirements of the applicable
249 collective agreement shall be followed.
- 250 b. Where the Allegation is dismissed, the AVPR and appropriate Senior Administrator, shall
251 take all reasonable steps to repair any damage that the Respondent's reputation for
252 scholarly integrity or research activities may have suffered by virtue of the Allegation. The
253 AVPR shall ensure that a letter confirming the finding that no breach of the Policy was
254 substantiated is sent to the Respondent, with a copy to the Complainant, and to the Senior
255 Administrator(s). With the consent of the Respondent, a letter confirming the finding that
256 no breach was substantiated may be sent to other persons with knowledge of the
257 Allegation. These persons may include, but are not limited to, co-authors, co-investigators,
258 collaborators, and others who may have been notified by the AVPR.

259

260 4.3 Determination of Consequences

261 If the Allegation is found to have been made in good faith, no disciplinary measures or
262 retaliatory action shall be taken against the Complainant. If the Allegation is found to have been
263 made in bad faith, the AVPR will refer the matter to Discrimination and Harassment Prevention
264 Services for resolution under the University Discrimination and Harassment Prevention Policy⁴.
265 Any acts of retaliation (including threats, intimidation, reprisals or adverse employment or
266 education action) made against the Complainant, Respondent or any individual who
267 participated in any manner in the Investigation or resolution of a report of a breach of the
268 Policy are subject to the University Discrimination and Harassment Prevention Policy.

269 4.3.1 For Students

- 270 a. If a Respondent who is an undergraduate or graduate student is found to have breached the

⁴ Discrimination and Harassment Prevention Policy <https://policies.usask.ca/policies/health-safety-and-environment/discrimination-and-harassment-prevention.php>

- 271 Policy, the consequences and sanctions shall be determined by the Hearing Board. The
272 Respondent and Complainant will have seven (7) working days from the receipt of the
273 Hearing Board report to make a written statement to the Hearing Board with a copy to the
274 AVPR, regarding the findings, in advance of any disciplinary action determined by the
275 Hearing Board.
- 276 b. The Hearing Board shall request from the Governance Office a record (if any) of any
277 sanctions imposed by other University hearing boards or appeal boards for similar academic
278 misconduct matters.
- 279 c. The Hearing Board shall have the authority to impose one or more sanctions which may
280 include, *but are not limited to*, the following:
- 281 i. that the student(s) be reprimanded or censured;
- 282 ii. that a mark of zero or other appropriate grade be assigned for the entire course, for
283 an assignment, or that a credit or mark for the course be modified or cancelled;
- 284 iii. that an assignment be redone or any other academic performance be repeated;
- 285 iv. that the student(s) be required to submit an essay or assignment relating to the topic
286 of academic misconduct, or to prepare and/or deliver a presentation on that topic;
- 287 v. that the student(s) be required to complete additional training in responsible conduct
288 of research;
- 289 vi. that the student(s) be suspended from the University for a specified period of time;
- 290 vii. that the student(s) be expelled permanently from the University; or
- 291 viii. that the conferral of a degree, diploma or certificate be postponed, denied or
292 revoked.
- 293 d. If the decision of the hearing board results in suspension or expulsion of the student(s) or
294 revocation of a degree, the Hearing Board will follow Sections VIII.4.6&7 and XIII of the
295 Regulations

297 4.3.2 For Other University Members

- 298
- 299 a. If it is established that the Respondent who is NOT an undergraduate or graduate
300 student has breached the Policy, the Respondent and Complainant will have seven (7)
301 working days from the receipt of the Hearing Board report to make a written statement
302 to the Senior Administrator with a copy to the AVPR, regarding the findings, in advance
303 of any disciplinary action recommended by the Senior Administrator.
- 304 b. The Senior Administrator shall, upon receipt of the Hearing Board report, determine and
305 communicate to the Complainant, the Respondent, and the AVPR within twenty-five
306 (25) working days whether or not formal disciplinary action is to be taken or where
307 appropriate, recommend formal disciplinary action to the President, taking into
308 consideration collective agreements, contractual and other obligations to external
309 organizations and prior offenses under the Policy.
- 310 c. The Respondent and the Complainant who brought the Allegation shall be advised of
311 the right to appeal as set out in section 5.0. Any penalties that are the outcome of a
312 Hearing Board remain in force unless and until they are overturned by an appeal or
313 through a grievance process.

314

315 5.0 Appeals under this Policy

- 316 a. Either the Complainant or the Respondent⁵ may appeal the decision of the Hearing Board
317 by delivering to the University Secretary a written notice of appeal within twenty (20)
318 working days of receipt of a copy of the Hearing Board report (section 4.1 b). The notice
319 should include a written statement of appeal that indicates the grounds on which the
320 appellant intends to rely, and any evidence the appellant wishes to present to support
321 those grounds.
- 322 b. An appeal will be considered only on one or more of the following grounds:
- 323 i. That the decision maker(s) had no authority or jurisdiction to reach the decision it did;
 - 324 ii. That there was a reasonable apprehension of bias on the part of one or more of the
325 decision makers;
 - 326 iii. That the original Hearing Board made a fundamental procedural error that seriously
327 affected the outcome;
 - 328 iv. That new evidence has arisen that could not reasonably have been presented at the
329 initial hearing and that would likely have affected the decision of the original Hearing
330 Board.
- 331 c. Upon receipt of a notice of appeal, the University Secretary will review the record of the
332 original hearing and the written statement of appeal and determine whether or not the
333 grounds for appeal are valid. If the University Secretary determines that there are no
334 valid grounds under these Procedures for an appeal, then the appeal will be dismissed
335 without a hearing. If the University Secretary determines that there may be valid grounds
336 for an appeal, then the appeal will proceed as provided for in section 5.1. The decision of
337 the University Secretary with respect to allowing an appeal to go forward is final, with no
338 further appeal.
- 339 d. The appeal under this Policy relates only to the original Hearing Board's determination of
340 whether a breach of this Policy occurred. The subsequent determination of discipline
341 imposed for the breach of this Policy is not appealable under this Policy.

342

343 5.1 Procedures for Appeals

344 When it has been determined that an Appeal should proceed, the following steps will be taken.

- 345 a. The University Secretary shall appoint an Appeal Board within a reasonable time frame
346 composed of three to five members, one of whom shall be designated as chair, at least
347 two of whom will be senior⁶ members of the University or of another academic
348 institution, and at least one member who is external and with no current student,

⁵ In remainder of section 5.0, the term "respondent" is used to refer to the respondent in the appeal (not necessarily the Respondent to the original complaint).

⁶ Senior members of the university include senior administrators, full professors, associate professors and adjunct professors of equivalent seniority.

- 349 employment, contractual or academic affiliation to the University. If the Respondent or
350 appellant is a student, the Appeal Board shall include a student member in addition to the
351 above-mentioned members. The chair will be appointed by the University Secretary.
352 Individuals appointed to serve on an Appeal Board shall exclude anyone who was involved
353 in the original Investigation of the case.
- 354 b. The members of the Appeal Board will have no actual or perceived conflicts of interest or
355 bias and will jointly have appropriate subject matter expertise and administrative
356 background to evaluate the appeal and the response to it. Each member of the Appeal
357 Board must sign a declaration denying any conflicts of interest and must sign a
358 confidential non-disclosure agreement.
 - 359 c. The University Secretary will provide the respondent and the appellant with the names
360 and positions of the chair and members of the Appeal Board. If the appellant or
361 respondent have any objection to the composition of the Appeal Board, an objection
362 must be made to the University Secretary within five (5) working days of receiving that
363 information. The University Secretary will make the final decision as to whether a
364 reasonable apprehension of bias or conflict of interest exists.
 - 365 d. Once appointed, the chair will, within ten (10) working days, send a letter to the
366 respondent and the appellant. This letter will convey the following information and
367 documentation:
 - 368 i. the right of both the respondent and the appellant to jointly appear before the Appeal
369 Board to make submissions within thirty (30) working days of receipt of this letter, or
370 such other time as determined by the chair;
 - 371 ii. a copy of the statement of appeal, and any other information gathered in the
372 Investigation pertinent to the appeal;
 - 373 iii. a statement of confidentiality of the proceedings for the protection of privacy and
374 reputation of the respondent and the appellant;
 - 375 iv. a proscription against improper acts of retaliation;
 - 376 v. that the respondent and appellant have a right to be advised and /or accompanied by
377 an Advocate at the appeal hearing;
 - 378 vi. if the respondent wishes to provide a written argument to the Appeal Board, the
379 respondent should submit the argument to the Appeal Board at least (10) working
380 days prior to the appeal hearing, and a copy of this written argument will be provided
381 to the appellant;
 - 382 vii. a copy of these Procedures; and
 - 383 viii. anything else that the chair deems necessary to facilitate the commencement of the
384 hearing.
 - 385 e. The chair may modify timelines for parties providing submissions where, in their
386 discretion, it is reasonable and appropriate.
 - 387 f. If any party to these proceedings does not attend the hearing, the Appeal Board has the
388 right to proceed, and may decide the appeal based on the written record of the original
389 Hearing Board and the statement of appeal, and any written arguments submitted by the
390 respondent. An appellant who chooses to be absent from the hearing may appoint an
391 Advocate to present their case at a hearing.
 - 392 g. The Appeal Board is not bound to observe strict legal procedures or rules of evidence but

- 393 shall establish its own procedures subject to the following principles:
- 394 i. the Appeal Board under these regulations will not hear the case again but is limited to
- 395 considering the grounds of appeal prescribed in section 5.0 b;
- 396 ii. the parties to the appeal shall be the appellant (who may be either the original
- 397 Complainant or the original Respondent) and the other party to the original
- 398 Investigation as respondent;
- 399 iii. the original Hearing Board chair (or another member designated by the chair) may be
- 400 invited to attend to answer questions of either party or of the Appeal Board. The
- 401 original Hearing Board chair cannot discuss the *in-camera* deliberations but can
- 402 provide facts regarding the process followed;
- 403 iv. except as provided for under section 5.0 b. iv. above, no new evidence will be
- 404 considered by the Appeal Board. The record of the original hearing, including a copy
- 405 of all material filed by both sides at the Hearing Board, and the written statement of
- 406 appeal, will form the basis of the Appeal Board's deliberations;
- 407 v. it shall be the responsibility of the appellant to demonstrate that the appeal has
- 408 merit;
- 409 vi. the chair of the Appeal Board has authority to extend the appeal procedure timelines
- 410 when necessary in the circumstances to conduct a fair appeal process;
- 411 vii. the chair may also permit any and all of the participants to the appeal hearing to
- 412 appear by way of telephone or videoconference.
- 413

414 5.2 Decision by the Appeal Board

415 The Appeal will normally be completed within sixty (60) working days of the Appeal Board being

416 appointed. In exceptional circumstances, the chair may apply to the University Secretary for an

417 extension of twenty (20) working days. Further extensions may be granted for twenty (20)

418 working days at a time. If an Appeal is anticipated to take longer than sixty (60) working days

419 from the time the board is appointed, if required by the Tri-Agencies, the University Secretary

420 will consult with the relevant Tri-Agency and/or SRCR. The University Secretary will inform the

421 respondent and appellant in writing of any extensions granted. Where required, the University

422 Secretary will also provide periodic updates to the relevant Tri-Agency and/or SRCR until the

423 Appeal is complete. The frequency of the periodic updates will be determined jointly by the

424 SRCR and the University Secretary.

425

- 426 a. After the hearing is completed, the Appeal Board will meet to decide whether to uphold,
- 427 overturn or modify the decision of the original Hearing Board. The deliberations of the
- 428 Appeal Board are confidential.
- 429 b. The Appeal Board may, by majority,
- 430 i. conclude that the appellant received a fair hearing from the original Hearing Board,
- 431 and uphold the original decision; or
- 432 ii. conclude that the appellant did not receive a fair hearing, but that the decision
- 433 remains appropriate and the original decision is upheld; or
- 434 iii. conclude that the appellant did not receive a fair hearing, and dismiss or modify the

- 435 original decision; or
436 iv. order that a new Hearing Board be struck to re-investigate the case. This provision
437 should be limited to cases that in the view of the Appeal Board are significant enough
438 to warrant a new hearing, including but not limited to cases when new evidence has
439 been introduced that could not reasonable have been available to the original Hearing
440 Board.
- 441 c. The chair of the Appeal Board shall prepare a report of the board's deliberations that shall
442 recite the evidence on which the board based its conclusions. The report shall be
443 delivered to the University Secretary and distributed to the appellant, the respondent, the
444 Associate Vice President Research and the relevant Senior Administrator(s).
- 445 d. If the decision of a Hearing Board is successfully appealed, the AVPR and the appropriate
446 Senior Administrator shall take all reasonable steps to repair any damage that the
447 appellant's or respondent's reputation for academic integrity may have suffered by virtue
448 of the earlier finding of the Hearing Board.

449

450 5.3 No Further Appeal

451 The findings and ruling of the Appeal Board shall be final with no further appeal.

452

453 6.0 Records

- 454 a. Hearing Boards and Appeal Boards will provide their report and all records from the hearing
455 to the AVPR for retention in accordance with this section 6.0. Complainants, Respondents,
456 Hearing and Appeal Board members will securely destroy all copies of evidence or materials
457 they have received related to the hearing or provide them to the AVPR for secure
458 destruction.
- 459 b. Records pertaining to Allegations that result in disciplinary action will be retained in the
460 Respondent's official file in accordance with existing University policies, procedures and
461 collective bargaining agreements.
- 462 c. No record of an Allegation of a breach of the Policy will be kept in the Complainant's official
463 file except the record of disciplinary action resulting from a complaint that is made in bad
464 faith.
- 465 d. Subject to the provisions of the Policy, these Procedures and the requirements of law, any
466 and all records pertaining to charges and/or hearings and/or sanctions under these
467 Procedures are confidential and should be kept in a file accessible only to the AVPR and
468 their confidential assistants for a period of ten (10) years or while any legal or official
469 proceedings are pending. After this time, the records may be destroyed. With the
470 exception of records supporting disciplinary action that are placed in the Respondent's
471 official file, these records are strictly confidential and will be disclosed only when disclosure
472 is required by law or by a legal or official proceeding.

473

474

475 **7.0 Reporting to the Tri-Agencies**

- 476 a. Reporting Allegations of a breach of the Policy to the Tri-Agencies: Subject to any applicable
477 laws, including privacy laws, the AVPR shall advise the relevant Tri-Agency or the SRCR
478 immediately of any Allegations related to activities funded by the Tri-Agency that may
479 involve significant financial, health and safety, or other risks.
- 480 b. Reporting results of an Inquiry to the Tri-Agencies: If the SRCR was copied on the Allegation
481 or advised of an Allegation related to activities funded by the Agencies, the AVPR shall write
482 a letter to the SRCR confirming whether or not the Institution is proceeding with an
483 Investigation within two (2) months of the receipt of the Allegation.
- 484 c. Reporting an Acknowledgement of Misconduct to the Tri-Agencies: If the Allegation
485 resulted in an Acknowledgement of Misconduct, a report will be submitted to the SRCR
486 within seven (7) months of the receipt of the Allegation.
- 487 d. Reporting Results of an Investigation to the Tri-Agencies: The AVPR shall prepare a report
488 for the SRCR on each Investigation it conducts in response to an Allegation of a breach of
489 the Policy related to a funding application submitted to an Agency or to an activity funded
490 by an Agency. A report will be submitted to the SRCR within seven (7) months of the receipt
491 of the Allegation by the institution. Subject to any applicable laws, including privacy laws,
492 each report shall include content as specified by the current Tri-Agency Framework:
493 Responsible Conduct of Research.
- 494

495 **7.1 Reporting to Other Funding Agencies and Institutions**

- 496 a. Other sponsors or funding agencies that require similar notification will be notified
497 in accordance with the procedures identified by the specific agency.
- 498 b. In instances involving researchers and research collaborators associated with other
499 institutions, the AVPR shall inform the appropriate Senior Administrator of the collaborator's
500 institution of the substantiated Allegation of a breach of the Policy.

501
502
503

Effective date TBD

Major Changes to the USask Responsible Conduct of Research (RCR) Policy and Procedures (2013)

A. Rationale for Changes to the RCR Policy:

- USask has signed the Agreement on the Administration of Agency Grants and Awards by Research Institutions with the Canadian Tri-Agencies. Accordingly, USask is required to develop and administer a policy to address allegations of policy breaches by researchers that meets the minimum requirements set out in the RCR Framework. The institution applies its policy to all research conducted under its auspices or jurisdiction. The existing policy was approved in 2013 and must be updated to align with the 2016 [Tri-Agency Framework](#).
- After eight years of implementing the Policy, experience has shown a need to improve the consistency and effectiveness of the application of the policy and procedures.

B. Activities Informing the Proposed Revisions

- 1) Interviews with 13 USask members with experience working with the RCR Policy.
- 2) Environmental Scan of the RCR Policies and Procedures of 12 of the U15 Universities plus UVic. University RCR Websites were reviewed where available.
- 3) Review of the Tri-Agency Framework on Responsible Conduct of Research, 2016, interpretation bulletins, published cases and statistics.
- 4) Consultation with Policy Oversight Cttee; Governance Committee; RSAW; Associate Deans Research; Associate Dean Academic; Centres SubCommittee; Access and Privacy Officer; University Secretary's Office; Provost and Vice President Academic; Vice Provost, Teaching and Learning; Vice Provost, Faculty Relations; College of Graduate and Postdoctoral Studies; Graduate Chairs Committee; VPR Executive Cttee; Controlers Office; ICT; McKercher and McKercher; GSA; USSU; Student Affairs and Outreach. A meeting was held with the USFA on the draft policy in March, 2020 but no comments have been received.

C. Major Recommended Policy Changes

- 1) Management of the RCR policy and procedures is moved to a centralized and more senior level of the university by designating the Associate Vice President Research (AVPR) as a single point of contact for implementation:
 - a) Aligns with the Tri-Agency Framework on Responsible Conduct of Research (RCR) requirement for a single point of contact at a Senior Administrative Level to receive all confidential enquiries, allegations of breaches of policies and information related to allegations of a complaint of a breach of the RCR Policy.
 - a) Transparently simplifies the process of making and handling an allegation.
 - b) Facilitates meeting mandated timelines and reporting to the Tri-Agency and other funders when required.
 - c) Clarifies the roles of the Senior Administrator and AVPR, and removes potential conflicts of interest for the Senior Administrator which may arise from being responsible for the Inquiry, Investigation and discipline, and at times being the role of Complainant making an allegation.

- 2) Revises the section on Breaches of the policy to reflect the current RCR Framework
 - a) The list of breaches is revised to reflect the 2016 revisions to the RCR Framework.
- 3) Revises public reporting to meet the Tri-Agency RCR Framework standard.
 - a) To conform with the requirements of the 2016 RCR Framework, a statement is added that the University of Saskatchewan will post annually on its Web site, information on confirmed findings of breaches of its policy (e.g., the number and general nature of the breaches, without unique identification), subject to applicable laws, including the privacy laws.
- 4) Opens the possibility of public disclosure of a breach of the RCR Policy
 - a) A statement is added indicating the possibility of public disclosure of the identity of researchers involved in a serious breach of the RCR Policy. The University may disclose information relevant to the serious breach that is in the public interest including the name of the researcher subject to the decision, the nature of the breach, and the recourse imposed. In determining whether a breach is serious, the University will consider the extent to which the breach jeopardizes the safety of the public and/or would potentially damage the integrity of or bring the conduct of research and/or the University into disrepute.
- 5) Includes Librarians in the list of University Members.

D. Major Recommended Procedural Changes

1) Inquiry

- a) The AVPR will handle the Inquiry into an Allegation rather than the relevant Senior Administrator. The AVPR may delegate the Inquiry, but will maintain oversight.
- b) Guidelines on the content of an allegation to ensure allegations meet the Framework criteria for a Responsible Allegation.
- c) Increased guidance on the specific activities at the Inquiry stage.
- d) Lengthened timeline for the Inquiry and possibility of extensions if warranted.

2) Investigation

- a) Centralized support for hearing boards from the OVPR.
- b) Clarification of the authority of the hearing board.

3) Students

- a) All aspects of a breach of the RCR Policy involving students will be handled under the RCR Policy rather than the Student Academic Misconduct Procedures in order to ensure all complainants and respondents to an RCR allegation are treated consistently and reporting meets all Tri-Agency requirements.

4) Appeals

- a) Appeals will now be made to the University Secretary who will consider on procedural grounds whether or not to grant an appeal.

5) Confidentiality

- a) Declarations of potential conflicts of interest are required from hearing board members and Chairs.

6) Informal Procedures

- a) Option for Acknowledgement of Misconduct when a respondent agrees to the statement of facts alleged in the complaint and guidelines on documenting these. The respondent will have had the opportunity to consult with an advisor prior to signing the Acknowledgement of Misconduct. This option follows guidance from the SRCR issued in January 2015.

E. Practical Implications of the Recommended Changes:

- 1) Centralized management of RCR Policy and Procedures in the OVPR. An AVPR is designated as USask's central point of contact to the Tri-Agencies for RCR and will oversee implementation of the Policy and Procedures. Senior Administrators will be informed of RCR inquiries and investigations involving their students and personnel but will only be formally involved if a breach is confirmed and consequences or discipline are to be considered.
- 2) Active and ongoing support is required to ensure USask meets its Tri-Agency obligations regarding RCR, improve consistency, timeliness and better serve members of the University.
 - a) Recommendation for a pilot program to appoint a Research Integrity Officer from USask Faculty. The Research Integrity Officer would be a resource for information requests and for hearing boards and could be delegated to undertake the Inquiry under the RCR Procedures.
 - b) Appointment of an RCR Senior Advisor, reporting to the AVPR who would support the AVPR/RIO with investigations of allegations of breaches of the RCR Policy, assist with the activities of hearing boards established to hear allegations, ensure records of the inquiry and hearings and copies of all documents and materials provided to the hearing boards are complete and securely stored, assist the AVPR/RIO with reporting requirements to the Tri-Agencies, maintaining the website content and reporting to University Council
- 3) Online and ongoing education regarding RCR for university students, faculty and staff. This is a significant need, will require appropriate resourcing and will be coordinated by AVPR, RCR Senior Advisor and Research Integrity Officer.
- 4) Establishment of a standing bench of RCR Hearing Board Chairs and Hearing Board members, who will be trained and supported to fulfill their role and responsibilities.
- 5) Guidance is being developed on what activities are defined as research for the purposes of determining whether the RCR Policy or the Students Academic Misconduct Regulations will apply to a student facing an allegation.
- 6) Development of a series of guidance documents and templates to facilitate and standardize processes.
- 7) Development of a website that identifies who to contact when an RCR issue arises, houses guidance documents and templates, USask statistics, and links to online education.

Revised Responsible Conduct of Research Policy (2021) and its Application to Students

Tri-Agency Definition of Research

The Tri-Agency Framework Responsible Conduct of Research defines research as “an undertaking to extend knowledge through a disciplined inquiry or systematic investigation”.

Proposed Tri-Agency Definition of Responsible Conduct of Research

The behavior expected of anyone who conducts research activities throughout the life cycle of a research project (i.e. from the formulation of the research question, through the design, conduct and analysis of the research, to its reporting, publication and dissemination). 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 scholarly research. These values include honesty, fairness, trust, accountability and openness.

Making a decision on consideration of an Allegation under the RCR Policy or the Regulations on Student Academic Misconduct

If the AVPR receives an Allegation that a student may be in breach of the Policy, the AVPR will consult with the appropriate Senior Administrator to determine whether the Allegation relates to a breach of the Policy or is a matter under the *Regulations on Student Academic Misconduct* (the “*Regulations*”).

Activities categorized as research activity for the purposes of determining whether an allegation naming a student respondent is investigated under the RCR Policy include but are not limited to:

1. Funding applications, research and projects supported by the Tri-Agencies or other research funding organizations;
2. Contract, consulting or industrial research;
3. Research that requires review by a Human or Animal REB;
4. Course based activity defined as research requiring Human REB review;
5. Undergraduate Theses, Masters Theses or PhD Dissertations;
6. Original investigations to apply existing knowledge in a novel way; to produce new products, devices, systems and services, offer improvements over those already produced or installed;

[Adapted from the University of Waterloo]

Investigations and Appeals when a Student is the Respondent

If the Respondent is a student, the Hearing Board and/or the Appeal Board shall include a student member.

Student Discipline when an RCR Hearing Board finds the Policy has been breached

- a. If a Respondent who is an undergraduate or graduate student is found to have breached the Policy, the consequences and sanctions shall be determined by the Hearing Board. The Respondent and Complainant will have seven (7) working days from the receipt of the Hearing Board report to make a written statement to the Hearing Board with a copy to the AVPR, regarding the findings, in advance of any disciplinary action determined by the Hearing Board.
- b. The Hearing Board shall request from the Governance Office a record (if any) of any sanctions imposed by other University hearing boards or appeal boards for similar academic misconduct matters.
- c. The Hearing Board shall have the authority to impose one or more sanctions which may include, *but are not limited to*, the following:
 - i. that the student(s) be reprimanded or censured;

- ii. that a mark of zero or other appropriate grade be assigned for the entire course, for an assignment, or that a credit or mark for the course be modified or cancelled;
 - iii. that an assignment be redone or any other academic performance be repeated;
 - iv. that the student(s) be required to submit an essay or assignment relating to the topic of academic misconduct, or to prepare and/or deliver a presentation on that topic;
 - v. that the student(s) be required to complete additional training in responsible conduct of research;
 - vi. that the student(s) be suspended from the University for a specified period of time;
 - vii. that the student(s) be expelled permanently from the University; or
 - viii. that the conferral of a degree, diploma or certificate be postponed, denied or revoked.
- d. If the decision of the hearing board results in suspension or expulsion of the student(s) or revocation of a degree, the Hearing Board will follow Sections VIII.4.6&7 and XIII of the Regulations

Student Discipline when a Student Acknowledges a Breach.

If the Respondent Acknowledging a Breach is a student, the AVPR will empanel a Hearing Board to determine what discipline or other consequences are warranted as outlined in Section 5g of the Procedures after receiving submissions regarding potential consequences and/or sanctions from each of the parties.

Student Support

Students will be encouraged to contact Student Affairs and Outreach for support and the GSA for advocacy in the letter sent to Respondents by the AVPR and the Chair of the Hearing or Appeal Board.

Current RCR POLICY (2013) and Students

Research misconduct is one aspect of academic misconduct and a number of the breaches listed in the RCR Policy are also in the Regulations. There is specific guidance in the Regulations on page 9 and 11 that reference the RCR Policy.

In Section IV (7)

Special Procedures Applying Only to Allegations Relating to Responsible Conduct of Research (sp) Policy: Allegations that relate to a breach of the Responsible Conduct of Research Policy must be determined in accordance with special hearing procedures set out in that Policy (<http://policies.usask.ca/policies/research-and-scholarly-activities/responsible-conduct-of-research-policy.php>) before such allegations can be addressed under these Regulations. Upon receipt of an allegation of academic misconduct, the Academic Administrator shall first determine whether the allegation must be heard under the procedures in the Responsible Conduct of Research Policy. The decision of the Academic Administrator in this matter is final and not subject to appeal. The University Secretary will be notified of the decision of the Academic Administrator in this regard.

And Section VII (A) (6)

Special Hearing Procedures for Breaches of Responsible Conduct of Research Policy: If a hearing under the Responsible Conduct of Research Policy determines that a breach of that Policy has occurred, then a hearing under these Regulations will occur with regard solely to sanctions. The hearing board will be provided the report (decision) of the Responsible Conduct of Research Policy hearing board and will hear evidence and submissions only in relation to sanctions. The hearing board will render a decision in accordance with Section VIII of these Regulations. In the event a student appeals the finding of breach (in accordance with the Procedures under the Responsible Conduct of Research Policy), the hearing under these Regulations to determine sanctions is suspended until the resolution of the appeal.