

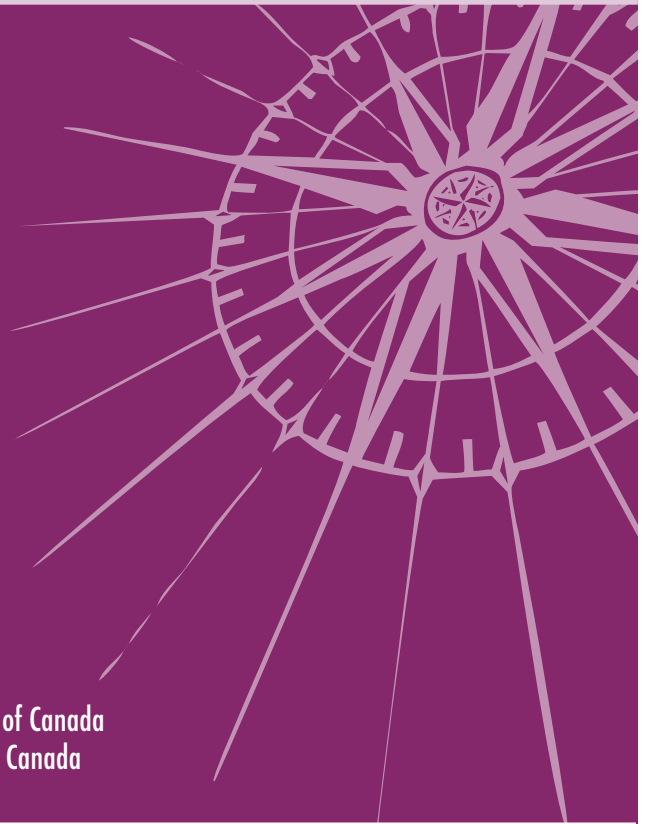
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Tri-Agency Framework

# Responsible Conduct of Research

Canadian Institutes of Health Research  
Natural Sciences and Engineering Research Council of Canada  
Social Sciences and Humanities Research Council of Canada



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2021



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# 1 TRI-AGENCY FRAMEWORK: RESPONSIBLE CONDUCT OF RESEARCH

## 1.1 Introduction

The search for knowledge about ourselves and the world around us is a fundamental human endeavour. Research<sup>1</sup> is a natural extension of this desire to understand and to improve the world in which we live, and its results have both enriched and improved our lives and human society as a whole.

In order to maximize the quality and benefits of research, a positive research environment is required. For researchers, this implies duties of honest and thoughtful inquiry, rigorous analysis, commitment to the dissemination of research results, and adherence to the use of professional standards. For the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) (the Agencies) and Institutions that receive Agency funding, it calls for a commitment to foster and maintain an environment that supports and promotes the responsible conduct of research (RCR). Responsible Conduct of Research<sup>2</sup> is the behavior expected of anyone who conducts or supports research activities throughout the life cycle of a 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 RCR Framework sets out the responsibilities and corresponding policies for researchers, Institutions, and the Agencies, that together help support and promote a positive research environment. It specifies the responsibilities of researchers with respect to research integrity, applying for funding, financial

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<sup>1</sup> Research is an undertaking intended to extend knowledge through a disciplined inquiry and/or systematic investigation (based on the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS 2 \(2018\)](#)). The conduct of research in the context of this RCR Framework includes applying for and managing Agency funds, performing research, and disseminating results.

<sup>2</sup> This definition is based on text drawn from the following sources: [The Hong Kong Principles for assessing researchers: Fostering research integrity \(2020\)](#), 6<sup>th</sup> 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.

management, and requirements for conducting certain types of research, and defines what constitutes a breach of Agency policies. For Institutions, it details the minimum requirements for institutional policies for addressing allegations of all types of policy breaches, and Institutions' responsibilities for promoting responsible conduct of research and reporting to the Agencies. This RCR Framework also sets out the process to be followed by the Agencies, and administered by the Secretariat on Responsible Conduct of Research (SRCR) and the Panel on Responsible Conduct of Research (PRCR), when addressing allegations of breaches of Agency policies.

A diagram summarizing the process used to address allegations is provided in Appendix A. A glossary of terms is provided in Appendix B.

## **1.2 Scope**

This RCR Framework describes Agency policies and requirements related to applying for and managing Agency funds, performing research, and disseminating results, and the processes that Institutions and Agencies follow in the event of an allegation of a breach of an Agency policy. The provisions of this RCR Framework are subject to the specific terms and conditions of individual funding agreements and the [Agreement on the Administration of Agency Grants and Awards by Research Institutions](#) (the Agreement) between the Agencies and each Institution.

The Institution shall 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. In addition, researchers who apply for or hold agency funding are required by the Agencies to adhere to the RCR Framework.

## **1.3 Objectives**

The objectives of the RCR Framework are to:

- a. ensure that the funding decisions made by the Agencies are based on accurate and reliable information;
- b. ensure public funds for research are used responsibly and in accordance with funding agreements;
- c. promote and protect the quality, accuracy, and reliability of research funded by the Agencies; and
- d. promote fairness in the conduct of research and in the process for addressing allegations of policy breaches.

## 2 RESPONSIBILITIES OF RESEARCHERS<sup>3</sup>

### 2.1 Tri-Agency Research Integrity Policy

The *Tri-Agency Research Integrity Policy* (the Policy) is a joint policy of the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) (the Agencies). The Policy's purpose is to support the Agencies in discharging their respective legislative mandates<sup>4</sup> to promote and assist research and in discharging their responsibility to foster a positive research environment.

#### 2.1.1 Scope

The Agencies require that all researchers applying for, or in receipt of, Agency funds comply with the Policy.

#### 2.1.2 Promoting Research Integrity

Researchers shall strive to 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:

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

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<sup>3</sup> The responsibilities in this section have drawn from the following sources: CCA (2010), [Honesty, Accountability and Trust: Fostering Research Integrity in Canada](#). Ottawa: Council of Canadian Academies; and the [Singapore Statement on Research Integrity](#), 2<sup>nd</sup> World Conference on Research Integrity, 21-24 July 2010.

<sup>4</sup> See [Canadian Institutes of Health Research Act](#), Statutes of Canada, 2000, Chapter 6; [Natural Sciences and Engineering Research Council Act](#), Revised Statutes of Canada, 1985, Chapter N-21; [Social Sciences and Humanities Research Council Act](#), Revised Statutes of Canada, 1985, Chapter S-12.

regulations, and professional or disciplinary standards in a manner that will allow verification or replication of the work by others.

- c. *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.
- d. *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.
- e. *Acknowledgement*: Acknowledging appropriately all those and only those who have contributed to research, including funders and sponsors.
- f. *Conflict of interest management*: Appropriately identifying and addressing any real, potential or perceived conflict of interest<sup>5</sup>, 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.

## **2.2 Applying for and Holding Agency Funding**

- a. Applicants and holders of Agency grants and awards shall provide true, complete and accurate information in their funding applications and related documents and represent themselves, their research and their accomplishments in a manner consistent with the norms of the relevant field.
- b. Applicants may only apply for funding if they are not currently ineligible to apply for, and/or hold, funds from CIHR, NSERC, SSHRC or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.

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<sup>5</sup> 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. (Based on Chapter 7 of the TCPS 2 (2018)).



- c. Principal funding applicants must ensure that others listed on the application have agreed to be included.

### **2.3 Management of Agency Grant and Award Funds**

Researchers are responsible for using grant or award funds in accordance with the policies of the Agencies, including the [Tri-Agency Guide on Financial Administration](#) and Agency grants and awards guides; and for providing true, complete and accurate information on documentation for expenditures from grant or award accounts.

### **2.4 Agency Requirements for Certain Types of Research**

Researchers must comply with all applicable Agency requirements and legislation for the conduct of research, including, but not limited to:

- [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS 2 \(2018\)](#);
- [Canadian Council on Animal Care Policies and Guidelines](#);
- Agency policies related to the [Impact Assessment Act](#);
- Licenses for research in the field;
- [Laboratory Biosafety Guidelines](#);
- [Controlled Goods Program](#);
- [Canadian Nuclear Safety Commission \(CNSC\) Regulations](#);
- [Canada's Food and Drugs Act](#).

### **2.5 Rectifying a Breach of Agency Policy**

Researchers in breach of an Agency policy are expected to be proactive in rectifying a breach, for example, by correcting the research record, providing a letter of apology to those impacted by the breach, or repaying funds.

### **2.6 Participation in Agency Review Processes**

- a. Participants in agency review processes must comply with the [Conflict of Interest and Confidentiality Policy of the Federal Research Funding Organizations](#).
- b. Participants in agency review processes confirm that they are not currently under investigation for an alleged breach of the RCR Framework or any other responsible conduct of research policies such as ethics, integrity or financial management policies.

If participants find themselves under investigation, they must temporarily withdraw themselves from participation in any Agency review process until the investigation is complete and a determination is made by the Agency whether they can resume their participation.

## **2.7 Appropriate supervision and training in the conduct of research**

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.

## **3 BREACHES OF AGENCY POLICIES BY RESEARCHERS<sup>6</sup>**

Agency-funded researchers - including those researchers who hold awards outside of Canada or at organizations in Canada that have not signed the Agreement - must comply with Agency policies. By signing an application for a grant or an award, and by accepting a grant or an award, a researcher agrees to comply with the Agencies' policies.

### **3.1 Breaches of Agency Policies**

A breach of the RCR Framework is the failure to comply with any Agency policy throughout the life cycle of a research project – from application for funding, to the conduct of the research and the dissemination of research results. In determining whether an individual has breached an Agency policy, it is not relevant to consider whether a breach was intentional or a result of honest error. However, intent is a consideration in deciding on the severity of the recourse that may be imposed. The following is a non-exhaustive list of breaches of Agency policies:

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<sup>6</sup> The definitions in this section have drawn from the following sources: CCA (2010). [Honesty, Accountability and Trust: Fostering Research Integrity in Canada](#). Ottawa: Council of Canadian Academies; the [Singapore Statement on Research Integrity](#), 2<sup>nd</sup> World Conference on Research Integrity, 21-24 July 2010; the [Committee on Publication Ethics \(COPE\)](#); and the University of Toronto, 'Framework to Address Allegations of Research Misconduct' Nov. 7, 2006.

### 3.1.1 Breaches of Tri-Agency Research Integrity Policy

- a. *Fabrication*: Making up data, source material, methodologies or findings, including graphs and images.
- b. *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.
- c. *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.
- d. *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.
- e. *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.
- f. *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.
- g. *Inadequate acknowledgement*: Failure to appropriately recognize contributors.
- h. *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.

### 3.1.2 Misrepresentation in an Agency Application or Related Document

- a. Providing incomplete, inaccurate or false information in a grant or award application or related document, such as a letter of support or a progress report.
- b. Applying for and/or holding an Agency award when deemed ineligible by CIHR, NSERC, SSHRC, or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.
- c. Listing of co-applicants, collaborators or partners without their agreement.

### 3.1.3 Mismanagement of Grants or Award Funds

Using grant or award funds for purposes inconsistent with the policies of the Agencies; misappropriating grants and award funds; contravening Agency financial policies, namely the [Tri-Agency Guide on Financial Administration](#), Agency grants and awards guides; or providing incomplete, inaccurate or false information on documentation for expenditures from grant or award accounts.

### 3.1.4 Breaches of Agency Policies or Requirements for Certain Types of Research

Failing to meet Agency policy requirements or, to comply with relevant policies, laws or regulations, for the conduct of certain types of research activities; failing to obtain appropriate approvals, permits or certifications before conducting these activities.

### 3.1.5 Breaches of Agency Review Process

- a. Non-compliance with the [Conflict of Interest and Confidentiality Policy of the Federal Research Funding Organizations](#).
- b. Participating in an Agency review process while under investigation.

## 3.2 Roles of Individuals in Addressing Allegations of Policy Breaches

Researchers and others play important roles in the process for addressing allegations of policy breaches and in helping to ensure that allegations are addressed appropriately and in a timely manner. The following are guidelines for those making or involved in an allegation:

- a. Individuals are expected to report in good faith and confidentially any information pertaining to possible breaches of Agency policies to the Institution where the researcher involved is currently employed, enrolled as a student or has a formal association.

This information should be sent directly to the Institution's designated point of contact, in writing, with an exact copy sent to SRCR.

- b. Individuals involved in an inquiry or investigation must follow the Institution's policy and process as a complainant, a respondent or a third party, as appropriate.

## **4 RESPONSIBILITIES OF INSTITUTIONS**

### **4.1 Agreement on the Administration of Agency Grants and Awards by Research Institutions**

The [Agreement on the Administration of Agency Grants and Awards by Research Institutions](#) sets out the minimum roles, responsibilities and requirements that Institutions must meet as a condition of eligibility to apply for, and hold, Agency funding.

### **4.2 Promoting Responsible Conduct of Research**

Institutions shall strive to provide an environment that supports the best research and that fosters researchers' abilities to act honestly, accountably, openly and fairly in the search for, and dissemination of, knowledge.<sup>7</sup> Institutions shall do so by:

- a. Establishing and applying responsible research conduct policy(ies) and procedures that meet the requirements of this RCR Framework (Article 4.3);
- b. Reporting to the SRCR as per Article 4.4.
- c. Promoting education on, and awareness of, the importance of the responsible conduct of research (Article 4.5).

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<sup>7</sup> Adapted from CCA (2010). [Honesty, Accountability and Trust: Fostering Research Integrity in Canada](#). Ottawa: Council of Canadian Academies.

### **4.3 Institutional Policy Requirements for Addressing Allegations of Policy Breaches**

Institutions play important roles in addressing allegations of all types of policy breaches by researchers (as described in Section 3) and in ensuring that such allegations are handled appropriately and in a timely manner. Institutions shall develop and administer a policy(ies) that applies to all research conducted under their auspices or jurisdiction to address allegations of policy breaches by researchers that includes, at a minimum, the following sections:

#### 4.3.1 Definitions

The definitions of researchers' responsibilities and breaches of policies as set out in Sections 2 and 3 of this RCR Framework.

#### 4.3.2 Confidentiality

A statement of principle to protect the privacy of the complainant(s) and respondent(s) as far as is possible.

#### 4.3.3 Receiving Allegations

- a. A central point of contact at a senior administrative level, to receive all confidential enquiries, allegations of breaches of policies, and information related to allegations.
- b. A statement that it will consider an anonymous allegation if accompanied by sufficient information to enable the assessment of the allegation and the credibility of the facts and evidence on which the allegation is based, without the need for further information from the complainant.
- c. A statement of principle to protect, to the extent possible, the individual making an allegation in good faith or providing information related to an allegation from reprisals in a manner consistent with relevant legislation.
- d. A statement indicating that the Institution may independently, or at the Agency's request in exceptional circumstances, take immediate action to protect the administration of Agency funds. Immediate actions could include freezing grant accounts, requiring a second authorized signature from an institutional representative on all expenses charged to the researcher's grant accounts, or other measures, as appropriate.

- e. A statement indicating that, 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.

#### 4.3.4 Investigating Allegations

- a. An initial inquiry process to establish whether an allegation is responsible and if an investigation is required. An inquiry may be conducted by one or more individuals. This could include the Institution's designated RCR contact and/or other individuals qualified to assess whether the allegation is responsible. The individual(s) conducting an inquiry should be without conflict of interest, whether real, potential or perceived.
- b. An investigation process for determining the validity of an allegation that provides the complainant and respondent with an opportunity to be heard as part of an investigation, and that allows for the respondent to appeal if a breach of policy is confirmed.
- c. An investigation committee, appointed with the authority to decide whether a breach occurred. The investigation committee shall include members who have the necessary expertise and who are without conflict of interest, whether real or apparent, and at least one external member who has no current affiliation with the Institution.
- d. Reasonable timelines for completing an inquiry, completing an investigation, reporting the findings, making a decision on what action should be taken, and communicating with the parties involved. The timelines must be within the reporting timeframes outlined in Article 4.4.

#### 4.3.5 Recourse

- a. A provision that the investigation committee's report, including its final decision, is provided to the Institution's central point of contact within a timeframe specified in the Institution's policy.
- b. A process for determining what kinds of recourse can be taken by the Institution, taking into account the severity of the breach.

#### 4.3.6 Accountability

- a. A procedure to provide affected parties with relevant information about the process and outcome of the inquiry and investigation. Institutions are encouraged to disclose information on the measures that they may be taking to improve their processes including training, as a result of the allegation. Information should be provided in a manner consistent with the privacy legislation applicable to the Institution(s) that are conducting the inquiry or investigation. Recourse against a respondent should only be shared with the respondent, or those who are authorized to receive this personal information.
- b. A provision for allegations determined to be unfounded that all reasonable efforts will be made by the Institution to protect or restore the reputation of those subjected to an unfounded allegation.

#### 4.4 Reporting Requirements

- a. Subject to any applicable laws, including privacy laws, the Institution shall advise the relevant Agency or SRCR immediately of any allegations related to activities funded by the Agency that may involve significant financial, health and safety, or other risks.
- b. The Institution shall write a letter to the SRCR confirming whether or not the Institution is proceeding with an investigation where the SRCR was copied on the allegation or advised as per Article 4.4.a. If a breach is confirmed at the inquiry stage, reporting requirements outlined in Article 4.4.c apply.
- c. The Institution shall prepare a report for the SRCR on each investigation it conducts in response to an allegation of policy breaches related to a funding application submitted to an Agency or to an activity funded by an Agency. Subject to any applicable laws, including privacy laws, each report shall include the following information:
  - the specific allegation(s), a summary of the finding(s) and reasons for the finding(s);
  - the process and timelines followed for the inquiry and/or investigation;
  - the researcher's response to the allegation, investigation and findings, and any measures the researcher has taken to rectify the breach; and



- the institutional investigation committee's decisions and recommendations and actions taken by the Institution.

The Institution's report should not include:

- information that is not related specifically to Agency funding and policies; or
  - personal information about the researcher, or any other person, that is not material to the Institution's findings and its report to the SRCR.
- d. The Institution should submit inquiry letters or inquiry reports to the SRCR within two months of receipt of an allegation. If an investigation is warranted, the Institution has an additional five months following the end of the inquiry to conduct an investigation and submit its report to the SRCR. The Institution therefore has a total of seven months from the date of receipt of an allegation that results in an investigation to report to the SRCR.

These timelines may be extended in consultation with the SRCR if circumstances warrant, and with periodic updates provided to the SRCR until the investigation is complete. The frequency of the periodic updates will be determined jointly by the SRCR and the Institution.

- e. The Institution and the researcher may not enter into confidentiality agreements or other agreements related to an inquiry or investigation that prevent the Institution from reporting to the Agencies through the SRCR.
- f. In cases where the source of funding is unclear, the SRCR reserves the right to request information and reports from the Institution.

#### **4.5 Promoting Awareness and Education**

An Institution is responsible for:

- a. Promoting awareness of what constitutes the responsible conduct of research, including Agency requirements as set out in the Institution's policies, the consequences of failing to meet them, as well as the process for addressing allegations, to all those engaged in research activities at the Institution.
- b. Communicating its policy on the responsible conduct of research within the Institution, and posting annually on its Web site information on

confirmed findings of breaches of its policy (e.g., the number and general nature of the breaches), subject to applicable laws, including the privacy laws.

Reporting annually to the SRCR on the total number of allegations received involving Agency funds, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including privacy laws.

- c. Communicating within the Institution, the central point of contact responsible for receiving confidential enquiries, allegations and information related to allegations of breaches of Agency policies.

## **5 BREACHES OF AGENCY POLICIES BY INSTITUTIONS**

In accordance with the Agreement signed by the Agencies and each Institution, the Agencies require that each Institution complies with Agency policies as a condition of eligibility to apply for and administer Agency funds.

The process followed by the Agencies to address an allegation of a breach of an Agency policy by an Institution, and the recourse that the Agencies may exercise, commensurate with the severity of a confirmed breach, are outlined in the Agreement.

## **6 RESPONSIBILITIES OF THE AGENCIES**

In striving to meet the objectives of this RCR Framework, the Agencies are responsible for:

- a. communicating this RCR Framework, including the contact information for those responsible for its administration;
- b. responding promptly to enquiries regarding this RCR Framework;
- c. helping to promote the responsible conduct of research and to assist individuals and Institutions with the interpretation or implementation of this RCR Framework;
- d. reviewing and updating this RCR Framework at least every five years; and
- e. responding to allegations of breaches of Agency policies.

## 6.1 Tri-Agency Process for Addressing Allegations of Policy Breaches by Researchers

The Agencies, through the SRCR and the PRCR, play important roles in addressing allegations of breaches of their policies and in ensuring that such allegations are addressed appropriately and in a timely manner. At any time after an allegation is made, the SRCR may request information from the individual and Institution involved.<sup>8</sup>

### 6.1.1 Receiving Allegations

- a. If the SRCR receives an allegation directly from a complainant, it will ask the complainant to provide the information in writing to the Institution where the researcher involved is currently employed, enrolled as a student or has a formal association, with a copy to the SRCR.
- b. Following receipt of an allegation, if the matter involves Agency funding and an alleged breach of an Agency policy, the SRCR will follow-up as needed with the complainant, the Institution and other parties, subject to applicable laws, including the *Privacy Act*.
- c. An Agency may submit their own allegations directly to an Institution, for example, as a result of information obtained through institutional monitoring reviews or its peer review activities.

### 6.1.2 Review of Institutional Reports

- a. The SRCR may follow-up with the Institution as needed to obtain updates on the status of the investigation.
- b. The SRCR and the PRCR will review the Institution's report to determine whether it meets Agency requirements, as outlined in Articles 4.3 and 4.4, and whether there has been a breach of Agency policies, the Agreement and/or a funding agreement. The SRCR may follow-up with the Institution for clarification.
- c. The PRCR will recommend recourse, if appropriate, consistent with the RCR Framework.

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<sup>8</sup> If no Institution that has signed the Agreement is involved, for example, if the researcher is holding an Agency scholarship or fellowship abroad, the Agency may review the file and deal directly with the researcher involved.

### 6.1.3 Recourse

- a. If the Agency determines that there has been a breach of an Agency policy, it will exercise the recourse it considers appropriate, commensurate with the severity of the breach. When making its decision, the Agency will take into consideration the PRCR's recommendations, the Institution's findings, the severity of the breach and any actions taken by the Institution and researcher involved to remedy the breach.
- b. Such recourse can include, but is not limited to:
  - issuing a letter of concern to the researcher;
  - requesting that the researcher correct the research record and provide proof that the research record has been corrected;
  - advising the researcher that the Agency will not accept applications for future funding from them for a defined time period or indefinitely;
  - terminating remaining instalments of the grant or award;
  - seeking a refund within a defined time frame of all or part of the funds already paid;
  - advising the researcher that the Agency will not consider them to serve on agency committees (e.g. peer review, advisory boards); and/or
  - such other recourse available by law.

In exercising the appropriate recourse, the Agency will give consideration to affected research personnel including students, post-doctoral fellows and research support staff.

### 6.1.4 Accountability and Reporting

- a. The Agency will inform the researcher subject to the decision, and their Institution, of the Agency's decision, where applicable. The content of this communication will be subject to any applicable laws, including privacy laws.
- b. The Agency will notify the appropriate authorities if at any time it becomes aware of possible fraud or other unlawful activity.
- c. In cases of a serious breach of Agency policy, as determined by the Agency President, the Agency may publicly disclose any information relevant to the breach that is in the public interest, including the name of the researcher subject to the decision, the nature of the breach, the

Institution where the researcher was employed at the time of the breach, the Institution where the researcher is currently employed and the recourse imposed. In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public and/or would bring the conduct of research into disrepute.

- d. The SRCR will serve as a central repository for institutional statistics on RCR involving Agency funds. The Secretariat will post annually, on its Web site, statistical data received from Institutions on the total number of allegations, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including the *Privacy Act*.

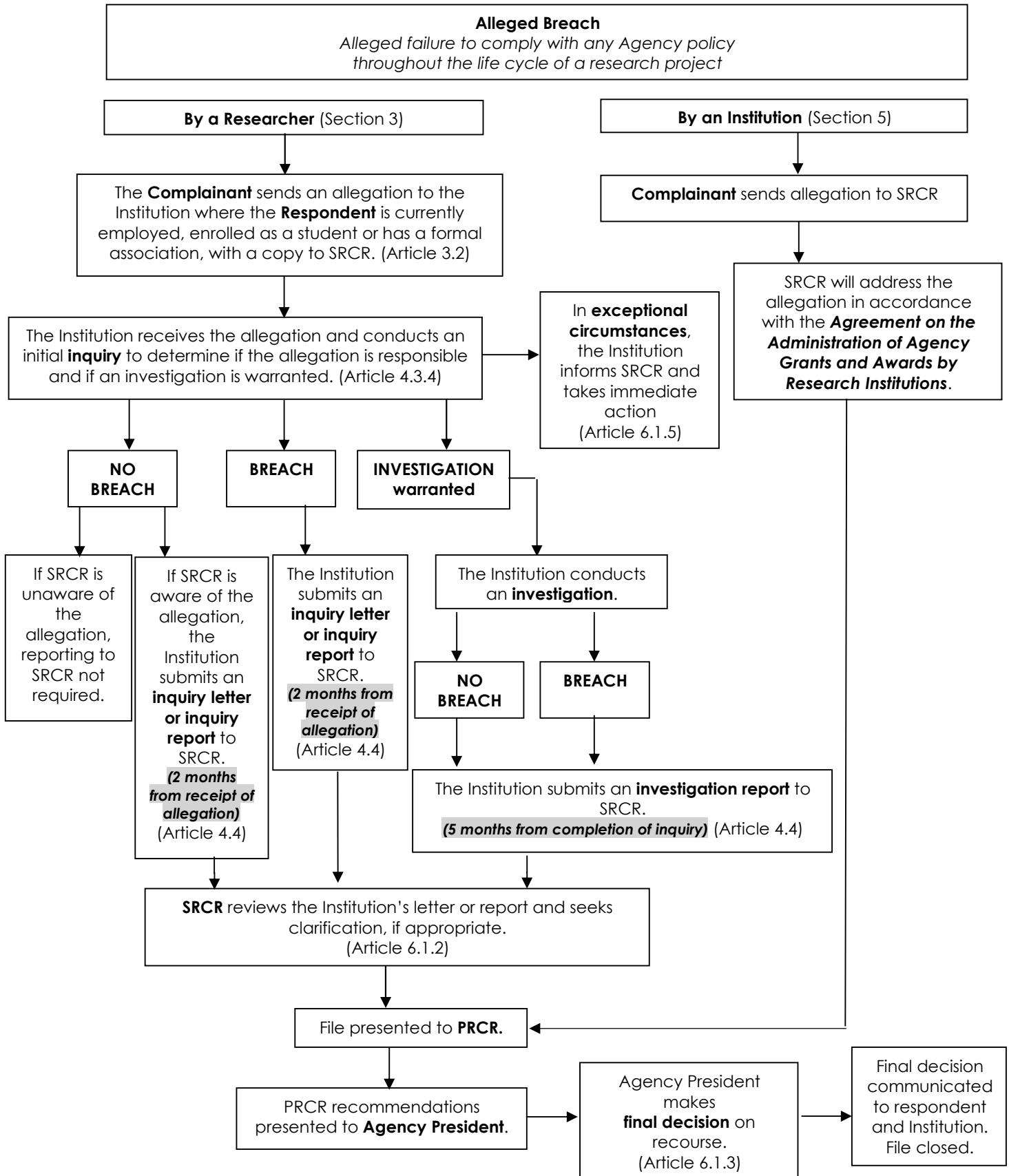
#### 6.1.5 Measures for Exceptional Circumstances

In exceptional circumstances, taking into account the severity and urgency of the alleged breach, its possible consequences and the potential financial, health, safety or other risks involved, the Agencies reserve the right to take special measures, including the following:

- 6.1.5.1 *Immediate Action*: The Agency may take immediate action (as set out in Article 4.3.3.d), or may require the Institution to do so. The Agency will consult with the Institution and will consider any actions already taken by the Institution and/or the researcher when deciding on whether further action is required.
- 6.1.5.2 *Review or Compliance Audit*: The Agency may conduct its own review or compliance audit, or require the Institution to conduct an independent review/audit. The Agency will consult with the Institution and will consider the investigation already planned, underway or completed by the Institution, and its findings.

## 7 APPENDICES

### A. SUMMARY OF RCR PROCESS



## B. GLOSSARY

This glossary is intended to assist readers in their understanding of the *Tri-Agency Framework: Responsible Conduct of Research*, also referred to as “the RCR Framework.” Terms are defined in accordance with the purposes and objectives of the RCR Framework.

**Accountability:** Being responsible for one's actions.\*

**Agencies:** Canada's three federal granting agencies: the Canadian Institutes of Health Research (CIHR); the Natural Sciences and Engineering Research Council of Canada (NSERC); and the Social Sciences and Humanities Research Council of Canada (SSHRC).

**Agency policies:** The set of rules, directives and guidelines issued by an individual Agency or jointly by the Agencies.

**Agreement on the Administration of Agency Grants and Awards by Research Institutions (the Agreement):** The agreement between the Agencies and Institutions eligible to receive and manage research funding from the Agencies.

**Allegation:** A declaration, statement, or assertion communicated in writing to an Institution or Agency to the effect that there has been, or continues to be, a breach of one or more Agency policies, the validity of which has not been established.

**Applicant (including co-applicant):** An individual who has submitted an application, individually or as part of a group or team, for funding from the Agencies.

**Author (including co-author):** The writer, or contributing writer, of a research publication or document.

**Breach:** A breach of the RCR Framework is the failure to comply with any Agency policy throughout the life cycle of a research project – from application for funding, to the conduct of the research and the dissemination of research results. It includes all activities related to the research, including the management of Agency funds. For examples of breaches, see Article 3.1.

**Complainant:** An individual or representative from an organization who has notified an Institution or Agency of a potential breach of an Agency policy.

**Conflict of interest:** A conflict of interest may arise when activities or situations place an individual in a real, potential or perceived conflict between the duties or responsibilities related to research, and personal, institutional or other interests. 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.†

**Eligible Institution:** An Institution that (a) meets the eligibility requirements to receive funding set out in guidelines issued by the Agency; and (b) has signed the [Agreement on the Administration of Agency Grants and Awards by Research Institutions](#).

**Fairness:** Being impartial and using sound judgment free of prejudice or favouritism.\*

**Funding agreement:** A written agreement that sets out the terms and conditions that an Agency and a researcher agree to for a particular grant or award. It defines the researcher's responsibilities, what constitutes a breach of the agreement, and the consequences of a breach.

**Honesty:** Being straightforward, and free of fraud and deception.\*

**Inquiry:** The process of reviewing an allegation to determine whether the allegation is responsible, the particular policy or policies that may have been breached, and whether an investigation is warranted based on the information provided in the allegation.

**Investigation:** A systematic process, conducted by an Institution's investigation committee, of examining an allegation, collecting and examining the evidence related to the allegation, and making a decision as to whether a breach of a policy(ies) has occurred.

**Institution:** The universities, hospitals, colleges, research institutes, centres and other organizations eligible to receive and manage Agency grant funds on behalf of the grant holders and the Agencies.

**Institutional policy:** The set of rules, directives and guidelines issued by an individual Institution that meet the requirements of the *Tri-Agency Framework: Responsible Conduct of Research*.

**Non-eligible Institution:** An Institution other than an eligible Institution.



**Openness:** Being transparent in process and practice, as characterized by visibility or accessibility of information.\*

**Research:** An undertaking intended to extend knowledge through a disciplined inquiry or systematic investigation.

**Researcher:** Anyone who conducts research activities.

**Respondent:** An individual who is identified in an allegation as having possibly breached Agency and/or institutional policy.

**Responsible allegation:** An allegation: 1) that is based on facts which have not been the subject of a previous investigation; that falls within Sections 2 and 3 of this RCR Framework; and 3) which would, if proven, have constituted a breach at the time the alleged breach occurred.

**Serious breach:** In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public or brings the conduct of research into disrepute. This determination will be based on an assessment of the nature of the breach, the level of experience of the researcher, whether there is a pattern of breaches by the researcher, and other factors as appropriate. Examples of serious breaches may include:

- Recruiting human participants into a study with significant risks or harms without Research Ethics Board approval, or not following approved protocols
- Using animals in a study with significant risks or harms without Animal Care Committee approval, or not following approved protocols
- Deliberate misuse of research grant funds for personal benefit not related to research
- Knowingly publishing research results based on fabricated data
- Obtaining grant/award funds from the Agencies by misrepresenting one's credentials, qualifications and/or research contributions in an application

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\* CCA (2010). [Honesty, Accountability and Trust: Fostering Research Integrity in Canada](#). Ottawa: Council of Canadian Academies.

† Based on the definition from the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS 2 \(2018\)](#).