

1 Research Integrity Policy (effective _____)

Category: Research and Scholarly Activities
Responsibility: Vice-President Research
Authorization: University Council
Approval Date: June 17, 2010

2 Revised

3 1.0 Purpose:

4 To set forth the standards for research integrity for all those involved in any capacity in
5 research at the University of Saskatchewan.

6 2.0 Principles

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

13 Allegations of breaches of the Research Integrity Policy at the University of
14 Saskatchewan will be dealt with by prompt, effective procedures that ensure fairness
15 and protect both those whose integrity is brought into question and those who bring
16 forward allegations of breaches or misconduct.

17 The University of Saskatchewan will provide ongoing educational opportunities for
18 those engaged in research to provide an environment that supports the best research
19 and that fosters researchers "abilities to act honestly, accountably, openly and fairly in
20 the search for and dissemination of knowledge"¹.

21 3.0 Scope of this Policy

22 For the purposes of this document, "research" encompasses the creation and
23 application of new knowledge and understanding through research, scholarly, and
24 artistic work. This policy applies to all members of the University involved in research,
25 in any capacity whatsoever. Members of the University of Saskatchewan include but are
26 not limited to faculty, professors emeriti, sessional lecturers, staff, trainees, clinical

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

27 faculty, graduate and undergraduate students, adjunct professors, visiting professors,
28 visiting scholars, professional affiliates, associate members, residents, and postdoctoral
29 fellows (PDFs) at the University of Saskatchewan. Nothing in these procedures will limit
30 or amend the provisions of any existing collective agreement at the University of
31 Saskatchewan. Subject to existing collective agreements, the formal resolution
32 procedures in this Policy will not be used if an allegation is, or has been addressed using
33 another University procedure such as a grievance, or non-academic student discipline
34 and appeal.

35 Lack of awareness of the policies, cultural differences, and/or impairment by alcohol or
36 drugs are not a defense for a breach of the Research Integrity Policy. If it can be
37 demonstrated that a university member knew or reasonably ought to have known that
38 he or she has violated the university's research integrity policy, then the violation may
39 be dealt with under the provisions of this policy.

40 This policy document is supported by two procedural documents entitled *Procedures for*
41 *Addressing Allegations of Breaches of the Research Integrity Policy at the University of*
42 *Saskatchewan* and *Procedures for Stewardship of Research Records and Materials at the*
43 *University of Saskatchewan*².

44 4.0 Policy

45 Research, scholarly, and artistic work at the University of Saskatchewan will be
46 conducted in accordance with the following assigned responsibilities:

47 4.1 Responsibilities of Members of the University

48 **University Members:** University members are responsible for conducting their research,
49 scholarly, and artistic work according to the highest standards of research integrity.
50 University members are also responsible for:

- 51 a. obtaining all the required University of Saskatchewan and respective agency
52 approvals and training for research including, but not limited to, research involving
53 human participants or animal subjects, fieldwork, biohazards, radioisotopes,
54 environmental impact.
- 55 b. ensuring that their research, scholarly, and artistic work is conducted in
56 accordance with these approved protocols and that they adhere to all reporting
57 requirements.
- 58 c. ensuring students and research staff are carefully supervised and trained in the
59 conduct of research, scholarly, and artistic work, including experiments,
60 processing of acquired data, recording of data and other results, interpretation of

² http://www.usask.ca/university_secretary/honesty/StudentAcademicMisconduct.pdf

- 61 results, publication, and the storage of research records and materials.
- 62 d. exercising scholarly and scientific rigour and integrity in obtaining and analyzing
- 63 data, including being able to verify the authenticity of all data or other factual
- 64 information generated in their research while ensuring that confidentiality is
- 65 protected where required.
- 66 e. protecting the privacy of any individuals whose personal information has been
- 67 obtained as part of any research activities as required under the University's
- 68 Freedom of Information and Protection of Privacy Policy, the *Local Authority*
- 69 *Freedom of Information and Protection of Privacy Act*, the *Health Information*
- 70 *Protection Act* and the *Tri-Council Policy Statement: Ethical Conduct of Research*
- 71 *Involving Humans (TCPS2)*.
- 72 f. managing funds acquired for the support of research as required by the terms of
- 73 research funding agreements and the university policies on the *Administration of*
- 74 *Research Funds*³ and the *Administration of Research Grants and Contracts*⁴.
- 75 g. ensuring that individuals, who have made a substantive intellectual contribution
- 76 to research being reported in a publication, and only those individuals are
- 77 included as an author. Specific requirements for authorship and acknowledgement
- 78 will be determined by the ethical guidelines or procedures established by a
- 79 researcher's discipline (i.e. set out by the journal(s) where publication is sought or
- 80 by the leading journals in the researcher's discipline).
- 81 h. reporting conflicts of interest as per the University of Saskatchewan Policy on
- 82 Conflict of Interest⁵.
- 83 i. disclosing to the relevant Senior Administrator any breach of the Research
- 84 Integrity Policy of which they have become aware.
- 85

86 **University Officials:** University Officials (Senior Administrators, Department Heads,

87 Directors, and Managers) are responsible for promoting and overseeing research,

88 scholarly, and artistic work at the University of Saskatchewan that is conducted with the

89 highest standards of research integrity. They are also responsible for:

90

- 91 a. dealing expeditiously and fairly with any known instances or allegations of a
- 92 breach of the Research Integrity Policy; and
- 93 b. encouraging activities that support research integrity among University Members.
- 94

95

³ http://www.usask.ca/university_secretary/policies/research/8_22.php

⁴ http://www.usask.ca/university_secretary/policies/research/8_20.php

⁵ U of S Policy on Conflict of Interest is available at
http://www.usask.ca/university_secretary/policies/operations/4_01_01.php

96 **Senior Administrators:** Under this policy, Senior Administrators include: Deans (when
97 respondents are faculty members, sessional lecturers or students in a college); Directors
98 or Associate Vice-Presidents in charge of an administrative Unit (when respondents are
99 employees); the Provost (when respondents are Deans or visiting professors); the Dean
100 of Graduate Studies and Research (when respondents are adjunct professors, post
101 doctoral fellows, professional affiliates or visiting scholars/professors); Vice-Presidents
102 (when respondents are Directors of an administrative unit or Associate Vice-Presidents),
103 the President (when respondents are Vice-Presidents); and, the Board of Governors
104 (when the respondent is the President). These individuals (or their designees) are
105 responsible for:

- 106 a. determining whether a formal investigation will occur; and
107
108 b. directing and overseeing formal investigations, as outlined in *the Procedures for*
109 *Addressing Allegations of Breaches of the Research Integrity Policy.*
110

111 5.0 Breaches of the University of Saskatchewan Research 112 Integrity Policy

113 Breaches of the Research Integrity Policy include, but are not limited to:

- 114 a. the intentional fabrication or falsification of data; erroneously reporting research
115 procedures or data analysis; destruction of research data or records to specifically
116 avoid the detection of wrong doing or in contravention of agreements, policies,
117 law, professional or disciplinary standards; or other deceitful acts or improprieties
118 in proposing, conducting, reporting, or reviewing research;
119 b. the use of someone else's data or ideas and claiming it as one's own; plagiarism;
120 redundant publication; invalid authorship; and inadequate acknowledgement of
121 the contributions of others⁶.
122 c. failure to comply with pertinent federal, provincial, international, or University
123 guidelines for the protection of researchers, human participants, the public, and
124 the welfare of animals; or failure to meet other legal requirements that relate to
125 the conduct of research;
126 d. failure to conduct research in the manner in which it has been approved by the
127 University's Research Ethics Boards;
128 e. failure to disclose any conflict of interests when asked to undertake reviews of
129 research grant applications or to test products for sale or distribution to the
130 public;
131 f. failure to disclose conflicts of interest prior to any commitment or expenditure of

⁶ From the Tri-Agency Framework: Responsible Conduct of Research
<http://www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/>

- 132 research funds and failure to notify their respective unit head should a conflict
133 arise at a later point;
- 134 g. failure to disclose to the University any financial interest in a company that
 - 135 contracts with the University of Saskatchewan to undertake research, particularly
 - 136 research involving the company's products, or to provide research-related
 - 137 materials or services. Financial interest means ownership, direct or indirect
 - 138 beneficial interest, substantial stock holdings, a directorship, honoraria or
 - 139 consulting fees, but does not include minor stock holding (<\$10,000) in publicly
 - 140 traded corporations;
 - 141 h. misuse of funds acquired for the support of research; and,
 - 142 i. failure to comply with terms of research funding agreements or university policy
 - 143 on *Research and Scholarly Activities* and the *Administration of Research Funds*.
- 144

145 Breaches of the Research Integrity Policy should not be interpreted as including
146 differences of opinion regarding research methodologies, analyses of data, and
147 theoretical frameworks.

148

149 6.0 Confidentiality

150 University Officials, Senior Administrators, Department Heads, Directors, and Managers
151 will protect the confidentiality of information regarding a potential violation of this
152 Policy to the fullest extent possible. If the allegation is substantiated, the University
153 reserves the right to use or disclose information in accordance with the *Local Authority*
154 *Freedom of Information and Protection of Privacy Act*, which may include disclosing the
155 discipline, if any, imposed on members of the University.

156 7.0 Education

157 To promote a greater understanding of research ethics and integrity issues, the
158 University will offer workshops, seminars, web-based materials, courses, and research
159 ethics training for University members along with orientation for those members who
160 are new to the university. When examples of investigations at the University of
161 Saskatchewan are used for the purpose of educating University members on acceptable
162 practices for scholarly integrity and research ethics, personal identifiers will be removed
163 from these cases in an effort to maintain confidentiality.

164 8.0 Contact

165 For further information please contact the Director, Research Ethics at 966-2975 or the
166 Director, Research Services at 966-XXXX

167

Effective date of these regulations 2012/XX/XX

168 Procedures for Addressing Allegations of 169 Breaches of the University of Saskatchewan 170 Research Integrity Policy

171 1.0 Application

172 These procedures accompany the Research Integrity Policy and apply to all allegations
173 of breaches of the Research Integrity Policy by members of the University of
174 Saskatchewan. Oversight of the procedures is the responsibility of the Office of the
175 Vice-President Research.

176 For the purposes of this document, “research” encompasses the creation and
177 application of new knowledge and understanding through research, scholarly, and
178 artistic work conducted by members of the University of Saskatchewan. Members of
179 the University of Saskatchewan include but are not limited to faculty, professors emeriti,
180 sessional lecturers, staff, trainees, clinical faculty, graduate and undergraduate students,
181 adjunct professors, visiting professors, visiting scholars, professional affiliates, associate
182 members, residents, and postdoctoral fellows (PDFs) at the University of
183 Saskatchewan.

184 Procedures shall be consistent with appropriate clauses in Collective Agreements
185 including University of Saskatchewan Faculty Association (USFA), Canadian Union of
186 Public Employees (CUPE) Local 1975, the Administrative and Supervisory Personnel
187 Association (ASPA), Canadian Union of Public Employees (CUPE) Local 3287, the
188 Professional Association of Interns and Residents (PAIRS).

189 2.0 Reporting Breaches of the Research Integrity Policy

190 A person or representative of a funding agency who believes that he or she has
191 knowledge of a breach of this policy should immediately report their allegation in
192 writing to a Senior Administrator or a University Official. Anonymous allegations will be
193 considered only if all relevant facts are publicly available or otherwise independently
194 verifiable.

195 **Reporting to a Senior Administrator:** Subject to the provisions in sections 3 and 4 of the
196 Research Integrity Policy, the Senior Administrator will provide a confidential
197 consultation to assess allegations of breaches of the Research Integrity Policy,
198 determine whether they fall under this policy, and outline options for
199 resolution. Individuals who consult with the Senior Administrator may choose:

- 200 a. to ask the Senior Administrator to facilitate a resolution or resolve the matter
201 informally;
202 b. to request a hearing under this Policy; or,
203 c. to take action to resolve the issue directly or address it using another University
204 procedure.
205

206 **Reporting to a University Official:** Incidents may also be reported to a University
207 Official. When these individuals receive an allegation of breaches of the Research
208 Integrity Policy or become aware of an incident, they should refer the allegation to the
209 relevant Senior Administrator to determine an appropriate course of action.

210 3.0 Options for Resolution

211 Reports and allegations of breaches of the Research Integrity Policy can be resolved
212 using informal and/or formal procedures. Informal approaches focus on resolving the
213 problem as opposed to determining right or wrong or taking disciplinary action. This
214 type of resolution may include consultation, raising the matter directly with the
215 offending party, or mediation.

216 4.0 Requesting a Hearing

217 Hearings may be requested by complainants, respondents and University Officials. A
218 request for a hearing is initiated by filing a written allegation of a breach of the Research
219 Integrity Policy and submitting it to the relevant Senior Administrator, who will decide
220 whether a hearing is warranted. This decision will be made after the Senior
221 Administrator has reviewed the written allegation, shared it with the respondent(s) and
222 provided an opportunity for the respondent(s) to respond to the allegation.

223 The Senior Administrator will assess whether the allegation:

- 224 a. is outside the jurisdiction of these procedures as outlined in Section 3.0 of the
225 Research Integrity Policy;
226 b. is clearly mistaken or unjustified;
227 c. involves allegations that, even if proven, would not constitute a breach as defined
228 in Section 4.0 of the Research Integrity Policy;
229 d. is frivolous, vexatious, or in bad faith,
230

231 The Senior Administrator will inform the complainant, the respondent, and the Vice-
232 President Research of his or her decision in writing within twenty-eight (28) calendar
233 days of having received the written allegation. If deemed necessary, the Senior
234 Administrator may restrict research and/or related activities until the allegation is
235 resolved.

236 5.0 Appeal of the Senior Administrator's Decision

- 237 a. Either the complainant or the respondent may appeal the decision of the Senior
238 Administrator about whether a hearing is warranted, by delivering to the Vice-
239 President Research a written notice of appeal before the expiry of fourteen (14)
240 calendar days from the date a copy of the decision was delivered to that
241 person. The notice should include a written statement of appeal that indicates the
242 grounds on which the appellant intends to rely, any evidence the appellant
243 wishes to present to support those grounds, and (where relevant) what remedy or
244 remedies the appellant believes to be appropriate.
- 245 b. An appeal will be considered only on one or more of the following grounds:
- 246 i. That the Senior Administrator had no authority or jurisdiction to reach the
247 decision he or she did;
 - 248 ii. That there was a reasonable apprehension of bias on the part of the Senior
249 Administrator;
 - 250 iii. That the Senior Administrator made a fundamental procedural error that
251 seriously affected the outcome
 - 252 iv. That new evidence has arisen that could not reasonably have been
253 presented to the Senior Administrator and that would likely have affected
254 her/his decision.
- 255 c. Upon receipt of a notice of appeal, the Vice-President Research or designee will
256 review the original allegation and the written decision of the Senior Administrator
257 and within twenty-one (21) calendar days will decide if a hearing is
258 warranted. The decision of the Vice-President Research with respect to allowing a
259 hearing to go forward is final, with no further appeal.

260

261 6.0 The Rights and Responsibilities of Parties to a Hearing

262 Hearings provide an opportunity for a balanced airing of the facts before an impartial
263 board of decision-makers. All hearings of alleged breaches of the Research Integrity
264 Policy will respect the rights of members of the university community to fair treatment
265 in accordance with the principles of natural justice. In particular,

- 266 a. A university member against whom an allegation is made is to be treated as being
267 innocent until it has been established, on the balance of probabilities and before a
268 board of impartial and unbiased decision-makers, that he/she has committed a
269 breach of the Research Integrity Policy.
- 270 b. The parties have a right to a fair hearing before an impartial and unbiased
271 decision-maker. This right includes the right for either party to challenge the
272 suitability of any member of the hearing board based on a reasonable
273 apprehension of bias against the complainant's or respondent's case. The Senior
274 Administrator will determine whether a reasonable apprehension of bias is

- 275 warranted.
- 276 c. Reasonable written notice will be provided for hearings, and hearings will be held
277 and decisions rendered within a reasonable period of time. It is the responsibility
278 of all parties to ensure that the University has current contact information for
279 them. If a notice is not received because of a failure to meet this requirement, the
280 hearing will proceed.
- 281 d. Hearing board procedures and protocols will be communicated to all parties prior
282 to the hearing.
- 283 e. All information provided to a hearing board in advance of a hearing by either party
284 will be shared with both parties prior to the hearing.
- 285 f. Neither party will communicate with the hearing board without the knowledge
286 and presence of the other party. This right is deemed to have been waived by a
287 party who fails to appear at a scheduled hearing or to send an advocate in her/his
288 place.
- 289 g. The complainant and the respondent have a right to bring an advocate (which may
290 be a person selected by the appropriate bargaining unit, or where a member
291 prefers or is not part of a bargaining unit by a friend, advisor, or legal counsel) to a
292 hearing, and to call witnesses, subject to the provisions below in keeping with the
293 rights of the hearing board to establish its own procedures. This right is subject to
294 the provision that the names of any witnesses and/or advocates are provided to
295 the Senior Administrator or designate at least 2 days prior to the hearing.
- 296 h. Parties to these proceedings have a right to a reasonable level of privacy and
297 confidentiality, subject to provincial legislation on protection of privacy and
298 freedom of information.
- 299 i. The hearing board has a right to determine its own procedures subject to the
300 provisions of these Procedures, and to rule on all matters of process including the
301 acceptability of the evidence before it and the acceptability of witnesses called by
302 either party. Hearing boards may at their discretion request further evidence or
303 ask for additional witnesses to be called.
- 304 j. No disciplinary measures shall be taken against the complainant if the allegation is
305 found to have been made in good faith. Moreover efforts will be made to ensure
306 that no retaliatory action is taken against the complainant in such cases. If the
307 allegation is found to have been made in bad faith, the Senior Administrator will
308 further investigate under the University Policy on Discrimination and Harassment.
- 309 k. Complaints alleging acts of retaliation including threats, intimidation, reprisals or
310 adverse employment or education action against a person who has filed a
311 complaint or participated in any manner in the investigation or resolution of a
312 report of a breach of the Research Integrity Policy will be investigated under the
313 University Policy on Discrimination and Harassment.

314 7.0 Procedures for Formal Hearings

315 When it has been determined that a formal hearing should proceed, the following steps
316 will be taken.

- 317 a. Within twenty eight (28) calendar days, the Senior Administrator or designate
318 shall convene a hearing board composed of a chair; at least three senior
319 members⁷ of the University or of another academic institution; plus at least one
320 member, external to the University, who has no current affiliation with the
321 University of Saskatchewan⁸. The hearing board may be a standing committee of
322 the university appointed for this purpose. The members of the hearing board will
323 have no actual, apparent, reasonable, perceived, or potential conflicts of interest
324 or bias and will jointly have appropriate subject matter expertise and
325 administrative background to evaluate the allegation and the response to it. The
326 complainant and the respondent will be advised of the composition of the hearing
327 board and will have seven (7) calendar days from time of notification to advise the
328 Senior Administrator of their intent to challenge the suitability of any member of
329 the hearing board based on a reasonable apprehension of bias against the
330 complainant's or respondent's case.
- 331 b. If the challenge is upheld by the Senior Administrator, a new hearing board will be
332 constituted, the complainant and the respondent will be advised of the
333 composition of the hearing board and will have seven (7) calendar days from time
334 of notification to advise the Senior Administrator of their intent to challenge the
335 suitability of any member of the hearing board based on a reasonable
336 apprehension of bias against the complainant's or respondent's case.
- 337 c. The hearing board is to receive the evidence, decide whether a breach of the
338 Research Integrity Policy has been committed and if so, recommend proportionate
339 disciplinary action. The Senior Administrator shall co-ordinate suitable
340 administrative support to the hearing board.
- 341 d. The Senior Administrator or designate shall provide both the complainant and the
342 respondent with at least seven (7) calendar days' written notice of the time, date
343 and place of the hearing. The hearing may be rescheduled if necessary to
344 accommodate participants' schedules, with the guideline that the hearing should
345 wherever possible be held within thirty (30) calendar days of the determination by
346 the Senior Administrator, or in the case of an appealed decision, by the Vice-
347 President Research that a formal hearing will proceed. Where there are special
348 circumstances (as determined by the Senior Administrator or designate), the
349 matter may be heard on less than seven (7) calendar days' notice.
- 350 e. If the respondent does not respond to the written notification of the hearing, or
351 chooses not to appear before the hearing board, the hearing board has the right
352 to proceed with the hearing. An absent respondent may be represented by an
353 advocate who may present his or her case at the hearing.
- 354 i. Generally, hearings will be held with all parties present. If any of the parties to the
355 hearing, or any advocate, witness, or observer is unable to attend in person, the

⁷ Senior members of the university include senior administrators, full professors and associate professors.

⁸ Tri-Agency Framework: Responsible Conduct of Research <http://www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/>

356 hearing board may at its discretion and where circumstances demand proceed on
357 the basis of written submissions. The hearing board may also provide for such
358 person(s) to participate by telephone, subject to the provision that either party to
359 the dispute (or their advocate) must be capable of hearing all evidence being
360 presented, and of responding to all evidence and questions, and that witnesses
361 and/or observers may be invited to join the hearing by telephone for the part of
362 the hearing to which they would normally have been invited in person. Provision
363 must be made for all parties to the proceedings to know when a party
364 participating by telephone is signing on and signing off.

365 f. The hearing board is not bound to observe strict legal procedures or the rules of
366 evidence, but shall establish its own procedures subject to the following:

367 i. Hearing boards under these regulations have an adjudicative role. It is the
368 responsibility of the complainant(s) to provide a rationale for the allegation
369 and to present the evidence in support of it, and it is the responsibility of the
370 respondent(s) to answer the charge.

371 ii. Both complainant and respondent shall be given adequate notice in writing
372 and full opportunity to participate in the proceedings other than the
373 deliberations of the hearing board.

374 iii. The hearing shall be restricted to persons who have a direct role in the
375 hearing as complainant or respondent or their advocates, members of the
376 hearing board, persons who are acting as witnesses. At the discretion of the
377 chair, other persons may be admitted to the hearing for training purposes,
378 or other reasonable considerations.

379 iv. When the hearing board meets, the complainant and the respondent or
380 their advocates shall have the opportunity to be present before the hearing
381 board at the same time. Either side may call witnesses, who would normally
382 be present only to provide their evidence. Exceptions may be made at the
383 discretion of the chair. Hearing boards may at their discretion request
384 further evidence or ask for additional witnesses to be called.

385 v. The allegation and the evidence allegedly supporting it, along with
386 supporting documentation and/or witnesses, shall be presented by the
387 person who made the allegation, or that person's advocate.

388 vi. The chair may at his or her discretion grant an opportunity for the
389 respondent or the respondent's advocate and members of the hearing
390 board to ask questions of the person presenting the allegation and any
391 person giving evidence allegedly supporting it.

392 vii. The respondent or the respondent's advocate shall then be allowed to
393 respond to the allegation and to present supporting documentation and/or
394 witnesses.

395 viii. The chair may at his or her discretion grant an opportunity for the person
396 presenting the allegation and members of the hearing board to ask
397 questions of the respondent and any witness for the respondent.

398 ix. Both the complainant and the respondent will have the opportunity to
399 explain their respective interpretations of the evidence presented in a

- 400 closing statement, and to suggest what sanctions, if any, they believe are
401 appropriate to the matter before the hearing board.
- 402 g. If, during the course of the investigation, the evidence discloses a new related
403 instance of a breach of the Research Integrity Policy that was not part of the
404 original allegation or which suggests additional respondents, the hearing board
405 may expand the investigation, provided that the complainant and respondent are
406 notified and the respondent is allowed to respond. If the expanded investigation
407 involves new respondents, they will be provided with notice and shall for the
408 purpose of this framework, be treated as respondents.
- 409 h. Once a hearing concludes, the hearing board may not consider any additional
410 evidence without re-opening the hearing to ensure that the parties have an
411 opportunity to review and respond to the new evidence.
- 412 i. The Chair shall notify both the Senior Administrator and the Vice-President
413 Research of interim findings, if any, that he/she believes should be reported
414 because of the University's obligations to students, staff, and faculty members,
415 funding agencies and sponsors or, where there are compelling issues of public
416 safety. Any interim report shall be in writing and copied to all members of the
417 hearing board, to the complainant and respondent, the Senior Administrator and
418 the Vice-President Research. The report shall set out the findings, the reason for
419 the interim report, and a recommendation regarding appropriate administrative
420 action.

421

422 7.1 Decision of the Hearing Board and Determination of 423 Consequences

424 After all questions have been answered and all points made, the hearing board will
425 meet *in camera* to decide whether a breach of the Research Integrity Policy has been
426 committed and, if so, to determine one or more appropriate sanctions. These
427 deliberations are confidential⁹. The hearing board has the sole authority to determine
428 whether or not the respondent has committed a breach of the Research Integrity Policy.

- 429 a. The standard of proof shall be whether the balance of probabilities is for or
430 against the respondent having committed the offense.
- 431 b. Within sixty (60) calendar days of being appointed, the hearing board shall
432 complete its inquiry and shall submit a report on its reasoned decision in writing
433 to the complainant, the respondent, the relevant Senior Administrator, and the
434 Vice-President Research. If there is more than one respondent or complainant,
435 reasonable efforts will be made to provide each with parts of the report that are

⁹ Records of deliberations may be subject to a Freedom of Information request

- 436 pertinent to him/her. It is recommended that the format of the hearing board
437 report contain the following:
- 438 i. the full allegation of a breach of the Research Integrity Policy;
 - 439 ii. a list of hearing board members and their credentials;
 - 440 iii. a list of the people who contributed evidentiary material to the investigation
441 or were interviewed as witnesses;
 - 442 iv. a summary of relevant evidence;
 - 443 v. a determination of whether a breach of the Research Integrity Policy
444 occurred;
 - 445 vi. if a breach has occurred, its extent and seriousness;
 - 446 vii. recommendations on any remedial action to be taken in the matter in
447 question; and,
 - 448 viii. recommendations of changes to procedures or practices to avoid similar
449 situations in the future (for example, in the case of a breach of the Research
450 Integrity Policy or if a serious scientific error has been made which does not
451 constitute a breach).
- 452 c. Recommendations of the hearing board may also include, without limitation:
- 453 i. withdrawing all pending relevant publications;
 - 454 ii. notifying publishers of publications in which the involved research was
455 reported;
 - 456 iii. notifying co-investigators and collaborators of the decision;
 - 457 iv. ensuring the unit(s) involved is informed of appropriate practices for
458 promoting the proper conduct of research;
 - 459 v. informing any outside funding sponsor(s) of the results of the inquiry and of
460 actions to be taken.
- 461 d. Members of the hearing board must sign a statement indicating that they agree to
462 the release of the report based on majority rule. No minority reports shall be
463 allowed.
- 464 e. The report of the hearing board is final and not subject to revision.
- 465 f. If it is established that the respondent has breached the Research Integrity Policy,
466 the Senior Administrator shall, upon receipt of this advice of the hearing board,
467 determine whether or not formal disciplinary action is to be taken or where
468 appropriate recommend formal disciplinary action to the President, taking into
469 consideration contractual and other obligations to external organizations and
470 prior offenses under this policy. The respondent and complainant will have seven
471 (7) calendar days from the receipt of the hearing board report to make
472 submissions to the Senior Administrator regarding the findings, in advance of any
473 disciplinary action recommended by the Senior Administrator. Decisions about
474 disciplinary action shall be made and communicated in writing to the complainant,
475 the respondent, the relevant Senior Administrator, and the Vice-President
476 Research within fourteen (14) calendar days of the date that the Senior
477 Administrator receives the hearing board report
- 478 g. The disciplinary action taken as a consequence of a breach of the Research
479 Integrity Policy will be proportional to the breach, and may include:

- 480 i. verbal reprimand;
481 ii. written reprimand with a letter held in the individual's permanent personnel
482 file;
483 iii. withdrawal of specific research privileges;
484 iv. revoking membership in the College of Graduate Studies and Research, if
485 applicable;
486 v. suspension with or without pay; or,
487 vi. termination.
488 vii. If an undergraduate or graduate student is found to have breached the
489 Research Integrity Policy, disciplinary action will include the outcomes
490 described in section VII of the Student Academic Misconduct Policy.
491 h. If the Hearing Board advises that the allegation should be dismissed, and the
492 Senior Administrator accepts this advice, the Senior Administrator shall so advise
493 any person identified in the allegation, the respondent, other appropriate Deans
494 or Directors, and the Vice-President Research. In addition, the notification
495 requirements of the applicable Collective Agreement shall be followed.
496 i. Where the allegation is not substantiated, the Senior Administrator, in
497 consultation with the Respondent and the hearing board that conducted the
498 investigation, shall take all reasonable steps to repair any damage that the
499 Respondent's reputation for scholarly integrity or research activities may have
500 suffered by virtue of the allegation. The Senior Administrator shall ensure that a
501 letter confirming the finding that no breach of the Research Integrity Policy has
502 occurred is sent to the respondent, with a copy to the complainant, and to the
503 Vice-President Research. With the consent of the respondent, a letter confirming
504 the finding of no breach may be sent to other persons with knowledge of the
505 allegation. These persons may include co-authors, co-investigators, collaborators,
506 and others who may have been notified by the Senior Administrator.
507 j. The respondent(s) and the complainant who brought the allegation shall be
508 advised that either of them may appeal the hearing board results through the
509 applicable grievance process¹⁰ or through the appeal process outlined in section
510 8.0. Any penalties that are the outcome of a hearing board remain in force unless
511 and until they are overturned by an appeal board or through a grievance process.
512

513 8.0 Appeals under this Policy

- 514 a. Appeals under this policy may be requested by university members who are not
515 represented by a collective agreement and who are not students. Members of
516 ASPA, CUPE 1975, CUPE 3287, PAIRS, or USFA may grieve any action taken by the
517 University using the grievance procedure set out in the relevant collective
518 agreement.
519 b. Either the complainant or the respondent may appeal the decision of the hearing

¹⁰ Members of ASPA, CUPE 1975, CUPE 3287, PAIRS, or USFA. may grieve any action taken by the University using the grievance procedure in the relevant collective agreement.

520 board and/or the penalty imposed by delivering to the Vice-President Research a
521 written notice of appeal within thirty (30) days of receipt of a copy of the hearing
522 board report. The notice should include a written statement of appeal that
523 indicates the grounds on which the appellant intends to rely, any evidence the
524 appellant wishes to present to support those grounds, and (where relevant) what
525 remedy or remedies the appellant believes to be appropriate.

526 c. An appeal will be considered only on one or more of the following grounds:

527 i. That the original hearing board had no authority or jurisdiction to reach the
528 decision or impose the sanction(s) it did;

529 ii. That there was a reasonable apprehension of bias on the part of a member
530 or members of the original hearing board;

531 iii. That the original hearing board made a fundamental procedural error that
532 seriously affected the outcome;

533 iv. That new evidence has arisen that could not reasonably have been
534 presented at the initial hearing and that would likely have affected the
535 decision of the original hearing board.

536 d. Upon receipt of a notice of appeal, the Vice-President Research or designate will
537 review the record of the original hearing and the written statement of appeal
538 and determine whether or not the grounds for appeal are valid. If the Vice-
539 President Research determines that there are no valid grounds under these
540 Procedures for an appeal, then the appeal will be dismissed without a hearing. If
541 the Vice-President Research determines that there may be valid grounds for an
542 appeal, then the appeal hearing will proceed as provided for below. The
543 decision of the Vice-President Research with respect to allowing an appeal to go
544 forward is final, with no further appeal.

545

546 8.1 Appeals Board

547 The appeal board will be constituted by the Vice-President Research within twenty one
548 (21) calendar days and will be composed of three senior¹¹ members of the University or
549 of another academic institution plus at least one member, external to the University,
550 who has no current affiliation with the University of Saskatchewan¹². One member of
551 the appeal board shall be named chair. Individuals appointed to serve on an appeal
552 board shall exclude anyone who was involved in the original hearing of the case. The
553 members of the hearing board will have no actual, apparent, reasonable, perceived, or
554 potential conflict of interests or bias and will jointly have appropriate subject matter
555 expertise and administrative background to evaluate the allegation and the response to

¹¹ Senior members of the university include senior administrators, full professors and associate professors.

¹² Tri-Agency Framework: Responsible Conduct of Research <http://www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/>

556 it. The complainant and the respondent will be advised of the composition of the
557 hearing board and will have seven (7) calendar days to advise the Vice-President
558 Research of their intent to challenge the suitability of any member of the hearing board
559 based on a reasonable apprehension of bias against the complainant's or respondent's
560 case.
561

562 8.2 Appeal Procedure

- 563 1. The appeal board shall convene to hear the appeal within twenty-one (21)
564 calendar days of being constituted. Under exceptional circumstances, the Board
565 may extend this period.
- 566 2. Written notice of the hearing, along with a copy of these Procedures and of the
567 written statement of appeal, will be delivered by the Vice-President Research or
568 designate to the appellant, to the other party in the original hearing as
569 respondent, to the chair of the original hearing board, and to members of the
570 appeal board. Where possible and reasonable, the schedules of all parties will be
571 accommodated and at least seven (7) calendar days notice of the time and
572 location of the hearing will be provided. Where there are special circumstances
573 (as determined by the Vice-President Research or designate), the matter may be
574 heard on less than seven (7) calendar day notice.
- 575 3. If any party to these proceedings does not attend the hearing, the appeal board
576 has the right to proceed with the hearing, and may accept the written record of
577 the original hearing and the written statement of appeal and/or a written
578 response in lieu of arguments made in person. An appellant who chooses to be
579 absent from a hearing may appoint an advocate to present his/her case at the
580 hearing.
- 581 4. The appeal board is not bound to observe strict legal procedures or rules of
582 evidence but shall establish its own procedures subject to the following principles:
 - 583 i. Appeal boards under these regulations will not hear the case again but are
584 limited to determining whether the original hearing board had authority and
585 jurisdiction to hear the original case; whether there was a reasonable
586 apprehension of bias on the original hearing board that heard the case;
587 whether the original hearing board made fundamental procedural errors
588 that seriously affected the outcome; or whether any new evidence that is
589 being presented would likely have affected the original outcome AND could
590 not reasonably have been presented at the original hearing.
 - 591 ii. The parties to the hearing shall be the appellant (who may be either the
592 original complainant or the original respondent) and the other party to the
593 original hearing as respondent. The chair (or another member designated
594 by the chair) of the original hearing board is invited to attend and at the
595 discretion of the chair will be permitted to participate in the hearing and to
596 answer questions of either party or of the appeal board.
 - 597 iii. Except as provided for under 8.0 c. iv. above, no new evidence will be

- 598 considered at the hearing. The record of the original hearing, including a
599 copy of all material filed by both sides at the original hearing, and the
600 written statement of appeal, will form the basis of the appeal board's
601 deliberations.
- 602 iv. It shall be the responsibility of the appellant to demonstrate that the appeal
603 has merit.
 - 604 v. Hearings shall be restricted to persons who have a direct role in the
605 hearing. Witnesses will not normally be called, but the appellant may
606 request the presence of an advocate and up to three observers. At the
607 discretion of the chair, other persons may be admitted to the hearing for
608 training purposes, or other reasonable considerations.
 - 609 vi. The appellant and the respondent shall be present before the appeal board
610 at the same time.
 - 611 vii. Both the appellant and the respondent will have an opportunity to present
612 their respective cases and to respond to questions from the other party and
613 from members of the appeal board.
 - 614 viii. Both the appellant and the respondent will have the opportunity to suggest
615 what sanctions, if any, they believe are appropriate to the matter before the
616 appeal board.
617

618 8.3 Disposition by the Appeal Board

- 619 a. After all questions have been answered and all points made, the appeal board will
620 meet in camera to decide whether to uphold, overturn or modify the decision of
621 the original hearing board. The deliberations of the appeal board are confidential.
- 622 b. The appeal board may, by majority,
 - 623 i. Conclude that the appellant received a fair hearing from the original hearing
624 board, and uphold the original decision; or
 - 625 ii. Conclude that the appellant did not receive a fair hearing, but that the
626 outcome determined remains appropriate and the original decision is
627 upheld; or
 - 628 iii. Conclude that the appellant did not receive a fair hearing, and dismiss or
629 modify the original decision and/or sanctions using any of the remedies
630 available in Section 7.1; or
 - 631 iv. Order that a new hearing board be struck to re-hear the case. This provision
632 shall be used only in rare cases such as when new evidence has been
633 introduced that could not reasonably have been available to the original
634 hearing board and is in the view of the appeal board significant enough to
635 warrant a new hearing.
- 636 c. The chair of the appeal board shall prepare a report of the board's deliberations
637 that shall recite the evidence on which the board based its conclusions and state
638 any penalty imposed or withdrawn. The report shall be delivered to the Vice-
639 President Research and distributed as provided for in Section 6.5.

640 d. If the decision of a hearing board is successfully appealed, the chair of the appeal
641 board shall ask the relevant Senior Administrator to take all reasonable steps to
642 repair any damage that the appellant's reputation for academic integrity may have
643 suffered by virtue of the earlier finding of the hearing board.

644

645 8.4 No Further Appeal

646 The findings and ruling of the appeal board shall be final with no further appeal.

647

648 8.5 Reports

649 Not later than 15 days after a hearing board or an appeal board has completed its
650 deliberations, the chair shall deliver a copy of the report to the Appellant, the
651 Respondent, the relevant Senior Administrator, and the Vice-President Research. If
652 there is more than one Appellant or Complainant, reasonable efforts will be made to
653 provide each with parts of the report that are pertinent to him/her.

654

655 9.0 Records

656 Records pertaining to allegations that result in disciplinary action will be retained in the
657 respondent's official file in accordance with existing University policies, procedures and
658 collective agreements.

659

660 No record of an allegation of a breach of the Research Integrity Policy will be kept in the
661 complainant's official file except the record of disciplinary action resulting from a
662 complaint that is made in bad faith.

663

664 Subject to the provisions of the Research Integrity Policy and Procedures and the
665 requirements of law, any and all records pertaining to charges and/or hearings and/or
666 sanctions under these Procedures are confidential and should be kept in a file accessible
667 only to the Vice-President Research and their confidential assistants for a period of fifty
668 years or while any legal or official proceedings are pending. After this time, the records
669 may be destroyed. These records are strictly confidential and will be disclosed only
670 when disclosure is required by law or by a legal or official proceeding. The Vice-
671 President Research shall make them available to hearing boards and appeal boards as
672 provided for in section 7.1e.

673

674 De-identified summaries of decisions based on investigations of breaches of the
675 Research Integrity Policy will be prepared periodically by the Office of the Vice-President
676 Research.

677

678 10.0 Funding Agencies and Research Collaborators

679 a. Tri-Agency Funded Research¹³

680 i. Reporting allegations of a breach of the Research Integrity Policy to the Tri- 681 Agencies:

682 Subject to any applicable laws, including privacy laws, the Vice President
683 Research shall advise the relevant Tri-Council Agency or the Secretariat on
684 the Responsible Conduct of Research (SRCR) immediately of any allegations
685 related to activities funded by the Agency that may involve significant
686 financial, health and safety or other risks.

687 688 ii Reporting a Hearing to the Tri-Agencies:

689 If the Secretariat on the Responsible Conduct of Research (SRCR) was copied
690 on the allegation or advised of an allegation related to activities funded by
691 the Agencies, the Institution shall write a letter to the SRCR confirming
692 whether or not the Institution is proceeding with an investigation within 2
693 months of the receipt of the allegation.

694 695 iii. Reporting results of a hearing to the Tri-Agencies:

696 The Institution shall prepare a report for the SRCR on each investigation it
697 conducts in response to an allegation of policy breaches related to a funding
698 application submitted to an Agency or to an activity funded by an Agency. A
699 report will be submitted to the appropriate Agency within seven (7) months
700 of the receipt of the allegation by the institution.

701
702 Subject to any applicable laws, including privacy laws, each report shall
703 include the following information:

- 704 ○ the specific allegation(s), a summary of the finding(s) and reasons for
705 the finding(s);
- 706 ○ the process and time lines followed for the inquiry and/or
707 investigation;
- 708 ○ the researcher's response to the allegation, investigation and findings,
709 and any measures the researcher has taken to rectify the breach; and
- 710 ○ the institutional investigation committee's decisions and
711 recommendations and actions taken by the Institution.

712 The Institution's report should not include:

¹³ Tri-Agency Framework: Responsible Conduct of Research <http://www.rcr.ethics.gc.ca/eng/policy-politique/framework-cadre/>

- 713 o information that is not related specifically to Agency funding and
714 policies; or
715 o personal information about the researcher, or any other person, that is
716 not material to the Institution's findings and its report to the SRCR.

717 The Institution and the researcher may not enter into confidentiality
718 agreements or other agreements related to an inquiry or investigation that
719 prevent the Institution from reporting to the Agencies through the SRCR(13)

720 b. Other Sponsors and Funding Agencies

721 Other sponsors or funding agencies that require similar notification will be notified in
722 accordance with the procedures identified by the specific agency.

723
724 In instances involving researchers and research collaborators associated with other
725 institutions, the Senior Administrator or the Vice-President Research shall inform the
726 Senior Administration of the collaborator's institution of the substantiated allegation of
727 a breach of the Research Integrity Policy.

728

729 **Procedures for Stewardship of Research Records at the**
730 **University of Saskatchewan**

731 Members of the University [defined below] involved in research at the University of
732 Saskatchewan must create and retain records in accordance with these procedures. The
733 purpose of these procedures is to ensure that the authenticity of all data and other
734 factual information generated in research can be verified and to ensure that any
735 research records containing personal and personal health information about identifiable
736 individuals are stored in a manner which protects the privacy of such personal and
737 personal health information in accordance with the University's *Freedom of Information*
738 *and Protection of Privacy Policy*¹⁴ and the appropriate freedom of information and
739 protection of privacy acts. Research records must be recorded appropriately, archived
740 for defined time periods or for reasonable longer periods [described below], and made
741 available for review if required in the following situations:

- 742 a. to ensure the appropriate use of human and animal participants in research and
743 compliance with biosafety, radiation safety, environmental and other regulations or
744 requirements;
745 b. to ascertain compliance with research sponsorship terms;
746 c. to protect the rights of students (undergraduate and graduate), postdoctoral
747 fellows, staff, and other research team members, including rights to access records
748 from research in which they participated as a researcher;
749 d. to assist in proving and/or securing intellectual property rights;

¹⁴ http://www.usask.ca/university_secretary/policies/operations/Freedom-of-Information.php

- 750 e. to enable investigations of allegations of breaches of the Research Integrity Policy or
751 conflict of interest; and,
752 f. to assist and enable other administrative or legal proceedings involving the
753 University and/or researchers, or its/their interests, related to their research.

754

755 1.0 Application

756 These procedures apply to all members of the University involved in research, in any
757 capacity whatsoever. Members of the University of Saskatchewan, include but are not
758 limited to, faculty, professors emeriti, sessional lecturers, staff, trainees, clinical faculty,
759 graduate and undergraduate students, adjunct professors, visiting professors, visiting
760 scholars, professional affiliates, associate members, residents, and postdoctoral fellows
761 (PDFs) at the University of Saskatchewan. Nothing in these procedures will limit or
762 amend the provisions of any existing collective agreement at the University of
763 Saskatchewan.

764 Research records are those documents and other records and materials recorded by or
765 for a researcher that are necessary to document, reconstruct, evaluate, and validate
766 research results and the events and processes leading to the acquisition of those
767 results. Research records may be in many forms including but not limited to laboratory
768 notebooks, survey documents, questionnaires, interview notes, transcripts, machine-
769 generated data or performance outputs, recruitment materials, consent forms,
770 correspondence, other documents, computer files, audio or video recordings,
771 photographs including negatives, slides, x-ray films, samples of compounds, organisms
772 (including cell lines, microorganisms, viruses, plants, animals) and components of
773 organisms.

774

775 2.0 Collection and Retention

776 The Principal Investigator¹⁵ (PI) is responsible for the collection, maintenance, privacy,
777 and secure¹⁶ retention of research records in accord with these procedures and
778 applicable privacy legislation. The PI should also ensure that all personnel involved with

¹⁵ A Principal Investigator (PI) is a person responsible for performing, directing, or supervising research, or who signs a research sponsorship agreement in acknowledgement of the obligations of himself, herself, or the University.

¹⁶ Research records must be stored securely and protected with all the precautions appropriate to its sensitivity and privacy. Highly sensitive records may need to be held on computers not connected to networks and located in secured areas with restricted access. Secure storage may mean encryption of research records sent over the internet or kept on a computer connected to the internet; adherence to guidelines on data storage on mobile drives, digital recording devices or laptop computers; the use of computer passwords, firewalls, back-ups, and anti-virus software; off-site backup of electronic and hard-copy records; and other measures that protect research records from unauthorized access, loss or modification.

779 the research understand and adhere to established practices that are consistent with
780 these procedures.

781 Research records must be recorded or preserved in accordance with the highest
782 standard of scientific and academic practice and procedures. Research records must be
783 retained in sufficient detail to enable the University and the involved researchers to
784 respond to questions about research accuracy, authenticity, compliance with pertinent
785 contractual obligations, and University of Saskatchewan and externally imposed
786 requirements and regulations governing the conduct of the research.

787 Human research ethics applications require a statement outlining the procedures
788 researchers will use to securely store research records including the length of time the
789 research records will be stored, the location of storage, the identity of the person
790 responsible for storage of research records, and the procedures that will ensure secure
791 storage. Research participants must be informed of the purpose, use and retention of
792 the records as part of the information provided to them to make an informed decision
793 about whether to consent to participate in the study. Research participants must also
794 be informed about any potential for secondary use of research records. Research
795 record retention periods will vary depending on the research discipline, research
796 purpose and type of records involved.

797 Research records must be retained for not less than:

- 798 a. five (5) years after the end of a research project's records collection and recording
799 period;
800 b. five (5) years from the submission of a final project report;
801 c. five (5) years from the date of publication of a report of the project research; or,
802 d. five (5) years from the date a degree related to a particular research project is
803 awarded to a student.
804 whichever occurs last.

805 Research records must be retained for longer periods:

- 806 a. if required to protect intellectual property rights;
807 b. if such research records are subject to specific federal or provincial regulations¹⁷
808 requiring longer retention periods;
809 c. if required by the terms of a research sponsorship agreement; or,
810 d. if any allegations regarding the conduct of the research arise, such as allegations of a
811 breach of the Research Integrity Policy or conflicts of interest.

812 Research records may be retained for longer periods if retention is required for the

¹⁷ For example: *Canada's Food and Drug Regulations* require certain clinical trial records to be stored for twenty-five (25) years and research conducted in provincial hospitals may be subject to *The Hospital Standards Regulations, 1980* (Saskatchewan).

813 continuity of scientific research or if the research records are potentially useful for
814 future research by the PI or other researchers¹⁸. The Tri-Agencies place the following
815 responsibilities on grant holders:

- 816 a. The Social Sciences and Humanities Research Council (SSHRC) Policy on Data Sharing
817 states that all research data collected with the use of SSHRC funds must be
818 preserved and made available for use by others within a reasonable period of
819 time¹⁹.
- 820 b. Canadian Institutes of Health Research (CIHR) grantees must deposit bioinformatics,
821 atomic and molecular coordinate data into the appropriate public database
822 immediately upon publication of research results²⁰.
- 823 c. CIHR grantees must retain original data sets arising from CIHR-funded research for a
824 minimum of five years after the end of the grant. This applies to all data, whether
825 published or not²¹.
- 826 d. Collections of animal, culture, plant or geological specimens, or archaeological
827 artifacts (“collections”) collected by a grantee with Tri-Council grant funds are the
828 property of the University²².

829 3.0 Destruction of Research Records and Materials

830 Where appropriate, destruction of research records must be carried out so that
831 personal information cannot practicably be read or reconstructed²³. In some cases it
832 may be advisable to document the manner and time of destruction.

833 4.0 Leaving the University

834 When a researcher (including a student) involved in a research project leaves the
835 University, she or he may take a copy of the research records related to her or his
836 research.

¹⁸ Future use of research records may be subject to the provisions of applicable privacy legislation and/or the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS) <http://pre.ethics.gc.ca/eng/policy-politique/tcps-eptc/readtcps-lireptc>

¹⁹ http://www.sshrc.ca/site/apply-demande/policies-politiques/edata-donnees_electroniques-eng.aspx

²⁰ <http://www.cihr-irsc.gc.ca/e/34846.html#8>

²¹ http://www.nserc-crsng.gc.ca/Professors-Professeurs/FinacialAdminGuide-GuideAdminFinancier/Responsibilities-Responsabilites_eng.asp

²² http://www.nserc-crsng.gc.ca/Professors-Professeurs/FinacialAdminGuide-GuideAdminFinancier/Responsibilities-Responsabilites_eng.asp

²³ Paper documents containing personal information should be burned, pulverized or shredded into very small shreds. Erasing electronic files from a computer will not remove the information in that file from the computer. Applications are available that provide for secure erasure and will remove the records. When a computer is decommissioned, the disks must be erased using a secure disk erasure application or physically destroyed

837 If a PI leaves the University of Saskatchewan or a project is to be moved to another
838 institution, the University must be notified of the location of the original research
839 records. In some instances (e.g., where University of Saskatchewan intellectual property
840 or other interests are involved), such transfer may not be permitted. Any agreement to
841 move research records may require diligent retention by the recipient and continued
842 access by the University of Saskatchewan.

843 The obligations of researchers set out in these procedures continue to apply if an
844 individual takes copies of research material to his/her new institution.

DRAFT