



# Policy on Scientific Integrity

Vice Presidency of graduate Studies  
and Scientific Research, University Of Dammam



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*King Fahd National Library Cataloging-In-Publication Data*

University of Dammam

Policy on scientific integrity/ University of  
Dammam – 1. . - Dammam, 2015

73p; 21\*14.8cm

ISBN: 978-603-8081-44-0

1-Research – Moral and ethical aspects 2-Research

3- Science – Research I-Title

507.2 dc 1436/5653

**L.D. no. 1436/5653**

**ISBN: 978-603-8081-44-0**

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## Policy on Scientific Integrity

MESSAGE FROM H.E. PROF. ABULLAH AL-RUBAISH  
PRESIDENT, UOD

The University of Dammam (UOD) is actively expanding its institutional aspirations to create an environment and culture in which intellectual curiosity, scientific research, and discovery are to become a vibrant partner with its traditional excellence as a predominantly instructional focused institution. As we seek to achieve this new balance with significant investment in our mission of scientific discovery, we must maintain our traditional vigilance toward our time-honored commitments to ethical behavior and integrity.



This UOD Policy for Scientific Integrity is a fitting enunciation of our long-standing values and becomes a foundational document articulating the critical manifestation of scientific integrity as provided in the King Abdullah City for Science and Technology's (KACST) National Science and Technology Innovation Plan (NSTIP). Although this UOD Policy for Scientific Integrity is newly minted in compliance with the NSTIP Rules for Scientific Integrity, its declarations span the breathe of our scientific and scholarly activities; articulate our traditional values of intellectual integrity and ethical behavior; and, underscore our ongoing commitment to the maintenance of high standards in all pursuits by our faculty, staff and students (Parts I-III). Further, it provides all institutional members with a transparent and clear understanding of the steps and processes to be undertaken by UOD to evaluate any concern reported regarding potential scientific misconduct or conflicts of commitment and conflicts of interest by institutional members.

I commend this policy to the entirety of UOD as a clear declaration of our institutional values related to scientific and scholarly endeavors and as a guide to the maintenance of our traditional high standards of scientific integrity.

**H. E. PROF. ABDULLAH M. AL RUBAISH**  
President, University Of Dammam

## Policy for Scientific Integrity

MESSAGE FROM PROF. ABDUSALAM A. AL-SULAIMAN  
VICE PRESIDENT FOR GRADUATE STUDIES AND SCIENTIFIC RESEARCH, UOD

As UOD commits to develop an institutional environment of intellectual curiosity and become an internationally competitive site for scientific research and discovery, we also aspire to achieve and maintain the highest standards of research ethics and scientific integrity. Pursuit of these ambitions demands that we develop and follow high ethical standards for scientific study and research that embody these goals and aspirations. The following Policy for Scientific Integrity provides a set of framework standards, guidelines and procedures within which we can assure our maintenance of an environment that promotes such high standards for research ethics and scientific integrity. Included in this Policy are:



- KACST's NSTIP Rules for Scientific Integrity (Part I);
- Additional guidelines relating to Scientific Publications (Part II);
- Policies related to Conflict of Commitment and Conflict of Interest (Part III); and,
- A detailed description of the processes undertaken to evaluate any concerns reported regarding scientific misconduct or conflicts of commitment and conflicts of interest (Part IV).

Although the principles embodied in this policy are not new to UOD, their clarification through this policy is intended to promote a UOD wide understanding of these accepted standards and insure the maintenance of our traditional deep commitment to ethical behavior and scientific integrity. Our goal is to insure that all institutional members are familiar with this policy; and, thereby, that they become engaged advocates for its adherence.

**PROF. ABDUSALAM A. AL SULAIMAN**  
Vice President for Graduate Studies and Scientific Research

# Part I

# Rules &

# Regulations



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## 1. Introduction

The University of Dammam (UOD) espouses to maintain the highest standards of research ethics and scientific integrity. To that end, UOD has developed a series of policies and associated initiatives to promote a culture of scientific integrity and research ethics in the conduct of all aspects of its research mission. This commitment includes programs to educate all institutional members of such standards and to monitor the conduct of all scientific endeavors.

This Policy for Scientific Integrity consists of four parts. They are:

Part I: Rules and Regulations

Part II: Rules for Scientific Publications, Authorship and Copyrights

Part III: Research Conflict of Commitment and Conflict of Interest

Part IV: Procedures for Evaluation and Management of Scientific Misconduct and Research Conflict of Commitment & Conflict of Interest

In their collective, these parts articulate the institutional guidelines for proper scientific conduct and provides a detailed description of the institution's management of any potential aberration to that standard.

## 2. Definition of Misconduct in Scientific Research Integrity

Misconduct in research and scientific studies means fabrication, falsification, and/or plagiarism, in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error or differences of opinion. Definitions of specific terms used in the text of all Parts, I-

IV, of this Policy are provided in Part I, Article 9:” General Definitions”.

### 3. **General Rules of Scientific Integrity**\*<sup>1</sup> (corresponds to Article One of “NSTIP Rules of Scientific Integrity”)

The following rules are reproduced from the KACST “Rules of Scientific Integrity” (Appendix 1) that was created to apply to research funded within the framework of the National Science, Technology and Innovation Plan (NSTIP)\*<sup>1</sup>. Nonetheless, they are applicable to all research conducted at UOD and have been adopted in their entirety by the UOD as Cannons of Integrity in the pursuit of Research and Scientific Studies. They are:

#### 3.1. **Prohibitions**\*<sup>2</sup> for researchers to:

\*<sup>2</sup> corresponds to and is a copy of Article Two of the “NSTIP Rules of Scientific Integrity”

1. “Conduct, or participate in, any scientific research inconsistent with the Islamic values and ethics.
2. Use or employ scientific achievements against humanity.
3. Conduct scientific research with adverse impact on public health or the environment; if such research is necessary, such impact must be eliminated or reduced as much as possible.
4. Conduct research in a manner that derogates human dignity or is inconsistent with ethical principles and human values and customs.
5. Defend scientific issues in a manner devoid of facts, evidence and documented expertise and scientific references.
6. Utilize scientific capabilities and activities to the detriment of the current and future generations.”

#### 3.2. **A researcher must abide by the following Professional Principles**\*<sup>3</sup>:

\*<sup>3</sup>Corresponds to and is a copy of Article Three of the “NSTIP Rules of Scientific Integrity”

1. "Seek transparency and credibility when selecting and conducting scientific research topics and themes, and dealing with proposed issues and challenges.
2. Avoid setting exaggerated time and financial requirements for scientific research, or the wasteful use of materials and supplies, or the misuse of available equipment and materials.
3. Present research results with honesty and transparency, and never conceal or cover negative results from anyone, or interpret results based on controversial hypothetical assumptions.
4. Follow laboratory safety instructions, procedures and rules, and preserve the safety of lab equipment, materials and staff.
5. Observe the instructions, regulations and laws pertaining to the research topic.
6. Comply with executive bylaws and regulations related to living creatures research ethics, and observe professional ethics when conducting research and experiments on human, animal or plant subjects
7. Ensure quality performance, which should never be linked or associated with any type of moral or material incentive or reward.
8. Abstain from utilizing his/her research activity, or scientific concepts, or expertise for any sort of advertising or publicity for any personal goal, or any tribal, nationalistic, ethnic or other affiliation, in violation of existing laws and regulations.
9. Avoid personal relationships and inclinations or subjective criticism during scientific discussions and debates, respecting the principle of mutual respect, regardless of scientific position or academic honors.
10. Refrain from accepting any invitation to conduct, or participate in conducting, any research when lacking sufficient professional or scientific expertise in the research domain, and seek to recommend the nomination of the needed qualified expert to conduct the research.
11. When tackling any topic or issue that is not within his/her area of

expertise, the researcher must state his/her domain of specialization as well as his/her academic honors.

12. Never conceal information and information sources, nor restrict the exchange of opinions and ideas among expert researchers, inhibiting scientific research progress.
13. Never withhold any scientific findings from the party for which the research is being conducted.
14. Protect the rights of the research subject concerning the results of scientific research and the intellectual outputs found or revealed, and report such results to the party in question promptly. These results shall not be used in any manner that will serve the researchers or other interests, without the prior written consent of the involved party.
15. Refrain from overstating research results as to mislead public opinion.”

### **3.3. The researcher must take the following into consideration with regard to the project team\*4:**

\*4 Corresponds to and is a copy of Article Four of the “NSTIP Rules of Scientific Integrity”

1. “Encourage teamwork through research teams, rather than exclusively or selfishly conducting scientific research.
2. Nurture perseverance, serious work and healthy competition, as well as mutual respect among researchers of all kinds to support scientific research and ensure its continuity.
3. Allocate research work among team members so as to ensure exchange of expertise and work perfection, and individual development among research team members.
4. Select qualified and capable team members based on objective impartial criteria.”

**3.4. In terms of publishing\*<sub>5</sub>, the researcher must commit to the following:**

\*<sub>5</sub> Corresponds to and is a copy of Article Six of the “NSTIP Rules of Scientific Integrity”

1. “Abide by international and domestic copyright laws and regulations effective in the Kingdom, especially concerning obtaining prior written consent from the author or the publisher when considering translating a published work, partially or entirely, or republishing pictures or figures or other parts of the work.
2. Cite source(s) quoted or used by the author to write his/her published work wherever mentioned, as well as in the references list.
3. A scientific paper may not be simultaneously submitted to more than one party for publishing.
4. A scientific paper published in one particular scientific journal may not be published again elsewhere, nor can it be used in more than one scientific conference record or seminar without significant change or addition, unless so authorized by the publishing party and with reference to the original reference or source where the paper was previously published.
5. Expressions of appreciation and gratitude to the funding party must be included, taking into consideration 3.6.5. below.”

**3.5. To protect the rights of others\*<sub>6</sub>, a researcher must abide to the following:**

\*<sub>6</sub> Corresponds to and is a copy of Article 7 of the “NSTP Rules of Scientific Integrity”

1. “When intending to publish scientific papers or research, or to participate in a conference or seminar, the researcher shall not omit the names of any participants in the research.
2. The names of researchers involved in joint research must be listed according to their actual contribution to that work. In case of equal contribution, names will be listed alphabetically, unless otherwise mandated by a mutual agreement.

3. Names of individuals who did not actually contribute to the published work shall not be listed in the credits.
4. Technicians, who contribute to the research activity with sample analysis or prototype design or editing and writing of results, as well as contributors with related opinions or commentary, must be recognized and their names listed among the list of authors, if their contribution is a major part of the published work.
5. A copyright agreement with the owner or the financial sponsor of the research project must be made and documented before the research activity is conducted, and upheld once the research is published.
6. The rights of society must be respected relating to the publication of scientific breakthroughs, and no attempts should be made to distort scientific facts or delay publishing of such facts.”

### **3.6. Peer Review Referees must commit to do the following\*7:**

Scientific Integrity”  
\*7 Corresponds with and is a copy of Article Eight of the “NSTIP Rules of

1. “Express his/her opinion impartially with integrity when arbitrating research and scientific output or activity.
2. Present and referee research and scientific output or activity with the utmost secrecy and objectivity, and only to the extent of his/her expertise. He/she may recommend the nomination of any of his/her colleagues to perform in areas that do not fall within his/her expertise.
3. Submit his/her comments, opinions, criticism, instructions and results of additional tests, if available, related to the scientific research or output or activity being refereed, to the party requesting the peer review.
4. Evaluate and arbitrate academic thesis with utmost professionalism and objectivity, showing and recording comments and criticism of the thesis.
5. Refrain from participating in the evaluation or arbitration of the results of his/her own scientific research or activity outputs, or

- scientific research or activity outputs or any other scientific exercise he/she supervised, or was involved in the supervision thereof.
6. Refrain from participating in the peer review process of any research output, activity or project, or research project reports, for a person or a party to whom he/she is connected or related with any sort of inherent mutual interests.
  7. If the referee identifies plagiarized material in the scientific material he/she is refereeing, or in case of any sort of scientific error, the referee is bound to indicate the plagiarized sections, along with the original source from which the material was illegally used. Likewise, in case of any sort of scientific error, the referee must indicate the error with precision and honesty.
  8. Accurately distinguish between redaction errors when citing the reference in a refereed material, and plagiarisms, and seek to demonstrate whether the error committed was intentional or the result of negligence and lack of expertise on behalf of the researcher whose work is being evaluated.”

## **4. Prevention of Scientific Misconduct**

### **4.1. Institutional Initiatives**

UOD is committed to the ethical conduct of all its endeavors and aspires to become a benchmark in its provision of an environment of such integrity in the pursuit of intellectual curiosity, discovery, innovation and entrepreneurialism. To achieve these ends and through the SCRELC, the Monitoring Office for Research and Research Ethics (MORRE) has been established to:

4.1.1. Ensure that training for faculty, students and staff involved in research is provided to ensure their understanding of all policies, rules and guidelines related to the ethical conduct of their research and scientific/scholarly studies.

- 4.1.2. Monitor the consistent adherence to all institutional policies, rules, procedures and guidelines that promote high ethical standards in the conduct of research and relevant scholarly studies; and,
- 4.1.3. Seamlessly work with the NSTIP to report, investigate and discipline valid allegations of misconduct and/or violation of the Rules of Scientific Integrity and related procedures and guidelines.

## 4.2. Individual Responsibilities

Each investigator is responsible for his/her ethical conduct of research and scholarly study. This responsibility includes awareness of all institutional policies related to research; supervision of other investigators under their charge to likewise advance their ethical conduct of research; maintain accurate and complete research records; and, abide by all rules of scientific integrity in publication and other dissemination of research findings.

## 5. Violations of Scientific Integrity

The following items are examples violations of scientific integrity.

### 5.1. Fabrication of Scientific Results\*8

\*8 Corresponds to and is a copy of Article Nine of the “NSTIP Rules of Scientific Integrity”

“A researcher is prohibited from fabricating any sort of scientific results and falsely claiming that they are based on scientific research or experiments”.

### 5.2. Falsification of Scientific Results\*9

\*9 Corresponds to and is a copy of Article Ten of the “NSTIP Rules of Scientific Integrity”



“A researcher must present his/her scientific findings without distortion, or omission of deviating or irregular results from the actual results of scientific experiments conducted, in order to present the consistency often required by scientific journals.”

### **5.3. Overstating the significance and Importance of Findings\*10**

\*10 corresponds to and is a copy of Article Eleven of the “NSTIP Rules of Scientific Integrity”

“A researcher must refrain from directed scientific deception, including intentional focus on exhibiting content, or acknowledging implications that may be incidental and of poor significance, and treating them as if they were the equivalent of the rest of the results obtained over the general course of scientific research, as well as neglecting the significance of other data, that could, once disclosed, weaken the core idea of the research”.

### **5.4. Misrepresenting Work of Others\*11**

\*11 Corresponds to and is a copy of Article Twelve of the “NSTIP Rules of Scientific Integrity”

“A researcher is prohibited from misrepresenting the work of others, partly or entirely, as his/her own, and from neglecting to cite the source of any idea.”

### **5.5. Excessive Use of Scientific References or Citations\*12**

\*12 Corresponds to and is a copy of Article Thirteen of the “NSTIP Rules of Scientific Integrity”

“A researcher must avoid excessive use of scientific references or citations without recourse to these sources, as well as listing reference names to simply suggest having an extensive scientific background in his/her area of expertise, to establish among readers and referees the impression that he/she is knowledgeable in his/her area of expertise”.

## 5.6. Intellectual Exploitation\*13

\*13 Corresponds to and is a copy of “ NSTIP Rules of Scientific Integrity”

“A researcher must refer to the efforts of others whose work is being utilized whether or not it was published, and refrain from adding any names of individuals who did not make a significant contribution to the scientific research in question.”

## 5.7. Curriculum Vitae Misrepresentation\*14

\*14 Corresponds to and a copy of Article Fifteen of the “NSTIP Rules of Scientific Integrity”

“A researcher’s curriculum vitae must reflect the utmost accuracy and credibility, and personal achievements and expertise must not be exaggerated either to mislead others or to achieve profit.”

## 6. Management of Possible Scientific Misconduct \*15

\*15 Corresponds to Article Sixteen and Seventeen of the “NSTIP Rules of Scientific Integrity”

### 6.1. Obligations to Report Possible Misconduct

All institutional members (see General Definitions – Article 9) are obligated to immediately report any real, apparent or suspected research misconduct to the Director of the MORRE who will act as the Institutional Research Integrity Officer (RIO)

### 6.2. No Retaliation

All Individuals involved in a report or management of a report of suspected Scientific Misconduct are bound to not take any action that could be seen as retaliation. This includes actions by the Responding Party against the Reporting Party(s), witnesses or

members of committees engaged to evaluate the complaint. Institutional members should immediately report any real or apparent retaliation to the RIO.

### **6.3. Confidentiality**

All parties should keep confidential all matters and individuals related to a report of potential scientific misconduct, its evaluation and conclusions. This includes the identity of the “Reporting Party(s)”, committee members, witnesses and the Responding Party. In short, transmittal of information between parties should be limited to those who have a need to know in order to carry out the misconduct proceeding.

### **6.4. Evaluation and Management of Reported Possible Misconduct**

All processes to be used for evaluation of a report of possible scientific misconduct and management of an instance judged to be scientific misconduct are provided in detail in Part IV of this Policy for Scientific Integrity, entitled “Procedures for Evaluation and Management of Scientific Misconduct and Research Related Conflict of Commitment & Conflict of Interest “

## **7. Record Retention**

**7.1.** All records associated with an evaluation of scientific misconduct, including all testimony during committee hearing and all material examined related to the report of possible misconduct will be held for at least seven years following the completion of the related proceedings, including any proceedings conducted by the Office of the General NSTIP Secretariat.

## 8. Applicability

**8.1.** This policy applies to any activity considered to be related to scientific research and scholarly publications by any Institutional member (See Definitions. Part I, Article 9.)

**8.4.** This policy will be amended as necessary to conform to policies of the funding entity relevant to the alleged scientific misconduct. Where conflicts between this policy and the funding entity's policy exists, the funding entity's policy will take precedence.

**8.5.** This policy does not substitute for or act as an alternative to: actions taken under the NSTIP rules and regulations; or, any existing regulations or procedures for managing misconduct in fiscal matters, the ethical treatment of humans or animals as research subjects or criminal matters.

## 9. General Definitions

The terms defined below apply terms used in any Parts (I-IV) of this Policy.

9.1 ***Conflict of Commitment*** means any circumstance in which an Individual's external relationships or commitments have the possibility of interfering or competing with the Individual's ability (either in fact or appearance) to discharge his/her obligations to or work in the University.

9.2. ***Conflict of interest*** means the real or apparent interference of one person's interest with the interest of another person, where potential bias may occur due to prior or existing personal, financial or professional relationships.

**9.3. Deciding Official** means the Institutional officer (Vice President of Post- Graduate Studies and Scientific Research or his/her designee) who makes final determinations on reports of scientific misconduct and any responsive Institutional actions.

**9.4. Entity** means a for-profit or not-for-profit organization legally unrelated to UOD for which an Individual may spend considerable time and effort and/or receives income

**9.5. Equity** means ownership interest in a for-profit corporation, partnership or other similar organization

**9.6. Fabrication** means making up data or results and recording or reporting them in scientific reports or in curriculum vitae.

**9.7. Faculty and administrative/professional staff** means an individual employed by UOD as faculty in one of its colleges or programs, administrative staff employed by UOD and professional staff (e.g. technologists, nurses and other professional staff in the King Fahd Hospital of the University (KFHU), medical and dental clinics and the Dentistry hospital.

**9.8. Falsification** means manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

**9.9. FCOI or Financial Conflict of Interest** means a circumstance in which the institution determines that an individual (e.g. UOD faculty member investigator, physician, dentist, nurse or administrative staff member) has or could directly and significantly affect the design, conduct, or reporting of research, the purchase of equipment or an

award of service contracts related to the research mission, the consequence from which he/she may incur direct or indirect financial benefit.

**9.10. Financial interest** means outside relationship that an Individual may have that is of monetary value including income for services, ownership, equity, fiduciary or management relationships whether they be paid or not.

**9.11. Good faith** means having the belief in the truth of one's report or testimony that a reasonable person in the Reporting Party(s)'s or witness's position of knowledge or information at that time could have arrived at the same report or statement at that time as the Reporting Party(s) or witness.

**9.12. Income** means money received in exchange for services rendered, the sale of goods or property or as a profit received from financial investments.

**9.13. Individual** means a UOD faculty member, administrative and professional staff employee, student, trainee and volunteer or part-time appointee (whose activities with UOD constitutes a primary allegiance to UOD in related matters). *Individual also includes spouse and dependent children in regard to employment or fiduciary interests.*

**9.14. Industry** means any bio-medical, bio-technology or pharmaceutical, engineering or architecture firm or company that is a vendor, or potential vendor to any component of UOD or may make products or services used by any component of UOD that relates to the research mission.

**9.15. Industry sponsored travel** means travel costs paid or reimbursed by industry. Such support may be completely appropriate but in all instances of *Industry Sponsored Travel* the individual must disclose and receive Travel Authorization. Disclosure does not apply to and is not required for travel supported by any of the following:

- Government sponsored travel
- Travel to institutions of higher education
- Travel to academic medical centers and hospitals
- Travel to research institutes that are affiliated with an institution of higher education

**9.16. Inquiry** means preliminary information-gathering and preliminary fact-finding that meets the criteria and follows the Institutional investigation procedures.

**9.17. Institution** means the University of Dammam (UOD).

**9.18. Institutional member** means a person who is employed by, is an agent of, or is affiliated by contract or agreement with the institution.

**9.19. Investigation** means the formal process of fact finding of records and testimony and the subsequent rendering of a decision of 'No Misconduct' or of a finding that "Misconduct" did occur and the recommendations for consequent actions.

**9.20. Investigator** means any Individual who is engaged in scientific research, be it as a project director, principle, co-principle investigator or other person, regardless of title, who the Institution determines to be responsible for the design, conduct, or reporting

of research. This also includes an Individual who may serve as a consultant or a collaborator.

**9.21. Key Officials** means UOD individuals who, due to their leadership position, their authority to make important decisions, their fiduciary duty to act in the best interest of the Institution, their activities as membership on Institutional Committees, and their position as role models for the Institution. Such

Individuals have significant influence on other Institutional members. Examples of Key Officials include, but not limited to: the UOD President, Vice Presidents, Deans, Department Chairs, Program Directors, senior administrative & professional staff, and Institutional committee members.

**9.22. MORRE or Monitoring Office for Research and Research Ethics** means the Monitoring Office for Research and Research Ethics that monitors and assures the ethical conduct of research at UOD .

**9.23. Notice** means a written communication provided in person, sent to that person by mail or its equivalent addressed to the last known street address, facsimile number or e-mail address of the person.

**9.24. NSTIP** means the National Science, Technology and Innovation Plan

**9.25. Plagiarism** means appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

**9.26. Preponderance of the evidence** means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.



**9.27. Reporting Party(s)** means a person or persons who, in good faith makes a report of potential research misconduct.

**9.28. Research** means the performance of a scientific experiment, study, evaluation, demonstration or survey designed to discover or contribute to knowledge relating to general or discipline specific knowledge.

**9.29. ROI or Research Integrity Officer** is the Director of the Monitoring Office for Research and Research Ethics (MORRE). The RIO has primary Institutional responsibility for assessing all reports of research misconduct and determining when such reports warrant inquiries and for overseeing inquiries and investigations.

**9.30. Research misconduct proceeding** means the processes described in Part IV that are undertaken by the Institution for evaluation of all reports of possible research misconduct.

**9.31. Research record** means any and all data that are created in relation to the conduct and/or results of an experiment and/or other scientific study, including publications related to such an experiment or study.

**9.21. Responding Party** means the person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.

**9.32. Retaliation** means an adverse action taken against another person by the Responding Party against any other person connected to the Misconduct proceedings.

**9.33. *Outside Interest/Activity*** means any paid or volunteer interest or activity undertaken by an Individual that is outside the scope of his/her regular Institutional duties.

Outside professional activities may include consulting, participation in civic or charitable organizations, working as a technical or professional advisor or practitioner, or holding a part-time job with another employer, whether working in one's Institutional occupation or another.

**9.34. *SCRELC or Standing Committee for Research Ethics in Living Creatures*** means the institutional leadership committee chaired by the Vice President for Post-Graduate Studies and Scientific Research that provides ultimate oversight for all issues relating to bio-ethics, scientific integrity, animal and human research, research related conflicts of commitment, conflicts of interest and the monitoring thereof.

**9.35. *(SFI) or Significant Financial Interest*** means a financial interest in any entity, not for profit or for-profit organization that results in income over a twelve (12) month period that exceeds an aggregate of \_\_\_\_\_SR or US \$5,000.

9.35.1. Exclusions from the definition of SFI include:

- a. Salary or other income paid by the Institution;
- b. Income from investment vehicles as long as the Individual's funds are not invested in entities doing business with UOD or associated with the Individual's UOD responsibilities and/or duties; and,
- c. Income or honoraria received from seminars, lectures, or teaching engagements sponsored by a governmental agency, an institution of

higher education or other academic or research institutions that are affiliated with an institution of higher education.

**9.36. Travel Authorization** means a form provided to the prospective Individual traveler that serves to disclose planned Industry-Sponsored Travel or any other travel related to conduct of UOD related activities. When requesting industry sponsored travel authorization, the prospective traveler will disclose the purpose of the trip, the identity of the sponsor/organizer, the destination, and the duration of travel. The MORRE will determine if further information is needed to in order to determine whether the travel constitutes a FCOI.

## 10. Acknowledgements

1. The Research Integrity Policy of the Wake Forest Baptist Medical Center, Winston-Salem, NC, USA, dated 7-19-12 was used with permission as a reference framework in the construct of this Policy (Parts I-IV).
2. The KACST National Science, Technology and Innovation Plan Rules for Scientific Integrity

## Appendices

1. NSTIP Rules for Scientific Integrity

# **Part II**

# **Rules for Scientific**

# **Publications**

# **Authorship, and**

# **Copyrights**



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## **1. Introduction**

Much of the academic reputation and perceived prowess of institutions of higher education is driven by their faculty's scientific and scholarly achievements as measured by the quality of their scientific and scholarly publications. UOD is committed to providing: a supportive structure and environment that nurtures intellectual curiosity and scholarship; and, to providing its faculty with the guiding tools of information and oversight to ensure that their scientific and scholarly publications, and related activities, are based on high ethics and scientific integrity. Underscoring that commitment, this portion, Part II, of the Policy for Scientific Integrity provides guidelines for the proper management of issues surrounding conduct in the creation and management of such scientific and scholarly publications.

## **2. Definitions**

Definitions for terms used in this Part (II) are included in the list of General Definitions that are provided in Part I, Article 9, of this Policy.

## **3. Guidelines for Authorship of Scientific and Scholarly Publications**

The purpose of the following guidelines and the associated documents are two fold:

1. to clarify the basic principles on which authorship is determined;
2. to address broadly accepted standards on how associated issues related to authorship should be managed.

### **3.1. Criteria for Defining Authorship**

Commonly held criteria for defining criteria for authorship are that the individual has contributed significant intellectual input to the scientific investigation and manuscript development, and, is amongst those who approve the final manuscript draft.

### 3.2. Designation of Respective Author Categories

#### 3.2.1. Responsible (Lead) Author

The **Responsible Author** is the individual who has assumed primary responsibility for the creation and scientific integrity in the publication, be it an original scientific article, book, abstract or review. Typically, the Responsible Author serves as the organizing author and assumes the duties for manuscript drafting, revisions and submission, and, for all correspondence to and from the remaining authors and publishing entity. Most commonly, this individual is the principle investigator of a research project, etc. but may serve only as the **Organizing or Corresponding Author** when the work is the product of a multi-center group of equal peers. At other times, the Responsible Author may be the senior person functioning as the leader of the group of contributing authors but not be the primary contributor to the body of work. Most commonly, when the Responsible Author is the principle architect of the work, he/she will be listed as the **Lead or First Author**. At other times, the Responsible Author will assume a similarly recognized senior position in the lists of authors, namely, the **Last Author**, leaving the first author position to the less senior but primary architect of the actual publication. In all instances, the Responsible Author assumes the ultimate responsibility for performing the due diligence to attest to the integrity of the entire manuscript.

#### 3.2.2. Order of Authorship



Except for criteria commonly used for Lead or First Author (See 3.2.1. above), the order of authorship for multi-authored work is driven by many indeterminable variables. For this reason, the sequence of authors should be determined and agreed in writing by all authors prior to initiating any draft of the manuscript. Ideally, the order of authorship should be affirmed in writing prior to beginning a scholarly work or initiating a research study.

### 3.2.3. Co-Authors

**Co-Authorship** is defined as all other authors to a publication other than the Responsible Author and First Author positions. It is incumbent on the Responsible Author to see that all individuals providing intellectual input into the work being reported, and, in the construct and approval of the drafted manuscript, be offered co-authorship to the publication (see 3.1. above).

The Responsible Author is reminded of his/her responsibility to see that undergraduate students, graduate students, and other research associates, irrespective of the presence or absence of monetary compensation for their work, are justly included as authors for their participation in the research or scholarly study and their development of the resultant manuscript.

### 3.2.4. Multi-Authors/Multi-Center Manuscripts

**Multi-Authors/Multi-Center** manuscripts are becoming more prevalent as collaborative scientific studies become multidisciplinary and include peer investigators and/or experts from diverse disciplines and multiple academic/research centers. Authorship inclusion and author position amongst scientific peers for such manuscripts/publications present special considerations. Division of responsibility and labor for construct of the manuscript reporting on

such multidisciplinary work from multiple centers is paramount since no single author is intellectually equipped to personally provide intellectual input attesting to work or statements provided by all peer collaborating participants from widely diverse fields of science (e.g. molecular biologist and population epidemiologist)

Considering the above mentioned complexities, it is critical that written agreement be obtained on inclusions of authors and their respective roles in the preparation of the manuscript prior to conduct of any such multi- disciplinary and/or multi-center scientific initiative. This includes agreement on who will be the Responsible Author and the duties and authorities of that position.

Although all authors remain responsible for the entirety of a publication, all participants/authors from the same field should work collaboratively to develop consensus, and must agree on the manuscript's content in their field of expertise.

### **3.3. Unacceptable Use of Authorship**

Individuals helping in administrative roles, providing patients for trials that lead to publication, only collecting data or providing other roles but not intellectually or scientifically engaged in a work leading to or producing a manuscript should not be listed as authors. If their help has been substantive, one can provide acknowledgement at the end of the publication.

### **3.4. Students as Authors**

3.4.1. Students (whether graduate or undergraduate) should be encouraged and mentored by faculty to become engaged in scientific and/or scholarly activity that leads to publications. Although they may have a very junior role in many projects that lead to publications,

their intellectual engagement in work that leads to publication should be solicited, mentored and rewarded by being included as an author. Notably, students are not technicians, should be mentored as a future peer; and, should be tutored on all components of developing manuscripts for publication.

#### 4. Copyrights & Citation Rules

All UOD related Individuals, be they researchers or others, that are engaged in authorship of research or scholarly publishing must follow the NSTIP Rules for Scientific Integrity as stated in its *Article Six* which covers rules and requirements related to copyright and Citation rules. It states that: “the researcher must commit to the following:

6. Abide by international and domestic copyright laws and regulations effective in the Kingdom, especially concerning obtaining prior written consent from the author or the publisher when considering translating a published work, partially or entirely, or republishing pictures or figures or other parts of the work.
7. Cite source(s) quoted or used by the author to write his/her published work wherever mentioned, as well as in the references list.
8. A scientific paper may not be simultaneously submitted to more than one party for publishing.
9. A scientific paper published in one particular scientific journal may not be published again elsewhere, nor can it be used in more than one scientific conference record or seminar without significant change or addition, unless so authorized by the publishing party and with reference to the original reference or source where the paper was previously published.
10. Expressions of appreciation and gratitude to the funding party

must be included, taking into consideration item (5) of Article Seven.”

## 5. Rights of Others

As stated in the *Article Seven* of the NSTIP Rules for Scientific Integrity, “to protect the rights of others, a researcher must abide to the following:

7. When intending to publish scientific papers or research, or to participate in a conference or seminar, the researcher shall not omit the names of any participants in the research.
8. The names of researchers involved in joint research must be listed according to their actual contribution to that work. In case of equal contribution, names will be listed alphabetically, unless otherwise mandated by a mutual agreement.
9. Names of individuals who did not actually contribute to the published work shall not be listed in the credits.
10. Technicians, who contribute to the research activity with sample analysis or prototype design or editing and writing of results, as well as contributors with related opinions or commentary, must be recognized and their names listed among the list of authors, if their contribution is a major part of the published work.
11. A copyright agreement with the owner or the financial sponsor of the research project must be made and documented before the research activity is conducted, and upheld once the research is published.
12. The rights of society must be respected relating to the publication of scientific breakthroughs, and no attempts should be made to distort scientific facts or delay publishing of such facts.”

## 6. Peer Review Guidelines

All Individuals serving as peer review referees of scientific publications and/or research grant submissions must abide by the admonitions stated in *Article Eight* of the NSTIP Rules of Scientific Integrity as follows:

“Referees must commit to do the following:

11. Express his/her opinion impartially with integrity when arbitrating research and scientific output or activity.
12. Present and referee research and scientific output or activity with the utmost secrecy and objectivity, and only to the extent of his/her expertise. He/she may recommend the nomination of any of his/her colleagues to perform in areas that do not fall within his/her expertise.
13. Submit his/her comments, opinions, criticism, instructions and results of additional tests, if available, related to the scientific research or output or activity being refereed, to the party requesting the peer review.
14. Evaluate and arbitrate academic thesis with utmost professionalism and objectivity, showing and recording comments and criticism of the thesis.
15. Refrain from participating in the evaluation or arbitration of the results of his/her own scientific research or activity outputs, or scientific research or activity outputs or any other scientific exercise he/she supervised, or was involved in the supervision thereof.
16. Refrain from participating in the peer review process of any research output, activity or project, or research project reports, for a person or a party to whom he/she is connected or related with any sort of inherent mutual interests.
17. If the referee identifies plagiarized material in the scientific

material he/she is refereeing, or in case of any sort of scientific error, the referee is bound to indicate the plagiarized sections, along with the original source from which the material was illegally used. Likewise, in case of any sort of scientific error, the referee must indicate the error with precision and honesty.

18. Accurately distinguish between redaction errors when citing the reference in a refereed material, and plagiarisms, and seek to demonstrate whether the error committed was intentional or the result of negligence and lack of expertise on behalf of the researcher whose work is being evaluated.”

### **13. Acknowledgements**

1. KACST National Science, Technology and Innovation Plan: Rules of Scientific Integrity



# Part III

## Research Conflict of Commitment and Conflict of Interest\*





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## **1. Introduction/Scope of Policy**

### **1.1 Introduction**

Conflict of Commitment (COC) and Conflict of Interest (COI) can take many forms. In many instances, such conflicts are only apparent on reflection or only when seen from an independent or unbiased perspective. Therefore, this policy has been developed to ensure that all activities of individuals employed by or engaged with UOD are aware of potential conflicts in the conduct of their professional activities and to advance an environment of high ethical standards and scientific integrity in all academic, clinical, interpersonal and research activities of the institution.

### **1.2 Scope of Policy**

The Scope of this policy is to:

- Define the scope of COC and COI as they may arise in the research mission and scientific activities of the institution;
- Create principled guidelines for conduct of all outside relationships and activities that may relate to one's scope of employment and activities within the research mission

- Prevent unethical research related COC and COI by investigators and other Individuals engaged in the research mission;
- Introduce guidelines for disclosure of potential or apparent research related COC and COI;
- Provide guidelines to manage disclosed potential or apparent research related COC and COI;
- Create programs to educate all UOD individuals of potential research related COC and COI in the performance of their employment/engagement that relate to the research mission of UOD; and
- Establish procedures for management of reported or undisclosed research related COC and COI

## **2. Research Conflict of Commitment and Disclosure**

The Institution encourages its faculty and administrative & professional staff to be engaged with the community and the greater world of academia. Within this context, Individuals must recognize that their primary responsibility is to UOD; and, will limit any such outside activities/interests such that the Individual is in conformance with the intent and specific components of this policy regarding Conflict of Commitment (COC). Each individual is required to disclose any outside commitments that may constitute a Reportable Conflict of Commitment to their Institutional Supervisor (see Article 2.2.) and the MORRE.

### **2.1. Conflict of Time Devoted to Consulting and Outside Employment**

The Individual will disclose all time committed to outside consulting and outside employment in accordance with the provisions in Article 4, of this Part (III of IV).

## 2.2. Authority to Assign Duties and Approve Outside Consulting and Employment

The chart shown below identifies the authority to which each Individual must obtain approval for outside activities potentially representing a COC or COI. The authorizing supervisor should provide such approvals based on the appropriateness of the activity within the context of professionalism and ethics; compliance with Institutional policies; the benefit to the Institution and the community; and/or, the amount of time proposed for the activity.

<b>Individual</b>	<b>Institutional Supervisor</b>
Student	Dean of related College
Graduate Students	Dean of Graduate School
Residents in Medicine or Dentistry	Department Chair of Program
Administrative Staff	Direct Supervisor
Professional Staff	Direct Supervisor
Faculty	Department Chair
Department Chair	Dean or designee
Vice Presidents	UOD President or designee

## 2.3. Use of Institution’s Resources for Outside Entities

Use of Institutional resources for activities with outside entities from which the outside entity might profit will require prior approval by both the authorized Institutional Superior and by the

Patents and Technology Transfer Office (PTTO). Issues that should be clarified before Institutional resources are used for such activities include examination of ownership of potential inventions, ownership of resultant patents, data ownership and authorship and copyright ownership of any resultant publications.

Since contracts for publications of books are the result of personal effort and related royalties are paid to the Individual, they are not subject to being shared with the Institution, and, thereby, are exempt from the research related COC and COI Policy.

#### **2.4. Use of the Institution's name Symbols or Logos**

Since the Institution's Name, its Symbols and Logos are outward representations of the Institution; their unauthorized use is prohibited unless approved by the authorized Institutional Superior and the MORRE.

Outside entities can gain benefit through their association with faculty of the Institution and the resultant marketing of the Individual's relationship with the Institution, its name, symbols and/or logos. Thus, Individuals cannot participate in any outside activities totally independent of their relationship with the Institution. Therefore, approval of such outside Entity relationship is needed for both protection of the Individual and the Institution.

#### **2.5. Sharing of Intellectual or Tangible Property**

Individuals must disclose to the PTTO and gain approval of any planned or existent relationship with an outside Entity if:

- a. The outside entity is to provide financial or other support for the Individual's work; or,

- b. The outside entity anticipates use of intellectual property or tangible property or original works of authorship of the Individual

### **3. Research Conflict of Interest (COI) and Disclosure**

The Institution encourages and supports its faculty's and students' pursuit of research activities. In such pursuit, the Investigators must be committed to prevent bias, in any form, from entering into their research. This policy is provided to describe, prevent and appropriately manage research related Conflicts of COI, including Financial Conflicts of Interest (FCOI) that may arise during conduct of research. Prevention and management of such COI in research is: integral to the promotion of Institutional scientific integrity; the maintenance of the highest standards for ethics in research; and, to achievement of the Institution's vision of creating an outstanding and productive research mission.

#### **3.1. Disclosure**

All Individuals are required to annually disclose all outside interests to their authorized Institutional Supervisor. The Individual will cooperate with the MORRE to manage or cease any identified COI. One must also update their COI disclosure within one month of any significant change in their reportable external activities.

Specific required research related COI disclosures include:

- a. All sponsor specific interests of the Investigator must be disclosed with submission of proposed grants, contracts, regulatory protocols and requisitions;

- b. Any financial relationships with Industry related to investigation using human subjects must be disclosed to human subjects enrolled in a clinical research project and to the MORRE;
- c. Authors must provide public disclosure of outside interest for all publications, presentations and approved media contact related to the Individual's or his/her immediate family member's relationship with a sponsor of his/her research or in the ownership of a related entity or intellectual property;
- d. Individuals & Investigators must disclose and obtain approval of all travel sponsored by industry or any other external entity; and,
- e. All SCRELC and MORRE members and all Institutional purchasing and formulary personnel must disclose any financial interests or commitments he/she may have in external entities doing business with the Institution.

### **3.2. Outside Employment and Other External Professional Relationships**

The MORRE will evaluate all disclosures by Individuals of outside interest, including a review of requests for speaking and education functions funded by Industry. The MORRE may determine that a request needs additional evaluation before action can be taken on the request.

#### **3.2.1. Continuing Education (CE) Activities**

The Institution recognizes that Industry support of continuing education ("CE"), though potentially beneficial, can present potential conflicts of interest. Due to this potential, all industry supported CE programs must be approved by the MORRE prior to their conduct to



assure that the industry sponsored event or program does not represent such a conflict.

### **3.2.2. Outside Employment**

Any Individual desiring to undertake Outside Employment, including consulting and expert witness activities must provide a detailed written description of the proposed employment to their authorized Institution Supervisor and the MORRE; and obtain written approval before entering into any such outside employment. The authorizing Institutional Supervisor should consult with the MORRE on any borderline request. The Individual's written request and the authorizing Institutional Superior's decision must be filed with the MORRE.

### **3.2.3. Prohibited Personal & Professional External Activities with Industry**

Individuals are prohibited from participating in any engagement with industry that is promotional in nature. This includes such activities as advising for industry regarding their products or devises or participating in focus groups designed to solicit advise from the participants on marketing or promotion of their products.

## **3.3. Gifts from Industry**

### **3.3.1. Gifts to Individuals**

Individuals are prohibited from accepting personal gifts of any kind from Industry. This prohibition includes, but is not limited to, receipt of personal travel support, meals not incident to a legitimate research or educational activities, devises, or other gratuities, regardless of value.

### **3.3.2. Gifts of Funds to Departments to Support Education, Research and other Professional Activities**

3.3.2.1. Industry may contribute unrestricted gifts and donations to a departmental education or account in which donations are intended for education and/or professional support. There may be no expressed or implied quid pro quo for the donation of the funds.

3.3.2.2. Educational materials such as books, anatomical models, and illustrations, etc. that have nominal value may be gifted by Industry. Such gifts may not promote the donor's products or services.

## **4. Administrative Actions by Faculty and Staff Related to Their Relationships with Industry and Others**

### **4.1. Administrative Actions by Key Officials**

By virtue of their Institutional and public visibility, their position of authority within the Institution, their duty to always act, and appear to act, in the best interest of the Institution, and their setting example for all other Individuals within the Institution, Key Officials are held to a higher level of ethical behavior and scrutiny than the remainder of the institution. Therefore, they must err on the side of “over disclosure” of potential COC and COI and will be evaluated with greater concern for appearance of COC and COI than other Individuals. Further, since the slightest appearance of COC and COI by Key Officials undermines the entire Institutional ethical integrity, their disclosures will be managed more strictly and with greater restrictions created for their involvement in decisions where disclosures have been provided.

#### **4.2. Committee Participation when Members Have Personal External or Internal Relationships that Create Conflicts of Interest**

Institutional committee members, including members of SCRELC and MORRE COC, COI, and/or Scientific Integrity inquiry and Investigation committees, are functioning as Institutional Key Officials when performing such Institutional committee service.

Such members must be highly sensitized to the adverse impact of even the slightest appearance of personal COI.

In circumstances where a personal COI might exist, they are required to disclose such potential conflict and excuse themselves from committee work, discussions, decisions and votes that involve matters with which the member's COI disclosure is relevant.

In addition, the Chair of any Institutional committee should remove a member from committee deliberations in the event the Chair reasonably determines that the member should not participate due to perceived or real COI concerns.

Finally, each Institutional committee member must verbally disclose any COI that may arise during committee meetings and recuse himself/herself from discussion of that item of business. Such declarations by Committee members, or the Chair, must be recorded in the minutes of that meeting.

#### **4.3. Responsibility for Research Proposals**

All Individuals acting as Investigators must comply with all institutional, governmental and other sponsoring/funding sources' policies regarding research related COC and COI. Each investigator is held responsible for this compliance. When investigations are sponsored or co-sponsored by an outside funding source, the most

encompassing COC and COI policy of these multiple sources will be considered the governing policy.

#### **4.4. Employment of Relatives (Nepotism)**

Any Individual, including Individuals acting as research Investigators, must obtain approval from the MORRE prior to employing an immediate family member under their direct or indirect supervision. Even following approval and hiring an immediate family member into such an employment relationship, the Individual should cooperate with the MORRE to continuously minimize or eliminate any appearance of bias in the ongoing working relationship with any such immediate family member.

### **5. Educational Programs & Training**

The Institution, through the SCRELC and the MORRE, will develop educational and training programs to fully and repetitively inform all Individuals employed by UOD of this policy and their critical role in prevention and/or management of COC and COI.

### **6. Policy Review & Revisions**

#### **6.1. Review**

The MORRE will convene an ad hoc committee to review and recommend identified appropriate revisions at least every three (3) years from the effective date of this policy. Any recommended revisions will be forwarded to the SCRELC for action.

#### **6.2. Maintenance of Records**

The Monitoring Office for Research and Research Ethics (MORRE) shall maintain this policy and related records and be the Office of Record.

## **7. Related Policies**

UOD Manual of the Standing Committee for Research Ethics in Living Creatures

UOD Manual of the Monitoring Office for Research and Research Ethics

KACST National Science, Technology and Innovation Plan: Rules of Scientific Integrity

## **8. Acknowledgements**

Conflict of Commitment and Conflict of Interest Policies from the following institutions were reviewed for Part III:

Northwestern University  
University of Michigan  
Wake Forest Baptist Medical Center

*\*Note – Portions of the policies from Wake Forest Baptist Medical Center, Winston-Salem N.C. USA were used, with permission, for structuring this Policy*

**Part IV**  
**Procedures for**  
**Evaluation & Management**  
**of**  
**Scientific Misconduct**  
**and**  
**Research Conflicts of**  
**Commitment & Conflicts of**  
**Interest**



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<b>Introduction</b>	55
<b>Evaluation and Management of Possible Scientific Misconduct: Guidelines and Procedures</b>	55
<b>Management of Research Conflict of Commitment and Conflict of Interest</b>	68



## **I Introduction**

This section of the Policy on Scientific Integrity provides the detailed procedures and related material for evaluation and management of scientific misconduct and research related conflict of commitment (COC) and conflict of Interest (COI). The reader is reminded that Part I of this policy provides the recommendations on means to minimize the risk of scientific misconduct by investigators and related parties, and, declarations of what constitutes scientific misconduct. Likewise, Part III provides the range of activities that may constitute research COC and COI. This Part, (IV), focuses on the processes to be undertaken to evaluate allegations of scientific misconduct and alleged COC and COI. It then details the management consequences of confirmed instances of scientific misconduct as well as the processes used for management of research related COC and conflict of COI.

## **II Evaluation and Management of Possible Scientific Misconduct: Guidelines and Procedures**

### **2.1. General**

All parties engaged in the evaluation of an allegation of scientific misconduct should appreciate the seriousness of scientific misconduct allegations and approach their involvement in the evaluation with the upmost care and diligence to arrive at a just decision at the completion of deliberations.

### **2.2. Evaluation Process**

When the Director of MORRE, serving as the UOD RIO, receives a report of potential scientific misconduct, he/she should immediately

make a preliminary assessment of the report to determine if the allegation appears credible and falls within the realm of scientific misconduct.

During the preliminary assessment, the UOD RIO may speak with the accused person, (hereby referred to as the Respondent), or other individuals who may have information relevant to the case and/or, examine information or documents potentially germane to the allegation. The purpose of this preliminary assessment is not to definitively gather information; but, to simply ascertain if there is a sufficiently credible basis for the report to justify activating the formal process of evaluation.

If such a decision is reached by the RIO to move forward with a formal evaluation, he/she must immediately inform the SCRELC Chair, who acts as the Deciding Official for UOD in regard to matters pertaining to scientific misconduct, and, initiate the formal steps in evaluation of a scientific misconduct allegation. These steps are:

1. Initiate a formal Inquiry, which is performed to determine if there is sufficient evidence of misconduct to conduct a formal Investigation.

*Note that the Inquiry is limited in scope designed to; formally examine the reported allegation; more completely review evidence; and, come to a decision as to the need for a formal Investigation to be undertaken. It is not intended to be exhaustive or definitive but simply to determine that there is justification to proceed with the definitive Investigation.*

2. Based on a decision by the RIO to have the allegation of misconduct definitively examined, he/she will notify the Deciding Officer and launch a formal Investigation of the

misconduct allegation to arrive at definitive decisions regarding fact and reach a formal conclusion regarding the presence or absence of misconduct.

## **2.2. Referral of other Issues**

If, during the preliminary assessment, the RIO determines that the allegation of the Reporting Party(s) relates to financial misconduct, he/she will forward the case to the Institutional Officer providing oversight of fiscal matters for the Institution. Reports of suspected criminal acts will be referred to and handled by the appropriate law enforcement agency.

## **2.3. Criteria for Determining Research Misconduct**

Three criteria of misconduct must be present to conclude that research misconduct has occurred. They are: 1) the behavior or action must represent a significant deviation from accepted behavior or practices when compared to the relevant research community; 2) the misconduct is committed knowingly, intentionally or recklessly; and, 3) the finding of research misconduct must be substantiated by a preponderance of the evidence.

## **2.4. Inquiry Phase of the Misconduct Proceedings**

The Inquiry phase of the evaluation is the first formal step in the examination of evidence. Its purpose is to determine if the reported allegation has sufficient credibility to warrant a full formal investigation.

Once the RIO's preliminary assessment determines that an Inquiry is justified, he/she clearly articulates, and submits to written record, the specific allegation for which the Inquiry is justified. This written

record of the specific allegation should include the specific event or action, the project or circumstance in which it was committed and define the specific research related scientific misconduct that is in question. Then, he/she will:

1. Immediately pursue acquisition and sequestration of all pertinent records, data, and other physical evidence related to the allegation that is known at that point from the Respondent and other parties who might hold such relevant material;
2. Notify the Deciding Officer of his/her decision to pursue an inquiry;
3. Notify the Respondent in writing of the decision to launch an Inquiry, provide him/her with the written statement of the allegation as described above, and, remind the Respondent of his/her obligation to completely cooperate with all aspects of the proceedings.
4. Inform the Respondent, in writing, that destruction, alteration, or unwillingness to provide all records and other documents requested by the RIO or either the Inquiry Committee or the Investigation Committee, if subsequently convened, is de-facto proof of scientific misconduct.
5. Send a copy of the notification that was sent to the Respondent to the SCRELC Chair, the Dean of the Respondent's College of employment or enrollment, the Dean of Research, the Respondent's Department Chair and any other Institutional Official warranting a copy in specific cases.
6. Provide the Respondent with a copy of all four Parts of the UOD Policy for Scientific Integrity,
7. Appoint and charge a three member Inquiry Committee, and designate its Chair; and,
8. Remind all parties engaged in the Inquiry of their need to maintain complete confidentiality of all matters related to the

proceeding and provide their signature to such a written statement.

*Note that the RIO should keep complete and accurate records of all material sequestered and retain such material in a secure location to prevent any risk of its alteration, removal or destruction*

**2.4.1.** The RIO must alert all Inquiry Committee members to the Institutional research related COC and COI and have each member verify that they have no personal or professional conflict of interest with the Reporting Party(s) or the Respondent.

**2.4.2.** The RIO will instruct the Inquiry Committee that the “Charge” is only to determine if there is sufficient evidence of potential misconduct to warrant a full Investigation to determine if scientific misconduct was committed. In other words, they are not to determine if misconduct occurred; they are only to determine if there is enough evidence to support the process to move forward to a full Investigation.

**2.4.3.** If deemed needed by the Inquiry Committee, experts may be brought in to explain data or other information. Such experts are purely advisory to the committee and do not interview witnesses or vote on any matter before the committee. An expert must attest to the absence of any personal or professional COI before participating in the committee’s deliberations.

**2.4.4.** The RIO will be an ex-officio member of the Inquiry Committee and will provide administrative support to the Committee through the MORRE.

**2.4.5.** Written detailed minutes of all committee meetings will be maintained to allow, if necessary, later review of the Committee's deliberations.

#### **2.4.6. Inquiry Committee Report**

**2.4.6.1.** After Committee deliberation is completed, the Committee will vote either to: end the evaluation process without further investigation of the alleged misconduct; or; to forward the evaluation on to a formal Investigation to determine judgment regarding the allegation of Scientific Misconduct.

In either event, a formal draft Report of the Inquiry Committee's deliberations will be created and maintained as a permanent record of the proceedings. This draft report will contain the names of the Reporting Party(s), the Respondent, the Committee members and any witnesses and experts called to participate in the proceedings. The Report will describe the complaint and its evaluation in sufficient detail to justify the final decision of the Committee.

**2.4.6.2.** A copy of the draft Report will be provided to the Respondent for written comment and rebuttal. Likewise, a copy of components of the report that relate to the Reporting Party(s) also will be provided that individual(s) for written comment and rebuttal. Both rebuttals should be provided within 30 days of receipt of the draft Report.

Following review of any comments from the Reporting Party(s) and/or Respondent, the Inquiry Committee will make any modifications they deem appropriate to the written draft report and submit that final report to the RIO for further action. That report will then be distributed to the individuals listed in Article 2.4. (#4 & #5).

### **2.4.7. Actions by the Deciding Official**

On receipt of the Inquiry Committee's report, the Deciding Official will review their deliberations and the report to make a final decision regarding cessation of the process or moving forward with a formal Investigation. The Deciding Official must provide a written record of his/her deliberations in sufficient detail to explain the reason for moving ahead with the formal Investigation, if that is his/her decision. The RIO will notify all parties previously in receipt of the Inquiry Committee report of the Deciding Official's action and, if so directed, will officially begin the Investigation Stage of the Misconduct Proceedings

## **2.5. Investigation Phase of Misconduct Proceedings**

The Investigation phase of the process follows the same format as the Inquiry phase. The Rio will notify both the Reporting Party(s) and the Respondent of the decision to enter the Investigation phase. Again, all parties, including the Reporting Party(s), the Respondent, other individuals serving as invited experts, witnesses and the committee members, are reminded of the requirement for complete confidentiality regarding all matters relating to the allegation and the conduct of the Investigation. The Reporting Party(s) and the Respondent are, again, notified, in writing, of their obligation to cooperate in all ways requested by the RIO.

**2.5.1.** The RIO will appoint an Investigation Committee of three members from the Institution. All members must hold an academic rank of at least Associate Professor. The RIO, at his/her discretion, may ask members of the Inquiry Committee to serve on the Investigation Committee. All Investigation Committee members must attest in writing that they have no personal or professional conflict of

interest related to the persons or matters being investigated. Again, the RIO will serve as an ad hoc member of the committee and supply all needed administrative assistance from the MORRE.

### **2.5.2. Sequestration of Additional Records**

Any additional records requested by the committee during the Investigation phase will be added to the sequestered records from the Inquiry phase; and, will be held in a secure location to prevent any risk of removal or alteration. These records will be held for at least 5 years after the completion of the Investigation.

**2.5.3.** Should questions arise during the Investigation outside the expertise of the committee members, the RIO may, on request from the committee, to invite Experts to provide expert testimony regarding specific areas related to the Investigation.

Such experts may not question the Respondent or witnesses and cannot participate in any votes of the committee.

**2.5.4.** The RIO should assure that the Investigation Committee conscientiously reviews all records and other information obtained, including examination of witnesses during their deliberations and that the conduct of the Investigation is undertaken without bias toward any participant. All issues that arise during the deliberation should be diligently pursued until resolution.

**2.5.5.** All interviewees should be provided adequate time, at least 7 calendar days, to prepare in advance of their testimony.

**2.5.6.** The Respondent has the burden of proving, by a preponderance of evidence, any affirmative defense, including evidence of mitigating factors, relative to the allegation of misconduct. The Respondent also



has the right to personal legal assistance in his/her development of his/her defense against the alleged scientific misconduct.

### **2.5.7. Deliberations of the Investigation Committee**

2.5.7.1. After all evidence has been considered and all testimony has been provided, the Investigation Committee must deliberate and decide whether or not scientific misconduct has been committed and by whom. The RIO must remind the Committee that if it decides that misconduct has been committed, that decision must be supported by a preponderance of the evidence. The RIO should remind the Committee during the deliberation phase, that a finding of scientific misconduct requires that the conduct meet the criteria as stated in Article 2.3. of this Part (IV).

### **2.5.8. Report of the Investigation Committee**

The development of the Investigation Committee Report will follow the rules and guidelines set forth for the development of the Inquiry Report (Article 2.4.6.1. and 2.4.6.2.) including the requirement for distribution of a draft report to the Reporting Party(s) and the Respondent for their review and potential provision of rebuttals. Following potential revision based on the rebuttal information received, the Committee will make their final recommendation of Action.

In addition to a simple majority vote to dismiss the allegation, or, to find that scientific misconduct was committed and by whom, the Investigation Committee may report that they could not reach a majority decision for either conclusion. In this case, the RIO will relay this information and the report to the Deciding Official.

The Deciding official may accept the report as written and make his/her own determination regarding the presence or absence of scientific misconduct; or, he/she may refer the matter back to the Committee with instructions for further investigation and deliberation.

## **2.5.9. Institutional Action**

### **2.5.9.1. Faculty Respondent**

If a finding of scientific misconduct is sustained by the Deciding Official, he/she will so notify the Respondent's Department Chair and the Dean of his/her College, in addition to, the UOD President and the General NSTIP Secretariat. He/she also will include with this notification the action taken in response to the finding.

In consultation with the Deciding Official, the Dean of the College in which the Respondent is employed will determine the appropriate action. It may include, without limitation, a letter of reprimand, removal from the research project in question, probation, salary reduction or termination. The College Dean will consult with the UOD legal department and institutional leadership before any before any information related to the incident or Investigation is released to the public.

### **2.5.9.2. Student Respondent**

Similar to Article 2.5.9.1., if the Deciding Official determines that the finding of research misconduct is substantiated, the Dean of the College in which the Respondent student is enrolled will then decide on the appropriate actions to be taken. Such Actions may include, without limitation, removal from the specific project; letter of

reprimand; loss of academic credit, special monitoring of future work; and/or academic probation or suspension.

#### **2.5.10. Findings of No Misconduct**

Understanding the mental trauma and the consequent negative impact of being the Respondent in an Investigation of scientific misconduct, all parties engaged in the Investigation should commit to diligent efforts in support of the Respondent's mental health and to repair any negative impact of the proceedings on his/her reputation. In addition, disciplinary action should be taken against any Party(s) who participated in leveling unfounded charges against the Respondent if such charges were found to be malicious or intentionally dishonest.

#### **2.5.11. Notification**

2.14.11.1. The RIO immediately will notify both the Respondent and the Reporting Party(s) in writing of the Deciding Official's decision within two days of his/her receipt if that decision. The RIO also will notify all Institutional officials previously notified regarding initiation of the Investigation of the Deciding Official's decision. The RIO will also send a copy of the Investigation Committee's final report and the final decision of the Deciding Official to the UOD President and the General NSTIP Secretariat.

2.14.11.2. Other institutions and sponsoring agencies with which the individual has been affiliated previously will be notified if there is reason to believe that the validity of previous research might be questionable.

2.14.12. Time Limit for Completing the Investigation

The time limit for completing all components of the Investigation, from notification to the Respondent of the decision to move forward with an Investigation through the rendering of a final decision by the Deciding Officer shall not exceed 120 calendar days.

## **2.15. Reporting to the General NSTIP Secretariat Prior to Completion of Inquiry or Investigation**

**2.15.1.** The RIO shall notify the UOD President, the Deciding Official and the General NSTIP Secretariat prior to completion of the inquiry or investigation related to scientific misconduct when there is:

1. An immediate health hazard to human subjects identified in the assessment of the allegation;
2. An immediate risk that funds may be inappropriately expended or equipment misused or harmed;
3. There is an immediate need to protect the interests of any Party due to the risk that the reported event or allegation may be reported publicly; or,
4. There is a reasonable indication of possible criminal violation. In this instance, the RIO must inform these individuals within 24 hours.

**2.15.2.** If the RIO plans to terminate an inquiry or investigation without completing all relevant steps in the evaluation and management of an allegation of scientific misconduct as described in this Policy of Scientific Integrity, the RIO will submit a report of the planned termination to the Deciding Official, the UOD President and the General NSTIP Secretariat. That report will include a written record of all components concluded and the reasons for the proposed termination. Such circumstances may include, but are not limited to,

admission of guilt by the Respondent prior to completion of all steps in the process or the allegation was found to be unfounded in fact.

## **2.16. Record Retention**

**2.16.1.**The RIO will retain all written material generated by the preliminary assessment, the Inquiry and the Investigation including communications with any Party regarding the case a secure place for seven years after completion of the all proceedings, including any proceedings conducted by the Office of the General NSTIP Secretariat.

## **2.17. Applicability**

**2.17.1.**This policy applies to all Institutional Members (see Definitions provided in Part I) and to any action of such Institutional Members that pertains to research, research training, or other scientific inquiry or report as defined in Part I, Article 2.

**2.17.4.**This policy and its associated procedures will be modified as necessary to conform to the regulations and requirements of funding agencies or sponsors of the research project in question. Where the regulations or requirements of a funding agency or sponsor conflict with this policy and its associated procedures, those of the funding agency or sponsor will take precedence.

**2.17.5.**This policy and its associated procedures are not meant to supplant or establish an alternative to any existing regulation or procedure for handling fiscal improprieties, criminal matters, or, personnel actions against the Institution or other regulatory agency.

### **III Management of Research Conflict of Commitment and Conflict of Interest**

#### **3. Evaluative Process for determining COC, COI and FCOI in Research**

On behalf of the SCRELC, the MORRE will monitor and evaluate all COC, COI and FCOI disclosures, to determine if a research or other scholarly activity related COC, COI or FCOI may exist for any of Individual's Institutional duties, research or other related Institutional activities. If the MORRE determines that a COC, COI or FCOI exists, the MORRE will undertake a review of the activity in relation to their disclosures. Examples of such evaluations may include the design, conduct, and reporting of a research project or other scholarly activity. If any conflict is identified the MORRE Director will determine and implement the appropriate management process to protect the credibility and integrity of the Institution and the responsible Investigator(s) and/or Individual(s). If no corrective management is feasible, the MORRE Director will notify the SCRELC Chair and the sponsoring entity and recommend cessation of the research or other identified activity by the conflicted investigator(s)/Individual(s).

#### **3.1. Compliance with Sponsoring Entity's Regulations**

- a. The Institution, through its SCRELC and MORRE, shall adhere to all relevant and available policies of the sponsoring entity, including KACST policies related to KACST awarded funds for support of "intramural" funding of research projects.
- b. The Institution will ensure that each Investigator is informed of its policy on COC, COI and FCOI. The

Investigator's responsibilities regarding disclosure of SFI's and of these regulations.

- c. Each Investigator is required to complete a training program regarding COC, COI and FCOI requirements prior to engaging in research, and, at least, every four years, and immediately when the following circumstances apply:
  - i. The Institution revises its CCOC, COI and/or FCOI policies or procedures in any manner that affects the requirements of Investigators;
  - ii. An Investigator is new to the Institution; and,
  - iii. The Institution determines that an Investigator is not in compliance with the Institution's COC, COI and/or FCOI policies or management plan.
  
- d. The Institution will maintain records relating to all Investigator disclosures, their MORRE review and response to such disclosures of COC, COI and/or FCOI and all actions taken under Institutional policies, if applicable, for at least three years from the date of the final expenditures of funds and closing of a research project.

## **3.2. Human Subject Research**

### **3.2.1. Management of COC, COI and/or FCOI**

If a COC, COI, including a FCOI, is identified in research involving human subjects by the MORRE, the SCRELC will withhold final approval of a pending research grant and/or withhold approval for continuing conduct of the research until the evaluative process is concluded; resolution of the identified issues and recommendations for management of the COI and/or FCOI have been approved by the

SCRELC; and, corrective management to resolve the conflicts have been implemented.

3.2.2. Human subjects and the sponsoring entity will be informed of any identified COI and/or FCOI and the SCRELC approved plan for its management.

### **3.3. Breach of Conflict of Interest Policy**

All UOD Individuals have an obligation to comply with this policy. Examples of conduct that violates this policy include:

- Failure to submit required outside interest disclosure statements;
- Intentional deception or dishonesty in disclosures;
- Repeated omission of industry relationships in disclosures;
- Failure to comply with COI management plan requirements;
- or,
- Repeated failure to submit required travel and/or education related forms

These are examples and are not intended to be exhaustive. Reports of suspected violations may be made to the MORRE. Suspected violations will be investigated by the RIO using, at his/her discretion, and, as appropriate, the entire process, or portions thereof, described in Part IV Article 2 in evaluating the allegation. The ROI will engage the Respondent's Authorized Supervisor as appropriate in the deliberative process and enacting the proper response and/or sanction. Authorized Supervisors for respective classes of Respondents are the following:



### **Respondent**

Student  
 Graduate Student  
 Postdoctoral employee  
 Professional Staff  
 Administrative Staff  
 Medical, Dental and Nursing residents  
 Department Chair & Program Director  
 Dean  
 Vice President

### **Institutional Official**

Associate Dean for Student Affairs  
 Dean for Graduate Degrees  
 Dean for Graduate Degrees  
 Direct Supervisor  
 Direct Supervisor  
 Dean of appropriate School  
 Dean of appropriate School  
 Vice President or UOD President  
 UOD President

## **3.4. Sanctions**

**3.4.1.** Possible sanctions for research related COC and COI policy violations imposed by the SCRELC for violations may include, but are not limited to:

- Reimbursement to the Institution for misused resources;
- Written advisory for placement in employee or student file;
- Ineligibility to participate in grant applications or on committees;
- Dismissal from an educational or training program; and,
- Termination of employment

**3.5.**If, in the course of evaluation of a violation of the COC, COI, or FCOI policies, Scientific Integrity misconduct is uncovered, the RIO will immediately alert the SCRELC Chair and activate the scientific misconduct evaluation and management process as defined in Article 2 of this Part (IV).





