

## Proposed Updates to the RCR Framework (2021)

Former Section / Article #	New Section /Article #	Current Text	Proposed Updates	Rationale
1	1	<b>Tri-Agency Framework: Responsible Conduct of Research</b>	<b>Introduction</b>	Renamed Section 1 to “Introduction”.
1.1	1.1	<p><b>Introduction</b></p> <p>The search for knowledge about ourselves and the world around us is a fundamental human endeavour. Research is a natural extension of this desire to understand and to improve the world in which we live, and its results have both enriched and improved our lives and human society as a whole.</p> <p>In order to maximize the quality and benefits of research, a positive research environment is required. For researchers, this implies duties of honest and thoughtful inquiry, rigorous analysis, commitment to the dissemination of research results, and adherence to the use of professional standards. For the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) (the Agencies) and Institutions that receive Agency funding, it calls for a commitment to foster and maintain an environment that supports and promotes the responsible conduct of research (RCR). Responsible Conduct of Research is the behavior expected of anyone who</p>	<p><b>Preamble</b></p> <p>Responsible conduct of research (RCR) is the behaviour expected of anyone who conducts or supports research activities throughout the research life cycle (from the formulation of the research question, through the design, conduct, collection of data, analysis and interpretation of the research, to its reporting, publication and dissemination, as well as the application for and the management of the research funds). RCR is characterized by an awareness and application of established professional norms and values and ethical principles, such as honesty, fairness, trust, accountability, and openness, that are essential in the performance of all activities related to research. It also aims to ensure that research conducted does not cause harm.</p> <p>The Tri-Agency Framework: Responsible Conduct of Research (RCR Framework) is a joint policy of Canada’s three federal research funding agencies: the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC) and the Social Sciences and Humanities Research Council of Canada (SSHRC) or the</p>	Renamed Article 1.1 to “Preamble” and refreshed the text that was viewed as outdated.

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	<p>conducts or supports research activities throughout the life cycle of a research project (i.e., from the formulation of the research question, through the design, conduct, collection of data, and analysis of the research, to its reporting, publication and dissemination, as well as the management of research funds). It involves the awareness and application of established professional norms, as well as values and ethical principles that are essential in the performance of all activities related to research. These values include honesty, fairness, trust, accountability, and openness.</p> <p>This RCR Framework sets out the responsibilities and corresponding policies for researchers, Institutions, and the Agencies, that together help support and promote a positive research environment. It specifies the responsibilities of researchers with respect to research integrity, applying for funding, financial management, and requirements for conducting certain types of research, and defines what constitutes a breach of Agency policies. For Institutions, it details the minimum requirements for institutional policies for addressing allegations of all types of policy breaches, and Institutions’ responsibilities for promoting responsible conduct of research and reporting to the Agencies. This RCR Framework also sets out the process to be followed by the Agencies, and administered by the Secretariat on Responsible Conduct of Research (SRCR) and the</p>	<p>“Agencies”. The RCR Framework describes Agency policies and requirements related to the responsible conduct of research, and the processes that institutions and Agencies follow in the event of an alleged breach of Agency policy throughout the research life cycle.</p> <p>Since the release of the first RCR Framework in 2011, the Agencies have made efforts to keep the document current through regular 5-year updates (2016 and 2021). In 2026, the Agencies are reinforcing their continued commitment to protecting and safeguarding the security of research and promoting the responsible conduct of research, especially as emerging tools and systems, such as artificial intelligence (AI), present new opportunities and challenges for the research enterprise.</p>	
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		<p>Panel on Responsible Conduct of Research (PRCR), when addressing allegations of breaches of Agency policies.</p> <p>A diagram summarizing the process used to address allegations is provided in Appendix A. A glossary of terms is provided in Appendix B.</p>		
1.2	1.3	<p><b>Scope</b> This RCR Framework describes Agency policies and requirements related to applying for and managing Agency funds, performing research, and disseminating results, and the processes that Institutions and Agencies follow in the event of an allegation of a breach of an Agency policy. The provisions of this RCR Framework are subject to the specific terms and conditions of individual funding agreements and the <u><i>Agreement on the Administration of Agency Grants and Awards by Research Institutions</i></u> (the Agreement) between the Agencies and each Institution.</p> <p>The Institution shall develop and administer a policy to address allegations of policy breaches by researchers that meets the minimum requirements set out in the RCR Framework. The Institution applies its policy to all research conducted under its auspices or jurisdiction. In addition, researchers who apply for or hold agency funding are required by the Agencies to adhere to the RCR Framework.</p>	<p><b>Scope</b> RCR is a shared responsibility amongst researchers, institutions and Agencies.</p> <p>Those who apply for, hold or use Agency funding, must comply with the provisions of the RCR Framework, with its associated Agency policies and requirements for the conduct of research, and with the specific terms and conditions of individual funding agreements.</p> <p>Institutions must develop and administer a policy to address allegations of policy breaches that meets the minimum requirements set out in the RCR Framework.</p> <p>The Agencies must respond promptly to enquiries regarding the RCR Framework and to alleged breaches of their policies.</p> <p>The Agencies and signatory institutions of the <u><i>Agreement on the Administration of Grants and Awards by Research Institutions</i></u> (“the Agreement”) must comply with its terms. Matters</p>	<p>Switched the order of Articles 1.3 and 1.2 for clarity, starting with the broader objectives followed by the specific scope of the document.</p> <p>Updated the text for increased clarity. This includes the addition of an overarching statement that RCR is a shared responsibility.</p> <p>Note: A tri-Agency decision has been made not to include workplace harassment, discrimination, hate speech or violence in the RCR Framework, as they are addressed through other institutional and civil systems.</p>

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			pertaining to a conflict or an alleged material breach of the relevant responsible conduct of research sections of the Agreement (Articles 4.2, 4.3, 4.4) fall within the scope of the RCR Framework.	
1.3	1.2	<b>Objectives</b> The objectives of the RCR Framework are to: <ul style="list-style-type: none"> <li>a. ensure that the funding decisions made by the Agencies are based on accurate and reliable information;</li> <li>b. ensure public funds for research are used responsibly and in accordance with funding agreements;</li> <li>c. promote and protect the quality, accuracy, and reliability of research funded by the Agencies; and</li> <li>d. promote fairness in the conduct of research and in the process for addressing allegations of policy breaches.</li> </ul>	<b>Objectives</b> The objectives of the RCR Framework are to: <ul style="list-style-type: none"> <li>a. ensure that the funding decisions made by the Agencies are based on accurate and reliable information;</li> <li>b. ensure public funds for research are used responsibly and in accordance with funding agreements;</li> <li>c. promote and protect the quality, accuracy, and reliability of research funded by the Agencies; and</li> <li>d. promote fairness, equity, diversity, and inclusion in the conduct of research and in the process for addressing allegations of policy breaches.</li> </ul>	Switched the order of Articles 1.3 and 1.2 for clarity, starting with the broader objectives and narrowing down to the more specific scope of the document.  Added equity, diversity and inclusion (EDI) to (d) to demonstrate the Agencies' commitment to EDI by articulating ideals to strive for.
N/A	1.4		<b>Governance</b> The Agencies achieve their RCR mandate with the support of the Secretariat on Responsible Conduct of Research (SRCR) and the Panel on Responsible Conduct of Research (PRCR).	New article. Addressed an absence in the document of the Agencies' governance structure as it relates to RCR.

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N/A	1.4.1		<p><b>The Secretariat on Responsible Conduct of Research (SRCR)</b></p> <p>As it relates to its responsible conduct of research mandate, the SRCR provides substantive, administrative and communication support to the PRCR and the Agencies with respect to the RCR Framework.</p> <p>The SRCR is the central body responsible for RCR in Canada and the main resource for institutions and RCR contacts.</p>	New article. See rationale in Article 1.4.
N/A	1.4.2		<p><b>The Panel on Responsible Conduct of Research (PRCR)</b></p> <p>Created by the Agencies, the PRCR is an interdisciplinary review and advisory body responsible for providing the Agencies with a coherent and uniform approach to promoting RCR and addressing allegations of breaches of Tri-Agency policies, consistent with the RCR Framework.</p> <p>The PRCR is composed of seven members appointed by the Presidents of the three Agencies for a three-year term, renewable once. The members are drawn from across Canada to represent a wide spectrum of expertise and experience in ethics, responsible conduct of research, research administration, research in the health, natural sciences and engineering, and social sciences and humanities.</p>	New article. See rationale in Article 1.4.

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			<p>The PRCR is supported by the Secretariat on Responsible Conduct of Research.</p> <p>The Director General of the Secretariat on Responsible Conduct of Research is an ex-officio member of the PRCR.</p>	
N/A	1.5		<p><b>Implementation of the RCR Framework</b> The RCR Framework (2026) takes effect on [date to be inserted once confirmed]. Institutions have one year from this date to update their RCR policies.</p> <p>When addressing allegations, institutions should consider the responsibilities and breaches described in the version of the RCR Framework that was in place at the time of the alleged breach.</p> <p>The RCR Framework is reviewed at least every five years.</p>	<p>New article. Added to emphasize the Agencies' expectations for institutions to have RCR policies that are aligned with the most recent version of the RCR Framework.</p> <p>Added flexibility to the Agencies' regular five-year review of the document.</p>
2	2	<b>Responsibilities of Researchers</b>	<p><b>Responsibilities of Researchers</b> Researchers are expected to meet the objectives of the RCR Framework (Article 1.2) in the conduct of their research. The Agencies require that all researchers applying for, or in receipt of, Agency funds comply with the following:</p>	Moved a portion of the text from Article 2.1.f to this section given that all researchers should strive to meet all of the objectives of the RCR Framework (Article 1.2) in their work, not just in the management of conflicts of interest.
2.1		<p><b>Tri-Agency Research Integrity Policy</b> The <i>Tri-Agency Research Integrity Policy</i> (the Policy) is a joint policy of the Canadian Institutes of Health Research (CIHR), the Natural Sciences</p>		To ensure a better flow of this section while keeping the same responsibilities expected of

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		and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) (the Agencies). The Policy’s purpose is to support the Agencies in discharging their respective legislative mandates to promote and assist research and in discharging their responsibility to foster a positive research environment.		researchers, labelling this section as a policy was deemed unnecessary.
2.1.1		<b>Scope</b> The Agencies require that all researchers applying for, or in receipt of, Agency funds comply with the Policy.		Moved this sentence to the main heading of Section 2 “Responsibilities of Researchers”.
2.1.2	2.1	<b>Promoting Research Integrity</b> Researchers shall strive to follow the best research practices honestly, accountably, openly and fairly in the search for and in the dissemination of knowledge. In addition, researchers shall follow the requirements of applicable institutional policies and professional or disciplinary standards and shall comply with applicable laws and regulations. At a minimum, researchers are responsible for the following:	<b>Upholding Research Integrity</b> Researchers are required to follow the best research practices honestly, accountably, openly and fairly in the search for and in the dissemination of knowledge. In addition, researchers shall comply with applicable laws and regulations and follow the requirements of applicable institutional policies and standards of the profession or research discipline.  Researchers are required to keep current and adhere to evolving standards as they relate to their respective research disciplines, as well as Agency and institutional policies, in their use and disclosure of AI throughout the research life cycle.  At a minimum, researchers are responsible for the following:	Replaced “promoting” which was viewed as too passive with the more active verb “upholding”.  To address the emergence of AI in the conduct of research.

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2.1.2.a	2.1.a	<i>Rigour:</i> Scholarly and scientific rigour in proposing and performing research; in recording, analyzing, and interpreting data; and in reporting and publishing data and findings.	<i>Rigour:</i> Exercising scholarly and scientific care and adhering to standards of the profession or research discipline in all stages of the research life cycle.	Updated the wording of this article for alignment with the RCR Framework’s definition of responsible conduct of research and the Hong Kong Principles for assessing researchers: Fostering research integrity.  Removed “data” from the definition as interpretation and dissemination may not necessarily only apply to research data.
2.1.2.b	2.1.b	<i>Record keeping:</i> Keeping complete and accurate records of data, methodologies and findings, including graphs and images, in accordance with the applicable funding agreement, institutional policies, laws, regulations, and professional or disciplinary standards in a manner that will allow verification or replication of the work by others.	<i>Record keeping:</i> Keeping complete and accurate records of data, methodologies and findings, including graphs and images, in accordance with the applicable funding agreement, Indigenous data governance agreements, institutional policies, laws, regulations, and standards of the profession or research discipline in a manner that will promote accountability and allow verification or replication of the work.	Added accountability to the definition of record keeping ensuring that researchers take accountability for the data they are collecting and not expect others to be responsible for keeping accurate records.
2.1.2.c	2.1.c	<i>Accurate referencing:</i> Referencing and, where applicable, obtaining permission for the use of all published and unpublished work, including theories, concepts, data, source material, methodologies, findings, graphs and images.	<i>Attribution:</i> Referencing appropriately (including in grant applications) and, where applicable, obtaining permission for the use of all published and unpublished work, including theories, concepts, data, source material, methodologies, findings, graphs and images.	Replaced the responsibility term “accurate referencing” with the more relevant term “Attribution”.  Added “grant applications” to account for the increased number of incomplete or inaccurate referencing issues seen in grant applications submitted to the Agencies.
2.1.2.d	2.1.d	<i>Authorship:</i> Including as authors, with their consent, all those and only those who have made	<i>Authorship:</i> Including all those and only those who have made a substantial contribution to, and	To address circumstances in which reasonable attempts have been made to obtain consent and



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		<p>a substantial contribution to, and who accept responsibility for, the contents of the publication or document. The substantial contribution may be conceptual or material.</p>	<p>who accept responsibility for, the contents of the publication or document. A substantial contribution may be conceptual or material.</p> <p>Responsibility for a published work resides with all authors.</p> <p>Authors should be included only with their consent. The corresponding author must make a reasonable and documented effort to obtain consent before excluding an author on the grounds that consent was not obtained.</p> <p>Those involved in authorship activities are required to know, understand and adhere to the criteria for authorship within their respective profession or research discipline.</p>	<p>an author could not be reached, added language that requires attempts to get consent.</p> <p>Added reference to disciplinary variance for authorship.</p> <p>Included guidance from the Committee on Publication Ethics (COPE) regarding the expectations of authors to know, understand and adhere to the criteria within their respective disciplines.</p>
2.1.2.e	2.1.e	<p><i>Acknowledgement:</i> Acknowledging appropriately all those and only those who have contributed to research, including funders and sponsors.</p>	<p><i>Acknowledgement:</i> Acknowledging appropriately all those and only those who have contributed to the research, including institutions, funders, sponsors and community partners, as appropriate to the research.</p>	<p>Added reference to institutions and community partners.</p>
2.1.2.f	2.1.f	<p><i>Conflict of interest management:</i> Appropriately identifying and addressing any real, potential or perceived conflict of interest, in accordance with the Institution’s policy on conflict of interest in research, in order to ensure that the objectives of the RCR Framework (Article 1.3) are met.</p>	<p><i>Conflict of interest management:</i> Avoiding conflicts of interest altogether, whether personal or institutional. When unavoidable, any real, potential or perceived conflict of interest should be identified, disclosed and managed.</p>	<p>Added action verbs to make the definition of conflict of interest (COI) management less vague.</p> <p>Moved this section of the definition to under the main heading of Section 2 “Responsibilities of researchers” given that all researcher responsibilities should meet the objectives of the</p>

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				RCR Framework (Article 1.2), not just COI management.
2.2	2.2	<b>Applying for and Holding Agency Funding</b> <ul style="list-style-type: none"> <li>a. Applicants and holders of Agency grants and awards shall provide true, complete and accurate information in their funding applications and related documents and represent themselves, their research and their accomplishments in a manner consistent with the norms of the relevant field.</li> <li>b. Applicants may only apply for funding if they are not currently ineligible to apply for, and/or hold, funds from CIHR, NSERC, SSHRC or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.</li> <li>c. Principal funding applicants must ensure that others listed on the application have agreed to be included.</li> </ul>	<b>Applying for and Holding Agency Funding</b> <ul style="list-style-type: none"> <li>a. Applicants and holders of Agency grants and awards shall provide true, complete and accurate information in their funding applications and related documents and represent themselves, their research and their accomplishments in a manner consistent with the norms of the relevant field.</li> <li>b. Applicants may only apply for funding if they are not currently ineligible to apply for, and/or hold, funds from CIHR, NSERC, SSHRC or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.</li> <li>c. Principal applicants must ensure that others listed on funding applications have agreed to be included.</li> </ul>	Made a minor editorial revision.
2.4	2.4	<b>Agency Requirements for Certain Types of Research</b> Researchers must comply with all applicable Agency requirements and legislation for the conduct of research, including, but not limited to:	<b>Agency Requirements for Certain Types of Research</b> Researchers must comply with all current applicable Agency requirements and legislation for the conduct of research, including, but not limited to:	Updated the non-exhaustive list to ensure it includes more recent or updated Agency policies.

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		<ul style="list-style-type: none"> <li>• <u>Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS 2 (2018);</u></li> <li>• <u>Canadian Council on Animal Care Policies and Guidelines;</u></li> <li>• Agency policies related to the <u>Impact Assessment Act;</u></li> <li>• Licenses for research in the field;</li> <li>• <u>Laboratory Biosafety Guidelines;</u></li> <li>• <u>Controlled Goods Program;</u></li> <li>• <u>Canadian Nuclear Safety Commission (CNSC) Regulations;</u></li> <li>• <u>Canada’s Food and Drugs Act.</u></li> </ul>	<ul style="list-style-type: none"> <li>• <u>Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans – TCPS;</u></li> <li>• <u>Canadian Council on Animal Care Policies and Guidelines;</u></li> <li>• Agency policies related to the <u>Impact Assessment Act;</u></li> <li>• Licenses for research in the field;</li> <li>• Canadian Biosafety Standards and Guidelines;</li> <li>• <u>Canadian Nuclear Safety Commission (CNSC) Acts and Regulations;</u></li> <li>• <u>Tri-Agency Policy on Indigenous Citizenship and Membership Affirmation;</u></li> <li>• <u>Policy on Sensitive Technology Research and Affiliations of Concern (STRAC);</u></li> <li>• <u>Tri-Agency Research Data Management Policy;</u></li> <li>• <u>Tri-Agency Open Access Policy on Publications.</u></li> </ul>	
2.5	2.5	<p><b>Rectifying a Breach of Agency Policy</b></p> <p>Researchers in breach of an Agency policy are expected to be proactive in rectifying a breach, for example, by correcting the research record, providing a letter of apology to those impacted by the breach, or repaying funds.</p>	<p><b>Rectifying a Breach of Agency Policy</b></p> <p>Researchers in breach of an Agency policy are expected to take substantive action to rectify a breach, for example, by correcting the research record, providing a letter of apology to those affected by the breach, taking restorative measures requested or recommended by communities that have been affected by the breach, or reimbursing funds.</p>	<p>Added examples to Article 2.5 to demonstrate how a researcher could rectify a breach involving or affecting communities. This includes Indigenous or vulnerable communities.</p>

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3	3	<b>Breaches of Agency Policies by Researchers</b> Agency-funded researchers - including those researchers who hold awards outside of Canada or at organizations in Canada that have not signed the Agreement - must comply with Agency policies. By signing an application for a grant or an award, and by accepting a grant or an award, a researcher agrees to comply with the Agencies' policies.	<b>Breaches of Agency Policies by Researchers</b> Agency-funded researchers must comply with Agency policies. A researcher agrees to comply with the Agencies' policies by submitting an application for funding, and/or by accepting a grant or an award.	Removed the focus on certain researchers and organizations as the RCR Framework is applicable to all Agency-funded researchers. The deletion of this part of the sentence does not change the purpose or scope of the applicability of the requirement.
3.1	3.1	<b>Breaches of Agency Policies</b> A breach of the RCR Framework is the failure to comply with any Agency policy throughout the life cycle of a research project – from application for funding, to the conduct of the research and the dissemination of research results. In determining whether an individual has breached an Agency policy, it is not relevant to consider whether a breach was intentional or a result of honest error. However, intent is a consideration in deciding on the severity of the recourse that may be imposed. The following is a non-exhaustive list of breaches of Agency policies:	<b>Breaches of Agency Policies</b> A breach of the RCR Framework is the failure to comply with any Agency policy throughout the research life cycle. In determining whether an individual has breached an Agency policy, it is not relevant to consider whether a breach was intentional or a result of honest error. However, intent is a consideration in deciding on the severity of the recourse that may be imposed. The following is non-exhaustive list of breaches of Agency policies:	Removed text to avoid repetition given that the definition of “research life cycle” is already described in Article 2.1.a and will be added to the document's glossary.
3.1.1	3.1.1	<b>Breach of <i>Tri-Agency Research Integrity Policy</i></b>	<b>Breaches of Research Integrity</b>	Updated title of the article to align with revised Article 2.1 “Upholding Research Integrity”.
3.1.1.c	3.1.1.c	<i>Destruction of research data or records:</i> The destruction of one's own or another's research data or records or in contravention of the applicable funding agreement, institutional policy and/or laws, regulations and professional or	<i>Destruction or alteration of research data or records:</i> The destruction of one's own or another's research data or records or in contravention of the applicable funding agreement, institutional policy and/or laws,	Added “alteration” to address the possibility that a researcher could alter records, not just destroy them, to avoid the detection of wrongdoing.

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		disciplinary standards. This also includes the destruction of data or records to avoid the detection of wrongdoing.	regulations and professional or disciplinary standards. This also includes the destruction or alteration of data or records to avoid the detection of wrongdoing.	
3.1.1.d	3.1.1.d	<i>Plagiarism</i> : Presenting and using another’s published or unpublished work, including theories, concepts, data, source material, methodologies or findings, including graphs and images, as one’s own, without appropriate referencing and, if required, without permission.	<i>Plagiarism</i> : Presenting and using published or unpublished work, including grant applications, theories, concepts, data, source material, methodologies or findings, including graphs and images, as one’s own, without appropriate referencing and, if required, without permission.	Made minor editorial revisions for consistency with revised Article 2.1.c. “Attribution”.
3.1.1.e	3.1.1.e	<i>Redundant publication or self-plagiarism</i> : The re-publication of one’s own previously published work or part thereof, including data, in any language, without adequate acknowledgment of the source, or justification.	<i>Redundant publication/self-plagiarism/text recycling</i> : The unjustified use of one’s own previously published work or part thereof, including data, in any language, without adequate acknowledgment of the source.	Added “text recycling” to the title as this term is considered similar to self-plagiarism and has emerged in publication guidelines (e.g., Committee on Publication Ethics).
3.1.1.g	3.1.1.g	<i>Inadequate acknowledgement</i> : Failure to appropriately recognize contributors.	<i>Inadequate acknowledgement</i> : Failure to appropriately recognize contributors, including institutions, sponsors, funders and community partners, as appropriate to the research.	Added text for alignment with the definition of “Acknowledgement” in Article 2.1.e.
3.1.1.h	3.1.1.h	<i>Mismanagement of Conflict of Interest</i> : Failure to appropriately identify and address any real, potential or perceived conflict of interest, in accordance with the Institution’s policy on conflict of interest in research, preventing one or more of the objectives of the RCR Framework (Article 1.3) from being met.	<i>Mismanagement of Conflict of Interest</i> : Concealment or failure to appropriately identify, disclose and manage any real, potential or perceived conflict of interest, including mismanagement of conflicts of interest between or among multiple employers or entities to which an individual has incurred responsibilities, duties, or obligations.	Updated text for consistency with revised definition of “Conflict of interest management” in Article 2.1.f.

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3.1.2.b	3.1.2.b	Applying for and/or holding an Agency award when deemed ineligible by CIHR, NSERC, SSHRC, or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.	Applying for and/or holding Agency funds when deemed ineligible by CIHR, NSERC, SSHRC, or any other research funding organization world-wide for reasons of breach of responsible conduct of research policies such as ethics, integrity or financial management policies.	Replaced “awards” with “funds” as it is a more general term that encompasses both awards and grants.
3.1.4	3.1.4	<b>Breach of Agency Policies or Requirements for Certain Types of Research</b> Failing to meet Agency policy requirements or, to comply with relevant policies, laws or regulations, for the conduct of certain types of research activities; failing to obtain appropriate approvals, permits or certifications before conducting these activities.	<b>Breach of Agency Policies or Requirements for Certain Types of Research</b> Failing to comply with all applicable Agency requirements, policies, laws or regulations related to the conduct of certain types of research activities. A non-exhaustive list of Agency requirements, policies and regulations can be found in Article 2.4 of the RCR Framework.	Added a reference to the non-exhaustive list of Agency requirements for certain types of research in Article 2.4.  Also removed examples as they are not exhaustive.
N/A	3.1.6		<b>3.1.6. Making False Allegations</b> a. Making false allegations with malicious or vexatious intent. b. Making false allegations to retaliate against a complainant who has made allegations in good faith.	New Article. Added a new breach to address instances where complainants misuse the RCR process to badger others or for purposes of retaliation.  The addition of this article is consistent with some institutional and other funder RCR policies.
3.2		<b>Roles of Individuals in Addressing Allegations of Policy Breaches</b> Researchers and others play important roles in the process for addressing allegations of policy breaches and in helping to ensure that allegations are addressed appropriately and in a timely manner. The following are guidelines for those making or involved in an allegation:		Moved to Article 4.2.3 for better alignment and flow.

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		<p>a. Individuals are expected to report in good faith and confidentially any information pertaining to possible breaches of Agency policies to the Institution where the researcher involved is currently employed, enrolled as a student or has a formal association.</p> <p>This information should be sent directly to the Institution's designated point of contact, in writing, with an exact copy sent to SRCR.</p> <p>b. Individuals involved in an inquiry or investigation must follow the Institution's policy and process as a complainant, a respondent or a third party, as appropriate.</p>		
4	4	<b>Responsibilities of Institutions</b>	<b>Responsibilities of Institutions</b> For the purposes of the RCR Framework and this Section specifically, institutions must meet the requirements of the <a href="#"><i>Agreement on the Administration of Agency Grants and Awards by Research Institutions</i></a> that fall within the scope of responsible conduct of research.	As full reference to the Agreement (see next line) was removed, a short statement was added at the beginning of Section 4 to introduce the section.
4.1	4.1	<b>Agreement on the Administration of Agency Grants and Awards by Research Institutions</b> The <a href="#"><i>Agreement on the Administration of Agency Grants and Awards by Research Institutions</i></a> sets out the minimum roles, responsibilities and		Removed reference to the Agreement as only a small section of the Agreement falls within the scope of and is addressed with the procedures of the RCR Framework.

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		requirements that Institutions must meet as a condition of eligibility to apply for, and hold, Agency funding.		
4.2	4.1	<p><b>Promoting Responsible Conduct of Research</b> Institutions shall strive to provide an environment that supports the best research and that fosters researchers’ abilities to act honestly, accountably, openly and fairly in the search for, and dissemination of, knowledge. Institutions shall do so by:</p> <ul style="list-style-type: none"> <li>a. Establishing and applying responsible research conduct policy(ies) and procedures that meet the requirements of this RCR Framework (Article 4.3);</li> <li>b. Reporting to the SRCR as per Article 4.4.</li> <li>c. Promoting education on, and awareness of, the importance of the responsible conduct of research (Article 4.5).</li> </ul>	<p><b>Upholding Responsible Conduct of Research</b> Institutions are required to provide an environment that supports the best research and that fosters researchers’ abilities to act honestly, accountably, openly and fairly in the search for, and dissemination of, knowledge. Institutions shall do so by:</p> <ul style="list-style-type: none"> <li>a. Establishing and applying responsible conduct of research policy(ies) and procedures that meet the requirements of this RCR Framework (Article 4.2);</li> <li>b. Reporting to the SRCR as per Article 4.3, ensuring that language in institutional reports related to matters involving Agency-funded research is consistent with the RCR Framework;</li> <li>c. Promoting education on, and awareness of, the importance of the responsible conduct of research (Article 4.4).</li> </ul>	<p>Revised title for consistency with the change made to Article 2.1.</p> <p>Revised “shall strive to” to “are required to” to emphasize that this is an institutional requirement.</p> <p>b. Added the expectation that institutions use language in their reports to the Agencies that is consistent with the language used in the RCR Framework.</p>
4.3	4.2	<p><b>Policy Requirements for Addressing Allegations of Policy Breaches</b> Institutions play important roles in addressing allegations of all types of policy breaches by researchers (as described in Section 3) and in</p>	<p><b>Institutional Policy Requirements for Addressing Allegations of Policy Breaches</b> Institutions play a key role in the responsible conduct of research. They are responsible for</p>	Updated text to allow for flexibility in the implementation of RCR requirements according to different institutional contexts and the evolution of best practices.



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		ensuring that such allegations are handled appropriately and in a timely manner. Institutions shall develop and administer a policy(ies) that applies to all research conducted under their auspices or jurisdiction to address allegations of policy breaches by researchers that includes, at a minimum, the following sections:	ensuring that RCR allegations are addressed appropriately and in a timely manner.  Institutions are required to develop and administer a policy or policies that address how allegations will be received and managed. Such a policy or policies shall include, at a minimum, the following:	
4.3.1	4.2.1	<b>Definitions</b> The definitions of researchers' responsibilities and breaches of policies as set out in Sections 2 and 3 of this RCR Framework.	<b>Definitions</b> Definitions of researchers' responsibilities and corresponding breaches as set out in Sections 2 and 3 of this RCR Framework.	Made minor editorial revisions.
4.3.2	4.2.2	<b>Confidentiality</b> A statement of principle to protect the privacy of the complainant(s) and respondent(s) as far as is possible.	<b>Confidentiality</b> A statement of principle to protect the privacy of the complainant(s) and respondent(s) to the extent possible.	Updated the text for consistency with wording in other sections of the document.
4.3.3	4.2.3	<b>Receiving Allegations</b> a. A central point of contact at a senior administrative level, to receive all confidential enquiries, allegations of breaches of policies, and information related to allegations.  b. A statement that it will consider an anonymous allegation if accompanied by sufficient information to enable the assessment of the allegation and the credibility of the facts and evidence on which the allegation is based, without the	<b>Receiving Allegations</b> a. Designation of a central point of contact, responsible for RCR within the institution (RCR contact). The RCR contact is responsible for a) receiving all confidential enquiries related to responsible conduct of research, b) adequately managing conflicts of interest associated with the handling of allegations, and c) overseeing the institution's process for addressing allegations. The RCR contact promotes RCR within the institution and is the primary liaison with the SRCR.	a. Added reference to the term "RCR contact" which is commonly used by the SRCR for a person at the institution who is responsible for RCR matters. Moreover, given the different size and governance structures of eligible institutions, the RCR contact may not always be at a senior administrative level.  b. Added the text from Article 3.2 here for better alignment and flow.

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		<p>need for further information from the complainant.</p> <p>c. A statement of principle to protect, to the extent possible, the individual making an allegation in good faith or providing information related to an allegation from reprisals in a manner consistent with relevant legislation.</p> <p>d. A statement indicating that the Institution may independently, or at the Agency's request in exceptional circumstances, take immediate action to protect the administration of Agency funds. Immediate actions could include freezing grant accounts, requiring a second authorized signature from an institutional representative on all expenses charged to the researcher's grant accounts, or other measures, as appropriate.</p> <p>e. A statement indicating that, where the allegation related to conduct that occurred at another Institution (whether as an employee, a student or in some other capacity), the Institution that receives the allegation will contact the other Institution and determine with that Institution's designated point of contact which Institution is best placed to conduct the inquiry and investigation, if warranted.</p>	<p>b. A statement that a complainant should submit any information pertaining to possible breaches of Agency policies in good faith and confidentially to the RCR contact at the relevant institution(s), with an exact copy to the SRCR.</p> <p>c. A statement that it will consider an anonymous allegation, or an allegation in the public domain that it is made aware of, if accompanied by sufficient information to enable the assessment of the allegation and the credibility of the facts and evidence on which the allegation is based, without the need for further information from the complainant.</p> <p>d. A statement of principle to protect, to the extent possible, the individual making an allegation in good faith or providing information related to an allegation from reprisals in a manner consistent with relevant legislation.</p> <p>e. A statement indicating that, in exceptional circumstances where there is a compelling prospect of immediate misuse of Agency funds or harm to humans, animals, the environment or national security, the institution may independently, or at the Agency's request,</p>	<p>c. Expanded the scope of this article to include allegations that the institution is made aware of that are in the public domain.</p> <p>e. Added additional context and clarification as to when immediate actions are required.</p> <p>f. Clarified the process for when an allegation is being addressed by more than one institution.</p> <p>g. Added a new article to cover situations when an allegation is submitted to an institution, but the respondent is no longer there or when the respondent leaves during the inquiry or investigation.</p>
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		<p>The Institution that received the allegation must communicate to the complainant which Institution will be the point of contact for the allegation.</p>	<p>take immediate action to protect the administration of Agency funds. Immediate actions could include freezing grant accounts, requiring a second authorized signature from an institutional representative on all expenses charged to the researcher’s grant accounts, or other measures, as appropriate.</p> <p>f. A statement indicating that, when an institution receives an allegation that involves more than one institution, the RCR contact at the institution that receives the allegation will communicate with the RCR contact(s) at the other institution(s) to determine which is best placed to conduct the inquiry and investigation, if warranted. The institution that receives the allegation must inform the complainant which institution will be their main point of contact. If a decision is made that a joint inquiry or investigation is necessary, institutions should work together to establish an agreement that clearly outlines each institution’s responsibilities in the RCR process, including which institution(s) will report to SRCR, or if they will report jointly.</p> <p>g. A statement that institutions will, to the best of their ability, hold respondents</p>	
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			<p>accountable, even when they are no longer affiliated with the institution.</p> <p>A statement that institutions remain accountable to the Agencies and the public even in situations where individuals cease to be affiliated with the institution where the research was conducted. Institutional responsibilities may extend to, for example, requesting that journals correct the research record.</p>	
4.3.4	4.2.4	<p><b>Investigating Allegations</b></p> <p>a. An initial inquiry process to establish whether an allegation is responsible and if an investigation is required. An inquiry may be conducted by one or more individuals. This could include the Institution’s designated RCR contact and/or other individuals qualified to assess whether the allegation is responsible. The individual(s) conducting an inquiry should be without conflict of interest, whether real, potential or perceived.</p> <p>b. An investigation process for determining the validity of an allegation that provides the complainant and respondent with an opportunity to be heard as part of an investigation, and that allows for the</p>	<p><b>Investigating Allegations</b></p> <p>a. An initial inquiry process to (i) assess whether an allegation is responsible and (ii) determine whether an investigation is required to make a finding of whether or not a breach has occurred.</p> <p>(i) An assessment as to whether an allegation is responsible may be conducted by one or more individuals. This could include the institution’s designated RCR contact and/or other individuals qualified to assess whether the allegation is responsible. The individual(s) conducting the inquiry should be without conflict of interest.</p> <p>An institution cannot reject an allegation solely because too much time has passed.</p>	<p>a. Clarified that the inquiry process includes two parts (i) to assess if an allegation is responsible and (ii) to determine whether a finding can be made without an investigation.</p> <p>(i) Added wording to ensure that institutions do not impose statute of limitations on when they can receive allegations.</p> <p>(ii) Clarified who can determine whether a finding can be made at the inquiry stage or if an investigation is warranted.</p> <p>Added requirements to ensure appropriate representation where findings are made that might affect the welfare of a student or a distinct community.</p>

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		<p>respondent to appeal if a breach of policy is confirmed.</p> <p>c. An investigation committee, appointed with the authority to decide whether a breach occurred. The investigation committee shall include members who have the necessary expertise and who are without conflict of interest, whether real or apparent, and at least one external member who has no current affiliation with the Institution.</p> <p>d. Reasonable timelines for completing an inquiry, completing an investigation, reporting the findings, making a decision on what action should be taken, and communicating with the parties involved. The timelines must be within the reporting timeframes outlined in Article 4.4.</p>	<p>(ii) A determination as to whether a finding can be made at the inquiry stage or whether an investigation is warranted should be made by one or more individuals with a clear understanding of the RCR Framework in consultation, if needed, with experts who understand the nature of the allegation and research at issue. The individual(s) should be without conflict of interest.</p> <p>If the allegation pertains to research involving distinct groups, for example First Nations, Inuit or Métis communities as defined in Chapter 9 of TCPS, or if the allegation involves trainees or research personnel, then an expert or representative with knowledge of the community should be included in the determination process.</p> <p>The inquiry process should include an opportunity for:</p> <ul style="list-style-type: none"> <li>the complainant and respondent to be heard, either through interviews or written representations; and</li> <li>the respondent to appeal, at the institutional level, if a finding of breach is made at this stage.</li> </ul> <p>Individuals involved in an inquiry must follow the institution's policy and process</p>	<p>Clarified that appeals of a finding or of a decision made by an institution are made at the institutional level, not at the agency level.</p> <p>Moved remainder of Article 3.2 here for better alignment and flow.</p> <p>Added guidance on what must be considered when deciding that an investigation is not warranted.</p> <p>b. Refined wording for clarity.</p> <p>Added further clarity for how a respondent can “be heard” to included “written comments”.</p> <p>Clarified who can be appointed to an investigation committee.</p> <p>Added requirements to ensure appropriate representation where findings are made that might affect the welfare of a student or a distinct community.</p> <p>Clarified that institutions must justify the use of any alternate investigative process that is different than the one outlined in this article.</p>
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			<p>as a complainant, a respondent or a third party, as appropriate.</p> <p>If an inquiry has determined that a breach has occurred and the institution decides that an investigation is not warranted, it must justify why it is not proceeding to an investigation, by, for instance, identifying that:</p> <ul style="list-style-type: none"><li>• the respondent acknowledges the breach;</li><li>• the likelihood of additional breaches having occurred is minimal;</li><li>• the perspectives of all institutions or individuals who had a direct role in the breach were included in making the determination; and</li><li>• an investigation would be unlikely to uncover additional facts and evidence relevant to the allegation.</li></ul> <p>If an inquiry has determined that no breach has occurred and the institution decides that an investigation is not warranted, it must justify why it is not proceeding to an investigation, by, for instance, identifying that:</p> <ul style="list-style-type: none"><li>• the inquirer or inquirers had sufficient expertise to make the determination;</li><li>• the determination of no breach was unambiguous;</li></ul>	
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			<ul style="list-style-type: none"><li>the perspectives of all institutions or individuals who had a direct role in the alleged breach were included in making the determination;</li><li>the scope of the inquiry was adequate to determine there was no breach and did not require an external perspective; and</li><li>an investigation would be unlikely to uncover additional facts and evidence relevant to the allegation.</li></ul> <p>b. An investigative process to determine whether or not a breach has occurred, when such a determination cannot be made at the inquiry stage. The investigative process must provide an opportunity for:</p> <ul style="list-style-type: none"><li>the complainant and respondent to be heard, or to provide written comments; and</li><li>the respondent to appeal, at the institutional level, if a breach is confirmed.</li></ul> <p>The investigation shall be carried out by a committee, appointed with the authority to make a finding of whether or not there is a breach. If a breach is confirmed, the investigation committee must consider its</p>	
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			<p>seriousness, its impact and where possible, intent.</p> <p>The investigation committee shall include members who have the necessary expertise and who are without conflict of interest and at least one external member who has no current affiliation with the institution.</p> <p>If the allegation pertains to research involving distinct groups, for example First Nations, Inuit or Métis communities as defined in Chapter 9 of TCPS, or if the allegation involves trainees or research personnel, then an expert or representative with knowledge of the community should be included in the determination process.</p> <p>Individuals involved in an investigation must follow the institution’s policy and process as a complainant, a respondent or a third party, as appropriate.</p> <p>In exceptional circumstances where the institution does not follow the investigative process as outlined in the preceding article, the institution must justify the use of an alternate process and demonstrate its functional equivalence in their report to SRCR.</p>	
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			<p>c. Reasonable timelines for completing an inquiry, completing an investigation, reporting the findings, making a decision on what action should be taken, and communicating with the parties involved. The timelines must be within the reporting timeframes outlined in Article 4.3.</p>	
4.3.5	4.2.5	<p><b>Recourse</b></p> <p>a. A provision that the investigation committee’s report, including its final decision, is provided to the Institution’s central point of contact within a timeframe specified in the Institution’s policy.</p> <p>b. A process for determining what kinds of recourse can be taken by the Institution, taking into account the severity of the breach.</p>	<p><b>Recourse</b></p> <p>a. A provision that the investigation committee’s report, including its final decision on whether or not there is a breach, is provided to the institution’s RCR contact within a timeframe specified in the institution’s policy.</p> <p>b. A process for determining the types of recourse that an institution can impose, taking into account the nature, intent, impact, any pattern of repetition, and severity of the breach.</p>	<p>a. Emphasized that investigation committee reports must clearly state whether or not a breach occurred.</p> <p>b. Added considerations for determining appropriate recourse. Specifically, for consistency with Section 6, added the nature and intentionality of the breach. For consistency with other funders’ policies, added any patterns of repetitiveness.</p>
4.3.6	4.2.6	<p><b>Accountability</b></p> <p>a. A procedure to provide affected parties with relevant information about the process and outcome of the inquiry and investigation. Institutions are encouraged to disclose information on the measures that they may be taking to improve their processes including training, as a result of the allegation. Information should be provided in a manner consistent with the</p>	<p><b>Accountability</b></p> <p>a. A procedure to provide affected parties with relevant information about the institutional process and outcome of the inquiry and investigation. Institutions are encouraged to disclose information on any institutional measures that they may take resulting from the matter, such as updating their policies or processes or their RCR training. Information disclosed</p>	<p>Made minor changes for clarity and to remove redundancies.</p>

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		<p>privacy legislation applicable to the Institution(s) that are conducting the inquiry or investigation. Recourse against a respondent should only be shared with the respondent, or those who are authorized to receive this personal information.</p> <p>b. A provision for allegations determined to be unfounded that all reasonable efforts will be made by the Institution to protect or restore the reputation of those subjected to an unfounded allegation.</p>	<p>should be provided in a manner consistent with the privacy legislation applicable to the institution(s) that conducted the inquiry or investigation. Recourse against a respondent should only be shared with the respondent, or those who are authorized to receive this personal information.</p> <p>b. A provision for ensuring that all reasonable efforts will be made by the institution to protect or restore the reputation of those subjected to an unfounded allegation.</p>	
4.4	4.3	<p><b>Requirements</b></p> <p>a. Subject to any applicable laws, including privacy laws, the Institution shall advise the relevant Agency or SRCR immediately of any allegations related to activities funded by the Agency that may involve significant financial, health and safety, or other risks.</p> <p>b. The Institution shall write a letter to the SRCR confirming whether or not the Institution is proceeding with an investigation where the SRCR was copied on the allegation or advised as per Article 4.4.a. If a breach is confirmed at the inquiry stage, reporting requirements outlined in Article 4.4.c apply.</p>	<p><b>Reporting Requirements</b></p> <p>a. Subject to any applicable legislation the institution must advise the relevant Agency or SRCR immediately of any allegations related to activities funded by the Agency if urgent or preventive intervention is required, for example, to protect research participants, ensure the safety of laboratory animals, prevent further fraudulent activities, limit effects to the environment, or protect national security.</p> <p>b. The institution is required to provide a written report to the SRCR, as per the reporting requirements outlined in Article 4.3.c, on each inquiry or investigation it conducts related to a funding application submitted to an Agency or to an activity</p>	<p>a. Provided examples of instances when the SRCR should be informed immediately of an RCR allegation.</p> <p>b. Added a new reporting requirement whereby <b>all</b> inquiry and investigation reports related to Agency-funded activities must be submitted to the SRCR. This will ensure to minimize the risk of the SRCR not being aware of instances when institutions conclude honest error as opposed to a breach. Honest error is a breach of the RCR Framework.</p> <p>c. Added a checklist of information that needs to be included in institutional reports. This addition is aimed at increasing efficiencies in reporting and assisting PRCR and the Agencies in their recommendations and decisions.</p>

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		<p>c. The Institution shall prepare a report for the SRCR on each investigation it conducts in response to an allegation of policy breaches related to a funding application submitted to an Agency or to an activity funded by an Agency. Subject to any applicable laws, including privacy laws, each report shall include the following information:</p> <ul style="list-style-type: none"> <li>○ the specific allegation(s), a summary of the finding(s) and reasons for the finding(s);</li> <li>○ the process and timelines followed for the inquiry and/or investigation;</li> <li>○ the researcher's response to the allegation, investigation and findings, and any measures the researcher has taken to rectify the breach; and</li> <li>○ the institutional investigation committee's decisions and recommendations and actions taken by the Institution.</li> </ul> <p>The Institution's report should not include:</p> <ul style="list-style-type: none"> <li>○ information that is not related specifically to Agency funding and policies; or</li> <li>○ personal information about the researcher, or any other person, that is not material to the</li> </ul>	<p>funded by an Agency. This reporting is required regardless of whether or not a breach has occurred and whether or not the SRCR is aware of the allegation.</p> <p>The institution must inform SRCR, with adequate explanation, when an allegation is found not responsible if the allegation is related to a funding application submitted to an Agency or to an activity funded by an Agency and SRCR is aware of the allegation.</p> <p>c. Subject to any applicable legislation, each report, whether inquiry or investigation, must include the following elements, which are also available in the <u>Institutional Reporting Guidelines</u> on the PRCR website:</p> <ul style="list-style-type: none"> <li>○ the specific allegation(s) and the article of the institution's RCR policy and RCR Framework it corresponds to;</li> <li>○ a clear statement of whether or not a breach has occurred;</li> <li>○ a summary of the finding(s) and reasons for the finding(s);</li> <li>○ where a breach is confirmed, an assessment of the nature, impact, severity and if possible, intent;</li> </ul>	<p>4.3(d) Minor changes for clarity and to remove redundancies. Clarity that extensions must be requested before the existing deadline.</p>
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		<p>Institution's findings and its report to the SRCR.</p> <p>d. The Institution should submit inquiry letters or inquiry reports to the SRCR within two months of receipt of an allegation. If an investigation is warranted, the Institution has an additional five months following the end of the inquiry to conduct an investigation and submit its report to the SRCR. The Institution therefore has a total of seven months from the date of receipt of an allegation that results in an investigation to report to the SRCR.</p> <p>These timelines may be extended in consultation with the SRCR if circumstances warrant, and with periodic updates provided to the SRCR until the investigation is complete. The frequency of the periodic updates will be determined jointly by the SRCR and the Institution.</p> <p>e. The Institution and the researcher may not enter into confidentiality agreements or other agreements related to an inquiry or investigation that prevent the Institution from reporting to the Agencies through the SRCR.</p>	<ul style="list-style-type: none"><li>○ the source(s) of funding (including titles of relevant grants or applications);</li><li>○ names, positions, affiliations and expertise of the inquirer(s) and/or investigation committee members;</li><li>○ the process and timelines followed for the inquiry and/or investigation;</li><li>○ the respondent’s response to the allegation, findings, and any measures the researcher has taken to rectify the breach;</li><li>○ any recommendations, for the institution, for the respondent, or for any other parties that arise from the process; and</li><li>○ if the breach involves unlawful activity, a statement as to whether the institution has reported it to law enforcement.</li></ul> <p>The Institution’s report should not include:</p> <ul style="list-style-type: none"><li>○ information that is not related specifically to Agency funding and policies; or</li><li>○ personal information about the researcher, or any other person, that is not material to the</li></ul>	
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		<p>f. In cases where the source of funding is unclear, the SRCR reserves the right to request information and reports from the Institution.</p>	<p>Institution's findings and its report to the SRCR.</p> <p>d. The institution is required to report the outcome of an inquiry to the SRCR within two months of receipt of an allegation. If an investigation is warranted, the Institution has an additional five months following the end of the inquiry to conduct an investigation and submit its findings to the SRCR. The institution therefore has a total of seven months from the date of receipt of an allegation that results in an investigation to report to the SRCR.</p> <p>These timelines may be extended in consultation with the SRCR if circumstances warrant, and with periodic updates provided to the SRCR until the investigation is complete. The frequency of the periodic updates will be determined jointly by the SRCR and the institution. Extension requests must be submitted before the existing deadline expires.</p> <p>e. The institution and the respondent must not enter into confidentiality agreements or other agreements related to an inquiry or investigation that prevent the institution from reporting to the Agencies through the SRCR.</p>	
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			f. In cases where the source of funding is unclear, the SRCR reserves the right to request information and reports from the institution.	
4.5	4.4	<b>Promoting Awareness and Education</b> An institution is responsible for: <ul style="list-style-type: none"> <li>a. Promoting awareness of what constitutes the responsible conduct of research, including Agency requirements as set out in the Institution’s policies, the consequences of failing to meet them, as well as the process for addressing allegations, to all those engaged in research activities at the Institution.</li> <li>b. Communicating its policy on the responsible conduct of research within the Institution, and posting annually on its Web site information on confirmed findings of breaches of its policy (e.g., the number and general nature of the breaches), subject to applicable laws, including the privacy laws. Reporting annually to the SRCR on the total number of allegations received involving Agency funds, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including privacy laws.</li> </ul>	<b>Promoting Awareness and Education</b> An institution is responsible for: <ul style="list-style-type: none"> <li>a. Fostering an environment that encourages responsible conduct of research and promotes it through awareness-raising measures and ongoing training for all those engaged in research activities at the institution. Promoting an understanding of Agency requirements as set out in the institution’s policies, the consequences of failing to meet them, and the process for addressing allegations of policy breaches.</li> <li>b. Communicating the name and contact information of the institution’s RCR contact throughout the institution so that anyone with questions about responsible conduct of research or who wants to make an allegation knows who to contact.</li> <li>c. Ensuring the process for submitting an allegation of a breach of policy is made clear and visible on its website.</li> <li>d. Making its responsible conduct of research policy publicly available on its</li> </ul>	Revised for clarity and precision as to the Agencies’ expectations of institutions regarding the promotion and education of RCR within and external to institutions.

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		c. Communicating within the Institution, the central point of contact responsible for receiving confidential enquiries, allegations and information related to allegations of breaches of Agency policies.	<p>web site and communicating it within the institution.</p> <p>Posting annually on its web site information on confirmed breaches (e.g., the number and general nature of the breaches), subject to applicable legislation.</p> <p>Reporting annually to the SRCR on the total number of allegations received involving Agency funds, the number of confirmed breaches and the nature of those breaches, subject to applicable legislation.</p>	
5	5	<p><b>Breaches of Agency Policies by Institutions</b></p> <p>In accordance with the Agreement signed by the Agencies and each Institution, the Agencies require that each Institution complies with Agency policies as a condition of eligibility to apply for and administer Agency funds.</p> <p>The process followed by the Agencies to address an allegation of a breach of an Agency policy by an Institution, and the recourse that the Agencies may exercise, commensurate with the severity of a confirmed breach, are outlined in the Agreement.</p>	<p><b>Breaches of the RCR Framework by Institutions</b></p> <p>Institutions that are signatories to the <a href="#">Agreement on the Administration of Grants and Awards by Research Institutions</a> (Agreement) are required to comply with the RCR Framework. The process for addressing allegations of institutional non-compliance with Article 4.2, 4.3 or 4.4 of the RCR Framework is set out in Article 6.2 of RCR Framework.</p>	Clarifies the link between the RCR Framework and the Agreement and directs the reader to new guidance on the management of allegations of breach of the RCR Framework by institutions.
6	6	<b>Responsibilities of the Agencies</b>	<b>Responsibilities of the Agencies</b>	Made minor editorial changes.

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		<p>In striving to meet the objectives of this RCR Framework, the Agencies are responsible for:</p> <ul style="list-style-type: none"> <li>a. communicating this RCR Framework, including the contact information for those responsible for its administration;</li> <li>b. responding promptly to enquiries regarding this RCR Framework;</li> <li>c. helping to promote the responsible conduct of research and to assist individuals and Institutions with the interpretation or implementation of this RCR Framework;</li> <li>d. reviewing and updating this RCR Framework at least every five years; and</li> <li>e. responding to allegations of breaches of Agency policies.</li> </ul>	<p>To meet the objectives of this RCR Framework, the Agencies are responsible for:</p> <ul style="list-style-type: none"> <li>a. communicating this RCR Framework, including the contact information for those responsible for its administration;</li> <li>b. responding promptly to enquiries regarding this RCR Framework;</li> <li>c. helping to promote the responsible conduct of research and assisting individuals and institutions with the interpretation or implementation of this RCR Framework;</li> <li>d. reviewing and updating this RCR Framework at least every five years; and</li> <li>e. responding to allegations of breaches of Agency policies.</li> </ul>	
6.1	6.1	<p><b>Tri-Agency Process for Addressing Allegations of Policy Breaches by Researchers</b></p> <p>The Agencies, through the SRCR and the PRCR, play important roles in addressing allegations of breaches of their policies and in ensuring that such allegations are addressed appropriately and in a timely manner. At any time after an allegation is made, the SRCR may request information from the individual and Institution involved.</p>	<p><b>Tri-Agency Process for Addressing Allegations of Policy Breaches by Researchers</b></p> <p>The Agencies, through the SRCR and the PRCR, play important roles in addressing allegations of breaches of their policies and in ensuring that such allegations are addressed appropriately and in a timely manner.</p>	Moved the second sentence of Article 6.1 to the end of Article 6.1.1.b as it relates specifically to allegations received.
6.1.1	6.1.1	<b>Receiving Allegations</b>	<b>Receiving Allegations</b>	Made minor editorial changes.



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		<ul style="list-style-type: none"> <li>a. If the SRCR receives an allegation directly from a complainant, it will ask the complainant to provide the information in writing to the Institution where the researcher involved is currently employed, enrolled as a student or has a formal association, with a copy to the SRCR.</li> <li>b. Following receipt of an allegation, if the matter involves Agency funding and an alleged breach of an Agency policy, the SRCR will follow-up as needed with the complainant, the Institution and other parties, subject to applicable laws, including the <i>Privacy Act</i>.</li> <li>c. An Agency may submit their own allegations directly to an Institution, for example, as a result of information obtained through institutional monitoring reviews or its peer review activities.</li> </ul>	<ul style="list-style-type: none"> <li>a. When the SRCR receives an allegation directly from a complainant, it will ask the complainant to provide the information in writing to the researcher's current affiliated institution or to the institution where the alleged breach occurred, with a copy to the SRCR.</li> <li>b. Where the SRCR has been copied on an alleged breach of Agency policy involving an Agency-funded activity, the SRCR will follow up as needed with the respondent or institution involved subject to applicable legislation. At any time after an allegation is made, the SRCR may request information from the individual and Institution involved.</li> <li>c. An Agency may submit an allegation(s) directly to an institution, for example, as a result of information obtained through monitoring or verification processes or its peer review activities.</li> </ul>	
6.1.2	6.1.2	<b>Review of Institutional Reports</b> <ul style="list-style-type: none"> <li>a. The SRCR may follow-up with the Institution as needed to obtain updates on the status of the investigation.</li> <li>b. The SRCR and the PRCR will review the Institution's report to determine whether it meets Agency requirements, as outlined in</li> </ul>	<b>Reviewing Institutional Reports</b> <ul style="list-style-type: none"> <li>a. The SRCR may follow up with the institution as needed to obtain updates on the status of its inquiry or investigation.</li> <li>b. The SRCR and the PRCR will review the institution's report to determine whether it meets Agency requirements, as outlined in</li> </ul>	Added clarity as to who PRCR makes recommendations to.

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		<p>Articles 4.3 and 4.4, and whether there has been a breach of Agency policies, the Agreement and/or a funding agreement. The SRCR may follow-up with the Institution for clarification.</p> <p>c. The PRCR will recommend recourse, if appropriate, consistent with the RCR Framework.</p>	<p>Articles 4.2, 4.3 and 4.4, and whether or not there has been a breach of Agency policies and/or a funding agreement. The SRCR may follow up with the institution for clarification or additional information.</p> <p>c. The PRCR will recommend recourse consistent with the RCR Framework to the President of the relevant Agency or their designate, if appropriate.</p>	
6.1.3	6.1.3	<p><b>Recourse</b></p> <p>a. If the Agency determines that there has been a breach of an Agency policy, it will exercise the recourse it considers appropriate, commensurate with the severity of the breach. When making its decision, the Agency will take into consideration the PRCR’s recommendations, the Institution’s findings, the severity of the breach and any actions taken by the Institution and researcher involved to remedy the breach.</p> <p>b. Such recourse can include, but is not limited to:</p> <ul style="list-style-type: none"> <li>○ issuing a letter of concern to the researcher;</li> <li>○ requesting that the researcher correct the research record and provide proof that the research record has been corrected;</li> </ul>	<p><b>Determining Recourse</b></p> <p>a. If the President of the relevant Agency or their designate determines that there has been a breach of an Agency policy, they will impose the recourse they consider appropriate, taking into consideration PRCR’s recommendations, the Institution’s findings, the nature, impact and severity of the breach and any actions taken by the institution and/or respondent involved to remedy the breach.</p> <p>b. Before any recourse related to periods of ineligibility or reimbursement is implemented by the Agency, a respondent will be given 30 days to respond in writing to the recourse. This opportunity for response is not in relation to the breach determined by the institution but solely regarding the</p>	<p>Added nature and impact as factors to consider in addition to severity.</p> <p>Changed researcher to respondent, a term with a wider scope.</p> <p>Added a new step to the Agencies’ process for addressing allegations, i.e., providing respondents with an opportunity to comment upon the recourse that the Agency proposes to implement.</p> <p>Clarified that Agency decisions are final.</p> <p>Updated the language of the recourse options to reflect current practice and added the requirement to pursue training in RCR as a possible recourse to be imposed by an Agency.</p>

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		<ul style="list-style-type: none"><li>o advising the researcher that the Agency will not accept applications for future funding from them for a defined time period or indefinitely;</li><li>o terminating remaining instalments of the grant or award;</li><li>o seeking a refund within a defined time frame of all or part of the funds already paid;</li><li>o advising the researcher that the Agency will not consider them to serve on agency committees (e.g. peer review, advisory boards); and/or</li><li>o such other recourse available by law.</li></ul> <p>In exercising the appropriate recourse, the Agency will give consideration to affected research personnel including students, post-doctoral fellows and research support staff.</p>	<p>recourse that the Agency intends to impose.</p> <ul style="list-style-type: none"><li>c. The President of the relevant Agency or their designate will consider the comments received before making a final decision on recourse. Once the 30 days have passed, the recourse will be implemented.</li><li>d. The decision of the President of the relevant Agency or their delegate is final.</li><li>e. Agency recourse can include, but is not limited to:<ul style="list-style-type: none"><li>o issuing a letter of awareness or reprimand;</li><li>o requiring that action be taken to correct the research record;</li><li>o declaring a respondent ineligible to hold or apply for Agency funding or to participate in any capacity in Agency applications for a defined period or permanently;</li><li>o terminating remaining instalments of the grant or award;</li><li>o seeking a reimbursement of all or part of Agency funds already paid;</li><li>o declaring a respondent ineligible to participate in Agency review processes (e.g. peer review) for a defined period or permanently; and/or</li></ul></li></ul>	
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			<ul style="list-style-type: none"> <li>○ requiring training on RCR.</li> </ul> <p>In determining the appropriate recourse, the Agency will give consideration to affected trainees, research personnel and communities.</p>	
6.1.4	6.1.4	<p><b>Accountability and Reporting</b></p> <ul style="list-style-type: none"> <li>a. The Agency will inform the researcher subject to the decision, and their Institution, of the Agency’s decision, where applicable. The content of this communication will be subject to any applicable laws, including privacy laws.</li> <li>b. The Agency will notify the appropriate authorities if at any time it becomes aware of possible fraud or other unlawful activity.</li> <li>c. In cases of a serious breach of Agency policy, as determined by the Agency President, the Agency may publicly disclose any information relevant to the breach that is in the public interest, including the name of the researcher subject to the decision, the nature of the breach, the Institution where the researcher was employed at the time of the breach, the Institution where the researcher is currently employed and the recourse imposed. In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public and/or</li> </ul>	<p><b>Communicating</b></p> <ul style="list-style-type: none"> <li>a. The President of the relevant Agency( or their delegate will inform the respondent and their institution of the final decision, where applicable. The content of this communication will be subject to any applicable legislation.</li> <li>b. The Agency( will, where necessary, notify the appropriate authorities if at any time it becomes aware of possible fraud or other unlawful activity.</li> <li>c. In cases of a serious breach of Agency policy, as determined by the President of the relevant Agency or their delegate, they may publicly disclose any information relevant to the breach that is in the public interest, including the name of the respondent subject to the decision, the nature of the breach, the institution where the respondent was employed at the time of the breach, the institution where the respondent is currently employed and the recourse imposed. In determining</li> </ul>	Changed researcher to respondent.

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		<p>would bring the conduct of research into disrepute.</p> <p>d. The SRCR will serve as a central repository for institutional statistics on RCR involving Agency funds. The Secretariat will post annually, on its Web site, statistical data received from Institutions on the total number of allegations, the number of confirmed breaches and the nature of those breaches, subject to applicable laws, including the <i>Privacy Act</i>.</p>	<p>whether a breach is serious, the President of the relevant Agency or their delegate will consider the extent to which the breach jeopardizes the safety of the public and/or would bring the conduct of research into disrepute.</p> <p>d. The SRCR will serve as a central repository for statistics on RCR involving Agency funds. The Secretariat will post annually, on its web site, statistical data received from institutions on the total number of allegations, the number of confirmed breaches and the nature of those breaches, subject to applicable legislation.</p>	
6.1.5	6.1.5	<p><b>Measures for Exceptional Circumstances</b> In exceptional circumstances, taking into account the severity and urgency of the alleged breach, its possible consequences and the potential financial, health, safety or other risks involved, the Agencies reserve the right to take special measures, including the following:</p> <p><i>6.1.5.1 - Immediate Action:</i> The Agency may take immediate action (as set out in Article 4.3.3.d), or may require the Institution to do so. The Agency will consult with the Institution and will consider any actions already taken by the Institution and/or</p>	<p><b>Taking Measures for Exceptional Circumstances</b> In exceptional circumstances, taking into account the severity and urgency of the alleged breach, its possible consequences and the potential financial, health, safety, research security or other risks involved, the Agencies reserve the right to take special measures, including the following:</p> <p><i>6.1.5.1 - Immediate Action:</i> The Agency may take immediate action or require the Institution to take immediate action as set out in Article 4.2.3.d. The Agency will consult with the</p>	<p>Added research security as a potential risk warranting exceptional measures.</p> <p>Changed researcher to respondent.</p>

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		<p>the researcher when deciding on whether further action is required.</p> <p><i>6.1.5.2 - Review or Compliance Audit:</i> The Agency may conduct its own review or compliance audit, or require the Institution to conduct an independent review/audit. The Agency will consult with the Institution and will consider the investigation already planned, underway or completed by the Institution, and its findings.</p>	<p>institution and will consider any actions already taken by the institution and/or the respondent when deciding on whether further action is required.</p> <p><i>6.1.5.2 - Review or Compliance Audit:</i> The Agency may conduct its own review or compliance audit, or require the institution to conduct an independent review/audit. The Agency will consult with the institution and will consider the investigation already planned, underway or completed by the institution, and its findings.</p>	
N/A	6.2		<p><b>Tri-Agency Process for Addressing Allegations of Breaches of the RCR Framework (Article 4.2, 4.3 or 4.4) by Institutions</b></p>	Added a process for the Agencies to follow when an allegation against an institution is received.
N/A	6.2.1		<p><b>Submitting Allegation(s)</b></p> <p>Complainants shall submit allegations of breach of the RCR Framework (Article 4.2, 4.3 or 4.4) to SRCR. Where possible, complainants should reference the specific article(s) (4.2, 4.3 or 4.4) that has allegedly been breached.</p>	See rationale in Article 6.2.
N/A	6.2.2		<p><b>Requesting an Institutional Response</b></p> <p>a. If the activity on which the allegation is based: i) involves Agency funding or an application submitted to an Agency and ii) if confirmed, would constitute an alleged breach of the RCR Framework (Article 4.2, 4.3 or 4.4), then SRCR will provide the allegation to the institution and request a response</p>	See rationale in Article 6.2.

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			<p>within two months. The institution may request additional time to complete its response, with adequate justification.</p> <p>b. If the activity on which the allegation is based: i) does not involve Agency funding or does not involve an application submitted to an Agency or ii) if confirmed, would not constitute an alleged breach of the RCR Framework (Article 4.2, 4.3 or 4.4), then the SRCR will inform the complainant and close its file.</p>	
N/A	6.2.3		<p><b>Reviewing Allegation(s) and Institutional Response</b></p> <p>a. The SRCR may follow up with the institution as needed to obtain updates on the status of the preparation of its response.</p> <p>b. Once the response is received, the SRCR and the PRCR will review the complainant’s allegation(s) and the institution’s response to determine whether not a breach occurred, or whether further assessment is needed before a finding can be made.</p> <p>c. If no further assessment is needed, the PRCR will make a recommendation to the President of the Agency or their delegate with which the institution is deemed eligible to administer Agency funds as to whether the institution</p>	See rationale in Article 6.2.

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			<p>may have breached the RCR Framework (Article 4.2, 4.3 or 4.4).</p> <p>d. If further assessment is needed, the SRCR will seek an independent assessor, with relevant knowledge of Article 4.2, 4.3 and 4.4 of the RCR Framework. The assessor will: a) review the allegation(s) and the institution’s response, b) seek additional information from the relevant parties at the assessor’s discretion and c) determine whether the institution may have breached the requirements of the RCR Framework (Article 4.2, 4.3 or 4.4); and d) make any recommendations, if applicable.</p> <p>e. In the event of a finding of breach, the PRCR will recommend to the President of the relevant Agency or their delegate corrective measures for the institution to implement, if appropriate.</p>	
N/A	6.2.4		<p><b>Requesting Corrective Action(s)</b></p> <p>If the President of the relevant Agency or their delegate determines that there has been a breach of the RCR Framework (Article 4.2, 4.3 or 4.4), they may request corrective actions that they consider appropriate (for example, updates to policies and procedures), commensurate with the severity of the breach.</p>	See rationale in Article 6.2.



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			<p>When making their decision, the Agency will consider the PRCR's recommendations, the nature, impact and severity of the breach and any actions proactively taken by the institution to remedy the breach.</p> <p>In requesting corrective actions, the President of the relevant Agency or their delegate will give consideration to affected trainees, research personnel and communities.</p>	
N/A	6.2.5		<p><b>Communicating</b></p> <ul style="list-style-type: none"> <li>a. The Agency will inform the institution of their decision.</li> <li>b. Communications with complainants will be carried out in accordance with the requirements of relevant legislation.</li> <li>c. At their discretion, the Agency will, where necessary, notify appropriate authorities if at any time they become aware of possible fraud or other unlawful activity.</li> </ul>	See rationale in Article 6.2.
NA	6.2.6		<p><b>Taking Measures for Exceptional Circumstances</b></p> <p>In exceptional circumstances, taking into account the severity and urgency of the alleged breach, its possible consequences and the potential financial, health, safety, research security or other risks involved, the Agency reserves the right</p>	See rationale in Article 6.2.

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			to take special measures, including taking immediate action as per Article 6.1.5.	
7.B	7.B	<b>Glossary</b> This glossary is intended to assist readers in their understanding of the <i>Tri-Agency Framework: Responsible Conduct of Research</i> , also referred to as “the RCR Framework.” Terms are defined in accordance with the purposes and objectives of the RCR Framework.	<b>Glossary</b> This glossary is intended to assist readers in their understanding of the RCR Framework. Terms are defined in accordance with the purposes and objectives of the RCR Framework.	Removed redundancy as the complete title of the RCR Framework is included in Section 1.
		<b>Agencies</b> Canada’s three federal granting agencies: the Canadian Institutes of Health Research (CIHR); the Natural Sciences and Engineering Research Council of Canada (NSERC); and the Social Sciences and Humanities Research Council of Canada (SSHRC).	<b>Agencies</b> Canada’s three federal research funding agencies: the Canadian Institutes of Health Research (CIHR); the Natural Sciences and Engineering Research Council of Canada (NSERC); and the Social Sciences and Humanities Research Council of Canada (SSHRC).	Made a minor editorial revision.
		<b>Allegation</b> A declaration, statement, or assertion communicated in writing to an Institution or Agency to the effect that there has been, or continues to be, a breach of one or more Agency policies, the validity of which has not been established.	<b>Allegation</b> A declaration, statement, or assertion communicated at any time in writing to an institution, an Agency or the SRCR to the effect that there has been, or continues to be, a breach of one or more Agency policies, the validity of which has not been established.	This addition of “at any time” reiterates that there is no statute of limitation to submit an allegation.  Clarified that SRCR can sometimes be notified directly of a potential breach by a complainant.
		<b>Author (including co-author)</b>	<b>Author (including co-author)</b>	Clarified for precision.

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		The writer, or contributing writer, of a research publication or document.	The writer of or the contributor to a research product.	
		<b>Breach</b> A breach of the RCR Framework is the failure to comply with any Agency policy throughout the life cycle of a research project – from application for funding, to the conduct of the research and the dissemination of research results. It includes all activities related to the research, including the management of Agency funds. For examples of breaches, see Article 3.1.	<b>Breach</b> The failure to comply with any Agency policy throughout the research life cycle. It includes all activities related to the research, including the management of Agency funds. For examples of breaches, see Article 3.1.	Made minor editorial revisions to ensure consistency with the approved revisions to Article 3.1.
		<b>Complainant</b> An individual or representative from an organization who has notified an Institution or Agency of a potential breach of an Agency policy.	<b>Complainant</b> An individual or representative from an organization who has notified an institution, an Agency, or the SRCR of a potential breach of an Agency policy.	Clarified that SRCR can sometimes be notified of a potential breach by a complainant.
		<b>Inquiry</b> The process of reviewing an allegation to determine whether the allegation is responsible, the particular policy or policies that may have been breached, and whether an investigation is warranted based on the information provided in the allegation.	<b>Inquiry</b> The process of (i) assessing whether an allegation is responsible and (ii) determining whether an investigation is required in order to make a finding of whether or not a breach of the RCR Framework occurred.	Revised for better alignment with the proposed changes to Article 4.2.4.a.
		<b>Institution</b> The universities, hospitals, colleges, research institutes, centres and other organizations eligible	<b>Institution</b> A university, hospital, college, research institute, centre or other organization eligible to receive and	Made minor editorial revisions.

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		to receive and manage Agency grant funds on behalf of the grant holders and the Agencies.	manage Agency grant funds on behalf of the grant holders and the Agencies.	
		<b>Institutional policy</b> The set of rules, directives and guidelines issued by an individual Institution that meet the requirements of the <i>Tri-Agency Framework: Responsible Conduct of Research</i> .	<b>Institutional policy</b> The set of rules, directives and guidelines issued by an individual institution that meet the requirements of the RCR Framework.	Removed redundancy as the complete title of the RCR Framework is included in Section 1.
		<b>Investigation</b> A systematic process, conducted by an Institution's investigation committee, of examining an allegation, collecting and examining the evidence related to the allegation, and making a decision as to whether a breach of a policy(ies) has occurred.	<b>Investigation</b> A systematic process, conducted by an Institution's investigation committee, of examining an allegation, collecting and examining the evidence related to the allegation, and making a finding as to whether or not a breach of the RCR Framework has occurred.	Revised for consistency with the updated definition of an inquiry.
		<b>Non-eligible institution</b> An Institution other than an eligible Institution.		Deleted to avoid redundancy as the Glossary already has a definition for an eligible institution.
			<b>RCR contact (Institution's designated RCR contact)</b> The central point of contact responsible for RCR at an institution. The RCR contact is responsible for promoting a culture of RCR within an institution, addressing allegations and is the point of contact between an institution and the SRCR.	Added new definition to Glossary.
			<b>Research life cycle</b>	Added new definition to Glossary.

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			From the formulation of the research question, through the design, conduct, collection of data, analysis and interpretation of the research, to its reporting, publication and dissemination, as well as the application for and management of research funds.	
		<b>Responsible allegation</b> An allegation: 1) that is based on facts which have not been the subject of a previous investigation; 2) that falls within Sections 2 and 3 of this RCR Framework; and 3) which would, if proven, have constituted a breach at the time the alleged breach occurred.	<b>Responsible allegation</b> An allegation: 1) that is based on facts which have not been the subject of a previous or current investigation; 2) that falls within Sections 2 and 3 of this RCR Framework; and 3) which would, if proven, have constituted a breach at the time the alleged breach occurred.	Added clarification to avoid duplication of efforts when complainants send allegations simultaneously to several institutions, which may be conducting investigations at the same time.
			<b>Responsible Conduct of Research</b> The behavior expected of anyone who conducts or supports research activities throughout the research life cycle, characterized by an awareness and application of established professional norms and values and ethical principles, such as honesty, fairness, trust, accountability, and openness, that are essential in the performance of all activities related to research.	Added this definition to the Glossary which is also defined in Article 1.1.
		<b>Serious breach</b> In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public or brings the conduct of research into disrepute.	<b>Serious breach</b> In determining whether a breach is serious, the Agency will consider the extent to which the breach jeopardizes the safety of the public or brings the conduct of research into disrepute.	Revised examples to avoid giving the reader the impression that conducting research with human participants or animals without following approved protocols always constitutes a serious breach when this is not necessarily the case.

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		<p>This determination will be based on an assessment of the nature of the breach, the level of experience of the researcher, whether there is a pattern of breaches by the researcher, and other factors as appropriate. Examples of serious breaches may include:</p> <ul style="list-style-type: none"><li>• Recruiting human participants into a study with significant risks or harms without Research Ethics Board approval, or not following approved protocols</li><li>• Using animals in a study with significant risks or harms without Animal Care Committee approval, or not following approved protocols</li><li>• Deliberate misuse of research grant funds for personal benefit not related to research</li><li>• Knowingly publishing research results based on fabricated data</li><li>• Obtaining grant/award funds from the Agencies by misrepresenting one’s credentials, qualifications and/or research contributions in an application</li></ul>	<p>This determination will be based on an assessment of the nature of the breach, the level of experience of the researcher, whether there is a pattern of breaches by the researcher, and other factors as appropriate. Examples of serious breaches may include:</p> <ul style="list-style-type: none"><li>• Recruiting human participants without Research Ethics Board approval; conducting research without following approved protocols that, as a result, causes significant risks or harms to participants.</li><li>• Using animals in a study without Animal Care Committee approval; conducting research without following approved protocols that, as a result, causes significant risks or harms to animals.</li><li>• Deliberately misusing of research grant funds for personal benefit not related to research.</li><li>• Knowingly publishing research results based on fabricated data.</li><li>• Obtaining grant/award funds from the Agencies by misrepresenting one’s credentials, qualifications and/or research contributions in an application.</li></ul>	<p>These revisions provide further clarity that if an approved protocol is not followed resulting in significant risks or harms to participants or animals, then that is considered a serious breach.</p>
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