Guidelines for handling matters relating to suspected research misconduct and other deviations from good research practice

These guidelines were approved by the vice-chancellor on 17 December 2019 (ORU 2019/06840). They were last revised on 19 October 2021 (ORU 2021/05816).

Introduction

Research misconduct undermines confidence in researchers, research activities and scholarship. Misconduct may also result in decisions, for instance on various social policy matters, being based on false grounds or people being exposed to physical or mental harm. Furthermore, there is a risk that the university’s competitiveness is jeopardised and resources wasted. Against this backdrop, good research practice must be safeguarded and measures must be taken to prevent misconduct.

To uphold trust in the research conducted at Örebro University, it is of utmost importance that any suspicions of research misconduct are reported and investigated. Anyone who in good faith has passed on suspicions of research misconduct and anyone who has contributed to the investigation into the matter may not be subjected to reprisals as a result.

Örebro University’s guidelines for handling matters relating to suspicions of research misconduct and other deviations from good research practice are aligned with national legislation and the European code of conduct1 in compliance with the recommendations of the Association of Swedish Higher Education Institutions (SUHF)2.

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1 The European Code of Conduct for Research Integrity, ‘ALLEA’, 2017
2 Guide for handling suspicions of deviations from good research practice, Vägledning för hanteringen av misstankar om avvikelser från god forsknings sed (Rek. 2020:3), Association of Swedish Higher Education Institutions (SUHF) (in Swedish)
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1. Definitions and demarcations

Research misconduct is here used per the definition provided in Section 2 of the Act on Responsibility for Good Research Practice and the Examination of Research Misconduct (2019:504):

- a serious deviation from good research practice in the form of fabrication, falsification or plagiarism that is committed intentionally or through gross negligence when planning, conducting or reporting research.

The National Board for Assessment of Research Misconduct (hereinafter ‘NPOF’) handles matters concerning suspicions of research misconduct in accordance with the definition provided in legislation. If a matter is considered to fall outside the definition of research misconduct, but may concern other deviations from good research practice, the relevant entity responsible for research is to handle the examination (Section 11, 2019:504). At Örebro University, a research ethics committee is to handle complaints concerning other deviations from good research practice. In compliance with the ALLEA code of conduct and the guide for handling suspicions of deviations from good research practice, Vägledning för hanteringen av misstankar om avvikelser från god forskningssed, issued by SUHF, an investigation should be undertaken on the suspicion of other deviations from good research practice that “damage the integrity of the research process or of researchers”. Examples of such deviations are described in the ALLEA code of conduct.

2. Research Ethics Committee

There is to be a research ethics committee at Örebro University. The mandate and composition of the committee are detailed in a rules of procedure document. Under the current rules of procedure (ORU 2019/02344), the Research Ethics Committee has the following mandate:

a) Handling reports of research misconduct and deviations from good research practice in accordance with current national and internal regulations.

b) Advising faculty management on matters of research ethics.

c) Continuously monitoring and analysing developments in the world around us with regard to research ethical aspects within research and education, and when needed, putting forward proposals for improvements at the university. The committee is also to offer strategic advice to the university in general and to the faculty boards in particular, with the purpose of fostering internal and external dialogue, understanding and education within research ethics.
3. Complaints

3.1. General rules
Anyone who suspects research misconduct or other deviations from good research practice should report this without delay. Those employed at Örebro University have an obligation to file such complaints. The complaint can be addressed to NPOF for examination of research misconduct, or to the following office/body at Örebro University:

- Vice-chancellor
- Research Ethics Committee
- Records Office

Employees at Örebro University may also use the university’s whistleblowing feature to point out irregularities anonymously. However, to facilitate examination of a complaint relating to suspicions of research misconduct and other deviations from good research practice, further information is usually required from the complainant, making anonymity difficult to maintain.

The Research Ethics Committee handles matters concerning other deviations from good research practice at Örebro University. On suspicion of other deviations from good research practice that damage the integrity of the research process or of researchers, an investigation is to be launched in accordance with these guidelines. Other matters are to be handled in other ways or closed without further action.

3.2. Support and information
In connection with a complaint, the person reported, their manager (director of division or equivalent), the head of subject, and dean of the faculty concerned are to be informed at an early stage that an investigation is underway. To provide the parties involved with support and help in terms of handling contacts, for instance, with the media, between the media and the university, as well as within the university, the head of communication is to be informed.

A person who is subject to an investigation is to be informed of the possibility to receive psychosocial support from the occupational health services and, where relevant, from the relevant trade union organisation. In certain cases, it may also be relevant to offer support and advice on, for example, legal matters or matters concerning research ethics.

4. Investigation and decision
On suspicion of research misconduct or other deviations from good research practice, a prompt assessment is to be made by a case officer at the Office for Academic Policy to determine whether the matter is to be referred to NPOF or handled at the university. The vice-chancellor is to be notified of the matter in writing and without delay, and a case file is to be created in the university records. If there is suspicion of research misconduct, the matter shall be referred directly to NPOF without further investigation at the university. NPOF or the university may during the course of the investigation find it necessary to refer the matter to another party with a duty to investigate. Obvious cases of misjudgement, misinterpretation, or other irregularities considered to be minor and that have obviously been made unintentionally normally warrant no further investigation.
4.1. Suspicions of research misconduct
On matters relating to suspicions of research misconduct that Örebro University refers for examination by NPOF, the university has a duty to collaborate (Section 12, Act on Responsibility for Good Research Practice and the Examination of Research Misconduct).

NPOF will decide whether research misconduct or other deviations from good research practice as per the definition in legislation has occurred and provide details on the possibility to appeal against the decision. The vice-chancellor will determine any sanctions as a result of the matter (see further section 5). Any measures shall be in proportion to the gravity of the deviation in question in accordance with Section 5 of the Administrative Procedure Act (2017:900).

4.2. Suspicions of other deviations from good research practice
Örebro University is to launch an investigation on suspicion of other deviations from good research practice in those cases when such deviations may have resulted in damage to the integrity of the research process or of researchers. The investigation is to be conducted in two steps: one initial investigation and, if required, one full investigation.

The initial investigation should take no more than two months unless special reasons exist. If special reasons exist, these are to be documented.

An investigation is initiated by:

- the Research Ethics Committee at Örebro University considering whether the matter is at all a matter for the university and presenting their assessment to the vice-chancellor.

The Research Ethics Committee drafts a proposal and the vice-chancellor decides to:

- close the matter if there is insufficient grounds for a full investigation, or
- close the matter if there is no reason to suspect any deviations from good research practice, or
- continue the investigation.

If the vice-chancellor decides that the matter requires further investigation, a full investigation must be launched.

A full investigation should take no more than six months unless special reasons exist. If special reasons exist, these are to be documented. The investigation is undertaken by the Research Ethics Committee at Örebro University unless the vice-chancellor decides otherwise. The investigation is to be launched and carried out promptly, objectively and with legal certainty. The investigation is to be carried out with respect for all those involved:

- without delay, both the complainant and the person suspected of deviations from good research practice are to be informed in writing that an investigation has been launched and of the reference number pertaining to matter. These Guidelines for handling matters relating to suspected research misconduct and other deviations from good research practice are to be attached.
- the person suspected of deviations from good research practice is to be informed of the opportunity to comment, in writing and within a certain timeframe, on the matter.
- the complainant is thereafter to be given the opportunity to comment, within a certain timeframe, on the comments submitted by the reported person.
- when required, supplementary written or oral information is to be obtained from the parties involved, other people concerned, witnesses, et cetera.
- when required, subject specialist(s) from other higher education institutions may be consulted.
- the suspicion, the investigation, and the reported person’s position on the suspicion raised are
to be documented in an investigation report. In accordance with the principles set out in Section 25 of the Administrative Procedure Act, all parties are to be offered the opportunity to comment on the matter before a decision is made.

Any conflicts of interest are to be considered throughout the process. Provisions on conflicts of interest and disqualification can be found in Sections 16–18 of the Administrative Procedure Act. During the course of the investigation, the Research Ethics Committee is to consider the right of the complainant, the reported person, and other parties to have access to the material that has been brought into the matter, as well as their right to respond to it (Section 25, Administrative Procedure Act).

**Decision, full investigation**

The Research Ethics Committee drafts a proposal and the vice-chancellor:

- decides to close the matter without further action as any deviations from good research practice have not been found, or
- determines that other deviation(s) from good research practice have occurred and whether they were committed intentionally or through gross negligence.

On making the decision public, the Administrative Procedure Act provision on who is to be notified of the contents of the decision is to apply. Should the decision affect a party adversely, information must also be included on whether and how the decision can be appealed against (Sections 40–46 Administrative Procedure Act). Moreover, the immediate manager of the reported person, head of subject, chair of the relevant faculty board, and the university’s head of communication are to be notified of the decision.

5. Measures following the decision

Under Section 13 of the Act on Responsibility for Good Research Practice and the Examination of Research Misconduct, the entity responsible for research is, within six months of the decision coming into force, to submit a report to NPOF on the measures the entity has taken or intends to take on account of the decision. The vice-chancellor determines any sanctions on account of the matter. Any measures are to be in proportion to the gravity of the deviation (Section 5, Administrative Procedure Act). The vice-chancellor may decide to refer the matter to the Staff Disciplinary Committee, or, in the case of professors, to the Government Disciplinary Board for Higher Officials (SAN). The disciplinary measures that may be considered are evident from the Public Employment Act (1994:206). The Government Disciplinary Board for Higher Officials examines matters of disciplinary liability, reports for prosecution, and summary dismissals of professors and vice-chancellors (Section 34, Public Employment Act). For all of these, the university has an obligation to report (Section 15, Employment Ordinance, 1994:373).

6. Notification and communication of the decision

As soon as possible following a decision by NPOF or by the vice-chancellor, Örebro University is to notify the following parties of the decision:

- the complainant and the reported person,
- the head/director in charge and the dean of the faculty in question,
- relevant research funding bodies, government authorities, scientific journals and others concerned.
Following decisions by NPOF, notifications thereof are to include details to inform the recipients of the fact that the decision may be appealed against with the administrative court (Public Employment Act, Section 14).

Consultation with the head of communication at Örebro University is required concerning the notification and communication of the decision.

7. Appeal against the decision
NPOF’s ruling may be appealed against to the administrative court.

The vice-chancellor’s decision may not be appealed against.

8. Enter into force
These guidelines enter into force on 20 October 2021.