PAN Integrity in Research and Scholarship Policy

Approved By: the Board of Directors
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This practice document has been adapted from the Canadian Aboriginal AIDS Network's Integrity in Research and Scholarship Policy, the Wellesley Institute's Integrity in Research Policy, and CIET Canada's (Canadian Institute for Energy Training) Policy for Responsible Conduct of Research. The practice guidelines are aligned with the requirements and guidelines set out for dealing with Research Integrity by the Tri-Council agencies (the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council of Canada, and the Social Sciences and Humanities Research Council).

INTRODUCTION

The Pacific AIDS Network (PAN) recognizes its responsibility to ensure that all research and scholarship meets the highest scientific and ethical standards, including the duty of honest and thoughtful reflective inquiry, rigorous analysis, accountability and sharing findings with those who participate in PAN-endorsed research. Beyond PAN-specific initiatives, it is also hoped that this policy statement will be useful for our membership and research colleagues in their work.

PAN is committed to ethical conduct in all its funded and unfunded research initiatives that involve human subjects. The purpose of the ethical standards embodied in this policy is to promote and facilitate the conduct of all research in ways that respect the dignity and preserve the well-being of human research participants in all research projects undertaken by PAN, or where PAN chooses to become involved.

PAN will provide the ethical framework for such activities, and will provide education, guidance and support on research and scholarly work to maintain high standards of research integrity. Research initiatives conducted by and supported by PAN are required to meet the standards as articulated in this policy and in the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (TCPS 2) as evidenced by peer review through a recognized Research Ethics Board (e.g., Ethics review boards of the University of Victoria, the University of British Columbia, Simon Fraser University, or a recognized community research ethics board).

1.0 SCOPE

This policy applies to all PAN members, staff, consultants, students, paid and/or unpaid research associates and assistants, and/or any person in a like position who conducts or advances research in collaboration with PAN, such as community organization representatives, research centre representatives, or university-based researchers.

In addition, all projects that request a letter of support from PAN (i.e., letters of collaboration) will be reviewed for consistency with this policy.

2.0 GUIDING PRINCIPLES

- **Community vs. Individual Interest:** Community relevance in research should take priority in setting research agendas and issues of investigation. Particular areas of

concern in need of investigation, as identified by individual communities, would take precedence over research arising out of personal interests that are formulated outside the community's priorities or without their involvement, for example.

- **Ethical Guidelines**: That the ethical guidelines set out by the most current version of *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (TCPS 2) and the *Tri-Agency Framework: Responsible Conduct of Research* must be adhered to in relation to securing individual consent to participate in research. All PAN researchers will respect privacy and confidentiality concerns in all research activities. The safe maintenance of research-related documents and information resides with the principal researcher.
- **Capacity Building:** PAN is committed to providing ongoing education and training on research scholarship and integrity. This will be achieved through participation on research teams, conference and workshop participation, contributions to peer review processes, and support to attend training where possible.
- **Intellectual Integrity**: PAN researchers will conduct research with honesty and integrity, and will ensure intellectual competence in all research initiatives.
- **Sharing Results with Community:** That the researcher acknowledges the contributions of participants and the right of individuals to gain access to findings resulting from their participation in the research. Reports based on aggregated data (not individual data or data subsets) will be shared with participating communities in cases where organizational representatives meet the ethical requirements as outlined in this policy.
- **Rational Use of Resources:** PAN researchers will use PAN resources efficiently and honestly. They will also use grant money as outlined in grant agreements and will abide by the funding agencies' guidelines.
- **Greater/Meaningful Involvement of People Living with HIV/AIDS:** Research will adhere to the principles of GIPA/MIPA and offer opportunities for the meaningful participation of people living with HIV/AIDS as partners in every stage of the research process (i.e., as research team members, as peer research associates, etc.). Where appropriate, research will also include the meaningful involvement of other stakeholder groups (e.g., people who use drugs, gay men, people with lived experience of hepatitis C, etc.),
- **Research involving Aboriginal Peoples:** Research involving Aboriginal Peoples or communities must conform to and be congruent with the principles outlined in Chapter 9 (*Research Involving the First Nations, Inuit and Métis Peoples of Canada*) of the TCPS2. For First Nations People, this means explicitly taking into consideration principles of ownership, control, access and possession (OCAP principles). Research with Aboriginal Peoples must consider the historical context of Aboriginal experience and implement safeguards against perpetuating colonialism throughout the research process.

3.0 DEFINITIONS

- **Research and scholarship:** Research is broadly defined as "systematic investigation to establish facts, principles, or generalizable knowledge." In addition, scholarship "includes the dissemination of this knowledge through various means such as publications, presentations (verbal and audiovisual), professional practice and the

application of this new knowledge to the enrichment of the life of society." (Murphy et al., 1993)

- **Research Records:** Includes data or results that embody the facts and observations arising through the study of the subject, and includes but is not limited to research proposals, laboratory and study records both physical and electronic, artefacts, images and models, progress reports, abstracts, theses, oral presentations, and official publications.

- **Conflict of Interest:** Refers to situations where a researcher's professional responsibilities (or those of a member of an inquiry/investigation committee) compete with his or her private interests, raising questions of independence, objectivity, improper gain or ethical duties. Conflict of interest might arise from interpersonal relationships, financial partnerships, academic interests or dual roles inside and outside of a research project.

- **Disclosure:** Disclosure of potential conflicts is a key factor in protecting a researcher's reputation and career from potentially embarrassing or harmful allegations of inappropriate behaviour. PAN researchers are expected to disclose any situation that could conceivably be viewed as a conflict of interest and to favour more rather than less disclosure.

- **Deception:** Involves any research procedure which does not include or which alters some or all of the elements of informed consent as described in Section 9.0. Typically this involves either the deliberate withholding of relevant information or the deliberate giving of false information as part of the methodology of research. Care should be taken in assessing the nature of deception. All research with human participants has the potential to involve deception. Actions as simple as not informing participants of the operating hypotheses for a study or asking someone to complete a questionnaire without explaining how it will be scored could be construed as deceptive.

- **Principal applicant, researcher, or investigator:** The researcher with overall responsibility for the direction of a research project, grant or contract.

- **Privacy:** Involves the right to decide the extent to which personal data that is not already in the public domain may be disclosed and/or disseminated.

- **Integrity**: Integrity in this work is defined as adhering to the core principles of honesty, respect, and ethical practice consistent with professional standards of health and academic research.

- **Confidentiality:** Involves the confidential preservation of a person's information as a participant and respecting privacy or confidentiality given to others whose information may be used.

- **Allegation:** Allegation means information brought forward by a person or group of people relating to possible misconduct in research and scholarship in any form.

4.0 RESEARCH THAT REQUIRES ETHICS REVIEW

ALL RESEARCH THAT INVOLVES HUMANS AS PARTICIPANTS (including those projects that utilize questionnaires and interviews) must be reviewed and approved by a university and/or recognized community Research Ethics Board (REB) before the research begins, regardless of whether it is funded (e.g., by grant, award, fellowship, contract) or is non-funded. Research collaborators have the additional responsibility to safeguard from harm organizations, communities, and individuals that choose through informed consent to be involved in research activities with PAN.

Research involving humans as participants occurs when data is derived from:

- Intervention or interaction with a living individual(s);
- Secondary sources/non-public sources (e.g., interviews about an individual);
- Identifiable private information about an individual; and
- Secondary use of data already collected for another purpose (particularly when the original data can be linked to individuals).

4.1 Exceptions to the Requirement for Ethics Review

Whether or not activities require an ethics review, all research is obligated to adhere to the GUIDING PRINCIPLES set forth in this document. This noted, certain classes of research involving humans are excluded from the requirement for ethics review:

- Performance reviews of an organization or its employees, within the mandate of PAN, are not subject to ethics review unless they contain an element of research in addition to assessment.
- Research undertaken to evaluate or assess an agency project or program, and/or to fulfil the terms and conditions of a funding agreement to develop a community project (e.g., gathering information from individuals with the purpose to inform development of community projects). In such cases, protection of individuals and of community consistent with this policy will apply.
- Evaluation activities as required under the terms and conditions of funding agreements (unless connected to research, activities such as pilot tests, etc., and in which case ethical review is required). Again, in such cases protection of individual and of community consistent with this policy will apply.

4.2 Amendments

Should a researcher wish to make changes to procedure following ethical approval, such changes are to be filed with the REB to seek approval for the amendments.

5.0 RESEARCH ETHICS BOARD(S) AND REVIEW OF ETHICS

5.1 All research undertaken by PAN shall be reviewed by an accredited Research Ethics Board(s). The Principal Investigator(s) (PIs)/Applicant(s) (PAs) must satisfy all terms and conditions as specified by the REB where a submission is handled.

5.2 For each research protocol that receives approval, the Principal Investigator/Applicant is required to submit an annual report, a termination report, and any other such report as the REB or funding body may require.

6.0 ETHICS AND FUNDING

Project funds will not be accepted and/or released to the project principal investigator until an ethics certificate is issued by an REB and a copy is on file with PAN. It remains the duty of the Executive Director (or designate) to ensure that all appropriate procedures have been followed prior to release of funds to the project principal investigator. PAN's Executive Director, in conjunction with the Financial Officer, is required to maintain all grant funding agreements and also ensures that ethical review of projects has occurred and is on file prior to release of monies.

7.0 PROMOTION OF INTEGRITY IN RESEARCH & SCHOLARSHIP

PAN recognizes that integrity in scholarship and research is best encouraged by actively developing awareness among all involved of the need for the highest standards of integrity, accountability and responsibility as articulated in this policy. PAN shall provide an environment conducive to this goal, in particular to new research personnel, research consultants, and 'outside' academics.

The Executive Director shall provide copies of this policy and be available to answer specific questions to the following groups of individuals:

- RESEARCH PERSONNEL (e.g. Research Coordinator, Peer Research Associates, or Research Assistants);
- RESEARCH CONSULTANTS who have been contracted by PAN to undertake research-related work;
- 'Outside' UNIVERSITY, COMMUNITY, HOSPITAL OR GOVERNMENT-BASED ACADEMICS who work with PAN across any number of different projects.

In addition, PAN encourages member organizations to adopt and/or adapt this policy statement. Organizations are also encouraged to incorporate standards of good conduct, as outlined in this policy, which will reinforce ethical and respectful community engagement when working with a research team. This may include asking that research team members:

- Sign an agency confidentiality form;
- Follow PAN policies and procedures when conducting work at the Pacific AIDS Network.

8.0 RISKS AND BENEFITS

8.1 Researcher's responsibilities in relation to risks and benefits

a) The researcher must assess all possible risks and benefits involved in the research. These must be clearly communicated to communities and individuals involved in research.

b) The researcher must be prepared to document all risk and benefits involved.

c) The researcher must be prepared to demonstrate that there is no reasonable alternative methodology that would avoid or reduce possible risks

d) Where appropriate, in light of risks involved, the researcher may be required to demonstrate prior successful first-hand experience with the methodology proposed, and the absence of detriment to the participants.

e) The researcher proposing to use a new methodology must undertake wide consultation and preliminary work, and must be prepared to make the results available to the appropriate REB.

8.2 Risks/Discomforts

a) Risks/discomforts which go beyond the threshold of minimal risk must be considered.

b) The researcher must be concerned with risks to:
- The individual participants involved;
- The communities involved, and consideration of broader cultural, ethnic, regional, provincial, or national interests;
- Clearly identifiable third parties; and
- The researcher personally, staff, and any research team members involved.

c) At minimum, the researcher must be concerned with the following types of risks/discomforts:
- Physical harm;
- Psychological harm;
- Injury to reputation or privacy/confidentiality; and
- Breach of any applicable law.

d) The researcher must assess not only the likelihood of a given risks/discomforts, but also the duration and the likely reversibility of its impact should it materialize.

8.3 Benefits

a) Benefits include specific advantages to participants, to third parties, or to society or a segment thereof, and any general increase in human knowledge.

b) Benefits include advantages or increase in knowledge both consciously sought by the researcher and/or likely to arise as by-products of the research.

c) Benefits may also include a stronger sense of community, increased self-esteem by virtue of contributing to new knowledge and 'being heard,' contributing towards new programming and/or interventions and an overall increased sense of empowerment as a result of being recognized as a knowledge holder regarding community health and social issues.

9.0 INFORMED CONSENT

The objective of obtaining informed consent is to ensure adherence to the ethical principle of respect for both persons and communities involved in research. The elements of consent that must be considered are capacity, comprehension and voluntariness. Different organizations and REBs may have different requirements to ensure informed consent. The following details the standards that must be met for PAN research:

a) The participant (whether individuals or community) who is providing informed consent must be given sufficient time and opportunity to assess the information provided (without undue influence), including the opportunity to consult with an advocate or other knowledgeable person.

b) The researcher must provide any person who is to give informed consent with at a minimum the following information:
    - The individual is being invited to participate in a research project, including any information on any costs, payments, reimbursements for expenses;
    - The identity of the researcher(s);
    - A description of the topic being researched;
    - A precise description of the participant's involvement, including their responsibilities (i.e., time commitment);
    - A description of the research procedures;
    - A description of the possible benefits;
    - A description of the risks or discomforts involved;
    - A description of the extent to which privacy and confidentiality will be protected, including a description of who shall have access to information that is provided and anticipated uses of information provided;
    - An assurance that prospective participants are free to refuse to participate, have the right to withdraw at any time during the study without prejudice to pre-existing entitlements (e.g., continued access to health and/or community services, etc.), and will be given continuing and meaningful opportunities for deciding whether or not to continue to participate;
    - A description of how the data will be stored and/or when they will be destroyed;
    - In the case of individual participants, provided an opportunity, upon request, to review interview transcripts;
    - Reasonably expect that published findings will be returned in a meaningful way to the participants – both the individual and community. This can include a description of the ways in which the research shall be published in academic literature and/or presented at conferences; and
    - A contact name, telephone number, and address of a contact person at the REB.

10.2 Special Circumstances

a) In special circumstances, for example, cases involving minors (e.g., children under the age of 18), cognitively impaired persons (due to intoxication, developmental disability, or neurological illness or injury), careful review is required for written/verbal consent. Consent procedures must provide a rationale for obtaining consent directly or consent may be obtained by a person having legal authority to give that consent.

b) In cases involving people who are confined in one area ("captive groups"), for example, in prison, in a prescribed program, patients in a hospital ward informed consent shall be obtained from each individual participant. Informed consent is also obtained by persons/groups responsible for the group of people.

c) Where written consent is waived (e.g., in favour of verbal consent), as in circumstances where it is not culturally appropriate, or where there is other good reason (e.g., illiteracy), the researcher shall document the procedures used to seek and obtain free and informed consent.

11.0 DECEPTION

An REB may approve an incomplete and/or deceptive consent procedure if, after rigorous scrutiny, all of the following conditions are satisfied:

a) The research is assessed to involve minimal risk to individuals or communities and minimal risks are documented.

b) Individual or community rights and welfare are not adversely affected by the procedure.

c) The research could not practically be carried out without deception. Researchers must:
   - Justify their use of the procedure, identifying the manner(s) in which the benefits of the deception outweigh the potential costs;
   - Demonstrate the inappropriateness of alternative research methods; and
   - Document precedents for using the proposed methodology in their application.

d) Participants must be fully debriefed immediately following their involvement in the research. The debriefing must include all pertinent information in which the exact nature of the deception and its necessity are clearly and fully articulated. A detailed written debriefing scenario, that fully explains the manipulation and its need to the participant, must be submitted as part of the application. Researchers must also provide an explanation of how potential negative effects will be handled.

e) Participants must be provided the opportunity to withdraw from the study if, after debriefing, they feel they would not have participated had they known about the deception.

12.0 PRIVACY AND CONFIDENTIALITY

12.1 Privacy

a) Personal data includes all information relating to a physical or mental condition; personal attitudes, values, concerns, beliefs, habits or circumstances; and social relationship.

b) Privacy must be looked at from the social and cultural perspective of the participant, not the researcher.

c) It is a requirement of informed consent that a participant be informed both of any anticipated acquisition of personal data by observation or study in a private setting and of the extent to which privacy will be protected.

12.2 Confidentiality

a) Confidentiality must be preserved when handling the data during the research, when using the data in teaching or for scholarly presentations, and in publication.

b) The research design must include procedures appropriate to securing the degree of confidentiality guaranteed.

c) In the absence of a clear statement to the contrary, it is assumed that confidentiality is guaranteed.

d) It is a requirement of informed consent that any anticipated breach of confidentiality be clearly explained to the participant by the researcher (e.g., in clinical research some diseases may be reportable).

e) Appropriate care must be taken to guard against breaches of confidentiality. In particular, where a breach can be anticipated due to the nature or size of the participant population, association or combination of information, the researcher should take appropriate measures to guard against breaches.

f) Researchers are responsible for ensuring the confidentiality of participants by maintaining data collected in secure storage (e.g. locked cabinet in a secure office) and by limiting access to only authorized individuals. Consent forms must be stored separate from data.

g) Electronic data is never transmitted electronically (i.e., email) between investigators, research staff, office staff or anyone involved on the project. Files needing to be shared over great distance may be uploaded to secure server space as agreed upon by the research team.

h) Upon completion of data analysis, researchers are responsible for ensuring the confidentiality of data. This may include destroying or having suitably destroyed, papers, documents, tapes, questionnaires, etc., that allow identification of individual participants and communities. If any of the research records are to be held for future analysis, data must continue to be stored in secure storage as outlined in Section 13.2 (a).

13.0 PROCEDURE FOR INVESTIGATION AND RESOLUTION OF COMPLAINTS WITH RESPECT TO ALLEGED BREACHES OF INTEGRITY IN RESEARCH & SCHOLARSHIP

This policy is applicable to all allegations of breach of the Integrity in Scholarship and Research Policy, including without limitations:

- Misconduct in Scholarly Research;
- Data Collection, Gathering and Retention;

- Authorship;
- Responsibilities of Investigators and Supervisors;
- Conflict of Interest in Research.

13.1 Misconduct in Scholarship and/or Research

Misconduct shall include any or all of the following:

- Plagiarism, which is the attempt to claim credit in written scholarly works for ideas, writing, research results, or methods taken from someone else;
- Fabrication or falsification of research data;
- Material failure to recognize by due acknowledgement the substantive contribution of others (including for example, but not limited to, co-researchers, students, research assistants or research coordinators, etc.);
- The use of unpublished material of others (e.g. community reports, etc.) without permission;
- Use of archival material in violation of the Copyright Act;
- Abuse of supervisory power affecting collaborators, assistants, students and others associated with the research;
- Financial misconduct, including the failure to account for or misapplication or misuse of funds acquired for support of research;
- Material failure to comply with relevant federal or provincial statues or regulations for protection of researchers or human participants, or failure to comply with the regulations of the relevant agency concerning the conduct of research;
- Material failure to meet other relevant legal requirements that relate to the conduct of research; and
- Failure to reveal any material conflict of interest to sponsors or to those who commission the research.

13.2 Data Collection and Retention

a) Primary research data will normally remain in the PAN office at all times and should be preserved as long as there is reasonable need to refer to the primary data, normally for a period of no less than five years (longer as per the requirements of the appropriate REB). Primary research data should be stored, when possible, in a locked filing cabinet in a secure office or in an appropriately protected electronic media file. Under no instance should the primary data be destroyed while investigators, colleagues or readers of published results may raise questions requiring reference to the original data.

b) Entitlement to ownership, reproduction and publication of primary data and other products of research will vary according to the circumstances under which the research was conducted and the agreement signed. A shared understanding of ownership should be reached among collaborators on a research project *before* the research is undertaken.

c) Issues of confidentiality will arise in some areas of research, and these will be addressed appropriately by all collaborators. *The Tri-Council Policy Statement: Ethical*

Conduct of Research Involving Humans (TCPS 2) and the *Tri-Agency Framework: Responsible Conduct of Research* provide guidelines for researchers in this area.

d) When an investigator leaves PAN, arrangements must be made for safekeeping of records, data and products of research. In the case of students, the data will normally stay with PAN. In the case of investigators leaving PAN, arrangements will be made to ensure maintain safekeeping of records, data and products of all research under which its name has been used to secure funding and where community has delegated via a resolution all research data, etc., remain the collective property of the community and where PAN has been asked to provide stewardship of research.

13.3 Authorship on Research Reports and Publications

a) Authorship guidelines should be negotiated at the beginning of a research project.

b) In order to ensure the publication of accurate scholarly reports two requirements must be met:
   - The active participation of each author in verifying the part of the manuscript that they have contributed;
   - The designation of one author who is responsible for the validity of the entire manuscript.

c) The principal criterion for authorship should be that the author(s) has made a significant intellectual and practical contribution. The concept of "honorary authorship" is generally unacceptable.

d) Research staff, peer research associates, and students will be given appropriate recognition for authorship or collection of data in any publication provided they fulfill any or all the terms and conditions articulated in the Authorship Guidelines.

e) Regardless of terms set forth in article 13.3 (b), all members of a research team will be provided any opportunity to review and comment on findings prior to publication/presentation.

f) Any one member on a research team may not further analyse, publish or present findings without the agreement of the Principal Investigator and other research team members.

g) The explicit permission of an individual or organization (e.g., organizations that have assisted in recruitment and/or advisory committee members) must be sought prior to acknowledging their contribution in a paper/presentation.

h) Any research team member or collaborator may choose to remove their (or their organization's) name if they do not agree with the content or views presented in a publication or presentation.

13.4 Responsibilities of Principal Investigators

a) To ensure that all research is conducted to the highest possible ethical standard and academic integrity.

b) To provide all collaborators, research staff and assistants with all reasonable information necessary to prevent misconduct as defined in this practice.

c) To monitor the work of research assistants, interns, etc., and oversee the designing of research methodology, and the process of acquiring, recording, storing, and analyzing of research data.

d) To hold regular meetings and discussions to ensure that all researchers are provided with timely information.

e) To verify the authenticity of all data or other factual information generated by research.

13.5 Conflict of Interest

It is essential to recognize situations of existing and potential conflicts of interest in the conduct of research and scholarly activities. A conflict of interest arises in the following circumstances:

a) When personal or business interests of the researcher conflicts with the researcher's obligations to the organization, staff/students under his or her supervision.

b) When without prior permission/agreement the researcher uses organizations resources, including secretarial, office, administrative, technical, logo or insignia, for the personal gain or benefit of researchers or for the benefit of others related to or associated with the researchers.

c) When the personal or business interests of the researcher or his/her associate compromise with the independence and impartiality necessary to his/her duties.

d) When the researcher uses confidential information that is gathered in the course of his/her duties for personal or business gain or for the gain of his/her associates or relations.

e) When a researcher influences or seeks to influence a decision made by the organization or an outside agency for personal or business benefit.

f) When a researcher influences or seeks to influence a decision made by the institute.

g) If, in the course of his or her duties, a researcher incurs an obligation to an individual or business that is likely to benefit from special treatment or favors granted by the researcher or the organization.

h) When a researcher accepts, without authorization of the organization, a research grant from any outside organization from which he or she receives or may subsequently receive direct or indirect benefits.

All conflicts of interest arising from participation as a collaborator on a research project will be declared in writing and submitted to the Executive Director or the Co-Chairs of the Board of Directors. At all times collaborators are expected to conduct themselves according to the highest ethical standard in a manner, which shall bear close scrutiny. They are responsible for

seeking guidance from an appropriate source before embarking on activities which might raise questions about conflict of interest.

13.6 Complaints Procedure

The process outlined below confirms and details PAN's commitment to ensuring integrity in research and scholarship, the ethical treatment of research participants, and the responsible use of public funds. PAN considers those who bring allegations in good faith as fulfilling their obligations under this policy to report suspicions of misconduct, and there must be no recriminations for a person bringing an allegation in good faith. Persons who raise allegations will be protected from retaliation if, in the judgment of the Investigation Committee, the allegations, however incorrect or unsupportable, appear to have been made in good faith.

13.6.1 Reporting Allegations of Research Misconduct

a) Anyone (e.g., member of partnering communities, research participants, research assistants, etc.) who believes that there has been a breach of the Integrity in Scholarship and Research Policy may seek informal assistance and may request a preliminary investigation from the Executive Director at any time. In the event that the allegation is against the Executive Director, anyone can seek assistance from the Co-Chairs of the Board.

b) All such inquiries will be kept confidential by the Executive Director or the Co-Chairs of the Board of Directors.

c) Any PAN member, staff person, consultant, student, paid or unpaid research associate and assistant, and/or any person in a like position who conducts or advances research in collaboration with PAN has an obligation to report to the Executive Director or the Co-Chairs of the Board of Directors any circumstances which they believe involves a breach of the Integrity in Scholarship and Research Policy. Any PAN member, staff person, consultant, student, paid or unpaid research associate and assistant, and/or any person in a like position who conducts or advances research in collaboration with PAN who forwards a complaint is also obligated to keep confidential such matters.

d) Complaints must be made in writing within six months (or by verbal or alternate methods in cases of low literacy) of the alleged breach before any formal steps will be taken. Written complaints must contain sufficient detail to enable the respondent to understand the allegation. Additional information may be required at the discretion of to the Executive Director or the Co-Chairs of the Board of Directors. Anonymous allegations will not normally be considered. However, if compelling evidence is received anonymously by to the Executive Director or the Co-Chairs of the Board of Directors, a preliminary investigation will be initiated.

13.6.2 Review Process

a) Formal acknowledgement of the receipt of a complaint will be provided in writing to the complainant within two weeks of the complaint being received. This response will include an indication of next steps to respond to the complaint.

i. The Executive Director or the Co-Chairs of the Board of Directors will determine whether a formal investigation is warranted. If sufficient evidence exists that a breach has occurred, the respondent will be notified in writing at this time of the allegation.
ii. Should the Executive Director or the Co-Chairs of the Board of Directors determine that insufficient evidence exists for a complaint, the allegation will be dismissed. Such a decision will be made in writing to all relevant parties. The complainant may appeal the dismissal of the complaint, in writing to the person supervising either depending upon who dismissed the complaint. In the case of the Chair of the Board, the dismissal can be appealed in writing to the full Board of Directors.

b) Within 30 days of receiving a complaint, the Executive Director or the Co-Chairs of the Board of Directors will first attempt to resolve the allegation in a meeting with all relevant parties present. Both the individual/organization (complainant) alleging a breach and the respondent will be informed of their right to have a third party present at this meeting (or any future meeting).

13.6.3 Investigation

If a complaint is not resolved through the initial meeting, the breach will be formally investigated through the below process.

a) Within 2 weeks of the initial meeting, the Executive Director or the Co-Chairs of the Board of Directors will appoint a three person investigation committee, including at least one member who is external to the Pacific AIDS Network, to hear the complaint. The committee will be composed of representatives with experience and expertise relevant to the situation.
    i. A committee chair will be elected and will determine the process for obtaining and recording necessary evidence.
    ii. The Executive Director or the Co-Chairs of the Board of Directors will support the committee's activities in a secretariat role with no influence on the process. Where an investigation is against the Executive Director or the Co-Chairs of the Board of Directors, they do not participate in the investigation.

b) The committee will have 30 days to gather evidence. Any and all persons relevant to the allegation will be offered the opportunity to present allegations and rebuttals. The names and contact information of the complainants and other persons who may be involved, such as witnesses, will be confidential. The privacy of all individuals will be protected at all times to the extent possible.

c) The committee may request additional documentation or external advice if relevant to the resolution of the allegation.

d) The findings of the committee will be submitted in writing to the Executive Director or the Co-Chairs of the Board of Directors with copies provided to both the complainant and the respondent. This report will contain all details of the complaint, selection of committee members, a rationale for their appointment, methodology for the investigation, evidence gathered, reference to persons interviewed, conclusions reached

and recommendations for action. Sanctions may include reprimand, suspension, dismissal and/or reparation made to complainant or others.

i. Both the respondent and the complainant will have 2 weeks to respond to the Investigation Committee in writing. The response(s) will be taken into consideration with the recommendations for action.
ii. The decision of the Investigation Committee will be considered final.
iii. Actions will be implemented by the Executive Director or the Co-Chairs of the Board of Directors, as relevant, within 30 days of receiving the final report.

e) At the conclusion of an investigation, the Executive Director or the Co-Chairs of the Board of Directors will provide appropriate follow-up. In cases where unfounded allegations had been made PAN will make every effort to restore the reputation of those unjustly accused, and will ensure that related documentation provided to the investigative committee is destroyed.

f) Once an investigation has been completed all records and/or reports associated with an investigation will be kept in a locked filing cabinet at the PAN Executive Director's office. Access will be limited to the Executive Director. All materials related to investigation will be held for a period of 1 year, at which time they will be destroyed.

13.6.4 External Reporting Requirements

a) Should misconduct be found to have occurred in any research activities supported by the Tri-Agencies, the committee will provide a report of the allegation, the investigation, and resolution to the appropriate Agency within 30 days of the completion of the investigation. If the Agency wishes to further investigate the nature of an allegation, PAN will comply.

b) In the event of a misconduct involving public funds, the Executive Director or the Co-Chairs of the Board of Directors will ensure that a comprehensive report of the allegations and misconduct findings are forwarded to the Council immediately following an investigation.

14.0 RESEARCH INVOLVING BIOHAZARDS

PAN does not carry out research involving biohazards. Should PAN in the future plan research activities involving the use of biohazards, it will notify relevant funding agencies and comply with the Health Canada Laboratory Biosafety guidelines.

15.0 RESEARCH INVOLVING ANIMALS

PAN does not carry out any research that involves the use of animals. Should the Institute in the future plan research activities involving the use of animals, it will notify relevant funding agencies and abide by Canadian Council on Animal Care (CCAC) guidelines for such research.

REFERENCES

Canadian Aboriginal AIDS Network. *Integrity in Research and Scholarship Policy,* July 2012.

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