CODE OF CONDUCT FOR THE RESEARCH INTEGRITY AT THE
MARIO NEGRI INSTITUTE FOR PHARMACOLOGICAL
RESEARCH - IRCCS

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Introduction

Respect for the principles and standards of research integrity is a guarantee of its quality and helps amplify the importance of science. It also reinforces society’s expectations. This has far-reaching consequences on the developments of research, hence on society’s wellbeing. Respect for the principles of research integrity therefore lays the ground for high-quality research projects coherent with ethical principles and values, deontology and nationally and internationally recognised standards. The principles of integrity in research – reliability, honesty, respect and responsibility – should inspire all the steps in research, guiding Researchers (see Article 2) when their work involves practical, ethical or intellectual challenges from each specific sector.

This Code of Conduct for the Research Integrity (referred to hereinafter as the “Code”) defines the basic rules for personnel employed at the ISTITUTO DI RICERCHE FARMACOLOGICHE MARIO NEGRI - IRCCS (hereinafter, “IRFMN”), applying correct practices inspired by the principles of integrity.

IRFMN adopts the present Code in application of the Italian Legislative Decree no. 200, 23 December 2022, entitled “Riordino della disciplina degli Istituti di ricovero e cura a carattere scientifico” (Re-order of the discipline of Scientific Institutes for Research, Hospitalization, and Healthcare (IRCCS)). This came into force in 2022 and involved the introduction, in Article 8 of the previous Decree no. 288/2003, of a new para. 5-bis, which specified that “the Institutes, with reference to Law no. 62, 31 May 2022, guarantee that research and care conforms to the principles of correctness, transparency, equity, responsibility, reliability and completeness, recognised internationally. They publish all their data and the sources of research truthfully and objectively, so that their truth and reproducibility can be checked, especially regarding the accuracy of the data presented. With this in mind, to guarantee the assessment of scientific research, and taking account of its effects on the health of the population, they employ internationally accepted indicators of the quality of efficacy and efficiency of their work.

Research Institutes adopt and periodically update a code of conduct for the research integrity. Personnel employed in these Institutes are expected to respect a code of conduct that disciplines behaviours aimed at the correct use of resources and respect of the rules for fair competition”.

Definitions

- **Bad conduct in research**: unethical or deliberate lack of respect for guidelines and codes of conduct for scientific research. This definition includes any failure to report bad conduct by others, but not errors made in good faith or poor-quality results of projects.

- **Conduct harmful to the research integrity** (“misconduct”): violation of good practices in research that damages the integrity of the project or harms researchers. Examples include, for instance, behaviour obstructing research, causing discrimination or abuse of the persons concerned, or harming IRFMN’s reputation, compromising its credibility; these are all to be considered harmful to research integrity. See also Part II of this Code.

- **Conflict of interest**: this refers to certain conditions, not only behaviour, that give rise to a real or perceived risk of a person’s professional judgement on a matter of primary interest (such as the validity of a research project) being unduly influenced, with or without the person realising it, by a ‘secondary’ interest, which might involve some economic or financial advantage. The Researcher in this case is induced to behave in a partially inappropriate way to obtain some personal gain (direct or indirect, through other subjects; financial or not, potential or real). This can lead to a conflict of interest if it influences the Researcher’s objectivity or professional judgement.

- **Research data**: all the information, in whatever format, employed following a defined protocol, that serves as the basis of a specific research project or is produced by it, and is necessary to validate the research results.

- **FAIR** (see ALLEA report providing key recommendations to make digital data “Findable, Accessible, Interoperable and Reusable”: DOI: 10.7486/DRI.tq582c863), referring to research data, stands for:
  - **Findable**, implies it can be found and used by others employing the relative identifiers: examples are DOI and/or descriptive metadata.
  - **Accessible**, accessible to Researchers;
  - **Interoperable**, can be integrated with other data;
Fabrication, falsification and plagiarism: these are the basic signs of harmful conduct.

- **Fabrication**: production of fraudulent data, documents, or results not related to a research project, when they are presented as reliable products of research.
- **Falsification**: fraudulent changes to data, documents or project results, to confirm achievement of the aims of the project. Falsification also involves the use of wrong or inappropriate statistical analysis, leading to false conclusions.
- **Plagiarism**: deliberate presentation of a product of research or a text written by another Researcher or group without giving them credit. Plagiarism is punishable under civil and penal law, and administrative regulations.

Whistle-blowing: a report of illegal wrongdoing made in the general interest by a public employee on the basis of something that came to his knowledge in the course of work; this is set out in Italian art. 54 bis of the Legislative Decree no. 165, 30 March 2001, containing “Norme generali sull’ordinamento del lavoro alle dipendenze delle amministrazioni pubbliche (General rules on the order of work for public administration employees)”; this was modified by Law no.179, 30 November 2017, which set out “Disposizioni per la tutela degli autori di segnalazioni di reati o irregolarità di cui siano venuti a conoscenza nell’ambito di un rapporto di lavoro pubblico o privato (Rules for protecting anyone reporting crimes or irregularities that have come to their knowledge during public or private employment)”. The whistleblowing procedure is designed, among other things, to keep the reporter’s identity anonymous and prevent them suffering retaliation.

### INTRODUCTORY PROVISIONS

**Article 1 – Aims**

1. By adopting this Code, IRFMN considers the fundamental principles of research integrity and internationally adopted solutions. These include the following:

   - “*Codice Europeo di Condotta per l’Integrità della Ricerca*”, European Federation of National Academies of Science and Humanities - ALLEA
   
   - “*Governance of Research Integrity*” – EMBO

2. This Code updates, where necessary, the rules and regulations already in force at IRFMN, in particular the Model of organization, management and control under Italian Legislative Decree no. 231/2001, the Code of Ethics and the Code of Values.

3. The Code aims to ensure correctness, transparency and efficiency in the research work at IRFMN, either individual or in groups, in relation to the importance of the public service provided, and also to inform all those working in various sectors at IRFMN of the values and rules for conduct to which the Institute will regularly refer in its research, upholding its reputation and image.

4. Any behaviour contrary to the principles set out in Part I implies ethical or deontological responsibility. Any harmful conduct coming under Part II will be considered a responsibility and may call for disciplinary measures, as indicated in Part III.

5. The Code does not affect any penal, civil or administrative responsibilities that might result from violations of the principles and behaviour described here.

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3. [https://docs.marionegri.it/website/IRFMN_Carta%20dei%20valori%20etico%20%20Code%2020etico_dic%202020.pdf](https://docs.marionegri.it/website/IRFMN_Carta%20dei%20valori%20etico%20%20Code%2020etico_dic%202020.pdf)
Article 2 – Area of application

1. The Code applies to personnel affiliated with IRFMN and/or doing research in the Institute, even only temporarily, regardless of their level or functional responsibility, or their type of contract with IRFMN.

2. The Code applies to personnel working as support for research, regardless of the type of contract, and all occasional and professional persons.

3. The Code applies to university personnel doing any type of research at IRFMN.

4. In this Code all the figures listed in points 1-3 above are referred to as Researchers.

Article 3 – Adoption of indicators of efficacy and efficiency for the quality and integrity of research

1. IRFMN adopts the following indicators of efficacy and efficiency for the quality and integrity of its research in order to assess specific aspects of the scientific work:

a) training courses on research integrity, held at least every two years - in any case, since the Code has been updated - aimed to involve all the research staff (the schedule is established by IRFMN), regardless of their type of contract with the Institute.

b) presence of a Regulation for the management of violations of the Code, including inappropriate behaviour in research (misconduct), reported in Appendix 1. This document:
   - is drawn up and managed by functions/figures in the IRFMN, updated periodically together with the Code, and published on the institutional pages;
   - it permits the acceptance of well-backed anonymous reports (in agreement with the laws on whistleblowing), guaranteeing anonymity and privacy of both the reporter and the person reported when possible;
   - it clearly predetermines the sanctions applicable if the bad conduct is confirmed, ensuring they are proportional to the gravity of the misconduct. Should the procedure conclude that the person accused had no responsibility, IRFMN will ensure their rehabilitation;
   - it ensures compliance with the adversarial principle, guaranteeing that subject accused is informed of the reasons for the procedure and the proofs regarding him, and allowing him to present evidence and arguments in defence;

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4. Exclusively for the sake of readability, in this document the masculine form will be used to refer to individuals of female, male, or non-binary gender.

5. These indicators were identified using the following sources:
   ii. BIH QUEST Center, Clinical trial reporting manual for universities, available at the following link: https://www.transparimed.org/_files/ugd/01f35d_01cf8de9b344fe5973ee80976a00b64.pdf?index=true.
   iv. Kelly D. Cobey et al., Community consensus on core open science practices to monitor in biomedicine, 24 January 2023, available at the following link: https://doi.org/10.1371/journal.phb.3001949.
   v. Standard Operating Procedures for Research Integrity (SOP4RI), Toolbox for Research Integrity, available at the following link: https://sops4ri.eu/toolbox/.
c) the number of clinical trials promoted by IRFMN whose results have been entered in the specific registers (obligatory in the Clinical Trials Information System for pharmacological trials) within a year from the conclusion of the trial, regardless of whether or not the results have been published in specialised journals;

d) the number of clinical trials promoted by IRFMN whose results have been published as peer-reviewed articles in specialised scientific journals within two years from the conclusion of the trial;

e) specific regulation on the management of laboratory registers and records of their storage when required by current legislation (Centro di Analisi Biomedica e Genomica, Centro di Ricerche Cliniche per le malattie rare Aldo e Cele Daccò) and number of laboratory notebooks in relation to the staff directly involved in the specific experimental work;

f) registration of Researchers with Orcid (percentage of researchers with Orcid numbers);

g) sharing of research data applying the FAIR principles (see Definitions and Article 7) (number of articles with shared data/year).

Article 4 – Procedures for promoting the research integrity
1. Within 60 days from the date the Code comes into force, IRFMN will set up a Working Group dedicated to the integrity of research, if it does not already exist.

2. This Group will deal with questions and activities inherent to integrity in research at IRFMN, organising training courses for Researchers, when necessary appointing experts from outside the Institute. This Group will also organise and manage the activities mentioned in this Code.

SPECIFIC PROVISIONS
PART I: PRINCIPLES OF RESEARCH INTEGRITY

SECTION 1 - General rules
Article 5 – Fundamental values
1. The Researcher must observe the ALLEA European Code of Conduct for Research Integrity (see Article 1), whose basic principles are the following:

- reliably guaranteeing the quality of the research, implying the quality of its planning, methodology, analysis, and correct use of resources;
- honesty in developing, conducting, reviewing, presenting and communicating the data in a transparent, equitable, complete and objective manner;
- respect for colleagues and all those involved in the research, for society, ecosystems, the cultural patrimony, and the environment;
- responsibility for research from conception to publication, for its management and organization, training, supervising and tutoring those involved, and assessing its broader impacts on society.

2. The Researcher must also ensure he upholds the reputation of IRFMN, and so doing sustains the credibility and authority of its scientific work.

3. In any case, the research must always respect the dignity of the persons involved, the health of mankind and other living species, and adopt good bioethical practices.

Article 6 – Doing research
1. The Researcher starts out from the state of the art to develop his own research ideas. While respecting the principles of freedom and independence in research, each Researcher defines his own objectives and aims, assesses the feasibility and the potential impacts of the research, and identifies the resources and organisation modalities most appropriate for achieving its efficacy and sustainability.
2. The research must employ the appropriate methods and tools for the topic of study, and they all must be fully and correctly documented.

3. The Researchers’ roles and tasks are agreed clearly and impartially, respecting each person’s skills and qualifications.

4. The Researcher makes informed and appropriate use of research funds.

**Article 7 – Management of research data**


2. All the data from the experiments in a research plan, whether published or not, must be filed in laboratory registers, so the experiments can always be traced, in line with the procedures set out in the IRFMN Code of Ethics and Code of Values, and in the specific procedures issued by IRFMN.

3. General access of research data to the public may be limited if the Researchers are bound by confidentiality restraints, regulated by financing sources, or based on the decision to valorize the results with a view to obtaining patents. These limits no longer apply when the research findings are published in specialised journals.

4. When sharing research data, IRFMN adopts the appropriate measures to create and keep the data “FAIR” (Findable, Accessible, Interoperable, Reusable).

**Article 8 – Scientific publications**

1. Unless bound by the conditions listed in the previous Article, the Researcher is expected to share the findings of his own studies with the scientific community, in a recognised form, usually a peer-reviewed article in a scientific journal.

2. This sharing must be honest, accurate and compatible with the standards of the discipline involved and all the information on methods required to verify and reproduce the results must be provided.

3. The Researcher must respect the confidentiality of data and/or results when legitimately requested (see Article 7, point 3).

4. The Researcher must avoid duplication of research findings and must not divide them unjustifiably with the aim of obtaining more scientific outputs.

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6 For further questions related to the management and protection of personal data, readers are referred to the following sources:

i Regolamento (UE) 2016/679, Regolamento Generale sulla Protezione dei Dati;
i 

ii Decreto legislativo 30 giugno 2003, no. 196, recante il Code in materia di protezione dei dati personali, come modificato dal successivo decreto legislativo 10 August 2018, no. 101, recante Disposizioni per l’adeguamento della normativa nazionale alle disposizioni del regolamento (UE) 2016/679 del Parlamento europeo e del Consiglio, del 27 Aprile 2016, relativo alla protezione delle persone fisiche con riguardo al trattamento dei dati personali, nonché alla libera circolazione di tali dati e che abroga la direttiva 95/46/CE;
i 

iii Garante per la Protezione dei Dati Personali, Regole deontologiche per trattamenti a fini statistici o di ricerca scientifica pubblicate ai sensi dell’art. 20, comma 4, del d.lgs. 10 August 2018, no. 101, 19 December 2018, available on the link [https://www.garanteprivacy.it/home/docweb/-/docweb-display/docweb/9069637](https://www.garanteprivacy.it/home/docweb/-/docweb-display/docweb/9069637);
v 

iv Garante per la Protezione dei Dati Personali, Provvedimento recante le prescrizioni relative al trattamento di categorie particolari di dati, ai sensi dell’art. 21, comma 1 del d.lgs. 10 August 2018, no. 101, in particolare Prescrizioni relative al trattamento dei dati personali effettuato per scopi di ricerca scientifica e Prescrizioni relative al trattamento dei dati genetici per clinica e ricerca scientifica, 5 giugno 2019, available on the link [https://www.garanteprivacy.it/home/docweb/-/docweb-display/docweb/9124510](https://www.garanteprivacy.it/home/docweb/-/docweb-display/docweb/9124510);

vi [European Data Protection Board, Linee guida 5/2020 sul consenso ai sensi del regolamento (UE) 2016/679](https://www.gdprshield.io/);
5. The Researcher must cite fully and faithfully all sources employed in his research.

6. Bearing in mind the details provided in the following Article 20, scientific publications must report as co-authors all the Researchers who have made a substantive contribution to the project or provided significant input to the manuscript. The order of the authors, the name of the author for correspondence, and any individual contributors is decided on the basis of shared rules, clearly defined preferably at the beginning of the project, as it is done in various disciplines.

7. The author who takes the responsibility as the contact person (“corresponding author”) is the sole point of contact for any communications from the editor referring to the article. This author must make sure that all the co-authors have read and approved the manuscript before it is submitted to the journal selected and is the person who passes editorial communications on to the other authors. The corresponding author is the scientific readership’s main contact for requests of information, material or clarifications regarding the study once published.

8. The co-authors all share responsibility to ensure that the publication is scientifically valid and correct. Each co-author must not only ensure that his own contribution to the publication is correct, but must also check that it appears scientifically coherent and rational when published.

9. In selecting where to publish an article, the Researcher must assess the reputation of the journal in the pertinent scientific community, and, when possible, give priority to the one likely to circulate the ideas and results of the research most widely. The Researcher must try to identify and avoid illegitimate or predatory journals. If possible, open access channels or journals should be used, to ensure the results are freely available to anyone interested, following a principle of equity and community return.

10. Research results should be published promptly, as any unjustified delay slows scientific progress and, in the case of clinical studies, may directly or indirectly harm patients.

11. If a Researcher, after the publication of his own scientific contribution, notes errors or suspects misconduct regarding the reliability or originality of the results, must inform the co-authors and the organization/office for research integrity for which the research was done (See Article 4, point 2) and assess how best to correct or retract the published article.

Article 9 – Assessment of publications or projects
1. When serving as a reviewer, editor or member of an editorial committee for journals or scientific collections, the Researcher must be careful and accurate, applying his own competence and scientific knowledge, making clear decisions based solely on objective assessment of the quality and integrity of the research, its originality and importance.

2. The same principles and behaviours come into play when the Researcher is required to express an assessment of projects, scientific output, or the work of other Researchers.

Article 10 – Dissemination of scientific knowledge and public communications
1. The Researcher has a general responsibility to participate in communicating science and making the results of his own research available to an unskilled public that might benefit from the information. This will help expand the habits of health knowledge and evidence-based medical information.

2. While respecting this requirement, the Researcher must ensure, as far as possible, that the communication of research findings to the public does not exaggerate or distort them, and the conclusions are directly upheld by the evidence.
3. The Researcher who states his affiliation with the IRFMN is not expressing the IRFMN’s official position, unless they are formally authorised to do so.

SECTION II – Collaborative research groups

Article 11 – Roles, tasks and objectives
1. Researchers working on a research project in a group are expected to display a spirit of collaboration, with a view to obtaining results without pursuing individual interests.

2. Each group member’s tasks must be agreed clearly, preferably at the start of the project, on the basis of the competence of each Researcher. The management and coordination roles should be rotated periodically, when possible, maintaining a gender balance.

3. Transparency and sharing are particularly important when applying for funding, for the approval and accounting of expenditures, treatment, sharing, storage of the material and data employed in the research, approval of articles to be submitted for publication, and management of communicating the results (see Articles 8 and 10).

Article 12 – Dissemination of results
1. Scientific publications follow the general rules set out in Article 8.

2. Without authorisation from the research group and colleagues, a Researcher cannot disseminate unpublished results of the group’s work and their methods.

3. The research group must always be mentioned in public presentations.

PART II

CONDUCTS HARMFUL TO THE RESEARCH INTEGRITY

Article 13 – Funding and assignments
1. Funding or assignments for research are to be authorised by IRFMN, to ensure there is no conflict with its objectives and output.

Article 14 – Conflicts of interest
1. Reports of cases involving conflict of interest are managed according to the procedures established by IRFMN in the document entitled Gestione e dichiarazione dei conflitti di interessi (Declaration and management of conflicts of interest).

2. In any case, the Researcher must declare the conflict of interest, of any nature, whether effective or potential, financial or not, that becomes evident during institutional work, research, review of articles, projects or scientific work of colleagues, in order to enable third parties to assess the possible influence or distorting effect of such interests.

Article 15 – Relations with other Researchers
1. The work of other Researchers must not be slowed or hindered intentionally.

2. The Researcher must not intentionally issue reports or make unfounded accusations regarding behaviours of other Researchers allegedly harmful to research integrity, nor voluntarily harm their reputation. This conduct is considered even more serious if it is aimed at obtaining some personal or professional gain.

Article 16 – Coordination of projects or collaborative research groups
1. The Researchers who coordinates a research project or holds a similar role must not take advantage of his position. He must not impose tasks not in line with the roles defined for a project; he must not take expenditure decisions not shared, or out of line with the project budget; he must not use the results of collective research for
personal purposes and must forbid or limit the use of data or research findings not justified by Institutional regulations or indicated by Funding or European bodies.

**Article 17 – Fabrication, falsification and data theft**
1. The Researcher must not fabricate research data nor purposely alter or omit data; he must not publish misleading or incomplete results using methods other than those described in Article 8, under the heading ‘Scientific publications’. Data, methods and research results must not be used without the consent of whoever planned or produced them, unless they have already been published.

**Article 18 – Storage and elimination of research data**
1. It is forbidden for the Researcher to deceptively select or destroy material, data, registers and any other sources of information essential for verifying research findings.
2. Any elimination may take place following internal regulations or other agreements with funders or sponsors of the research.

**Article 19 – Plagiarism and citations**
1. The Researcher must not purposely present as his own ideas, data, results or projects of other Researchers.
2. The Researcher must not impose the citation of non-essential work with a view of increasing the impact of his own or others’ scientific output, the prestige of a journal or a research group.

**Article 20 – Criteria for authorship attribution**
1. A researcher who has not contributed to a scientific publication cannot be listed as a co-author. There are well-defined, irrevocable criteria for the attribution of authorship, indicative of the contribution to the research (https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html).
2. To be considered an author, a Researcher must have made substantial contributions to the idea or plan of the work. This may imply the acquisition, analysis or interpretation of data, the creation of new software employed in the research, writing up the article or substantially reviewing it. In addition, he must have approved the submitted version (or any subsequent one, modified in response to editorial comments) and accepted personal responsibility for his own contributions. The Researcher must also ensure that any criticism about the accuracy or integrity of any part of the work, including those in which the author was not personally involved, are adequately investigated, clarified, and documented in the literature.

**Article 21 – Patents**
1. To protect the intellectual property of the research, with a view to patenting it, the Researcher follows the rules and indications set out in the Code of Values and Code of Ethics adopted by IRFMN. IRFMN does not apply for patents, and only protects the right of its Researchers to be acknowledged as authors of the invention, so that all research results can be made promptly public, to the advantage of the scientific community.

**Article 22 – Alteration of titles or credentials**
1. The Researcher must not attribute to himself false titles and scientific credentials.

**Article 23 - Declaration of affiliation**
1. The Researchers must always indicate in scientific publications his affiliation with IRFMN.

**Article 24 – Assessment of persons, projects and publications**
1. The Researcher must not make wrong or deceptive judgments of projects, persons, or research output.
2. The Researcher must not disclose data or confidential information about projects or their results, nor break the rule of confidentiality until the results have been published.
3. The Researcher must not impede or slow the publication of scientific articles.

PART III
MEASURES TO DEAL WITH VIOLATIONS OF THE CODE
Article 25 – Procedures
1. Any reports or detection of hypothetical misconduct or disrespect of the principles of research integrity are dealt with as specified in the Regulation for the management of violations of the Code of Conduct for Research Integrity, adopted by IRFMN (Appendix 1).

2. Conducts harming the research integrity, dealt with in Part II of this Code, must be divided according to their severity and sanctioned if necessary, as specified in Article 1.

3. The Researcher with reliable reasons or objective findings of conduct by other Researchers likely to damage research integrity (from IRFMN or outside), with whom they currently or have in the past collaborated on scientific work, is expected to report these cases.

PART IV
FINAL PROVISIONS
Article 26 – Entry in force, publication and updating of the Code
1. The Code comes into force the 15th day after its approval by IRFMN Board of Directors.

2. The Code will be published on the intranet page and on the official IRFMN site, and distributed as considered appropriate.

3. The IRFMN updates the Code periodically, at least every three years.

4. All the Researchers at IRFMN must give their specific acceptance to the regulations in this Code.
APPENDIX 1
REGULATION FOR THE MANAGEMENT OF VIOLATIONS OF THE CODE OF CONDUCT FOR RESEARCH INTEGRITY

This Regulation follows the indications set out in Article 3 of this Code of Conduct for the Research Integrity.

1. AIM
IRFMN, in line with the basic principles set out in its Code of Values and Code of Ethics, and the main documents regarding transparency, ethics and integrity in research⁷, has issued the present Regulation for the management of violations of the Code of Conduct for Research Integrity (hereinafter, “the Regulation”).
The main purpose of the Regulation is to define the criteria, methods, and responsibility regarding the reporting, assessment and management of any violation of the Code of Conduct for Research Integrity.
Should any violation give rise to penal, civil, administrative or disciplinary responsibility, this Regulation governs the discipline and sanctions applicable to the personnel, in line with the obligations set out in Italian Legislative Decree no. 231/2001.

2. AREA OF APPLICATION
The Regulation is applicable to IRFMN Researchers, as defined in Article 2 of the Code of Conduct for the Research Integrity.
The situations in which the Regulation is applicable are set out in PART I (Principles of research integrity) and II (Conducts harmful to the research integrity) of the Code of Conduct for the Research Integrity.

3. METHODS
3.1 Reporting of potential violations
Each Researcher is expected to report any critical points related to the research activity which might be considered a violation of the Code of Conduct for the Research Integrity. Examples might involve compromise of the research results, inappropriate management of financing, or incorrect publication of the scientific findings.
Such reports are made to the Committee for Research Integrity at IRFMN (hereinafter, “the Committee”) using the following e-mail address: integritaricerca@marionegri.it. This internal reporting system is designed to ensure the possibility of receiving anonymous reports if well-founded, guaranteeing the anonymity and confidentiality of the whistleblower and the person reported when possible (see the section on whistleblowing).
The Committee members are the Director of IRFMN, Research Coordinators in Milan and Bergamo, and a representative of the Researchers, with experience in research integrity.
If necessary, the Committee will seek support from the Working Group on Research Integrity (see Article 4 of the Code of Conduct for the Research Integrity), Department Heads and other figures at IRFMN considered useful for the assessment; these might include the Privacy Officer or the Chief Librarian.
The Committee informs the Human Resources Head that the assessment phase has started, for competence and any other clarifications on the case, should it involve violation of other regulations or current rules.

COPE, UK Committee on Publication Ethics (http://publicationethics.org/)
ORI, U.S. Office of Research Integrity (http://ori.hhs.gov/)
3.2 Assessment of potential violations

Once received the report and relative documentation using the standard forms, the Committee will assess the nature and severity of the violation, request opinions and any further information, also talking to the parties involved. The assessment will be based on the principles of integrity, equity, confidentiality, safeguard of the person, and equilibrium. The Committee will specifically:

a) evaluate the truth of the report;
b) establish the responsibility;
c) agree on the severity of the violation.

The Committee will always guarantee the right to defence, informing the person(s) concerned of the reasons for the procedure and the proofs against them, accepting written or spoken proof or arguments in defence. Except for communications required by the procedure, the Committee and all those taking part in the assessment phase must maintain total confidentiality on all aspects of the procedure, in order to protect those involved. The Committee minutes are drafted anonymously. Persons involved in the procedure must communicate any potential conflicts of interest, which must then be managed appropriately.

3.3 Outcome of the assessment and application of sanctions

At the end of the assessment, the Committee will express an opinion on the outcome of the procedure and any sanctions, respecting the principles of graduality and proportion. Should the violation not be confirmed by this assessment (for instance, because of a lack of proofs), the procedure will be considered closed. The Committee may take measures against the person(s) who raised the case, it they suspect and can prove bad faith.

Should the violation be confirmed, the Committee - having kept the Head of Human Resources continuously informed, who still has the opportunity to set up a separate disciplinary procedure - establishes any sanctions and the terms of their application. Unless there are contractual conditions and disciplinary measures governed by other rules and regulations, the following sanctions may be applied:

- removal from a research project;
- closer and more detailed supervision at work;
- an official reprimand*;
- transfer to another area of work*;
- temporary suspension from work*;
- termination of the employment contract.

*in coordination with the Head of Human Resources.

Within 60 days from the end of the assessment phase, the Committee will draft a written report summarizing its reasoning and conclusions, along with a briefly listing of the evidences found and the most relevant testimonies for the case. The Report should give the following information:

· the names and roles of the persons involved, including experts, if called in;
· the facts in question;
· a brief description of the procedures followed during the assessment;
· a list of the scientific documents examined;
· a summary of the testimonies;
· a careful description of the items that led to the accusation and/or demonstration of the violation;
· the final outcome of the assessment phase and the measures to complete it, either annulling the whole procedure or applying sanctions.

The Report is sent to all concerned, as party to the case or support for the Committee, and to the Head of Human Resources.

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* OECD Global Science Forum Investigating Research Misconduct – Allegations in International Collaborative Research Projects, April 2009
4. LIMITING RISKS AND CORRECTIVE MEASURES

The main aim of managing violations of the *Code of Conduct for Research Integrity* is primarily to prevent future critical situations, boosting awareness and knowledge on integrity, and ultimately raising the quality of research processes. With this in mind, extending the measures outlined in the *Code* and on the basis of practical experiences, the Committee may specify actions and procedures, including, for instance, training for staff.

5. RECORDING AND FILING

All documents regarding the procedure under this Regulation are filed in the offices of the Director and IRFMN Personnel Office, for at least ten years from the closure of the procedure, unless some dispute arises, in which case the papers must be kept longer.