

legitimate authorship

presumption of authorship

**clear documentation
of results**

fabrication of results

reproducible data

manipulation of data

protection of intellectual

plagiarism **property**

theft of ideas

correct quotation

sabotage of

research activities

professional fairness

AN ORIENTATION FRAMEWORK
FOR GOOD RESEARCH PRACTICE

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GOOD RESEARCH PRACTICE – WHAT IS IT ABOUT?

Trust among colleagues in the integrity of academic work is a cornerstone of academic knowledge and scientific progress. Dishonesty, which is reflected, for example, in falsified research results, not only endangers research itself; it also impairs society's trust in research and thus the preconditions for support of the academic system. The timely communication of principles of good research practice in teaching as well as in the supervision of early-career researchers is a duty of the universities.

With this in mind, the University of Göttingen and the University Medical Center Göttingen (UMG) have drawn up the “Rules of the University of Göttingen Governing the Safeguarding of Good Research Practice” (hereafter called the “Rules for Good Research Practice”), based on the DFG (German Research Foundation) recommendations (2013), and, prompted by the DFG's new code “Governing the Safeguarding of Good Research Practice” (2019), further developed them with the expertise of persons experienced in ombuds work (2021). In this brochure, the rules are summarised in a simple form with supplementary information for practice.

The brochure offers those engaged in research at the University and the University Medical Center an orientation framework by formulating central standards of good research practice and explaining the **ombuds system** and its procedural paths at the University of Göttingen.

The term “ombud” is of old Norse origin and in present language usage refers to an agency directed towards mediation. Ombuds institutions can be found in various areas of society, and also in academia. Guideline 6 of the DFG Code (2019) obliges universities and research institutions to nominate ombudspersons as independent persons of trust. Researchers can turn to them if they have questions about good research practice or if they suspect research misconduct. As an alternative to the local ombuds system, the “German Research Ombudsman” as a supra-regional committee is available to all researchers in Germany.

Good research practice is based not only on the use of methods that are appropriate for the respective field, but above all on honesty towards oneself and others. This attitude finds its expression in the willingness to consistently doubt all results oneself and in allowing and encouraging critical discourse within the research community.

In concrete terms, this practice means that

- academic qualification work is actually based on personal contribution,
- preliminary academic work should be adequately considered and correctly cited,
- strict integrity with regard to the contributions of other persons is maintained
- the authors listed in a publication have made a genuine, identifiable contribution to the creation of the work,
- research data, documented in a comprehensible and complete manner and stored securely, can be checked and used by others within the framework of standards customary in the respective field,
- researchers who teach and instruct meet their responsibility for communicating these principles and ensure adequate and regular supervision.

Reality shows that these principles are not always adhered to and that **misconduct in research** occurs as a result of ignorance or intention. What exactly is to be understood by this is defined in the Rules for Good Research Practice. The forms of research misconduct that can be documented most clearly are as follows:

- **Plagiarism:** Plagiarism occurs when parts of texts, images or tables are used without citing a source and can be found completely or almost unchanged in an existing source. Such cases must be distinguished from insufficient consideration of literature and insufficient source references.

GOOD RESEARCH PRACTICE – WHAT IS IT ABOUT?

- **Problematic authorship in publications:** *Unjustified authorship* exists when a person who was not involved in the development of the research results is included in a list of authors. The so-called “honorary authorship” is widespread; for example, when an institute director is named as co-author of all publications originating from his research institution without having made any substantial contribution. An *omitted authorship* exists if persons with relevant and genuine contributions are excluded from the list of authors. Early-career researchers are particularly often affected by this exclusion.
- **Misrepresentation of research results:** *Falsifications* or the fabrication of data and sources are of particular concern in the empirical and experimental sciences. Falsifications occur, for example, when desired results are highlighted, while undesired results are tacitly rejected. *Research results are manipulated* if they are modified in such a way that they seem to prove a result desired by the manipulator.

It is not always easy to define whether a case actually represents research misconduct. In the assessment, it is important to distinguish, among other things, whether the critical practice is the result of negligence or deliberate deception.

There are several ways **to prevent** such behaviour that is harmful to research. At the University, the principles of good research practice are communicated in different ways. In particular, this is done through the dissemination of the Rules for Good Research Practice, the central website and the information and advisory service of the Ombuds Office. The faculties also have rules (examination and doctoral regulations) as well as courses and modules that deal with the principles of good research practice and sensitise early-career researchers to them. In addition, supervisors should offer doctoral researchers regular discussions that serve to clarify questions about the standards of good research practice. The University management supports the expansion of such measures.

Misconduct can also be prevented by researchers – regardless of career level – regularly updating their knowledge of standards of good research practice and taking preventive measures in common academic practice themselves. For this purpose, agreements and decisions concerning academic processes must be made according to the standards of a discipline, transparent and comprehensible, and should be documented. This includes in particular the appreciation of contributions to publications and reaching timely agreements on access to and (further) use of jointly collected research data. In this context, it is important to agree and document an appropriate distribution of tasks and the associated rights and obligations at the beginning of the research work.

PREVENTION OF RESEARCH MISCONDUCT

Think about how you yourself can strengthen this practice in your field of work on the basis of the Rules for Good Research Practice:

- In which situations can a regular discussion of work processes and results be used to clarify questions of good research practice and to document this bindingly in order to prevent conflicts?
- Which people are under particular pressure as a result of the expectations of others and may need support to prevent any misconduct?
- Which dependencies can lead to which type of misconduct?
- How can an imbalance in decision-making processes be remedied and in which cases should uninvolved third parties be involved as facilitators?

Conflicts with regard to good research practice can be avoided, among other things, by ensuring that:

- the roles and responsibilities in working groups are clearly defined and comprehensible for all participants.
- an agreement on authorship is reached at an early stage, at the latest before the manuscript is written, and the decision on the ranking of authors is made jointly by the co-authors.
- documented agreements on the rights of use of research data and results are made at the earliest possible time (e.g. in the case of research cooperations, change of institution of researchers).
- regular scientific exchange takes place within the framework of supervision relationships, which includes space for clarifying questions about good research practice.

Conflicts associated with suspected misconduct often cannot be resolved directly with colleagues, supervisors or the head of the relevant working group or institute. In such cases, for all employees of the University, the University Medical Center and the German Primate Center (DPZ) – be it as suspected persons or as people providing information – there are various **possibilities for confidential advice**.

For all academic staff of the University and the DPZ the **Ombuds Office** and **ombudspersons** are available as neutral and confidential contacts. All academic staff of the University Medical Center can directly contact the ombudspersons in charge of the Medical Center.

→ *Those affected can be supported in resolving a conflict themselves.*

The **Ombuds Office for Good Research Practice** confidentially accepts enquiries about the standards of good research practice as well as reports of suspected misconduct. Here, initial advice can be obtained, and information is provided on possible procedural steps. Enquiries and reports can also be passed on to expert ombudspersons.

Subject to the consent of the informing person, other institutions may also be consulted as advisors as needed, e.g. the Central Conflict Management, the office of the Dean of Studies or the representative of the respective faculty, the Department of Science Law or the Human Resources Department.

The three **ombudspersons of the University** come from different scientific fields (natural sciences/mathematics, humanities and social sciences) and each of them has a deputy. The three **ombudspersons of the University Medical Center** and their deputies come from various clinical and research fields. This diversity ensures that the ombudspersons are familiar with different specialist cultures and that in the case of bias of an ombudsperson there are alternatives.

SUSPICION OF RESEARCH MISCONDUCT – WHAT TO DO?

The ombudspersons examine the plausibility of a concern, can advise on further action and mediate conflicts.

→ *Ombudspersons can be engaged for the investigation of allegations and for arbitration.*

If there is an initial suspicion of research misconduct and the informing person wishes to initiate a closer investigation against a researcher, the ombudspersons carry out an **ombuds procedure** as an **Ombuds Committee** of the University or the University Medical Center. The allegations are then investigated in detail and, with the consent of the informing person, the accused person is questioned in writing or orally. Statements from further persons may also be obtained to clarify the facts of the case. The proceedings may be discontinued if the suspicion of research misconduct is not confirmed, if a settlement can be reached between the informing and the accused persons, or if conditions laid down by the Ombuds Committee are fulfilled accordingly.

If the allegation relates to dissertations or postdoctoral theses, the Ombuds Committee examines whether there is likely to be an initial basis for suspicion. If this is the case, the Ombuds Committee submits the case to the responsible faculty or the doctoral/habilitation committee of the University Medical Center for examination.

Anonymous reports will only be followed up if there is a suspicion of serious research misconduct and it is possible to verify the suspicion on the basis of the material supplied (in particular in the case of allegations of plagiarism).

→ *An ombuds procedure is not initiated without the consent of the informing person.*

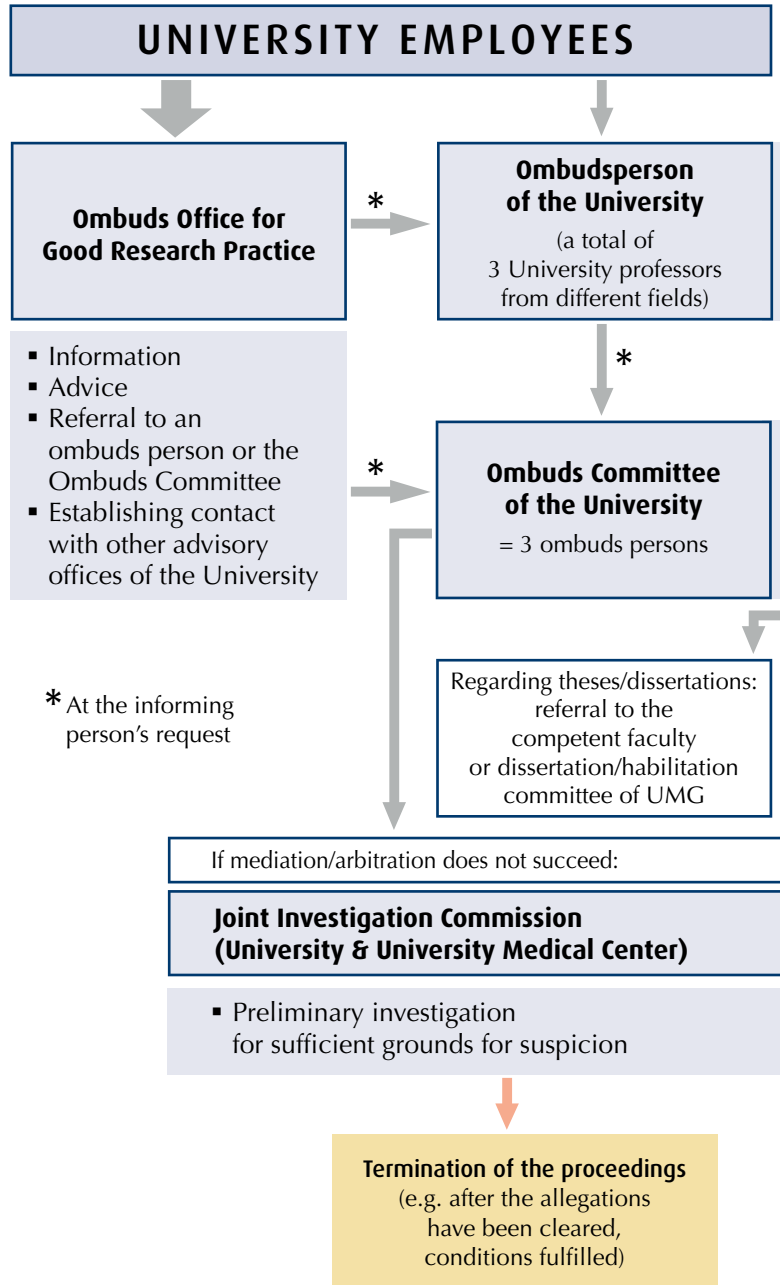
The withdrawal of a request is possible. On the basis of a personal risk assessment, the informing person can dispense with an ombuds procedure, even if the suspicion of research misconduct is well-founded.

→ *Absolute confidentiality is a matter of course during the consultations and procedures. The informing person is also obliged to treat his or her suspicions confidentially.*

In cases where the suspicion of a research misconduct can be substantiated by an ombuds procedure and/or no agreement can be reached by the Ombuds Committee, the procedure is referred to the **Joint Investigation Commission** of the University and the University Medical Center, which consists of five persons, including a judge in a presiding function. If there are sufficient grounds for suspicion, the Investigation Commission may open formal investigation proceedings. If the suspicion is not confirmed or a minor misconduct is evident, the proceedings will be discontinued, if necessary, subject to conditions. If there is evidence of serious research misconduct, the Investigation Commission will issue a recommendation for sanctions to the President of the University or the Dean of Faculty of Medicine.

The diagram on the next page illustrates to whom members and affiliates of the University and University Medical Center can turn if they suspect research misconduct, which procedural steps are possible and what consequences may result from this.

The Ombuds Procedure



at a Glance

EMPLOYEES OF THE MEDICAL CENTER

- Advice
- Examination of allegations
- Mediation/arbitration

Ombudsperson of the Medical Center

(a total of
3 University professors
from different fields)

*

- Examination for initial suspicion → if so:
- Ombuds procedure is carried out
- Mediation/arbitration

Ombuds Committee of the Medical Center

= 3 ombuds persons

Termination of the procedure

(e.g. after the allegations
have been cleared,
conditions fulfilled)

Referral to the Joint Investigation Commission

(5 members, including 1 judge, 1 representative of UMG,
at least 2 non-university members)

- Sufficient grounds for suspicion:
opening of formal investigation proceedings

In the case of proven misconduct
recommendations for sanctions to
the President of the University or
the Dean of the Faculty of Medicine

EXAMPLES FROM PRACTICE

Expert Advice

A doctoral student* calls the Ombuds Office to inquire whether she must hand over the data she collected during her research to her doctoral supervisor before leaving the institute. The doctoral student is informed that her data also belong to the institution and thus to her superior and that the institution is responsible for storing the data of the last 10 years securely and traceably. The doctoral student will be referred to the Rules for Good Research Practice as well as to the University's Research Data Policy. During the consultation, she is also recommended to reach an agreement with her doctoral supervisor on the continued use of data and future co-authorships before leaving her workplace.

→ *Persons with questions on good research practice can contact the Ombuds Office at any time. The Ombuds Office offers confidential advice. If necessary, the Ombuds Office will establish contact with other experts (e.g. the ombudspersons).*

Conflict counselling

– Case 1: A postdoctoral researcher (postdoc) in the natural sciences contacts the Ombuds Office by email because his boss wants her name instead of his as the last author of a manuscript to be submitted shortly, even though she had not contributed anything to its production. The first author is a doctoral student closely supervised by the postdoc. The boss justified her claim to the last authorship with the fact that she had, after all, raised the funds for the project within the framework of which the research in question was carried out.

The postdoc is advised to refer his boss to the rules on authorship contained in the Rules for Good Research Practice, as these would contradict the legitimacy of her claim. In a telephone conversation, he explains that he would rather not risk this because his habilitation success de-

* The female or male form is chosen arbitrarily in the following examples and is not related to the example cases.

depends on the goodwill of his boss. At the enquiry of the Ombuds Office, however, he declares that he agrees to his request being passed on confidentially to one of the ombudspersons particularly experienced in authorship conflicts.

The ombudsperson meets with the postdoc and advises him on an argumentation strategy regarding his boss. The ombudsperson also offers to support him in his negotiations with the boss, in the event that his supervisor should show any lack of understanding. The postdoc then decides to have a conversation with his boss. The discussion is successful, and she withdraws her »claim« to authorship.

→ *The Rules for Good Research Practice provide orientation regarding concrete questions of application. Confidential advice can help those affected to resolve conflicts themselves.*

– Case 2: A professor asks for a meeting at the Ombuds Office in order to obtain advice on an escalated conflict within a research network. It turns out that the experiences described do not give rise to any suspicion of scientific misconduct, but rather that there are signs of general communication problems coupled with a resource conflict. The person seeking advice is referred to the Human Resources Development Department and advised to contact the Central Conflict Management Office confidentially in order to clarify her scope for action.

→ *Not all conflicts in the field of academia are necessarily related to good research practice. The Ombuds Office helps people seeking advice to understand their conflict and, if necessary, establishes contact with other University advisory offices.*

EXAMPLES FROM PRACTICE

Anonymous Reporting

The Ombuds Office receives an anonymous letter, accusing a colleague who received his doctorate at the University of Göttingen eight years previously of extensive plagiarism in his doctoral thesis.

- Case 1: The work or works from which the plagiarism is/are alleged to have originated is/are not specified. In this case, in the absence of reference texts, no examination can be carried out.
- Case 2: A plagiarised work is specified. After a manual review by the Ombuds Committee, the suspicion is either confirmed or not confirmed. If both documents are available in digital form, the dissertation can be checked with the help of plagiarism detection software .

If an initial suspicion has arisen, the Ombuds Committee will forward the result of its review to the responsible faculty or doctoral committee. If necessary, it will decide on the question of the revocation of the doctorate.

→ *An anonymous report of research misconduct is possible in the case of a suspected serious breach of the standards of good research practice, but in most cases, it precludes further investigation of the suspicion.*

Ombuds procedure

A research assistant addresses the Ombuds Committee with the allegation that his academic contribution as co-author had been ignored. His colleague had not mentioned him at all in a manuscript submitted to a high-ranking journal by a number of authors, although he had contributed substantially to the creation of the manuscript by interpreting the data. Nor had he been informed of the submission of the manuscript. The co-authorship to which he was entitled was important for his upcoming application.

In support of his allegation, the research assistant sends documentation of his preliminary work and versions of the manuscript at various processing

stages to the Ombuds Committee. The committee informs the person affected of the allegation and invites him to submit a written statement. His account contradicts that of the informing person. The two parties will be invited separately to hearings, as will two researchers as witnesses who are involved in the project. In order to gain an understanding of the scientific culture in the relevant field, the committee also asks an external expert with the same background to submit a confidential statement.

After evaluating and weighing-up all the information, the Ombuds Committee reaches the conclusion that the allegation of research misconduct is justified. A written justification of this decision is sent to both sides. The accused person is asked to withdraw the manuscript from the publisher and resubmit it after amending the list of authors. If he does not agree, the procedure would be referred to the Investigation Commission.

→ *The Ombuds Committee may make the termination of the procedure dependent on the fulfilment of conditions that correct the research misconduct.*

Proceedings of the Investigation Commission

After initial anonymous allegations, which are also discussed in the media, the Ombuds Committee of the Göttingen University Medical Center (UMG) investigates a journalist's plagiarism allegation against a professor working at a different university. About 30 years previously, the latter had been employed as a habilitation candidate at the UMG at the same time as a doctoral student, who is now also a professor and whose doctoral thesis – as it now turns out – contains text passages and illustrations that are identical with those of the professor's habilitation thesis without any corresponding citation. Who seems to have plagiarized whom is unclear. Both researchers are asked for a written statement regarding the allegations. The journalist who made the allegations is informed of the preliminary investigation.

EXAMPLES FROM PRACTICE

After a detailed and critical examination of the statements, the Ombuds Committee must assume that there is a suspicion of research misconduct: The doctoral student at the time copied parts of the text and illustrations from the habilitation thesis. The committee forwards the case to the Investigation Commission.

On the basis of the statements received, the Investigation Commission requests two further statements from contemporary witnesses, former members of the working group, and consults a subject matter expert. It turns out that both qualification documents emerged as research deliverables from the working group which was organised according to a division of labour. In addition, the commission learns that at the time the data collected in the group were stored in a common data pool and, in accordance with the then common research practice, were available to all members of the working group for qualification work and publications. This not only concerned the data collected during technical investigations, but also textual descriptions of the applied methodology including diagrams. The data was considered to be community property, regardless of who actually collected them. The metric methods shown in diagrams, including their description, were used by all working group members in qualification publications and joint publications.

The Investigation Commission reaches the conclusion that there is no research misconduct and that the scientific qualification of that time is not in question. The similarities found do not call into question the independent scientific result of the otherwise original works. Objectively, the suspicion of plagiarism is obvious, since the habilitation thesis was not quoted in the dissertation. Subjectively, however, due to the research practice customary for the working group at the time, there was no intent of scientifically incorrect behaviour, which is a necessary condition for negligent behaviour. The adoption of text blocks describing the procedures of a working group that was organised according to a division of labour, but containing no scientific statements and findings, did not require

mutual quoting according to the consensus at that time. Only general acknowledgements were the norm. From today's perspective, this approach no longer seems compatible with the principles of good research practice. Research misconduct would be particularly evident if the independent contributions of the members of the working group were not made visible prominently and in sufficient detail.

The proceedings are terminated by the Investigation Commission. All parties concerned, including the journalist, are informed of the decision taken by the Commission.

→ *The evaluation of research misconduct requires careful consideration of the individual case. In order to determine whether it is intentional misconduct, time and culture-specific aspects must also be considered.*

INTERNAL OMBUDS SYSTEM AT THE UNIVERSITY – CONTACT PERSONS AND BODIES

Information on the ombuds system of the University of Göttingen as well as information on contact persons and important documents on the topic of good research practice can be found by clicking on the following link:

www.uni-goettingen.de/ombudswesen

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INTERNAL OMBUDS SYSTEM AT THE UNIVERSITY – CONTACT PERSONS AND BODIES

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ADDITIONAL ADVISORY OFFICES

At the University Level

- ➔ Persons of trust in the faculties and graduate schools
www.uni-goettingen.de/en/657893.html
Confidential advice for members of the faculties and graduate schools in conflicts of any kind
- ➔ Person of trust / ombudsperson for students:
Meike S. Gottschlich, M.A.
www.uni-goettingen.de/studienqualitaet
Confidential advice for students of the University and the University Medical Center on conflicts and difficulties concerning studies and teaching
- ➔ Central Conflict Management: Dr. Holger Epstein
www.uni-goettingen.de/konfliktmanagement
Confidential conflict advice, mediation, coaching, prevention of conflicts of any kind for employees of the university (with the exception of non-graduate students)
- ➔ Equal Opportunities Officer (University): Dr. Doris Hayn
www.uni-goettingen.de/gleichstellung

Equal Opportunities Officer (University Medical Center): Anja Lipschik
www.umg.eu/karriere/infos-foerderung/gleichstellungsbuero
Confidential advice on conflicts relating to gender equality, sexual harassment/violence
- ➔ Staff Council (University):
www.uni-goettingen.de/personalrat

Staff Council (University Medical Center):
www.personalrat.med.uni-goettingen.de
Confidential advice on personnel measures, breaches of rules, communication

At the National Level

- ➔ German Research Ombudsman
www.ombudsman-fuer-die-wissenschaft.de
Advice for researchers on questions of good research practice and concrete information on possible infractions
- ➔ Ombuds Board of the German Psychological Society
www.dgps.de/die-dgps/das-ombudsgremium
Complementary to local ombudsman service, contact point for questions about good research practice, suspected violations of rules and regulations, and suspected misconduct at the place of work/study.

DOCUMENTS ON GOOD RESEARCH PRACTICE

Within the University

- ➔ Rules of the University of Göttingen Governing the Safeguarding of Good Research Practice (2021)
www.uni-goettingen.de/en/657896.html
- ➔ Research Data Policy of the University of Göttingen (2014)
www.uni-goettingen.de/de/488918.html

National Statements/Position Papers

- ➔ German Research Foundation (DFG) – Guidelines for Safeguarding Good Research Practice. Code of Conduct (2019))
<https://doi.org/10.5281/zenodo.3923602>
- ➔ Recommendations on Academic Integrity. Position Paper of the German Council of Science and Humanities (2015)
www.wissenschaftsrat.de/download/archiv/4609-15.pdf

International Statements/Position Papers

- ➔ The European Code of Conduct for Research Integrity (2017)
https://ec.europa.eu/research/participants/data/ref/h2020/other/hi/h2020-ethics_code-of-conduct_en.pdf
- ➔ Montreal Statement on Research Integrity in Cross-Boundary Research Collaboration (2013)
<https://wcrif.org/documents/354-montreal-statement-english/file>
- ➔ Singapore Statement on Research Integrity (2010)
<https://wcrif.org/documents/327-singapore-statement-a4size/file>





Rules of the University of Göttingen Governing the Safeguarding of Good Research Practice

The Senate of the University of Göttingen adopted the Rules of the University of Göttingen Governing the Safeguarding of Good Research Practice on 29 September 2021 (section 15, sentence 2, and section 41 subsection (1), sentence 1, of the Lower Saxony Higher Education Act (Niedersächsisches Hochschulgesetz, NHG), and section 20 subsection (3) of the Bylaws of the University of Göttingen. The authentic text was published in Amtliche Mitteilungen I no. 49 of 5 November 2021.¹

¹ **Please note** that this is an unofficial translation of the original German text provided for information purposes only. Exclusively the German text is authentic and legally binding as published in Amtliche Mitteilungen I no. 49 (5 November 2021).

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Preamble

¹The present rules serve to ensure good research practice in the long term.

²The University of Göttingen (including its faculties and institutes as well as the University Medical Center Göttingen (UMG), hereinafter referred to collectively as the University, unless otherwise stated) bears responsibility for the organization of research, teaching and the advancement of early career researchers within the framework of its statutory mandate. ³Research is inseparably linked to the teaching and advancement of early career researchers. ⁴It is of particular importance for the University to maintain and promote an atmosphere of openness, creativity and commitment. ⁵Academic integrity is an essential aspect of all research activity. ⁶This includes respectful treatment of people and the environment, as a form of academic commitment. ⁷In the fulfilment of its responsibility, the University makes provisions with these Rules for the communication of the fundamental principles and rules of good research practice, for the assurance of academic integrity, for the structured organization of the ombudsman system, for the appropriate sanctioning of research misconduct as well as its prevention. ⁸The Rules respect academic freedom (§ 5(3) of the Basic Law) and take into account the Code of Conduct “Guidelines for Safeguarding Good Research Practice” of the German Research Foundation (DFG) in the version of July 3, 2019, the recommendation “Good Scientific Practice at German Universities” of the German Rectors’ Conference in the version of May 14, 2013 and the position paper “Recommendations on Scientific Integrity” of the German Council of Science and Humanities in the version of April 24, 2015.

Section I: Good research practice

§ 1 Fundamental principles and rules

(1)¹People engaged in research at the University shall maintain the fundamental principles of academic integrity. ²They shall be responsible for implementing or observing the fundamental values and standards of research work, in particular the rules of good research practice set out in these Rules and appendices – taking into account the specifics of the relevant subject area – in their actions and for standing up for them. ³For the purposes of these Rules, people engaged in research are all members and affiliates of the University who are or have been engaged in academic activity, in particular professors, junior professors, research assistants, associate professors, honorary professors, visiting academics, holders, doctoral students and undergraduates, insofar as they themselves are pursuing or have pursued research projects or are or have been involved in such projects or are or have been involved in research processes in any other way, for example within the context of reviews, as members of research advisory or decision-making bodies or as publishers. ⁴People who are engaged in research also include people who are carrying out a doctoral or postdoctoral project supervised at the University, even if they do not work full-time at the University of Göttingen, as well as employees of the non-academic staff, provided they are active in supporting research. ⁵Fundamental principles of academic integrity and the rules of good research practice include

1. the general principles and standards of research work *lege artis* (that is, performed in the correct manner), in particular
 - a) compliance with the recognised rules of authorship in accordance with § 10 and Appendix II,

- b) maintenance of strict integrity with regard to the contributions of other persons, in particular academic cooperation partners, doctoral candidates, researchers from other facilities in the respective field of research, and former researchers,
 - c) respect for the intellectual property of others, in compliance with the rules of citation,
 - d) complete and correct evidence of one's own and other's preliminary work,
 - e) consistent and self-critical assessment of one's own results and, if necessary, regular discussion of it in the respective working unit (§ 3(2)) including those engaged in research in infrastructural facilities (e.g., laboratories),
 - f) comprehensible and complete documentation of the research process and results, including compliance with the provisions for securing and storing primary data,
 - g) allowing and encouraging critical discourse within the research community,
 - h) disclosure of conflicts of interest in connection with research projects and peer reviews,
2. the consideration of ethical aspects and legal requirements, including the assessment of risks and consequences of research projects and, where necessary, the obtaining of approvals and ethics votes,
 3. the exercise of responsibility
 - a) for the adequate supervision of early career researchers,
 - b) for the management of the respective area of responsibility,and
 4. the observance of special regulations for individual disciplines.

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(2) ¹The fundamental principles and regulations laid down in these Rules shall be binding for those engaged in research. ²The current standards of the DFG may be consulted in the interpretation of these fundamental principles and regulations.

(3) ¹The present Rules shall be published in the course catalogue as well as on the website of the University, and shall be handed to all persons engaged in research on taking up their employment. ²Examination and study regulations, doctoral regulations and habilitation regulations are to refer to these Rules.

§ 2 Prevention

(1) In order to ensure good research practice, appropriate measures shall be taken to prevent misconduct in research as far as possible.

(2) ¹In this context, the University shall exercise its responsibility at all levels, in particular by establishing the framework conditions for research and compliance with respect to ethical and legal standards. ²It shall create and maintain appropriate structures to teach students, doctoral candidates and post-docs working toward their habilitation the principles of academic work and good research practice with respect to these Rules, and in this respect in particular encourage them to be honest and responsible in research, and to point out the risks and consequences of research misconduct. ³This is to be already appropriately addressed in the introductory events of the course of study or degree programme, as well as in regular classes. ⁴The faculties and institutes shall embed the principles of good research practice and its communication in courses or modules in their curricula, examination regulations and study regulations in a clear and transparent manner.

(3) ¹Researchers at all career levels shall regularly update their knowledge of the standards of good research practice and the current state of the art. ²Experienced and early career researchers shall support each other in a process of continuous mutual learning and ongoing training and maintain a regular dialogue. ³Supervisors shall offer doctoral researchers regular opportunities for discussion to clarify questions about the standards of good research practice.

(4) The University shall assume its responsibility towards employed academic staff by informing them once a year through the institutes about the principles of research work and good research practice, with respect to these Rules.

(5) The further training of teachers, as well as the exchange between them, shall be supported by the “Ombuds Office for Good Research Practice of the University” (not including the UMG) (§ 17; hereinafter: Ombuds Office).

§ 3 Managerial responsibility and cooperation in research

(1) ¹The University shall promote the conformity of the actions of its members and staff with the Rules by means of suitable organisational structures. ²It shall provide, as far as possible, the necessary infrastructure for the search of research results already in the public domain and shall lay down binding principles of research ethics and procedures for the appropriate assessment of research projects.

(2) Without prejudice to the responsibility of other bodies, each faculty and institute shall be responsible in its own area for an appropriate organisation of research which ensures that the tasks of management, supervision, quality assurance and conflict settlement are

- a) clearly assigned,
- b) communicated to their members and affiliates in an appropriate manner, and
- c) actually carried out.

(3) ¹Working units within the meaning of these regulations are persons who are closely connected academically and functionally, in particular the members and affiliates assigned to a professorship or subdivisions of an academic facility that are headed by a professor or another working group leader. ²The size and the organisation of the working unit shall be designed in such a way that all those who assume supervisory tasks within the working unit can adequately fulfil their responsibilities, in particular with regard to the transfer of skills, the academic supervision, as well as the supervisory and mentoring duties.

(4) ¹Compliance with the regulations and standards of good research practice is primarily the responsibility of individual researchers and teachers. ²The academic staff involved in a research project shall engage in regular exchange. ³In research working units, this means that the results achieved in the division of labour are communicated to each other, subjected to critical discourse and

compiled in a joint state of knowledge. ⁴The academic staff involved in a research project shall define their roles and responsibilities in an appropriate manner and, where necessary, adapt them to new requirements. ⁵It must be ensured that these roles and responsibilities are clear to all staff at each stage of the research project.

(5) ¹Insofar as researchers perform management tasks, this shall include, without prejudice to the responsibility of other bodies, in particular the duties to provide information in accordance with § 7(5), the organisation of the operation of the facility in such a way as to ensure good research practice, and the verification of compliance with good research practice by staff who is bound by technical instructions, as well as by postdocs working toward their habilitation, doctoral candidates and students, insofar as they are involved in research projects or pursue such projects themselves.

§ 4 Supervision of early career researchers; career development

(1) ¹Researchers shall enjoy a balance of support and personal responsibility appropriate to their career level and shall be given adequate status with corresponding rights of participation. ²Through gradually increasing autonomy, they shall be empowered to shape their careers. ³Their publication activities and the submission of their own research proposals shall be encouraged. ⁴Appropriate measures are to be taken to prevent the abuse of power and the exploitation of dependent relationships.

(2) ¹The faculties and each institute within their areas of responsibility shall bear responsibility for the organisation of appropriate individual supervision of researchers at different career stages in accordance with the respective level of education. ²The faculties shall develop transparent, subject-specific supervision plans, which shall be adopted by the Faculty Council, and otherwise by the respective governing body of the institute, and implemented by the latter.

(3) ¹The acceptance of doctoral candidates obligates them to provide academic supervision. ²Doctoral researchers shall be offered an academic environment that supports their research within the scope of the available resources. ³The concrete supervision of doctoral researchers is primarily the responsibility of the respective supervisors and mentors. ⁴The duty of supervision shall include, in particular, offering doctoral candidates regular academic guidance on their doctoral projects, promoting the drafting of final and qualification works within an appropriate time frame and assessing such work within an appropriate time frame. ⁵Anyone who performs supervisory tasks shall furthermore bear responsibility in their own field for the implementation of supervision, including quality assurance. ⁶Supervisory agreements are to be signed for doctoral projects; the details shall be regulated in the doctoral regulations of the faculties.

(4) ¹The faculties and each institute within their area of responsibility shall promote equal opportunities and career advancement – embedded in the overall concept of the respective institute – for researchers and research support staff. ²Researchers shall be informed about the opportunities offered by University graduate schools and academic human resources development.

(5) Students shall be included in the duties of supervision and information set out in paragraphs (2) to (4) if and to the extent that they are involved in researchers' research projects or are pursuing a research project themselves.

§ 5 Performance evaluation and quality assurance in assessments

(1)¹Originality and quality shall always take precedence over quantity as performance and evaluation criteria; this shall apply in particular to examinations, the awarding of academic degrees and titles, personnel measures as well as the allocation of funds. ²In addition to academic and research performance, other performance dimensions such as commitment to teaching, academic administration, public relations work or knowledge and technology

transfer as well as contributions to the general good of society shall also be included in the performance evaluation, where this is reasonably applicable.

³An individual's approach to research with regard to openness to new findings and a willingness to take risks shall also be included.

(2) ¹With regard to personnel measures, the assessment of performance, which shall be based on the principle of merit (§ 33(2) of the Basic Law), shall refer to qualitative parameters and shall be made transparent; this shall apply in particular to appeal procedures and other appointment and promotion procedures. ²Gender equality and diversity shall be taken into account and (unconscious) bias shall be avoided wherever possible. ³In addition to the categories of the General Equal Treatment Act (*Allgemeines Gleichbehandlungsgesetz*), individual characteristics in *curriculae vitae* (e.g., extended periods of training and qualification, alternative career paths, personal, family or health-related absences or comparable circumstances) shall also be taken into account appropriately when forming judgements, insofar as this is voluntarily stated. ⁴Personnel measures must be implemented using binding criteria and procedures.

(3) ¹In assessment procedures, the independence and impartiality of the assessors shall be guaranteed for quality assurance purposes. ²Researchers involved in the evaluation of manuscripts, funding applications and the suitability of persons shall be obliged to maintain confidentiality. ³The confidentiality of third-party content to which the reviewers gain access precludes disclosure to third parties and the reviewers' own use. ⁴If circumstances exist which could give rise to concern about bias or a conflict of interest, assessors must disclose these to the competent body without delay. ⁵These obligations also apply to members of research advisory and decision-making bodies.

(4) Researchers who assume the function of editor or reviewer shall carefully check that the publication organs for which they perform this task comply with academic standards.

§ 6 Cross-phase quality assurance

(1) ¹Researchers shall carry out each step of the research process *lege artis*.

²This includes identifying relevant and appropriate research questions through careful study of research already made publicly available, taking comprehensive account of the current state of the art when planning a research project, and applying scientifically sound and appropriate methods. ³When developing and applying new methods, researchers attach particular importance to quality assurance and the establishment of standards. ⁴The application of a method usually requires specific expertise, which may have to be covered by suitable cooperative arrangements.

(2) ¹Researchers shall ensure continuous quality assurance. ²This refers, in particular, to compliance with subject-specific standards and established methods, to processes such as equipment calibration, the collection, processing and analysis of research data, the selection and use of research software, its development and programming, and the keeping of laboratory notebooks.

³Researchers use methods to avoid unconscious bias in the interpretation of findings whenever possible. ⁴This also includes examining whether, and if so, to what extent gender and diversity may be of significance to the research project (with regard to the methods, the work programme, the objectives, etc.).

(3) ¹When researchers make their findings public (in the form of publications or also via other communication channels), they shall describe the quality assurance mechanisms applied. ²This applies in particular when new methods are developed.

(4) Researchers should, depending on the subject area concerned, ensure that their research results or findings can be replicated or confirmed by other researchers by describing their methods and materials accordingly.

§ 7 Dealing with research data and materials, as well as archiving and rights of use

(1) Researchers must ensure that research data are handled in accordance with the requirements of the respective discipline.

(2) ¹Research data or research results as well as the central materials on which they are based and, if applicable, the research software used, which serve as the basis for publications or qualification work or have been produced in connection with a published research project, are – depending on the subject area – generally accessible and traceable for at least ten years and, if possible due to their nature, stored in the information infrastructure of the University of Göttingen including the *Gesellschaft für wissenschaftliche Datenverarbeitung mbH* (GWDG) (i.e. in central facilities such as the eResearch Alliance of SUB, GWDG and UMG as well as in subdivisions) or in a subject-relevant external information infrastructure, taking into account current technical and organisational standards as well as § 9(5). ²Research data and research objects which, due to their nature, cannot be retained for the period specified in sentence 1 may be subject to shorter retention periods; the reasons for this must be clearly explained. ³The retention period shall commence on the date on which the research data are referenced in a publication or qualification work. ⁴In the case of external storage, it must be ensured that archiving requirements and periods comply with these regulations. ⁵If there are factual reasons for not retaining certain data, those who collected the data or in whose area of responsibility the data were collected shall state this; responsibility for this decision lies with the heads of the research project in which the data were collected.

(3) The determination of separate retention periods pursuant to paragraph (2), sentence 2 for a subject (including its subdivisions) shall be made in a separate annex by resolution of the Senate on the proposal of the technically responsible Faculty Council, or in the case of interdisciplinary matters on the consensual proposal of the technically responsible Faculty Councils.

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(4) ¹Research data as defined in paragraph (2) are data generated in the course of research projects, e.g., through digitalisation, research into source material, experiments, measurements, surveys or questionnaires. ²Research materials serving as objects of investigation (e.g., specimens, cell cultures, material samples and archaeological finds, biological material) with which research data were obtained must be conserved and retained for the same period. ³The objective pursued with biological material collection may solely be the promotion of academic research. ⁴The research material (in particular tissue samples and liquid material, but excluding samples, materials, etc., generated in clinical trials or within the framework of research services for third parties) must, as far as possible, be obtained from the patient by means of a procedure for the collection of biological materials. ⁵The passing on or the taking of the research material with the departure of researchers is only permitted with the consent of the University, in matters of University Medicine only with the consent of the UMG. ⁶Research data, research materials, animal models and research equipment may only be taken along if there are no regulations of the University or the respective faculty or requirements of any third-party funding bodies to the contrary.

(5) ¹The head of a working unit shall be responsible for ensuring that the provisions of the handling of research data and research materials are brought to the attention of all academic staff, in particular doctoral candidates, when they commence their academic activities and thereafter at regular intervals, and at least once a year. ²The management may delegate these informational duties to other employees in writing.

(6) Researchers who generate research data or materials shall be responsible for the proper storage of their own research data and materials, in particular within the framework of the facilities created for this purpose.

(7) ¹Documented agreements on the rights to use research data and results should be made at the earliest possible time. ²This applies in particular if multiple facilities are involved in a research project or if it is foreseeable that re-

searchers will move to a different research facility and wish to continue using the data generated by them for (their own) research purposes. ³The use of research data shall be open in particular to those researchers who collect it themselves or have it collected by staff or study assistants. ⁴Researchers who are no longer employed by the University shall be given access to research data and research materials in which they were involved in the preparation of for research and documentation purposes, insofar as the University maintains such data and materials, and insofar as this is legally and factually possible. ⁵Within the framework of ongoing or completed research projects, the authorised users shall decide whether third parties should be given access to the data or be able to make subsequent use of them.

(8) These provisions do not release researchers from the obligation to comply with the legal requirements for the protection of personal data as they result in particular from the EU's General Data Protection Regulation and the data protection laws of the federal and state governments.

§ 8 Documentation

(1) ¹Researchers shall document all information relevant to the generation of a research result as clearly as is required by and is appropriate for the relevant subject area to enable third parties to verify and replicate the result. ²Documentation shall also include individual results that do not support the research hypothesis; selection of results or manipulation of research data shall not be permitted.

(2) ¹The origin of data, organisms, materials and software used in the research process must be identified, original sources cited and subsequent use documented. ²The source code of publicly accessible software must be persistent, citable and documented. ³The type and scope of the data generated in the research process must be described. ⁴So far as concrete professional recommendations exist, researchers shall carry out the documentation according to

the respective guidelines. ⁵If the documentation does not meet these requirements, the limitations and reasons for this must be explained in a clear manner.

§ 9 Publication of research results, provision of public access and correction or withdrawal of research publications

(1) ¹Researchers shall take into account the principle that originality and quality take precedence over quantity. ²A repeated publication of the same results must contain an explicit reference to the first publication. ³This shall also apply to translations of research publications.

(2) ¹If researchers make their research results public, they shall describe them clearly and in full. ²Results that have already been made public must be reproduced completely and correctly, unless the recognised subject-specific standards allow this to be dispensed with. ³Authors shall, as far as possible, ensure that their research contributions are labelled by publishers and information infrastructure providers in such a way that they can be correctly cited.

(3) ¹Researchers shall carefully select the publication medium in which they publish their research results on the basis of, among other things, its quality and visibility in the respective subject area. ²An essential criterion for the selection shall be whether the respective publication medium has established its own guidelines for good research practice. ³In addition to books and specialist journals, academic repositories, data repositories, software repositories and blogs can also be considered as publication medium. ⁴The scientific/academic quality of a contribution does not depend on the medium in which it is made publicly accessible. ⁵This shall also apply to the assessment of cumulative qualification works.

(4) ¹If researchers have made findings publicly available and subsequently become aware of significant inconsistencies or errors or if they are made aware of them by third parties, they shall correct them. ²Those involved in a research

project, including cooperation partners, shall be informed as necessary.³If the discrepancies or errors are the reason for the retraction of a publication, authors shall immediately request the publisher or infrastructure provider to correct or retract the publication and mark this accordingly.⁴If the responsible authors and editors involved do not take action, the University shall initiate the measures it is able to take.

(5) ¹In consideration of the currently valid version of the University's Research Data Policy, which promotes and supports free access to research data, all researchers working at the University are required to make their research data publicly accessible as promptly as possible, provided this does not conflict with the rights of third parties (in particular data protection, copyright, *know-how*). ²Researchers decide autonomously – with due regard for the conventions of the relevant subject area – whether, how and where to make their results publicly available. ³If, in individual cases, there are reasons for not making results public, this decision must not depend on third parties.

(6) ¹In the interest of traceability, connectivity of research and re-usability, researchers should, as far as possible and reasonable, deposit the research data, materials and information on which the results are based, the methods applied and the software used in recognised archives and repositories. ²In depositing, the FAIR principles (“**F**indable, **A**ccessible, **I**nteroperable, **R**e-Usable”) should be followed. ³Software programmed by researchers themselves shall be made publicly available with indication of the source code or, in the case of provision specifically for third parties, shall be provided with an appropriate license.

§ 10 Authorship

(1) ¹All persons named as authors of a publication must be entitled to authorship and all persons entitled to authorship must be named as authors. ²Persons shall be entitled to authorship if they have made a genuine, identifiable con-

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tribution to the scholarly content of a publication. ³Subject-specific standards are to be observed when checking whether a contribution is genuine and identifiable.

(2) ¹Only those people may be designated as authors of an original research publication who, measured against the standards of the respective discipline, have contributed in a research-relevant way to the conception of the studies or experiments, to the development, analysis and interpretation of the data or to the drafting of the manuscript itself and have agreed to its publication, i.e. who are responsible for it. ²Whoever does not contribute to a publication in a research-relevant way, in particular merely makes individual corrections to a manuscript, gives mere suggestions or provides certain methods, as is usual, for example, in the supervision of research work or in the editing of publications, does not thereby become a (co-)author. ³Neither the status of a former or current management of a facility nor the status of a superior can establish a co-authorship; the so-called 'honorary authorship' is inadmissible. ⁴Further details are set out in Appendix II.

(3) ¹Authors bear joint responsibility for the research content of the publication, unless this is explicitly stated otherwise. ²In the case of a collective of authors, especially the prominent members (e.g., first, corresponding and senior authors) must assume responsibility for the adherence to good research practice in relation to the entirety of the work, from its commencement up to publication. ³The agreement to be named as co-author establishes the co-responsibility for ensuring that the publication meets academic requirements. ⁴Co-authors are responsible for the correctness of their own contribution as well as for ensuring that it is incorporated into the publication in an academically justifiable manner.

(4) ¹Insofar as research work has been drawn up jointly by several research units, the authorship shall be shared by all the participating researchers of these research units, provided that they meet the requirements of paragraphs (1) and (2) and of Appendix II. ²The share of the individual researchers or research units' contribution shall be documented.

(5) ¹The sequence of authors must be a joint decision on the part of all co-authors. ²The decision as to the order in which authors are named is made in a timely manner, normally no later than when the manuscript is drafted, on the basis of comprehensible criteria that reflect the practices in the relevant subject areas.

(6) ¹All co-authors must grant the approval of a manuscript for publication in writing or in text form. ²Without sufficient reason, consent to the publication of research results may not be withheld. ³The refusal of consent must be justified with verifiable criticism of data, methods or results.

(7) If unpublished research results of other persons are cited or findings of other facilities are used in a manuscript intended for publication, their written consent must be obtained.

(8) If individual researchers are named as co-authors in a publication without their consent, and if they find themselves unable to give their consent subsequently, they are expected to expressly object to their being named as co-authors vis-à-vis the person primarily responsible and/or the editorial office of the publication medium in question or the publishing house.

§ 11 Legal and ethical frameworks

(1) ¹Researchers shall handle the constitutionally granted freedom of research responsibly by being aware of the risk of misuse of research results and by using their knowledge, experience and skills in such a way that risks can be identified, assessed and evaluated. ²With regard to research projects, a thorough assessment of the potential consequences of the research shall be made, taking ethical aspects into account.

(2) Researchers shall respect the rights and obligations, in particular those arising from legal requirements or contracts, and seek approvals and ethics statements where necessary.

Section II: General rules of procedure and organisation

§ 12 Duty to inform, bodies and offices

(1) The Presidential Board shall have the superordinate responsibility for the notification of the fundamental principles and rules of good research practice.

(2) The following bodies and units shall serve to support the performance of the tasks in accordance with the present Rules:

a) the ombudspersons and the Ombuds Committee of the University (excluding the UMG) (§ 13 and 14) and of the University Medical Center (§ 28 and 29) respectively, and the Joint Ombuds Committee (§ 30(2)), and

b) the Joint Investigation Commission for the University in accordance with § 14, as well as

c) the Ombuds Office (§ 17) or the Office for Ombudsman matters of the University Medical Center (hereinafter: UMG Ombuds Office) (§ 31).

(3) ¹The Presidential Board shall ensure, as far as possible, that the ombudspersons and the members of the Investigation Commission are familiarised with their work, provided with administrative support and otherwise relieved of their workload. ²The Presidential Board shall ensure that the ombudspersons and the members of the Investigation Commission are supported in terms of content, in particular by providing them with the information they deem necessary and with expert advice. ³The Presidential Board shall ensure that the Ombuds Office, the names of the ombudspersons and the members of the Investigation Commission are made known to the members and staff of the University and, moreover, are freely accessible in an easily accessible place.

§ 13 Ombudspersons (not including the UMG)

(1) The Senate shall appoint three members and their respective personal deputies from the University lecturers' group to serve as ombudspersons from the fields of

- a) Humanities (Faculty of Humanities, Faculty of Theology),
- b) Law, Social Sciences and Economics (Faculty of Law, Faculty of Social Sciences, Faculty of Economics) and
- c) Life Sciences, Mathematics and Natural Sciences (Faculty of Agricultural Sciences, Faculty of Biology and Psychology, Faculty of Chemistry, Faculty of Forest Sciences and Forest Ecology, Faculty of Geoscience and Geography, Faculty of Mathematics and Computer Science, Faculty of Physics).

(2) ¹Suitable academics with management experience shall be selected as ombudspersons. ²They should have experience in teaching and in the training of early career researchers as well as be familiar with the implementation of research projects – also in an international context.

(3) ¹The term of office shall be four years. ²A maximum of two terms of office are possible. ³After retirement, a professor may continue to serve as ombudsperson until the end of the term for which they were appointed. ⁴If, at the end of their term of office, an ombudsperson is involved in a procedure that could not be concluded by that time, they shall remain responsible for this procedure in place of their successor even beyond the end of their term of office until its conclusion, provided they are a member or affiliate of the University.

(4) ¹The ombudspersons shall advise as neutral contact persons in questions of good research practice and in suspected cases of research misconduct. ²Their work shall be guided by the goal of mediating between the parties involved in the proceedings, insofar as this is possible and objectively justified. ³In addition, they shall in particular have the task of advising on and checking the plausibility of the suspected cases submitted to them.

§ 14 Ombuds Committee (not including the UMG)

(1) The ombudspersons in accordance with § 13(1), sentence 1, shall together constitute the Ombuds Committee.

(2) The Ombuds Committee is responsible in particular for carrying out the ombuds procedure, as well as for advising the Presidential Board on fundamental questions of good research practice, including the issuing of recommendations.

(3) The Ombuds Committee shall elect from its midst a chairperson, as well as a deputy.

§ 15 Joint Investigation Commission of the University

(1) ¹The Senate shall, on the proposal of the President, appoint the members of the Joint Investigation Commission (hereinafter: Investigation Commission), as well as one personal deputy each. ²The Investigation Commission shall consist of five suitable people, one of whom must be qualified to hold judicial office, and at least two of whom shall come from outside the University. ³One member must be a member of the Faculty of Medicine, appointed by mutual agreement between the Faculty Council of the Faculty of Medicine and of the Executive Board.

(2) The Investigation Commission shall be responsible in particular for the formal investigation of allegations of misconduct in research.

(3) ¹The Investigation Commission shall select from its midst a chairperson. ²The chair may only be occupied by a member qualified to hold judicial office. ³If the chairperson is unable to attend, the deputy appointed by the Senate shall act as chairperson; sentence 2 shall apply *mutatis mutandis*.

(4) ¹The term of office of the members of the Investigation Commission shall be four years. ²A maximum of two terms of office are possible. ³After retirement, a professor may continue to serve as a member of the Investigation

Commission until the end of the term for which they were appointed. ⁴If, at the end of their term of office, a member of the Investigation Commission is involved in an investigation procedure which could not be concluded by that time, they shall remain responsible for this procedure in place of their successor beyond the end of their term of office until its conclusion.

§ 16 Joint regulations for the ombudspersons, the ombuds committees, the Joint Ombuds Committee and the Joint Investigation Commission

(1) ¹The ombudspersons and the members of the Investigation Commission shall work independently, and shall not be bound by instructions. ²If grounds for disqualification or concerns about bias under § 20 and 21 of the Administrative Procedure Act (*Verwaltungsverfahrensgesetz*) exist with respect to a member, the deputy appointed by the Senate shall take their place. ³The body shall determine whether a case in accordance with sentence 2 exists; the person affected by the reason for exclusion or the concern of partiality shall not participate in this decision.

(2) ¹A member of the Presidential Board, the Executive Board, the University Foundation Committee of the University of Göttingen Foundation, the Foundation Committee of the Göttingen University Foundation of the University Medical Center, or of a Dean's Office may not be appointed as a member or deputy of a body under these Rules. ²The office as ombudsperson or member of the Investigation Commission ends with the beginning of the term of office as a member of the Presidential Board, the Executive Board, the Foundation Committee of the University of Göttingen, the Foundation Committee of the University Medical Center, or of a Dean's Office.

(3) ¹The chairperson shall carry out the ongoing business of the body. ²In urgent matters, the chairperson shall take decisions and measures in place of the body if its decision cannot be acquired in good time; the body shall be informed thereof without delay.

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(4) The chairperson may determine that one member or several members of the respective body prepare or carry out, in particular, the clarification of the facts in whole or in part.

(5) ¹The meetings of the bodies shall be convened and chaired by the chairperson. ²A body shall be deemed to be a quorate when the meeting has been duly convened, and in the case of the Ombuds Committee at least two members, and in the case of the Investigation Commission at least four members, including the chairperson or his/her deputy, are present. ³A meeting is duly convened if the members receive the invitation by the chairperson or the body appointed by them in writing with a notice period of at least one week. ⁴In urgent cases or with the consent of all members and the other parties to the proceedings invited to the respective meeting, the period of notice may be reduced to up to one working day. ⁵The meetings of the bodies shall not be public.

(6) A decision in accordance with § 21(3), sentences 3 and 4, § 22(2) and (4), § 23(2), § 24(3) and § 25(4) shall be in writing, reasoned and signed by the ombudsperson or the chairperson of the body; written format shall also suffice for the communication of the decision.

(7) The files of the ombuds proceedings, special proceedings and investigation proceedings shall be retained for 30 years after the conclusion of the proceedings; retention shall be effected by the Ombuds Office for all proceedings of the bodies in accordance with these Rules.

§ 17 Ombuds Office for Good Research Practice at the University (not including the UMG)

(1) The Ombuds Office shall be responsible for providing administrative support to the persons and bodies referred to in § 13 to 15; in particular, guidance of the respective ombuds proceedings and the administration of files shall be incumbent on the Ombuds Office.

(2) The Ombuds Office shall furthermore be responsible for the following tasks:

a) It shall advise people who suspect research misconduct at their request and, in particular, shall inform them about their options and the procedural steps to be taken in the event of initial suspicion of research misconduct (§ 21(1) and (3), § 22(1)). It shall only inform the Ombuds Committee of a specifically stated suspicion with the consent of the person providing the information. The right of a person to directly turn to an ombudsperson or the Ombuds Committee remains unaffected.

b) It shall be responsible for contact with other advisory bodies of the University. Matters which do not fall within the competence of a person or body in accordance with § 13 to 15 shall be forwarded by it to the responsible University office on request.

c) It shall advise people implicated in events of research misconduct.

d) It shall be responsible for coordinating and supporting measures to ensure good research practice and for coordinating the exchange of experience on the topic of good research practice in the University.

e) It shall support the development and implementation of courses for the teaching of good research practice, the further training of teachers as well as their exchange with each other.

§ 18 General procedural provisions

(1) ¹In order to protect in particular the people providing information and the people affected by suspicion and to ensure successful handling, the activities of the bodies and offices in accordance with § 12(2) shall be confidential. ²Confidentiality shall also be maintained beyond the conclusion of the proceedings, unless provided otherwise. ³The parties to the proceedings shall be informed separately of this obligation.

(2) ¹A person under suspicion shall be presumed innocent. ²The person affected by the suspicion shall in principle not incur any disadvantages to their own research or professional advancement resulting from the investigation of the suspicion until such time as research misconduct has been formally established.

(3) The person doing the informing shall not incur any disadvantages to their own research and professional advancement as a result of expressing suspicion of research misconduct, even in the case of research misconduct that has not been proven, provided that the report of the suspicion was made in good faith.

(4) ¹If the name of the informing person is known, it shall be treated confidentially and shall also be communicated to other parties to the proceedings only with the consent of the informing person. ²The situation shall be different if and insofar as there is a statutory obligation to disclose the name of the person informing or if the person affected by the suspicion cannot otherwise defend themselves properly.

(5) ¹The person informing and the person affected by allegations of research misconduct shall have the right to comment at every stage of the proceedings, but the person informing shall generally only have the right to comment until the final decision of the Investigation Commission. ²The informing person and the person affected by suspicion may consult a person enjoying their confidence as counsel. ³Witnesses may only be assisted by a lawyer. ⁴People affected by suspicion of research misconduct may not be consulted as counsel.

⁵The person affected by the suspicion of research misconduct or their counsel may, upon request, be granted access to the files by the chairperson of the respective body; access to the files shall not be granted insofar as this conflicts with the interests of other parties to the proceedings worthy of protection and the proper defence is not thereby impaired.

(6) Proceedings in accordance with these Rules shall be expedited.

(7) ¹If the suspicion relates to misconduct in research dating back more than ten years, proceedings shall not be opened. ²As a departure from sentence 1, the Ombuds Committee shall open proceedings if concrete circumstances have subsequently emerged that give rise to the urgent suspicion of particularly serious research misconduct with lasting repercussions. ³Under the same conditions, the Ombuds Committee may reopen an ombuds procedure that had been discontinued because there was no initial suspicion or because it could not be confirmed. ⁴The failure to open the proceedings shall not affect other provisions for the sanctioning of such conduct, in particular those of labour, civil and criminal law as well as provisions of the law on universities.

(8) ¹The provisions of § 20 and 21 of the Administrative Procedure Act (*Verwaltungsverfahrensgesetz*) on exclusion due to personal involvement and due to apprehension of partiality, as amended, shall apply *mutatis mutandis* to experts and administrative employees of a body consulted for support. ²The respective body shall decide whether a case in accordance with sentence 1 exists.

§ 19 Procedure in the case of responsibility or partial responsibility of other bodies

(1) ¹Where the matter involves an examination procedure for an undergraduate or postgraduate degree programme (with the exception of doctoral work or postdoctoral work toward a habilitation, unless otherwise specified in paragraph (3)), the investigation shall be carried out by the relevant faculty. ²Sen-

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tence 1 shall not apply if there is suspicion of research misconduct on the part of a person providing guidance or instruction in connection with the preparation of the Bachelor's or Master's thesis.

(2) ¹In doctoral and habilitation procedures, the Ombuds Committee shall first examine whether the initial suspicion of research misconduct is likely to exist.

²The Ombuds Committee shall communicate the result of this examination to the faculty; from this point onwards, the ombuds proceedings shall be suspended. ³The faculty shall first conduct the doctoral or habilitation procedure (including procedures for the withdrawal of a degree) on the basis of the relevant regulations. ⁴On completion of this doctoral or habilitation procedure, the faculty shall inform the Ombuds Committee of the final result, including the reasons, in the event of court proceedings including the final court rulings.

⁵The Ombuds Committee shall resume the proceedings and, taking into account the outcome of the doctoral or habilitation proceedings, shall make the decision in accordance with § 22(2) to (4). ⁶The Ombuds Committee may also discontinue the proceedings if it considers the measure pronounced by the faculty to be sufficient. ⁷If the dean of a faculty is confronted with the suspicion of research misconduct before the body responsible under these Rules, she or he shall refer the informing person to the competent body without further examination.

(3) ¹If a different body has partial responsibility for the matter, e.g., another Ombuds Committee, the Data Protection Commissioner, an animal protection commission and the Animal Protection Officer, this part shall be submitted to the other body in advance for a binding determination of this part of the matter.

²Confidentiality must also be maintained in this case; the provisions of § 18(1) to (5) shall apply *mutatis mutandis* in this respect.

Section I: The facts of the case

§ 20 Research misconduct

(1) ¹Misconduct in research shall be deemed to have been committed if the rules of good research practice set out in Appendix I are violated with gross negligence or wilful intent. ²Misconduct in research may be assessed as minor (*minderschwer*), medium (*mittel*), grievous (*schwer*) or particularly grievous (*besonders schwer*) misconduct. ³The assessment shall be based in particular on the degree of culpability (intent, gross negligence), the manner in which the misconduct was committed and the severity of the consequences for the people and/or institutes affected by the misconduct and for research as a whole. ⁴In assessing whether and how violations within the definition of sentence 1 are to be sanctioned as research misconduct, account shall also be taken of whether and to what extent the person affected by the suspicion has herself/himself taken measures to reconstruct, clarify and rectify any violations of his/her own or has contributed to such measures. ⁵This also applies in particular if such measures have been taken immediately and in an appropriate manner in response to information from third parties.

(2) ¹If several persons are involved in research misconduct, each person shall be individually responsible for it. ²Co-responsibility for another person's research misconduct may arise from active participation in the misconduct of others, from co-authorship of publications containing fabrications, from grossly negligent or wilful neglect of a supervisory obligation as well as, subject to the conditions of paragraph (3), from knowledge of another person's research misconduct.

(3) Research misconduct may also consist of an omission in breach of duty.

Section II: Implementation of the ombuds procedure

§ 21 Initiation, mediation

(1) ¹As a rule, suspicion of research misconduct shall be reported to the Ombuds Office, which shall forward it to one of the ombudspersons. ²The option of contacting an ombudsperson directly or the Ombuds Committee or the supra-regional German Research Ombudsman (*Ombudsman für die Wissenschaft*) instead shall remain unaffected. ³The information shall be provided in writing; in the case of oral information, a written note of the suspicion shall be made and signed.

(2) ¹The work of the ombudspersons shall be guided by the goal of mediating between the informing person and the parties to the proceedings, insofar as this is possible and justified in terms of the grievousness of the alleged misconduct. ²The ombudsperson shall advise on the rights of the parties involved and the procedural steps to be taken in the event of suspected research misconduct, insofar as this information has not already been provided by the Ombuds Office.

(3) ¹The ombudsperson shall examine the suspicion of research misconduct from the point of view of plausibility with regard to its concreteness and grievousness, as well as with regard to the possibility of mediating or clearing up the allegations. ²If the suspicion is not plausibly presented, the ombudsperson may give the informing person the opportunity to substantiate the suspicion within a reasonable period of time, including any supporting documents. ³If no agreement is reached in the course of the mediation efforts, the ombudsperson shall refer the case to the Ombuds Committee. ⁴The referral must include a recommendation as to whether concrete suspicion exists, and whether the proceedings should be discontinued or the examination continued accordingly.

(4) As a rule, an ombudsperson does not investigate anonymously submitted reports on allegations of research misconduct. An exception is possible, in particular, if there is a suspicion of serious research misconduct and sufficiently concrete and reliable facts are presented.

§ 22 Preliminary examination proceedings, verification of facts, decision

(1) ¹The Ombuds Committee shall carry out preliminary examination proceedings; this shall also include a plausibility check, unless this has already been carried out by an ombudsperson. ²The Ombuds Committee shall examine whether initial suspicion exists; § 21(3) sentences 1 and 2, shall apply *mutatis mutandis*. ³In doctoral and habilitation procedures, § 19(2) shall apply.

(2) If there is no initial suspicion, the Ombuds Committee shall discontinue the preliminary examination proceedings, and shall inform the informing person and the person affected by the suspicion (hereinafter: affected person) of this in writing.

(3) ¹If there is an initial suspicion, the Ombuds Committee shall investigate the facts further. ²Insofar as this is possible and factually justified, the Ombuds Committee shall endeavour to mediate between the informing and affected persons; the result of the mediation shall be recorded in the settlement decision (paragraph (4), sentence 1, no. 2) of the Ombuds Committee. ³The Ombuds Committee shall give the affected person the opportunity to comment within a reasonable period, specifying the incriminating facts and evidence. ⁴The Ombuds Committee may give the informing person the opportunity to make a supplementary statement. ⁵The Ombuds Committee may obtain statements from further persons or experts.

(4) ¹Once the hearing procedure in accordance with paragraph (3) has been completed, the Ombuds Committee shall make a decision as follows and communicate it in writing to the affected person:

1. The preliminary examination proceedings are discontinued because the suspicion has not been sufficiently confirmed.
2. The preliminary examination proceedings are discontinued by means of a settlement because the possibility of clearing up the allegations has arisen in the course of the proceedings with the consent of the informing

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and affected persons and intervention due to research misconduct is not (or no longer) necessary; the decision is to contain a deadline by when the conditions are to be met.

3. The preliminary examination proceedings are discontinued due to the determination that the research misconduct is found not to be of a grievous nature; the Ombuds Committee can make the discontinuation conditional on the satisfaction of conditions.

4. The proceedings are handed over to the Investigation Commission; in this case, the decision and the documents are forwarded to the chairperson of the Investigation Commission via the Ombuds Office.

²Communication of the decision to an informing person and their counsel shall take place only if they declare in writing in advance that they will treat the decision as confidential and will not make it available to third parties.

(5) The reasoning for the decision must include, in particular, the nature and grievousness (§ 20(1)) of the research misconduct.

(6) If there is a suspicion of particularly grievous research misconduct, the Ombuds Committee may decide to hand over the proceedings to the Investigation Commission without conducting the preliminary examination proceedings, in derogation from paragraphs (3) and (4).

Section III: Interim proceedings

§ 23 Opposition proceedings

(1) If an informing person makes a plausible case that they themselves suffer direct disadvantages as a result of the research misconduct alleged by them, they may lodge an objection with the Ombuds Committee within two weeks of receipt of the decision, in writing and stating the reasons, if they do not agree with the discontinuation of the ombuds proceedings in accordance with § 22(2) or (4), sentence 1, nos. 1 or 3.

(2) ¹If the Ombuds Committee considers the objection to be admissible or well-founded, it shall resume the ombuds proceedings and take a new decision of its own. ²If it considers the appeal to be inadmissible or unfounded, it shall communicate its opinion in writing to the Investigation Commission.

(3) ¹The Investigation Commission shall reject the objection if it is inadmissible or unfounded. ²If the Investigation Commission considers the objection to a discontinuation under § 22(2) to be admissible and well-founded, it shall return the matter to the Ombuds Committee for the conduct of the ombuds proceedings. ³If the Investigation Commission considers the objection to a discontinuation under § 22(4) sentence 1 nos. 1 or 3 to be admissible and well-founded, it shall open the formal investigation proceedings (§ 25). § 22(3) or (5) shall apply *mutatis mutandis*.

§ 24 Preliminary proceedings

(1) Following the referral of the case by the Ombuds Committee (§ 22(4), sentence 1, no. 4), the Investigation Commission shall examine whether sufficient grounds for suspicion exist for the opening of formal investigation proceedings (§ 25).

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(2) In order to prepare the decision, the Investigation Commission may continue to clarify the facts of the case and, in particular, request the affected person and the informing person to provide additional information.

(3) The Investigation Commission shall decide whether the proceedings in the written procedure shall be discontinued without a formal investigation, or whether the formal investigation procedure (§ 25) shall be opened.

Section IV: Implementation of the formal investigation proceedings

§ 25 Formal investigation proceedings by the Joint Investigation Commission

(1) The provisions of the German Code of Criminal Procedure (*Strafprozessordnung*) and of the German Courts Constitution Act (*Gerichtsverfassungsgesetz*) in the currently valid version shall apply *mutatis mutandis* to the formal investigation proceedings, unless provided otherwise by regulations below.

(2) ¹The Investigation Commission shall be entitled to obtain all information and opinions necessary to clarify the facts of the case, while safeguarding the legitimate interests of the persons concerned. ²It shall freely examine the evidence as to whether research misconduct has taken place.

(3) ¹The affected person shall be given the opportunity by the Investigation Commission, stating the incriminating facts and evidence, to make a statement within a reasonable period of time to be set by the Investigation Commission. ²The informing person may be given the opportunity by the Investigation Commission to make an additional statement. ³The Investigation Commission may consult members of the Ombuds Committee in an advisory capacity. ⁴It may obtain statements from further persons as witnesses or experts. ⁵In the case of oral statements, a written note shall be taken.

(4) ¹Once the hearings in accordance with paragraphs (1) to (3) have been concluded, the Investigation Commission shall make a decision as follows:

1. The proceedings are discontinued because the suspicion has not been sufficiently confirmed;
2. The proceedings are discontinued because the possibility of eliminating the allegations has arisen in the course of the proceedings with the participation of the person providing the information and the person affected by

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the suspicion, and intervention on account of research misconduct is not (no longer) necessary;

3. The proceedings are discontinued on the grounds of research misconduct is not a grievous case; the Investigation Commission may make the discontinuation subject to the satisfaction of conditions;

4. The proceedings for proven research misconduct, with a recommendation containing the necessary measures (sanctions), will be submitted to the responsible authority (President or full-time member of the Presidential Board for personnel).

²In the case of sentence 1 nos. 3 and 4, the decision must in particular cover the nature and grievousness (§ 20(1)) of the research misconduct. ³The person affected by the suspicion of misconduct shall be informed of the decision in accordance with sentence 1 in writing without delay. ⁴In the case of a decision in accordance with sentence 1 no. 4, the management of the facility where the person affected by the suspicion of research misconduct works and the responsible Dean shall be informed thereof, in writing. 5§ 22(4), sentence 2, shall apply accordingly.

(5) An internal University appeal procedure against a decision of the Investigation Commission will not be permitted.

(6) In order to protect the personal and academic integrity of a person for whom no research misconduct has been established, the person may in particular be offered:

1. A consultation with the Ombuds Office or an ombudsperson;
2. A written statement by the chairperson of the Investigation Commission that no research misconduct has been established for this person.

§ 26 Sanctioning of research misconduct

(1) ¹If research misconduct has been established by the Investigation Commission, the responsible authority shall decide, taking into account the recommendations of the Investigation Commission, which measures are to be taken in order to sanction the research misconduct and shall inform the office responsible for the respective measure, as well as the chairperson of the Investigation Commission, thereof. ²The responsible authority shall take the circumstances of the individual case and the degree of grievousness of the misconduct into account when making the decision. ³Before the decision is made, the person whose misconduct has been established by the Investigation Commission shall be given the opportunity to comment. ⁴Possible measures are listed in Appendix III.

(2) ¹The responsible authority shall decide whether and which other persons and organisations within and outside the University (third parties), e.g., research organisations, cooperation partners, publishers, authorities, professional bodies and the public, shall be informed of the conclusion of the formal investigation proceedings, provided they have a legitimate interest. ²At this, particular consideration shall be given to the need to protect the interests of third parties, to maintain confidence in academic integrity, to restore the academic reputation of the University and to avoid collateral damage. ³Insofar as the rehabilitation interest or the legitimate interests of the third parties concerned do not conflict with this, the information shall be provided anonymously.

(3) ¹Insofar as an examination process is concerned, the responsibility of the body responsible for sanctioning according to the applicable regulations (e.g., doctoral or habilitation regulations) remains unaffected. ²In this case, the President is responsible for the information according to paragraph 2.

Chapter III

Special regulations for the University Medical Center Göttingen

§ 27 Procedure, responsibilities for the UMG

(1) In the event of suspected research misconduct related to the UMG, the proceedings shall be in accordance with the following regulations.

(2) ¹In matters relating to the UMG, the Board of the UMG (hereinafter: Board) shall take the place of the Presidential Board and the Speaker of the Board shall take the place of the President. ²In relation to a case falling under § 63(6) nos. 1 to 3 of the Lower Saxony Higher Education Act (*Niedersächsisches Hochschulgesetz*, NHG), the President shall take the place of the Board. ³The President, the Presidential Board and the Board shall coordinate in a spirit of trust on matters related to them jointly.

(3) In matters relating to the UMG, in derogation of § 7(3), a body appointed by the Board shall decide instead of the Senate on the basis of utilisation guidelines for the establishment of special retention periods in accordance with § 7(2), sentence 2, as well as in place of the Presidential Board on the transfer or taking away of biological material.

(4) The SUB and the GWDG offer the services for research data management that are institutionally entrenched via the jointly operated eResearch Alliance, in the case of the UMG in cooperation with the institutions there.

§ 28 Ombudspersons for the UMG

¹For ombuds matters at the UMG, the Faculty Council of the Faculty of Medicine shall appoint three persons from the lecturers' group of the Faculty of Medicine as ombudspersons and three deputies for a period of four years. ²§ 13(2) to (4) apply *mutatis mutandis*.

§ 29 Examination by the Ombuds Committee of the UMG

¹The ombudspersons in accordance with § 28 shall form the Ombuds Committee of the UMG (UMG Ombuds Committee). ²In matters relating to the UMG, the UMG Ombuds Committee shall perform the tasks of the Ombuds Committee.

§ 30 Competences of the ombuds committees; Joint Ombuds Committee

(1) ¹If the Ombuds Committee of the University (§ 14) or the Ombuds Committee of the UMG (§ 29) is predominantly responsible for a matter, the proceedings shall be transferred to this body. ²If the Ombuds Committee of the University and the Ombuds Committee of the UMG are unable to agree on the jurisdiction, the President and the spokesperson of the Board shall establish the area of responsibility by mutual agreement.

(2) ¹If no primary responsibility can be established, the Ombuds Committee of the University and the Ombuds Committee of the UMG shall form the non-permanent Joint Ombuds Committee for this proceeding, which shall take the place of the other two Ombuds Committees. ²The Joint Ombuds Committee shall select from its midst a chairperson and their deputy.

§ 31 Office for Ombuds Matters of the University Medical Center

The UMG Ombuds Office shall take the place of the Ombuds Office in matters relating to the UMG; the provision contained in § 16(7) shall remain unaffected.

Chapter IV

Reporting

§ 32 Reporting

(1) The Ombuds Office of the University shall report to the President on the work of the Ombuds Committee and of the Joint Ombuds Committee and the Investigation Commission as well as of the activities of the Ombuds Office in a report drawn up on an annual basis and anonymised to the necessary degree. ²The President shall inform the Senate once a year of the content of the report. ³Insofar as the matter is also related to the UMG, the Ombuds Office shall also report to the Board of the UMG.

(2) ¹The Ombuds Committee of the UMG shall report to the Board on the work of the Ombuds Committee of the UMG in a report drawn up on an annual basis and anonymised to the necessary degree. ²The chairperson of the Ombuds Committee of the UMG shall inform the Faculty Council of the Faculty of Medicine and the Senate once a year about the work of the Ombuds Committee of the UMG.

(3) The President and the Board shall exchange the reports in accordance with paragraphs (1) and (2).

Chapter V

Final provisions

§ 33 Coming into force; transitional provisions

(1) ¹These Rules shall come into force on the day after publication in the Official Announcements I (*Amtliche Mitteilungen I*) of the University of Göttingen. ²At the same time, the Rules for Safeguarding Good Scientific Practice in the version of the announcement of December 22, 2016 (Official Announcements no. 68) shall expire.

(2) By way of derogation from paragraph (1), sentence 2, Chapter I, Section I, and Appendices I to III of the Rules for Safeguarding Good Scientific Practice as published on December 22, 2016 (Official Notices no. 68) shall apply to procedures pending at the time of entry into force of these Rules.

(3) The ombudspersons and members of the Investigation Commission in office at the time of the entry into force of these Rules and their deputies shall continue to hold office until the end of the term for which they were elected before the entry into force of these Rules.

Appendices

Appendix I **List of types of conduct to be regarded as research misconduct**

Research misconduct shall include, but not be limited to:

1. False information

- a. inventing data and/or research results;
- b. falsifying data, sources and/or research results, e.g.,
 - (1) by selecting desirable results and rejecting undesirable ones without disclosing this;
 - (2) by manipulating data, and/or research results, sources, representations of the illustrations;
 - (3) by distorting presentations of data, research results and/or statistical and other analyses, e.g., by a lack of separation of data and their interpretation;
 - (4) by suppressing and/or eliminating relevant sources, data, evidence or text, and knowingly failing to take steps to investigate dishonesty in the handling of data and text;
- c. incorrect information in a letter of application or an application for funding, including false declaration on the publication medium and the status of a publication project;
- d. incorrect information as a member of a selection or review committee on the academic achievement of an applicant, as well as the concealment of facts or circumstances that clearly justify a conflict of interest or concern of bias;
- e. deception of third-party funding bodies regarding points relevant to the decision (including disregarding an existing ban on double funding);

f. as well as the use of the (co-)authorship of another person without his or her consent.

2. Violation of intellectual property

with respect to copyrighted works created by others or research findings, hypotheses, doctrines, or research methods originating from third parties by means of:

- a. the unmarked adoption of third-party content without the required citation (plagiarism);
- b. the unauthorised use of research methods and ideas, in particular as a reviewer or expert witness (theft of ideas);
- c. the unauthorised utilisation of patents, prototypes or software;
- d. the assumption of academic authorship or co-authorship without having made a genuine, identifiable contribution to the research content of the publication, or the denial of a claim to co-authorship acquired by others through genuine contributions;
- e. the falsification of content, e.g., by arbitrarily omitting or adding results and/or information relevant to the subject matter,
- f. the unauthorised disclosure or unauthorised making available to third parties of research results, data, hypotheses, theories and findings that have not yet been published,
- g. knowingly concealing significant relevant preliminary work by others.

3. *Impairing the research activities of others,*

in particular by:

- a. sabotaging research work (including damaging, destroying, removing or manipulating experimental setups, equipment, records, hardware, software, chemicals, materials or anything else that others need for research purposes),
- b. the disposal of research documents, research data or biological materials, insofar as this violates statutory or inhouse regulations or discipline-related recognized principles of academic work,
- c. deliberate misappropriation or theft of research materials, e.g., books, archival records, manuscripts, data sets,
- d. deliberately rendering academically relevant information media unusable;
- e. unauthorised destruction or unauthorised disclosure of research material (the loss of original data from a laboratory constitutes a breach of fundamental rules of careful research practice, and prima facie justifies the suspicion of grossly negligent dishonest conduct);
- f. prevention of the publication of research results, including refusing to consent to the publication of research results as a co-author in breach of good faith;
- g. arbitrarily delaying the publication of a research work, in particular as an editor, reviewer or co-author;
- h. the unreasonable delay of the assessment of an academic qualification thesis or other grossly negligent violations of the duties as a supervisor of a qualification thesis.

LIST OF TYPES OF CONDUCT TO BE REGARDED AS RESEARCH MISCONDUCT

4. Violation of the accepted rules of authorship

See the rules and obligations referred to in § 10 and in Appendix II.

5. Other violations of the rules, violation of the duty of supervision

- a. Breach of confidentiality in an ombuds or investigation proceeding;
- b. negligent dealing with accusations of research misconduct, in particular making deliberately incorrect, unverified allegations or allegations made without sufficient knowledge of the facts.

Appendix II

Recognised rules of authorship

1. The principles of authorship as well as the rights and obligations associated with them are laid down in § 9 and 10 and are specified by the following explanations.

The following contributions usually meet the criteria for authorship or co-authorship, each on its own merits and taking into account subject-specific practice:

- a. significant contribution to the conceptual design of the research project, including the development of methods for its implementation;
- b. substantial involvement in the drafting of the text version of the publication, including the approval of the text version to be published;
- c. development, collection, analysis or interpretation of data, software or sources to a significant extent or modelling for this research project;
- d. significant contribution of experimental or investigational materials, including a significant technical and academic contribution.

2. Particularly, in view of the joint responsibility for the entire publication, the following contributions, each by themselves, shall not be sufficient as a matter of principle, to establish authorship or co-authorship:

- a. organizational responsibility for the acquisition of funding for research projects;
- b. management of a facility, organisational unit or work unit in which the research work intended for publication was carried out;
- c. support of a merely technical nature, e.g., merely providing equipment or experimental material;
- d. provision of standard investigation materials;

- e. transfer of data sets or important research materials;
- f. instruction of employees in standard methods,
- g. involvement in the collection, collation or compilation of data;
- h. technical assistance in data collection, e.g., by purely technical drawing up of graphs or tables from existing data;
- i. reading the manuscript without substantially contributing to its content.

Deviation from individual standards may be made on a case-by-case basis, subject to the approval of the Ombuds Committee, for reasons of international cooperation. If a contribution is not sufficient to justify authorship, this support may be appropriately acknowledged in footnotes, in the preface or in the acknowledgement.

Appendix III

Catalogue of possible consequences of research misconduct

The following catalogue contains possible sanctions and consequences of the decision of a body that is responsible in accordance with these Rules, as well as other legal consequences in the case of research misconduct. If research misconduct is formally established by the Investigation Commission, the supervisor may consider decisions of varying types and scope. Since each case may be different, and also the grievousness of the research misconduct found is relevant to the respective decision, there can be no uniform rules for the appropriate consequences that are suitable in each individual case. These shall, rather, be dependent on the circumstances of the individual case. Without claiming to be exhaustive, the following consequences in particular can be considered, depending on the circumstances of the case:

1. Consequences under service law and labour law

In the case of an existing civil servant or employment relationship with the University, possible consequences under service law or labour law must be examined.

a. consequences under civil service law for tenured civil servants:

- implementation of disciplinary proceedings with the imposition of disciplinary measures. In this context, the following may be considered:
 - reprimand,
 - fine,
 - reduction in remuneration,
 - demotion,
 - removal from civil service employment.

- With retired tenured civil servants:

- reduction in pension,
- demotion,
- revocation of the pension.

b. consequences under labour law in the case of non-tenured employees:

- warning,
- ordinary and extraordinary termination,
- dissolution of contract.

2. Academic consequences:

In particular, it shall be possible to consider the withdrawal of the corresponding academic degree or non-admission to the doctoral procedure by the faculties. If the academic degree was awarded by another facility, the latter shall be informed of the research misconduct.

3. Civil or administrative law consequences,

such as

- a. the issuing of a ban from the premises;
- b. claims for restitution against the person concerned, for example for the return of misappropriated academic material or the like;
- c. claims for removal and injunctions, in particular under copyright law, personal rights, patent law and competition law;
- d. claims for damages by the University;

e. claims for restitution (e.g., related to scholarships, third-party funds, grants under budgetary law).

4. Consequences under criminal or regulatory offence law,,

in the form of criminal charges or criminal complaints, if there is suspicion that research misconduct simultaneously fulfils an offence under the Criminal Code (*Strafgesetzbuch*, StGB) or other criminal provisions or regulatory offences, in particular with regard to

a. violation of personal life and secrecy (e.g., § 202a StGB: spying on data, § 204 StGB: exploitation of the secrets of others);

b. property offences (e.g., § 242 StGB: theft; § 246 StGB: unlawful appropriation; § 263 StGB fraud; § 264 StGB: subsidy fraud; § 266 StGB: embezzlement. This also includes the misappropriation of or fraudulent obtaining of funding);

c. forgery (e.g., §267 StGB: forgery of documents; § 268 StGB: falsification of technical records);

d. damage to property including data alteration (e.g., § 303 StGB: damage to property; § 303a StGB: data alteration);

e. copyright infringements (e.g., § 106 of the Copyright Act (*Urheberrechtsgesetz*): unauthorised exploitation of copyrighted works);

f. life or bodily injury (e.g., § 211 StGB: murder, § 212 StGB: manslaughter, § 223 StGB: bodily injury).

5. Informing the public and the media,

- a. In particular, in the event of particularly grievous research misconduct, the University shall inform other research facilities or academic organisations concerned. If there is good cause, it may be appropriate to inform professional organisations or specialist academic societies.
- b. The University may be obliged to inform affected third parties and the public, in particular for the protection of third parties, in order to maintain confidence in academic integrity or to restore its academic reputation (including the reputation of one of its researchers), to prevent consequential damage, as well as in the general public interest.
- c. Reference is made to § 26(2) of the Rules.

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