

## **Statutes for Safeguarding Good Scientific Practice at the University of Greifswald**

of 24 July 2023

Based on § 51(2) and § 2(1) of the *Landeshochschulgesetz* - LHG M-V (State Higher Education Act) of 25 January 2011 (Law and Ordinance Gazette of Mecklenburg-Vorpommern (GVOBl. M-V) p. 18), last amended on 21 June 2021 (GVOBl. M-V p. 1018), the University of Greifswald hereby passes the following regulations as statute:

### **Table of Contents**

#### Part 1 – Principles of Good Scientific Practice

- § 1 Scope of these statutes
- § 2 Principles of good scientific practice
- § 3 Professional ethics of members of academic staff
- § 4 Organisational responsibility of the Rectorate
- § 5 Responsibility of the heads of academic organisational units
- § 6 Assessment of academic performance
- § 7 Cross-phase quality assurance
- § 8 Persons involved, responsibilities, roles
- § 9 Research design
- § 10 Legal and ethical framework conditions for research
- § 11 Rights of use
- § 12 Methods and standards
- § 13 Documentation
- § 14 Public access to research results
- § 15 Archiving
- § 16 Authorship
- § 17 Publication media
- § 18 Confidentiality and neutrality in reviews and consultations

#### Part II – Ombudspersons

- § 19 Ombudspersons
- § 20 Tasks of ombudspersons

#### Part III – Procedures for Dealing with Academic Misconduct

- § 21 General principles
- § 22 Evidence of academic misconduct
- § 23 Initiation of an investigation
- § 24 Preliminary examination
- § 25 Committee of Inquiry
- § 26 Formal investigation procedure
- § 27 Conclusion of the procedure
- § 28 Sanctions and measures

## Part IV – Final Provisions

§ 29 Transitional provisions, application after leaving the university

§ 30 Entry into force

### **Preamble**

(1) Scientific work requires the correct use of methods. Correspondingly, the University obliges its members of academic staff to comply with the University of Greifswald's code of good scientific practice (Greifswald's Principles of Good Scientific Practice), the guidelines of the German Research Foundation (DFG) including their various detailed specifications, as well as any corresponding rules published by the learned societies or faculties within their respective areas of responsibility.

(2) Members of academic staff at all stages of their careers regularly update their knowledge of the standards of good scientific practice.

(3) Good scientific practice can only be accomplished through the collaboration of all members of the university community. The individual members of academic staff are primarily responsible for observing and conveying the required governing regulations.

(4) When interpreting the following regulations on good scientific practice and other stipulations of these statutes, the corresponding guidelines of the DFG must also be taken into account. The same applies if and as long as corresponding regulations have been postulated by learned societies or faculties within their areas of responsibility.

(5) The following provisions put the DFG's Code "Guidelines for Safeguarding Good Research Practice" of August 2019 into practice. They are legally binding for all persons conducting research or supporting research at the University of Greifswald.

### **Part I**

### **Principles of Good Scientific Practice**

#### **§ 1**

#### **Scope of these statutes**

(1) The applicable principles of good scientific practice as set out in these statutes are published on the University of Greifswald's website. In addition, all employees and civil servants who hold academic positions at the university will be informed about the entry into force of these statutes via email.

(2) All of the University of Greifswald's academic staff are obliged and responsible for observing the rules of good scientific practice in performance of their work tasks.

(3) Rights and duties pursuant to employment and civil service laws are not affected by these statutes.

## § 2

### Principles of good scientific practice

The principles of good scientific practice include, in particular,

1. Working according to the established rules and customs,
2. Maintaining strict honesty with regard to own and third parties' contributions,
3. Consistently questioning all results, and
4. Permitting and encouraging critical discourse in the scientific community.

## § 3

### Professional ethics of members of academic staff

(1) The principles of good scientific practice are taught from the very beginning of academic training (including teaching) and academic careers.

(2) Members of academic staff are committed to the principles of scientific practice.

(3) At all levels of professional careers, members of academic staff undergo a permanent learning process and continuing professional development with regard to good scientific practice. They exchange ideas and support one another.

## § 4

### Organisational responsibility of the Rectorate

(1) The Rectorate is responsible for the observance and imparting of the principles of good scientific practice at the University of Greifswald.

(2) The Rectorate and the management of the faculties create the framework conditions for academic practices to comply with the rules. To this end, they ensure the provision of the required infrastructure for documenting all of the information relevant for obtaining research results, which is required for securing good scientific practice. This provides the prerequisites for members of academic staff to observe legal and ethical standards.

(3) The following measures at the University of Greifswald that have been put down in writing determine clear procedures and principles for staff recruitment and development, in which special emphasis is given to equal opportunities and diversity:

- *Satzung zur Anwendung des Kaskadenmodells* (Statutes on the Application of the Cascade Model)
- DFG's research-oriented gender equality and diversity standards
- Staff development concept for early career researchers and members of academic staff

(4) The following supervision structures and concepts have been established to support researchers at early stages of their careers:

- Guidelines for the doctoral stage
- Orientation guidelines for supporting early career researchers

(5) In accordance with the Guidelines on Transparency in Research at the University of Greifswald passed by the Senate, the University and University Medicine Greifswald provide information on the origin of external funding.

## **§ 5**

### **Responsibility of the heads of academic organisational units**

(1) Heads of academic organisational units are responsible for the entire unit that they manage.

(2) The responsibility of the head of an academic organisational unit includes, in particular, the obligation to provide individual support to researchers in the early stages of their careers that is in line with the overall concept of the university, to foster the careers of academic and academic support staff, and to convey the principles of academic probity.

(3) Collaboration in the academic organisational units must be organised in such a way that the entire unit is able to fulfil its tasks, required collaboration and coordination can take place, and all members are aware of their roles, rights and duties.

(4) The abuse of power and taking advantage of dependent relationships must be counteracted by suitable organisational measures at both individual academic organisational unit level, as well as university governance level.

(5) Members of academic staff enjoy a balanced level of support and self-responsibility that corresponds to the stage of their career.

## **§ 6**

### **Assessment of academic performance**

A multidimensional approach is used to evaluate members of academic staff's performance. The academic performance is an important component of the assessment and is primarily based on qualitative standards. Quantitative indicators can only be included in the overall assessment following differentiation and careful consideration. If provided voluntarily and lawfully permissible, individual circumstances in researchers' lives will be included in the assessment in addition to the academic performance. The scientific quality of a contribution does not depend on the publication medium in which it is made available to the public.

## **§ 7**

### **Cross-phase quality assurance**

(1) Members of academic staff carry out each step of the research process according to the established rules and customs. Quality assurance is continuous and cross-phase.

(2) The origin of data, organisms, materials and software used in the research process shall be labelled with mention of the original sources and guidelines are stipulated for

subsequent use. In so far as it is possible and reasonable, if publicly accessible software is used, it must be documented in a persistent and citable manner with mention of the source code.

(3) Researchers must describe the type and scope of research data generated in the research process.

(4) An essential component of quality assurance is the possibility for other researchers to replicate the results or findings.

(5) If academic findings are made publicly accessible (also by means other than publication), they always state the quality assurance mechanisms in place. If discrepancies or mistakes in such findings are found or pointed out at a later date, they will be corrected.

## **§ 8**

### **Persons involved, responsibilities, roles**

(1) The roles and responsibilities of the members of academic staff involved in a research project must be defined in an appropriate manner and be clear at all times.

(2) If required, the roles and responsibilities shall be adjusted.

## **§ 9**

### **Research design**

(1) When planning a project, members of academic staff consider and acknowledge all aspects of the current state of research. This usually entails careful analysis of previously published research findings.

The Rectorate ensures the required conditions for this analysis within the scope of its budgetary possibilities.

(2) Members of academic staff use methods to avoid (even unconscious) bias in the interpretation of findings, in so far as this is possible and reasonable.

(3) Members of academic staff check whether and to what extent gender and/or other diversity dimensions could apply to the research project.

## **§ 10**

### **Legal and ethical framework conditions for research**

(1) Members of academic staff treat the research freedom they are granted by the constitution responsibly.

(2) The Rectorate is responsible for ensuring the activities of the members of the university community comply with the regulations and fosters the compliance with the rules by providing suitable organisational structures. The Rectorate has developed the following binding principles for research ethics:

- Greifswald's Principles of Good Scientific Practice
- Guidelines on Research Transparency at the University of Greifswald

(3) Members of academic staff respect their rights and duties, especially those linked to legal provisions and contracts with third parties.

(4) If required, members of academic staff obtain authorisations and votes on ethical aspects and submit them to the responsible bodies.

(5) Members of academic staff constantly renew their awareness of the danger of manipulating research results, especially in security-relevant research. They carefully estimate the consequences of research and judge the ethical implications of the research.

## **§ 11**

### **Rights of use**

(1) Members of academic staff conclude documented agreements on the rights of use of the data and results arising from the research project from the earliest possible moment.

(2) Those who collected the data are especially entitled to use the data and results.

(2) Agreements pursuant to sub-sections (1) and (2) remain unaffected if one of the persons involved transfers to another employee.

(4) Authorised users arrange regulations on whether and how third parties shall receive access to the research data.

## **§ 12**

### **Methods and Standards**

(1) Scientifically tested and transparent methods are used in research.

(2) When developing and applying new methods, members of academic staff place special emphasis on quality assurance and the establishment of standards.

## **§ 13**

### **Documentation**

(1) Members of academic staff document all of the information that is relevant for achieving a research result as comprehensibly as required and suitable for the subject area in question in order for the findings to be verified and assessed and to allow for replication. If there are specific recommendations for verification and assessment in the respective subject area, members of academic staff shall create the documentation in accordance with the respective standards. The source code of developed research software must be documented in so far as this is possible and reasonable.

(2) Individual results that do not support one's own hypothesis must also be documented as a matter of principle. A selection of results is not allowed.

(3) If the documentation fails to meet the recommendations pursuant to sub-sections (1) and (2), the corresponding restrictions and reasons shall be explained in a comprehensible manner.

(4) The documentation and research results may not be manipulated. They must be subject to the best possible protection against manipulation.

## **§ 14**

### **Public access to research results**

(1) As a general rule of principle, members of academic staff contribute all their findings to scientific discourse. In so doing, they avoid inappropriately short publications, giving precedence to quality over quantity.

(2) In special circumstances, there may be reasons not to publish results. As a general rule of principle, the decision for making results public may not depend on third parties; instead, members of academic staff decide at their own accord and taking into account the customs of the subject area, whether, how and where they make their results available to the public. Exceptions are permitted, in particular if they affect third parties, pending patent applications, if they have resulted from contract research or they concern security-relevant research.

(3) If results are made publicly available, they are described in full and in a comprehensible manner. As far as possible and reasonable, this also includes providing access to the underlying research data, materials and information, the applied methods and the software used to obtain the results. This occurs in accordance with the so-called FAIR principles: Findable, Accessible, Interoperable, Re-Usable. Exceptions can be made in the context of patent applications.

(4) Self-programmed software is made available together with its source code insofar as this is possible and reasonable. Licensing may be necessary. Work processes are described in detail.

(5) Own and third-party preliminary work must be documented in full and correctly, unless, in exceptional subject-specific circumstances this is unnecessary if own results have been previously published. At the same time, the contents of own publications are only repeated to the amount required for understanding.

## **§ 15**

### **Archiving**

(1) Members of academic staff store research data and results that are made publicly available, as well as the underlying, central materials, in an adequately accessible and comprehensible manner at the institution in which they were produced, or in multi-location repositories. The standards of the respective subject area are decisive. Usually, the research data to be archived is stored as raw data.

(2) The storage pursuant to sub-section (1) spans an appropriate period of time, however at least 10 years. Here too, the standards of the respective subject area are decisive. The storage period begins on the date on which the respective data or results were made available to the public.

(3) Paragraphs 1 and 2 also apply to the research software used.

(4) Members of academic staff must comprehensibly explain any justified reasons as to why certain data is not to be archived or to be archived for a period shorter than defined in sub-section (2).

(5) The Rectorate ensures the provision of the required infrastructure for appropriate archiving.

## **§ 16 Authorship**

(1) An author is any person who has made a genuine, identifiable contribution to the contents of an academic publication, whether in text, data or software form. Whether a genuine and identifiable contribution has been made depends on the subject-specific principles of scientific work and must be judged in each individual case.

(2) A genuine, identifiable contribution has been made, in particular, if a member of academic staff has contributed in at least one of the academically relevant forms listed below:

- Planning and design of the specific research activities described and assessed in the publication (not: simple application for or acquisition of funds for overarching framework projects, institutional units or equipment, purely managerial or supervising positions at the respective research institute or similar);
- Independent collection and processing of data, indexing of sources or programming of software (not: simple performance of routine technical tasks, mere realisation of predefined collection formats or similar);
- Independent analysis, evaluation or interpretation of data, sources or results (not: simple listing of results, simple compilation of sources or similar);
- Development of conceptual approaches or argumentative structures (not: mere advice on third-party drafts, mere introduction of unspecific recommendations or similar);
- Writing the manuscript (not: mere editorial adjustments, mere language-related corrections or similar).

(3) If a contribution is not substantial enough to justify authorship, it can be recognised appropriately in footnotes, in a preface or in acknowledgements. An honorary authorship in which no sufficient contribution was made is just as inadmissible as the granting of authorship due simply to a managerial or supervisory role.

(4) All authors must agree to the final version of the work prior to publication; they carry joint responsibility for the publication unless it has been explicitly indicated otherwise. Agreement to the publication may not be refused without sufficient reason. Moreover,



the refusal is only possible if it is justified by verifiable criticism of the data, methods, or results. Use of artificial intelligence does not release authors from the aforementioned responsibility.

(5) Members of academic staff agree on who is to be named author of the research results in due course – usually whilst writing the manuscript. This agreement must be reached on the basis of transparent criteria and taking into account the conventions of each subject area.

## **§ 17**

### **Publication media**

(1) The scientific quality of a contribution does not depend on the publication medium in which it is made available to the public. In addition to publications in books and scientific journals, results can also be published in subject-specific, data and software repositories as well as blogs.

(2) Authors carefully select the publication medium after consideration of its quality and prevalence in the respective field of discourse. A new publication medium is assessed with regard to its seriousness.

(3) Any person who takes on a role as editor must carefully assess the corresponding publication media.

## **§ 18**

### **Confidentiality and neutrality in reviews and consultations**

(1) Honest behaviour forms the basis for the legitimacy of a judgment-forming process.

(2) Members of academic staff, who review manuscripts, funding proposals or the expertise of persons, are obliged to strict confidentiality in such matters. They immediately disclose any facts to the competent body that could justify any concern of bias.

(3) Confidentiality includes the demand that all information received during performance of these activities is not passed on to third parties and may not be used for personal purposes.

(4) Sub-sections (2) and (3) apply correspondingly to members of academic advisory and decision-making bodies.

## **Part II Ombudspersons**

### **§ 19 Ombudspersons**

(1) There are two ombudspersons and an equal number of deputy ombudspersons at the University of Greifswald. Deputies are provided for cases in which there are concerns of bias with regard to one of the responsible ombudspersons or if the ombudsperson is prevented from performing their function. The question as to whether there are concerns of bias is assessed in accordance with § 21 of the *Verwaltungsverfahrensgesetz - VwVfG* (Administrative Procedure Act) Mecklenburg-Vorpommern. In cases of doubt, the Committee of Inquiry will pass its decision pursuant to Part III. One of the ombudspersons should mainly work with methods commonly used in the humanities and the other should primarily carry out experimental or data-driven research; furthermore, if possible, one of them should be male and one female.

(2) Which ombudsperson shall be responsible is dependent on whether the focus of the accusation focuses on the disregard of methods used in the humanities or the handling of empirical data. In the event of differences of opinion, the ombudspersons shall reach an agreement. If this does not succeed, the decision is passed by the Chairperson of the Committee of Inquiry.

(3) The role of ombudsperson or deputy can only be appointed to academics of integrity who have managerial experience. The subject areas represented at the University of Greifswald shall also be taken into account during the appointment process. The ombudspersons and their deputies may not be a member of the Committee of Inquiry or a governing body at the University of Greifswald during their term of office. The relevant governing bodies are the Rectorate and faculty governances.

(4) Appointment is made by the Rectorate following election by the Senate. The election is preceded by nomination by the Committee of Inquiry.

(5) The period of office for an ombudsperson or deputy ombudsperson is four years. Re-election is permissible once.

(6) Ombudspersons and their deputies receive the required amount of support and acceptance from the Rectorate when performing their duties. In order to improve the effectiveness of the ombudspersons, measures shall be introduced to ease the burden of acting ombudspersons and deputies that correspond to the extent permitted by law, e.g. by reducing their respective teaching load.

### **§ 20 Tasks of ombudspersons**

(1) The ombudspersons and their deputies perform their duties pursuant to § 19 independently, in particular, independently of instructions or informal, case-specific

exertion of influence by the Rectorate. Ombudspersons perform their tasks in a confidential manner, i.e. they respect confidentiality.

(2) All members of the community at the University of Greifswald can contact the ombudspersons in matters concerning good scientific practice, but also in cases of suspected academic misconduct. Alternatively, members of the community at the University of Greifswald are able to contact the national “Ombuds Committee for Research Integrity in Germany”.

(3) The Rectorate ensures that local ombudspersons and their deputies are known at the University of Greifswald. The identity and contact details of the incumbent persons are published on the website.

(4) Ombudspersons act in advisory capacities as neutral and qualified contacts in matters related to good scientific practice and suspected cases of academic misconduct. To the best of their ability, they contribute towards the solution-oriented mediation of a conflict.

(5) Ombudspersons or their deputies treat all requests confidentially and, if necessary, hand suspected cases of academic misconduct over to the respective organisational units of the University of Greifswald (see Part III).

### **Part III**

#### **Procedures for dealing with academic misconduct**

#### **§ 21**

##### **General principles**

(1) Any of the organisational units at the University of Greifswald that check a suspected case of academic misconduct within their realm of responsibility must take measures to suitably protect both the person(s) providing the information (whistle-blower(s)) as well as the person(s) affected by the accusations (suspect(s)). The responsible organisational units are aware that the course of such a procedure and the concluding, possible imposition of sanctions can constitute a considerable encroachment on the legal rights of the accused person(s).

(2) The investigation of accusations of academic misconduct must at all times be conducted in accordance with principles founded on the rule of law, in a fair manner and with the presumption of innocence. The investigation is also held confidentially. Investigations are conducted and decisions made without distinction of person.

(3) Whistle-blowers must make their accusations in good faith. Whistle-blowers must have objective evidence to support possible violations of the standards of good scientific practice. If the whistle-blower is unable to check the facts linked to the accusation themselves, or if, as part of an observed process, there are uncertainties concerning the interpretation of the guidelines on good scientific practice pursuant to Part I, the whistle-blower shall contact the persons defined in § 19(1) and (2) to clarify their accusation.

(4) Neither whistle-blower(s), nor the accused/affected person(s) shall be faced with disadvantages to their own academic or professional careers as a result of the accusation. This applies to the accused person(s) until misconduct has been proven and established. In cases in which persons at early stages of their careers have been accused, the notification shall not lead to delays in their qualification. The writing-up of dissertations and doctoral theses shall not be affected by any disadvantages. The same applies to work conditions and possible extensions of contract.

(5) The whistle-blower must also be protected if it is found that there is no evidence of misconduct. This only applies if the accusation was made contrary to better knowledge.

(6) All organisational units involved in the procedure endeavour to ensure that the entire procedure is carried out as quickly as possible. They take the required steps to make sure that every step of the procedure is completed within a reasonable period of time.

(7) Accusations in which the whistle-blower does not disclose their identity (anonymous notification) are checked if the whistle-blower has provided reliable and sufficient substantial facts that enable an investigation with a reasonable amount of effort.

(8) If the identity of the whistle-blower is known by the organisational unit in charge of the investigation, the unit will treat the identity confidentially and will not name the person to third parties without the consent of the whistle-blower. Consent shall be granted in text form. The name may be disclosed without consent if provided for by corresponding legal regulations. Disclosure can also take place in exceptional circumstances if the accused person is otherwise unable to defend themselves as this depends on the identity of the accusing person. The whistle-blower is informed prior to the disclosure of their identity. They can then decide whether they would like to withdraw their accusation. If they withdraw, their identity will not be disclosed unless there is a legal obligation to disclosure. The investigation procedure may be continued if a consideration of the interests determines that it is necessary in the interest of the scientific integrity in Germany, or in the legitimate interest of the University of Greifswald.

(9) The confidentiality of the procedure will be restricted if the whistle-blower makes their accusations public. The organisational unit responsible for the investigation shall decide freely after a due assessment of the individual circumstances how to deal with the whistle-blower's breach of confidentiality.

## **§ 22**

### **Evidence of academic misconduct**

(1) Academic misconduct is present, in particular, if a member of academic staff at the University of Greifswald intentionally, or as a result of gross negligence, makes false statements in areas related to science, illicitly appropriates scientific achievements of others, or impairs the research activities of others. The special facts of an offence pursuant to sub-sections (5) to (8) remain unaffected.

(2) Provision of false details includes, in particular

- a) the fabrication of scientifically relevant data or research results,
- b) the falsification of scientifically relevant data or research results, in particular, by holding back or disposing of data or results gained during the research process without corresponding disclosure, or by falsifying a depiction or illustration,
- c) the inconsistent depiction of an image and the corresponding assertion,
- d) the provision of incorrect science-related details in a funding proposal or in the context of a reporting duty,
- e) the claiming of authorship or co-authorship of another person without their consent.

(3) Illicit appropriation of scientific achievements of others is present in the following circumstances:

- a) Insufficiently marked adoption of third-party content without the required naming of source (“plagiarism”)
- b) Non-authorized use of research approaches, research results, and scientific ideas (“stealing ideas”)
- c) Non-authorized dissemination of scientific data, theories and findings to third parties
- d) Presumption or non-justified assumption of authorship or co-authorship of a scientific publication, in particular, if no genuine, clearly identifiable contribution was made to the scientific content of the publication
- e) Falsification of the scientific content
- f) Non-authorized publication and non-authorized provision of access to third parties if the scientific work, findings, hypothesis, theory or research approach are yet to be published

(4) An impairment to the research activities of others is present, in particular, in the following cases:

- a) Sabotage of research work (including damaging, destroying, or manipulating experimental set-ups, devices, documents, hardware, software, chemicals, or other objects required by others for research purposes)
- b) Falsification or non-authorized disposal of research data or research documents
- c) Falsification or non-authorized disposal of documents related to research data

(5) Academic misconduct of members of academic staff at the University of Greifswald also occurs – if there is evidence of intent or gross negligence – from

- a) the co-authorship of a publication that contains false details or the illicit appropriation of scientific achievements of third parties,
- b) neglect of supervision duties, if another person has objectively fulfilled the facts providing evidence of academic misconduct in the terms of sub-sections (1) to (4) and this could have been avoided or made considerably more difficult by the required and reasonable amount of supervision.

(6) Academic misconduct also arises from intentional (in the sense of suborning or aiding and abetting) intentional misconduct of others that constitutes misconduct according to these statutes.

(7) Academic misconduct of persons commissioned with assessments or body members at the University of Greifswald occurs, for example, when they intentionally or through gross negligence

- a) make non-authorized use of academic data, theories or findings that they have become aware of as part of their activities as a reviewer or member of a body for their own academic purposes,
- b) violate the confidentiality of the procedure by passing on data, theories, or findings they have learned about during their role as a reviewer or body member to third parties without authorisation,
- c) do not disclose facts or circumstances that could give rise to concerns of bias to the responsible body during the course of their role as reviewer or body member.

(8) Academic misconduct is also present if a reviewer or member of a body at the University of Greifswald, with the intention of gaining an advantage for themselves or another person, does not, contrary to better knowledge, disclose facts during the performance of their duties that reveal the academic misconduct of the other person within the meaning of sub-sections (1) to (5).

## **§ 23**

### **Initiation of an investigation**

(1) Whistle-blowers shall address any suspected cases to an ombudsperson or one of the deputies pursuant to § 19. Notifications of suspected cases shall be made in text form. They can be made orally; in such cases, a transcript must be recorded by the respective organisational unit. If whistle-blowers directly contact a member of the Committee of Inquiry with their suspicions, the member forwards the notification of the suspected case to a competent ombudsperson.

(2) If there are concerns of bias of ombudspersons in their role in procedures pursuant to Part III, in deviation of § 19(1) of these statutes, §§ 22 et seq. of the *Strafprozessordnung* (Code of Criminal Procedure) apply correspondingly. The Committee of Inquiry shall decide pursuant to § 25 of these statutes.

(3) The competent ombudsperson or deputy confidentially checks whether there is sufficient substantial evidence to support a suspicion that a person has committed an offence pursuant to § 22 in a prosecutable manner. As part of these activities, the ombudsperson can perform preliminary investigations; § 24(2) applies correspondingly.

(4) If the ombudsperson comes to the conclusion that there is sufficient evidence pursuant to sub-section (3), they will initiate a preliminary examination. If this is not the case, they can add a corresponding anonymised note to the file.

## **§ 24**

### **Preliminary examination**

(1) As part of the preliminary examination, the ombudsperson shall ask the accused person to comment immediately on the allegation in writing. In doing so, they inform the accused person of the incriminating facts and evidence. A deadline shall be set for comments; this shall usually be four weeks. The deadline can be extended. The comments shall be made in writing with signature, or in text form. Accused persons are not obliged to incriminate themselves.

(2) During the preliminary examination, the ombudsperson may lead the investigations required to clarify the facts of the case as long as these are permissible under higher-ranking law. For example, they can request, obtain and view documents, obtain and store other evidence, obtain opinions, or – if required – obtain external expertise. All of the persons involved shall be requested to treat the enquiry confidentially.

(3) The files shall contain information on the steps that were taken to clarify the facts of the case.

(4) Following completion of the investigations to clarify the facts of the case and once all of the evidence, including the comments from the accused person, have been analysed, the competent ombudsperson shall decide without delay on the further course of the proceedings. The decision is based on whether the evidence deems it more likely that the Committee of Inquiry will determine academic misconduct than terminate the proceedings (reasonable grounds for suspicion). If there are no reasonable grounds for suspicion of prosecutable academic misconduct, the ombudsperson shall discontinue the proceedings. If there are reasonable grounds for suspicion, the ombudsperson shall lead the preliminary examination into a formal investigation, which is conducted by the Committee of Inquiry.

(5) If the proceedings are discontinued, the whistle-blower shall be the first to receive notification of the decision. This shall occur in writing. The important reasons that led to the decision must be named. The whistle-blower is given a right to appeal against the decision within a period of two weeks. If the appeal is lodged on time, the passed decision will be reconsidered.

(6) If the time to lodge an appeal has passed or the appeal has not led to a different decision, the accused person will receive written notification of the decision to discontinue the proceedings with an explanation of the main reasons for the decision.

(7) The whistle-blower and the accused person shall receive written notification if the procedure is transferred to a formal investigation. If the accused person has denied the accusation, a short description must be provided of the reasons why the accusation could not be dropped.

## **§ 25**

### **Committee of Inquiry**

(1) The University's permanent Self-Regulation in Science Committee performs the formal inquiry. It is tasked with ensuring the proper handling of suspected cases of

academic misconduct at the university. The Committee gets involved if members of academic or artistic staff at the university are suspected of academic misconduct and also if consideration is being given to the revocation of a title gained following completion of a doctoral or habilitation project at the university. It comprises one member of professorial staff from each faculty, including University Medicine, as well as two post-doctoral fellows, one of which predominantly works with methods common to the humanities and the other who primarily performs experimental or data-driven research. All members should have considerable experience in research. A substitute is to be named for every member in view of possible conflicts of interest or unavailability. One of the members of professorial staff must be qualified to hold the office of judge; they are Chairperson of the Committee.

(2) The members of the Committee and their respective substitutes are elected for a period of four years by the Senate on proposal from the Dean responsible for the respective member of professorial staff or the Senate's elected representatives of academic staff members, following consultation with the Senate's Research Committee. Re-election is possible. In individual cases, the Committee of Inquiry may call in up to two experts from the subject discipline of the scientific issue being assessed as additional members for consultation, who are not entitled to vote.

(3) In the event of a potential conflict of interest or the unavailability of a member of the Committee for longer than just a short period of time, they shall be represented by their substitute. The provisions of §§ 22 et seq. of the Code of Criminal Procedure apply accordingly to potential conflicts of interest. Concerns of conflicts of interest can be raised by all Committee members with voting rights, by ombudspersons at the university, or by accused persons. The Committee passes the decision in exclusion of the person who is claimed to have a conflict of interest. Non-postponable procedural steps may still be realised.

(4) All Committee members with voting rights have equal voting rights; the Chairperson of the Committee is also entitled to vote. Decisions are passed by simple majority; if there is a tie of votes, the vote of the Chairperson, if they are absent, the vote of their deputy, will be decisive. The Committee only has a quorum if, in addition to the Chairperson or their deputy, at least three further members are present at the hearing.

(5) The members of the Committee and their deputies shall carry out these tasks independently, in particular independently of instructions or informal, case-related interventions by the Rectorate and other university bodies. The tasks are performed confidentially.

(6) The Committee of Inquiry works and convenes confidentially and in private.

(7) The current members of the Committee of Inquiry are displayed on the university website.

## **§ 26**

### **Formal investigation procedure**

(1) The Committee only commences investigations if a person affected has reported themselves in writing or a third party, including an ombudsperson, has reported the



suspected case of academic misconduct in writing. Third parties must report the offence in good faith; deliberate incorrect or wanton allegations can themselves constitute academic misconduct. Neither the person reporting an offence in good faith, nor the person affected by the allegations shall be faced with disadvantages for the own academic or professional development.

(2) Allegations of academic misconduct are investigated confidentially and are subject to the presumption of innocence.

(3) If there are reasonable grounds for suspicion of academic misconduct, the Committee will open proceedings by way of formal notification and schedule a date for a prompt meeting. The person accused will be given at least 2 weeks prior to the meeting to comment on the accusations orally before the Committee (hearing) or in a written statement. § 24(1) Sentence 6 applies mutatis mutandis. The whistle-blower is also given a further opportunity to pass comment. If the accused person refrains from passing further comment, this alone may not constitute any form of disadvantage. The decision must then be made on the documents presented to the Committee.

(4) At its due discretion, the Committee can hear oral statements from further persons if their statement is considered useful for the proceedings. The provisions of the Code of Criminal Procedure apply correspondingly to privileges of witnesses against self-incrimination or incrimination of close relatives.

(5) Every person who is heard by the Committee may be assisted by a person they trust. The Committee must be informed in good time.

(6) The Committee examines whether it is convinced that scientific misconduct has been proven pursuant to the conventional rules of free evaluation of evidence. The Committee's investigations must comply with the principles of a due process. The person affected must be advised on the record, that their statements can have consequences for further procedures related to civil service, employment and other laws. The person affected is entitled to view all of the materials presented to the Committee and to pass comments on these as well as any other kind of collected evidence.

(7) If the person affected repeatedly fails to appear at the hearing before the Committee without a valid excuse, the Committee will present the material in its possession to the respective line manager/superior.

(8) The hearing before the Committee is not open to the public. However, if desired by the person affected, members of the university community can attend the hearing as listeners.

(9) Academic misconduct can only be established if the Committee passes a majority decision to this effect. The deliberations are subject to confidentiality. The Committee's power to discontinue the proceedings due to a lack of sufficient suspicion or on the grounds of insignificance due to minor misconduct remain unaffected. If the procedure is discontinued, the whistle-blower shall not be able to remonstrate the decision.

(10) § 21(8-9) apply mutatis mutandis to possible disclosures of the whistle-blower's identity.

(11) The procedure is suspended in the event of suspected violations of disciplinary/employment law.

(12) The Committee of Inquiry shall submit its final investigation report to the Rectorate in a promptly manner. The report shall also contain the Committee's proposed sanctions. The report must include the underlying reasons for the Committee's decision.

(13) In cases in which academic misconduct has led the competent faculty to strip a scholar of an academic degree, but, in the opinion of the Committee, requires further measures due to the nature of the misconduct, the Committee shall continue its own procedure and inform the Rector.

(14) The documents linked to the formal investigation procedure shall be stored for 10 years.

## **§ 27**

### **Conclusion of the procedure**

(1) The Rectorate shall decide at its due discretion whether the accused person has been found guilty of academic misconduct and whether and which sanctions and measures are to be imposed on them.

(2) If the accused person is a member of the Rectorate, they shall not be involved in the decision-making.

(3) After the meeting, the whistle-blower and the accused are notified of the passed decision and the essential reasons in writing. The parties may only use remedies provided for by law to appeal against the decision.

(4) The decision is also communicated to academic organisations affected by the decision and to third parties who have a justified interest in the decision. The Rectorate decides at its own due discretion whether and how these shall be informed. It also decides whether and how to inform the general public. Notifications in line with this sub-section may be accompanied by a statement of the reasons.

(5) If the stripping of an academic degree is to be considered, the competent organisational units shall be involved in the process.

## **§ 28**

### **Sanctions and measures**

(1) If the Rectorate considers academic misconduct to have been established by the evidence, it may impose one or more of the following sanctions and/or take one or more of the following measures according to the principle of proportionality:

- a) Reprimand the accused in writing
- b) Demand the accused person to retract or correct incriminating publications or to refrain from publishing incriminating manuscripts

- c) Reverse funding decisions or revoke funding contracts if the decision was passed by the University or the contract was signed by the University, including, if applicable, the demand of repayment
- d) For employees at the university: written warning pursuant to employment law, routine dismissal, termination of contract, exceptional dismissal
- e) For civil servants at the university: initiation of a disciplinary procedure pursuant to civil service law with the corresponding designated, and provisional measures
- f) Report the offence to the police or the Public Prosecutor's Office
- g) Report the breaching of a rule to the competent authorities
- h) Assertion of claims under civil law – also by means of preliminary legal protection –, in particular claims of damages, return of property, or abatement/injunction
- i) Assertion of any claims under public law, also by means of preliminary legal protection
- j) Initiation of a procedure to revoke an academic degree or proposal for the initiation of such a procedure.

(2) Sanctions and measures that deviate from those mentioned in sub-section (1) may only be imposed if they are proportionate to the legal and legitimate interests of the accused person.

(3) Measures pursuant to sub-section (1) are not unlawful if they were not issued in the notification pursuant to § 27(3).

## **Part IV Final Provisions**

### **§ 29**

#### **Transitional provisions, application after leaving the university**

(1) Offences related to academic misconduct pursuant to § 22 only apply to offences that were committed whilst these statutes were in force.

(2) The procedural rules of this section only apply to offences that are reported following the entry into force of these statutes. Preliminary investigation procedures and formal investigation procedures that were already underway when these statutes entered into force are completed according to the previously valid procedural rules.

(3) An offence can also be prosecuted if the accused person is no longer scientifically active at the University of Greifswald, but they performed scientific tasks there at the time of the offence.

### **§ 30**

#### **Entry into force**

These statutes enter into force on the day after they are made available to members of the university via publication on the website. The Statutes for Safeguarding Good

Scientific Practice at the University of Greifswald of 24 August 2021 expire at the same time.

Drawn up following a resolution passed by the University of Greifswald's Senate on 19 July 2023.

Greifswald, 24 July 2023

**The Rector  
of the University of Greifswald  
University Professor Dr. Katharina Riedel**

Made public and accessible to all members of the University on 25 July 2023