



**Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of Nursing Education,
Karvenagar, Pune 411052**

Institutional Research Integrity Committee –Board (IRIC)

Standard Operating Procedure (SOP) Version-2 2024-25

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Smt. Bakul Tambat Institute of Nursing Education,
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Institutional Research Integrity Committee –Board (IRIC)
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Maharshi Karve Stree Shikshan Samstha's Smt. Bakul Tambat Institute of Nursing Education (MKSSSBTINE) Affiliated to Maharashtra University of Health Science, Nashik, India		
SOP version-1	Title: MKSSSBTINE Institutional Research Integrity Committee –Board (IRIC) Standard Operating Procedure (SOP) Version-1	
Approved by Principal cum Director of IRIC MKSSSBTINE, Pune	 Signature PRINCIPAL MKSSSBTINE OF NURSING EDUCATION PUNE	Date First Effective: 17/03/2023
Approved by Chairperson of MKSSSBTINE Institutional Ethics Committee	Signature	Date
Approved by Legal Advisor, MKSSSBTINE Institutional Ethics Committee	 Signature	Date 3/2/25
		Release of SOP version- 2



Objective of the MKSSSBTINE Institutional Research Integrity Committee (IRIC):

1. To promote excellent research that aligns with the principles and norms of the Maharshi Karve Stree Shikshan Samstha's Smt. Bakul Tambat Institute of Nursing Education (MKSSSBTINE) Code of Conduct for Research Integrity.
2. To counter research misconduct within the institute..
3. To stimulate transformational processes across MKSSSBTINE research performing department within the institute and research funds organizations (RFOs) to achieve this goal.
4. To involves a mixed-methods, co-creative approach to the development and empirical validation of standard operating procedures (SOPs) and guidelines to cultivate research integrity and reduce detrimental practices in MKSSSBTINE research ecosystem.
5. To describe the policies and procedures for developing, reviewing, revising, and distributing standard operating procedures (SOPs) for the Institutional Ethics Committee (IEC) and IRIC.
6. To establish a standard guideline for faculty researchers regarding ethical, responsible, and accountable publication practices in the institute.
7. To establish guidelines for diploma, UG, PG, and PhD students regarding responsible and ethical publication practices in academic research in the institute.
8. To establish clear procedures for handling violations of research and publication ethics among faculty and students.

Standard Operating Procedure for MKSSSBTINE Institutional Research Integrity Committee –Board (IRIC):

The creation of an MKSSSBTINE Institutional Research Integrity Committee (IRIC) is consistent with the specific recommendations from Government, affiliated University, experts in field and NAAC inspecting members. The IRIC is authorized and appointed in consultation with the Institutional Ethic Committee (IEC), to ensure that the University's policy and procedures for dealing with research misconduct are consistent with the central regulations and emerging best nursing practices. The IRIC will consist of a pool of senior faculty, Ph.D scholars, research



experts in the field to serve as experts for the Inquiry and on Investigation Committees (IC), with expertise and training to participate in Research Misconduct proceedings.

General Guidelines:

- With rigorous methods, the SOPs and guidelines will be developed by experts and key stakeholders and will be offered as flexible tools to develop Research Integrity Promotion Plans.
- This SOP's promotes and maintains to ensure effective functioning of the human research protection program.
- Active researchers in MKSSSBTINE will be surveyed as part of the validation procedure.
- Proposals for appropriate incentives and novel sanctions will be developed to promote adoption.
- The discipline-sensitive SOPs (Medical Surgical Nursing, Mental Health Nursing, Pediatric Nursing, Obstetrical Gynecological Nursing and Community Health Nursing) and guidelines will support the production of sound, novel, trust-worthy knowledge, for tackling the current crisis of nursing innovative vacuum and renew trust in nursing science.
- In turn, a strong research integrity culture and high epistemic quality of research-based knowledge will make a vital contribution to addressing the MKSSSBTINE's current and future challenges in research innovation as pathfinder in the field.
- The IRIC will promote and maximize the feasibility, and impact of nursing project's outcomes in the institute.
- Enhance engagement with key stakeholders in the state, national and beyond in an iterative development, cost benefit assessment in nursing research.
- A strategic communication plan leveraging the support of key partners will be implemented to maximize short, medium, and longer term impacts.
- The IRIC ensure that the research procedures are initiated, revised, and disseminated to staff, IEC members, investigators, and study personnel as well as the procedures for staff training regarding SOPs and maintenance of training records.



Membership:

1. The MKSSSBTINE Institutional Research Integrity Committee (IRIC) members will be constituted with senior faculty, diploma/ UG students, Ph.D. Nursing scholars, external experts in their research field, selected by the IRIC director in consultation with the consultation with IEC chairperson and senior faculty members.
2. The IRIC will be composed of a pool of 15 - 20 senior faculty, chosen research inclined UG students and Ph.D. nursing scholars selected from multiple disciplines.
3. Each IRIC member shall serve a staggered 5-year term with training in the university's research misconduct policy and procedures and in the central regulations. The term of membership for IRIC members is renewable at the discretion of the appointing authority, in consultation with the Research Integrity Officer (RIO) appointed by IRIC director.
4. The IRIC pool will include at least three (3) faculty members that represent the interests of the ANM and GNM researches.

Duties and Responsibilities:

1. IRIC members will be selected to serve as an expert during the Inquiry or appointed to an Investigation Committee for any research misconduct (IC), as needed and shall conduct research misconduct proceedings consistent with the central policies on research misconduct and the university policy on research misconduct.
2. All IRIC members are voting members
3. All IRIC will support research integrity by safeguarding the key elements of honesty, rigor, transparency and the care and respect of all participants in the nursing research field..
4. The IRIC will review the publication proposal from faculty, Ph.D. scholars, PG students and diploma/ UG students and ensure for its originality and authenticity of research content before their research publication to communicate their research finding publicly in responsible manner.

Organization and Process:

1. The RIO (Research Integrity Officer), in collaboration with the IEC chairperson and IRIC director, will select experts for the inquiry or IC (Integrity Committee) members from the pool of IRIC members.



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2. For the purpose of conducting procedures for research misconduct, an IC will always consist of at least three (3) IRIC members.
3. To make sure that university policies and governmental directives are followed, the expert for the inquiry and IC members will collaborate with the RIO.
4. The RIO will choose a new member from the IRIC to replace the conflicted member if it discovers a conflict of interest for any expert for the Inquiry or IC members.
5. Internal or external subject matter experts must be named as temporary appointees to the IRIC and will serve as voting members as needed during the course of an inquiry or investigation if additional substantial subject matter expertise is needed for the duration of a specific inquiry or investigation in any research misconduct.
6. Internal or external subject matter experts shall be named as temporary appointees to the IRIC to serve as non-voting consultants to aid in a specific Inquiry or Investigation when limited experience or expertise is required for specific, focused questions related to an Inquiry or an Investigation.
7. Representatives shall be assigned to the IRIC for any allegations against staff members to serve as non-voting consultants to help with the suggestion of suitable remedial actions or sanctions.
8. The IRIC will convene for training courses offered by the RIO, as needed, pertaining to the University's policy on research misconduct and the laws governing it.
9. The IRIC members shall convene as frequently as necessary for a specific Inquiry or Investigation once they have been chosen to serve in Research Misconduct proceedings.
10. The IRIC will have its general meetings twice every yearly.

Drafting of SOPs:

1. All SOPs are in compliance with central, state, and institutional regulations.
2. In consults with the IEC Chairs and/or IEC members on IEC related issues in developing the SOPs.
3. As appropriate, the IRIC staff distributes copies of newly drafted SOPs to designated IEC Chairs, IEC members, and/or IRIC staff members for review.
4. If the SOP involves coordination with another University administrative office, the IRIC Director, or IRIC staff cooperate with the administrative unit involved in drafting the SOP



and route the SOP to the appropriate individual representing that office for approval and signature.

5. IRIC members ensure that each SOP designates the date on which it originally became effective as well as the most recent revision date, which serves as the currently effective date for the SOP. The most recent revision date indicates that this version is currently in effect.
6. Each SOP contains a revision number, which indicates how many times since their origination IRIC staffs have revised an SOP.
7. The IRIC Director, IEC Chairs, and any appropriate coordinating officials sign and date each SOP. Dissemination of Standard Operating Procedures
8. The IRIC or designee monitors the SOPs and disseminates new SOPs to all IRIC staff members and to the IEC Chairs, Vice Chairs, or members if the SOP involves their activities.
9. The IRIC also circulates a SOP Tracking Form to applicable IRIC staff for their signature to document circulation and review of new SOPs.
10. IRIC staff and/or IEC Chairs or designees are responsible for reviewing the new SOP, signing the attached SOP Tracking Form, and returning it to the IRIC within a reasonable amount of time.
11. According to the IRIC guidance document, "A Principal Investigator's Guide to Responsibilities, Qualifications, Records, and Documentation of Human Subjects Research", PIs are responsible for reviewing and complying with ethical codes, IEC guidance documents (MKSSSBTIBE Handbook on professional conduct), and SOPs relevant to them, to professional practice, and to other applicable regulatory requirements.

Revisions to Standard Operating Procedures:

1. The IRIC Coordinator or designee conducts a periodic review, once a year, or according to workload or need, of the continuing suitability of the SOPs.
2. The Research Ethics Committee will oversee adherence to this SOP.
3. IRIC staff may review SOPs at any time for accuracy/applicability. The IEC/IRIC staff obtains information necessary to update procedures through monitoring of sources including, but not limited to, the HRD Department, ICMR, etc...
4. If significant or applicable changes to procedures become necessary, the IRIC Director, revise the SOP in question as soon as possible, and the IRIC distributes the revisions to the



IEC, IRIC staff, and appropriate individuals representing coordinating administrative offices in a timely manner following the procedures outlined above suspension or deletion of a SOPs.

5. Upon consulting with IEC Chairs, the IRIC Director has authority to suspend or delete a SOP in such circumstances as major policy deliberation, changes in institutional administration, or reorganization of departments, offices or divisions with which the IRIC and IEC have coordination relationships or joint procedures.
6. When an SOP is suspended or becomes obsolete, the IRIC deletes the SOP, informs appropriate staff and/or IEC members, and ensures that IRIC staff removes the SOP from the institute website and database and archive it, as appropriate.

Record Keeping:

1. The IRIC maintains copies of all current SOPs in both hard copy and electronic files. The designated IRIC staff person archives copies of all previous editions of the SOPs in the SOP binder.
2. The IRIC files the SOPs in the SOP binder, and places the electronic files into the SOP folder. The IRIC or designee maintains copies of all original and subsequent revisions of all SOPs indefinitely.
3. IRIC membership form to be recorded in hard copies files by IRIC in charge.

Responsibilities of researcher toward research and publication: This section will be divided into faculty researcher and student as research scholar. All faculty must engage in active professional research work. Faculty should train their junior faculty and student's research scholar in research methodology to produce high quality research and develop a research culture and innovative ecosystem.

1. **Faculty researcher:** This SOP applies to all faculty members involved in research and scholarly publication.

A. Research Integrity & Ethical Conduct

- a) Ensure all research publications are original and free from plagiarism.
- b) Properly cite sources and adhere to institutional and journal-specific plagiarism policies.

B. Data Integrity & Transparency



- a) Maintain accurate, honest, and verifiable research data.
 - b) Provide complete documentation for data collection, analysis, and interpretation.
- C. Ethical Approval
- a) Obtain Institutional Review Board (IRB) or Ethics Committee approval before conducting research involving human or animal subjects.
- D. Conflict of Interest Disclosure
- a) Declare any financial or personal conflicts of interest related to research funding, collaborations, or publication.
- E. Authorship & Contribution: Authorship Criteria:
- a) Follow international guidelines (e.g., ICMJE, COPE) for authorship.
 - b) Ensure that only those who have made substantial contributions are listed as authors.
 - c) Acknowledgment of Contributions through giving proper acknowledgment to non-author contributors such as funding agencies, technical staff, and reviewers.
- F. Responsible Publication Practices
- a) Selecting the Right Journal
 - b) Publish in reputable, peer-reviewed, and indexed journals to maintain academic integrity.
 - c) Avoid predatory or unethical journals.
 - d) Avoiding Duplicate or Redundant Publication
 - e) Do not submit the same research to multiple journals simultaneously.
 - f) Disclose any prior publication of similar data or findings.
 - g) Timely Submission & Communication.
 - h) Ensure timely submission of manuscripts and respond promptly to reviewer comments.
 - i) Keep co-authors informed about submission progress.
- G. Compliance & Institutional Accountability
- a) Adhering to Institutional Policies
 - b) Follow the institution's research and publication guidelines.
 - c) Participate in institutional training on research ethics and scholarly publishing.
 - d) Post-Publication Responsibilities
 - e) Address any post-publication corrections, retractions, or ethical concerns if required.
 - f) Share research findings through institutional repositories in its library, conferences, or faculty presentations in CNE.



- g) Respect institutional policies on intellectual property rights and ensure proper attribution.
- h) Secure necessary permissions before reproducing copyrighted material.

H. Enforcement & Compliance

- a) The Research & Ethics Committee shall oversee adherence to this SOP.
- b) Violations may lead to disciplinary action, retraction of published work, or other penalties as per institutional guidelines.

2. Student researcher: This SOP applies to all student researchers at diploma, undergraduate, postgraduate, and doctoral levels who engage in scholarly research and publication. All final years student must engage in research attitude and contribute to develop research culture within institute.

A. Research Ethics & Integrity

- a) Comply with institutional, national, and international ethical research standards.
- b) Obtain Institutional Review Board (IRB) or Ethics Committee approval for studies involving human or animal subjects.
- c) Ensure research work is original and free from plagiarism.
- d) Properly cite all sources and follow institutional plagiarism policies.

B. Data Integrity & Transparency

- a) Maintain accurate, honest, and transparent research data.
- b) Store and share data responsibly for verification when required.

C. Ethical Approval

- a) Obtain Institutional Review Board (IRB) or Ethics Committee approval before conducting research involving human or animal subjects.

D. Conflict of Interest Disclosure

- a) Declare any financial, institutional, or personal conflicts of interest related to research.

E. Authorship & Contribution: Authorship Criteria

- a) Follow authorship guidelines (e.g., ICMJE, COPE) and include only those who made significant contributions.
- b) Do not engage in ghost, honorary, or gift authorship practices.
- c) Acknowledge individuals or institutions that provided funding, supervision, or technical support.

F. Responsible Publication Practices:



- a) Choosing the Right Journal
- b) Publish in reputable, peer-reviewed, and indexed journals.
- c) Avoid predatory or non-reputable journals.
- d) Avoiding duplicate or redundant submission
- e) Do not submit the same manuscript to multiple journals simultaneously.
- f) Disclose any prior presentation or publication of similar findings.
- g) Timely submission & communication
- h) Submit manuscripts within designated timelines.
- i) Respond promptly to peer reviewer comments and journal queries.

G. Compliance & Institutional Accountability

- a) Adhering to Institutional Policies
- b) Follow the institution's research and publication policies.
- c) Attend research ethics training and workshops.
- d) Post-Publication Responsibilities
- e) Address any post-publication issues such as errors, retractions, or ethical concerns.
- f) Share research findings through institutional repositories in its library, conferences, or symposiums.
- g) Understand and adhere to institutional intellectual property rights policies.
- h) Secure necessary permissions before using copyrighted material.

H. Specific Responsibilities by Academic Level among student researcher:

Academic Level	Key Responsibilities
Diploma	& Conduct ethical research under faculty supervision, avoid plagiarism,
Undergraduate	(UG) and follow basic research integrity principles and publication in
Students	institution journal.
Postgraduate (PG)	Develop independent research skills, engage in peer-reviewed
Students	publication, and comply with university norms and advanced
	research ethics.
PhD Students	Demonstrate high-level research integrity, contribute to novel
	academic knowledge, and take full responsibility for scholarly
	publications.



Actions against violations of SOPs:

This policy applies to all faculty members, diploma/ undergraduate (UG), postgraduate (PG) students, and Ph.D. scholars involved in research and publication.

Types of Violations:

A. Minor Violations (Unintentional or First-time Offenses)

- a) Incomplete citations or improper referencing
- b) Minor errors in data presentation or methodology
- c) Failure to acknowledge contributors properly
- d) Unintentional copyright infringement

B. Major Violations (Serious Ethical Breaches)

- a) Plagiarism (beyond acceptable limits)
- b) Fabrication or falsification of data
- c) Duplicate submission/publication
- d) Unauthorized use of research data
- e) Ghost authorship, honorary authorship, or exclusion of rightful authors
- f) Failure to obtain ethical clearance for research involving human/animal subjects
- g) Conflict of interest concealment
- h) Submission to predatory journals

Actions on Violations:

A. Minor Violations

Offense	Action	Responsible Authority
First-time unintentional plagiarism (low percentage)	Formal warning and mandatory training on citation and plagiarism prevention	Research Ethics Committee members & research guide
Improper citation or	Correction of manuscript before	Supervisor / Research



Offense	Action	Responsible Authority
referencing	approval	Advisor/research guide
Minor authorship issues	Discussion and correction of author list	Supervisor / Research Advisor/ research guide
Unintentional breach of publication ethics	Guidance on ethical publishing practices	Research HOD/ in charge

B. Major Violations

Offense	Action	Responsible Authority
Plagiarism (>10-20% without citation)	Revision, re-evaluation, or rejection of the research work	Plagiarism Review Committee of IRIC
Plagiarism (>40%) or Repeated Offense	Suspension of research privileges for a specified period	IRIC
Data fabrication or falsification	Rejection of research work and disciplinary action	Research Ethics Committee
Duplicate submission/publication	Retraction from journal, official reprimand	Research Office & Journal Editors
Ghost/honorary authorship	Removal from authorship list and official reprimand	IRIC
Failure to obtain ethical clearance for research	Nullification of research, re-submission required	IRIC
Conflict of interest concealment	Formal investigation and possible funding withdrawal	Research Funding Committee/ IRIC



Offense	Action	Responsible Authority
Submission to predatory journals	Advisory warning and future research restrictions	Research Cell

Disciplinary Actions Based on Severity:

A. Faculty Researchers-

First Offense: Formal warning and corrective action (training, manuscript revision).

Second Offense: Suspension of research privileges for a specified period, removal from advisory roles.

Repeated Offenses: Institutional disciplinary action, loss of funding, and possible termination/demotion.

B. Diploma, UG, PG, and PhD Students-

First Offense: Mandatory research ethics training and manuscript revision.

Second Offense: Research rejection, suspension of thesis/dissertation submission for a semester.

Repeated Offenses: Expulsion from the research program or degree revocation in severe cases.

Appeal Process:

1. Faculty / students researcher may submit a formal appeal within 10 working days of receiving a violation notice.
2. Appeals will be reviewed by a special Academic Integrity & Research Review Panel.
3. Final decisions will be communicated within 30 days of appeal submission.



Conclusion

Maintaining ethical research and publication practices is essential for upholding the integrity, credibility, and reputation of both the individual researcher and the institution. By adhering to these guidelines, faculty and students contribute to a culture of academic excellence, innovation, and responsible scholarship, ensuring that research has a meaningful and lasting impact.


IRIC In-charge




Principal/ Director of IRIC

MKSSSBTINE, Pune

PRINCIPAL

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Institutional Research Integrity Committee –Board (IRIC)

MEMBERSHIP FORM

Institution Name:

Date of Application:

1. Personal Information

Full Name: _____

Designation: _____

Department: _____

Employee/Student ID: _____

Email Address: _____

Phone Number: _____

2. Membership type (Tick appropriate option):

Administrator []

Committee In-charge []

Faculty member []

External Expert []

Diploma/ UG students' []

Ph.D scholar []



3. Research Ethics & Integrity Background:

Highest Qualification: _____

Research Specialization: _____

Number of Published Research Papers: _____

Previous Experience in Research Ethics Committees (if any): _____

Any Research Misconduct Cases Handled (if applicable): _____

4. Purpose of Joining IRIC:

(Briefly explain why you wish to be a member of the Institutional Research Integrity Committee.)

5. Declaration & Agreement

I, _____, hereby declare that the information provided in this form is true and accurate. I understand my role and responsibilities as a member of the Institutional Research Integrity Committee and commit to upholding research ethics and integrity in all scholarly activities. I agree to actively participate in meetings, contribute to ethical evaluations, and adhere to the institution's research policies.

Signature: _____

Date: _____



6. Official Use Only (Approval Section)

Reviewed by: _____

Designation: _____

Approval Status: [☐] Approved [☐] Not Approved

Remarks: _____

Signature: _____

Date: _____


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