RESEARCH POLICIES

1.1 External & Internal Funding for Research Projects

Suleman Roshan Medical College Tando Adam Research Department (RD) envision and plan to prepare a certain number of research proposals per year. The faculty will submit their proposals to RD for onward submission to HEC or other funding agencies. The RD shall provide secretarial assistance in the preparation and submission of Research Proposals and will pursue the follow-up with the HEC or other funding agencies.

1.1.1 SOPs for External Funding

1. RD would identify the areas of research and opportunities for potential grant or funding.
2. Research proposals should be relevant to Pakistan's Socio-Economic needs, to be achieved from the forum of SRMC.
3. Faculty Members of the college shall submit their project proposals on the prescribed application form (if any) set by the relevant funding agency to RD for onward submission to concerned funding agency.
4. RD shall provide prescribed application Performa (if any) for research funding on university website.
5. RD will facilitate Faculty Member/Principal Investigator (P.I) to develop a proposal according to the requirements and prescribed forms of the concerned funding agency.
6. All the research proposals for HEC and other funding agencies shall be processed through RD. RD will assess if the proposed project fulfils the requirements of submission to the funding agency.
7. All research proposals shall be submitted to RD well before the deadline set by the funding agency for completion of required formalities. In case of any delay in submission, the RD shall not be responsible and proposals shall be turned down. Proposals completed in all respect shall only be considered for processing and endorsement of the Principal SRMC.
8. The RD shall scrutinize the project proposal in the light of guidelines/procedures, specified by the concerned funding agency. If the project proposal is found complete in all respect, the same shall be sent to the concerned funding agency after completion of codal formalities.
9. RD shall be responsible to get the updates on project proposal submitted to the funding agency(s) during process of scrutiny, review and approval of the same.
10. The Principal Investigator (P.I) of Project shall be responsible to make sure that all communication (written & oral) including replies/answers of queries/observations communicated by the funding agency should be shared/processed through/by keeping RD updated.
11. P.I and Co-PI are required to provide necessary documents to RD, as and when required by the funding agency, within the deadline period. In case of failure, RD shall not be responsible for rejection of application(s).
12. In case of approval of the project from funding agency, the PI will be responsible to complete all the documentation/follow rules and procedures through RD as per requirement of the respective agency.

13. PI of the project will also be responsible to follow the rules and regulations of the concerned funding agency regarding the following:
    a. Project Financial Management
    b. Project General Administration
    c. Project Procurement Management
    d. Project Human Resource Management/Staff Hiring
    e. Project Monitoring and Evaluation

Efforts shall be made to approach the relevant funding agencies for obtaining external funding for the research projects submitted by faculty and students of SRMC. However, in case of non-availability of external funding, SRMC will provide internal grant to faculty for the research projects, on case to case basis, through University Research Committee.

1.1.2 SOPs for Internal Funding

The research project received at RD shall be forwarded to at-least one reviewer within or outside Suleman Roshan Medical College Tando Adam. The overall score for review of the research project will be 100, distributed equally on the following five scoring criteria:

A. Significance
    a. The project should address an important problem or a critical barrier to progress in the field.
    b. The project should contribute to the body of scientific knowledge.
    c. Objectives of the project should be achievable.
    d. The project should have significant practical implications for all the stakeholders of relevant field.

B. Investigator/Researcher
    a. The investigators, collaborators, and other researchers involved in the project should be capable of executing research project.
    b. Leadership approach, governance capability of the principal investigator should be appropriate for execution of the project.

C. Innovation
    The project should address some novel theoretical concepts, approaches, methodologies, instrumentation and/or interventions.

D. Approach
    The design, method, procedure and analysis should be logical and appropriate to accomplish the objectives of the project.

E. Environment
    The proposed project should be designed according to the available institutional support, equipment and other physical resources.

The decision shall be taken on the application based on overall score provided by the reviewer for which the criterion is as under:

Overall Score	Decision
70 or above	To be funded

50 to 69	To be sent back to investigator to incorporate the changes recommended by the reviewer
49 or below	To be rejected

Revision of applications: When considering a revised application, the RD shall ensure that proposed changes have been incorporated, based on which decision for approval or rejection of application will be taken.

1.2 AUTHORSHIP POLICY

1.2.1 Policy Statement

Authorship implies accountability and responsibility for scholarly publication. he authorship policy refers to all processes related to publication processes and explicitly determines the person to be credited as author on basis substantive intellectual contributions to a paper. This policy provides guideline to author and help them to understand their role in taking responsibility and being accountable for what is published. This policy is not restricted only to author but also include contributions of each person having participated in a submitted study, at least for original research. The purpose of developing criteria for authorship is to clearly distinguish authors from other contributors.

1.2.2 Authorship criteria

The ICMJE recommends that authorship be based on the following 4 criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work
- Drafting the work or revising it critically for important intellectual content
- Final approval of the version to be published
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

In addition to being accountable for the parts of the work he or she has done, an author should be able to identify the role and contribution of co-authors and should have confidence in the integrity of the contributions of their co-authors.

ICMJE also states that: “Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. One or more authors should take the responsibility for the integrity of the work as a whole, from inception to published article.”

1.2.3 Objectives

The basic purpose of this policy is to establish uniform authorship requirements

The policy should be followed by all researchers affiliated with the Suleman Roshan Medical College Tando Adam (SRMC) & allied hospitals and also by all Partner universities working in collaborate on with SRMC& allied hospitals.

1.2.4 Authors sequence

Author

- An author is an individual who has made substantial intellectual contributions to a scientific investigation
- Authorship sequence should be decided in early phase of planning of research work. Each author should be clear about his/her share of work which should be decided by mutual understanding of all authors .Each author must be prepared to take the responsibility of assigned task with complete ownership.

First author (Principal investigator)

The first author (Principal investigator) is the one responsible for conception and design of the study .The principal author should have major contribution in overall research process

Corresponding Author

The corresponding author will be the one affiliated with Suleman Roshan Medical College Tando Adam & allied hospitals and should have a permanent position within the University. The corresponding author should be nominated after mutual consensus between all authors and will be responsible for all sort of communication required during publication process. Corresponding author will be responsible for all editing and corrections suggested by reviewers and keep all authors on board during this process.

1.2.5 Multiple authors

For multiple authors, the sequence of names of author should clearly represent the contributions made by each of them. All authors must have written documentary proof of their scholarly contribution which can be asked from them at any stage.

1.2.6 Intellectual Property of SRMC & Allied Hospitals

"Work undertaken at Suleman Roshan Medical College Tando Adam & Allied Hospital" should be clearly specified even if an author submits a manuscript and publishes it after leaving SRMC .This also implies for a student who has left the programme after graduation.

Under no circumstance should anyone affiliated with SRMC& Allied Hospital, whether as employee, student, or volunteer; publish data owned by SRMC, or SRMC & Allied Hospital faculty without permission from the owner of the data.

Research work of undergraduate students /CPSP PGTs /MD/MS students must be published under the affiliation with Suleman Roshan Medical College Tando Adam& Allied Hospital.

Under no circumstance should anyone affiliated with SRMC & Allied Hospital, whether as employee, student, or volunteer; publish data owned by SRMC, or SRMC & Allied Hospitals faculty without permission from the owner of the data

1.2.7 Collaborative research projects

In collaborative research projects ,it is mandatory that all researchers have read University Intellectual right policy carefully and agreed to all its constituents and has signed the intellectual property Performa and bound to provide written documentary evidence of it .

In such joint projects researcher must have read and complied University Ethical Review Policy, authorship policy and research misconduct policy.

Every research work has to be present before Ethical Review Board and Ethical approval should be sought before initiation of project.

Ghost/honorary Authorship: Ghost author is one who does not fullfill the criteria of authorship or the one whose name is included in authors without mutual consensus.

1.2.8 Dispute Resolution

In order to avoid dispute authorship should be determine before the initiation of research through mutual agreement between all authors.

If dispute arises over authorship, its resolution should be sought in professional manner through mutual consultation with all researchers.

Principal investigator will be held responsible for dispute resolution among team members

Inspite of all above mentioned measures if dispute remained unresolved then following measures then relevant departments may be approached in the following order:

- Director RD
- Dean of the Department
- Competent authority (whose decision will be final and binding on all parties)

If paper is being processed and submitted for publication and all above mentioned measures fail to resolve the dispute then journal editor may be communicated in written.

1.2.9 Declaration of source of funding

All sources of funding must be acknowledged appropriately, whether internal or external funding.

Sources of support for the work, including sponsor names along with explanations of the role of those sources if any in study design; collection, analysis, and interpretation of data; writing of the report; the decision to submit the report for publication; or a statement declaring that the supporting source must be mentioned in clear terms

1.2.10 Acknowledgement

All members who have made significant contribution in research work but not full fill the given criteria of substantial contributions should be acknowledge for their work in acknowledgement section.

Technical support staff, data collectors, administrative staff and all others who have contributed in research work should acknowledged in this section.

1.2.11 Conflict of interest

A conflict of interest exists when professional judgment concerning a primary interest (such as patients' welfare or the validity of research) may be influenced by a secondary interest (such as financial gain). Perceptions of conflict of interest are as important as actual conflicts of interest. Since scholarly writing and research publication has great influence promotion criteria of faculty and overall university ranking, so it can be a potential source conflict regarding authorship credit. Other sources may include monetary benefits like honorarium, patents, employments and others. It should be mandatory to declare conflict of interest at time of submission.

1.2.12 Ethical Approval

No manuscript can be submitted for publication if ethical approval or exemption of the study has NOT been obtained. The Principal Investigator of the study should obtain ethical approval or exemption (where applicable) for the study.

1.2.13 Alteration

These guidelines will be reviewed periodically by RD-SRMC can be customized as and when required.

1.3 POLICY ON RESEARCH MISCONDUCT

Research Misconduct policy is intended to ensure highest level of integrity and quality in conduct, reporting and dissemination of research.

1.3.1 Misconduct in research

Minconduct in rescarch is defined to include any one or more of the following acts:

- Plagiarism in all research related matters including publications, appropriation of another's person ideas, processes, results, outputs or words without giving appropriate credit
- Inappropriate use of others' intellectual property (without reference or acknowledgement)
- Non-compliance with institutional policies on conflict of interest, intellectual property rights and authorship guidelines
- Deliberate misuse of institutional or sponsor's funds for financial gains
- Deliberate destruction of one's own or others' research data or records
- Violation (non-compliance) of the code of ethics for research as established by the University

Reporting of Research Misconduct

- The initial report of the misconduct should be in writing or documentary evidence to the Dean / Director of a specific unit of the University who may direct it to the head of respective academic department for verification.
- On receiving report with evidence, the Director RD can initiate an investigation by requesting a Dean/Director RD set up for this purpose to submit a complete report of findings and advise on penalties, if any to be imposed.

Procedure of Inquiry

- Dean / Director in whose office the allegation charges are files will set up an initial inquiry to assess whether or not the matter is a breach of any of the University's policies of good conduct in research.
- The faculty member whose research or act of violation of research integrity is the subject of investigation shall be notified about the complaint without disclosing identity of initiator.
- An inquiry committee shall be appointed by the Dean RD on request of Dean of concerned department. Joint Committee will submit a written report of inquiry proceedings. All Inquiry proceedings must be recorded and transcribed on paper as well to fulfill legal requirements.
- If dispute remained unresolved then competent authority (whose decision will be final and binding on all parties) will be consulted.
- If an outside sponsor / collaborator is also involved in research, the report of inquiry committee should be shares with the concerned organization or individuals
- The whole inquiry process must be completed in 30 calendar days.
- If research misconduct is not proven, diligent efforts will be undertaken where appropriate to restore the reputation of people under investigation.
- Copies of inquiry report, supporting documents and decision making must be retained by RD Director for 5 years.