

Regulations for Safeguarding Good Research Practice and dealing with suspected cases of scientific misconduct Brandenburg Medical School (MHB)¹

Preamble

The Brandenburg Medical School (MHB) has issued the regulations for Safeguarding Good Research Practice, appointment of ombudsperson and dealing with suspected cases of scientific misconduct. The regulations contained the corresponding Code of the German Research Foundation (DFG) in the version dated August 2019. The regulations have been decided by the Senate of the MHB with the consent of the Faculty Council on 4 July 2024 and are binding for all members of the university. They are made public (e.g. website) and communicated throughout the university in appropriate manner (e.g. MHB Moodle, mail).

Section I – Principles for Good Research Practice

§ 1 General information

The MHB is responsible for the organisation of research, teaching and promoting of young scientists. In order to fulfil its responsibility in research, it is entitled and obliged to create and maintain the framework conditions for compliance with Good Research Practice. It also take precautions for dealing with suspected cases of scientific misconduct. In doing so, it ensure the recognized standards of scientific integrity and fulfils the legal obligations to use taxpayers money appropriately and its contractual obligations to use private funding appropriately.

§ 2 Rules for Good Research Practice

All members of the MHB working in research community are obliged to observe and responsibly apply the rules of good research practice. They include: the general principles of scientific work, in particular,

¹This is the English translation of "*Ordnung zur Sicherung guter wissenschaftlicher Praxis und zum Umgang mit Verdachtsfällen wissenschaftlichen Fehlverhaltens V1, Senatsbeschluss vom 04.07.2024*". Tools used: DeepL Translate, DeepL SE, <https://www.deepl.com/en/translator>, June-July 2025.

- to always work according to general recognised professional standards (*de lege artis*)
- to document results,
- to consistently scrutinise all findings,
- to ensure strict honesty with regard to one's own contribution and those of third party,
- to allow and promote critical discourse in the scientific community.

§ 3 Professional ethics of scientific activity

(1) The teaching of fundamentals of good research practice, including these regulations, begins as earliest possible stage in academic training (including teaching) and careers.

(2) Academic staff are committed to the fundamental values of academic work.

(3) Including all career levels, academic staff undergo a continuous process of learning and further training with regard to good research practice. They exchange ideas and support each other.

§ 4 Organisational responsibility of the University Management

(1) The University Management consisting of the President, Vice President and Chancellor, is responsible for and has organisational responsibility for compliance with good research practice at the MHB.

(2) The University Management creates framework conditions for compliant academic work at the university by establishing an appropriate institutional organisational structure. In this way, the University Management creates the conditions for academic staff to be able to comply with legal and ethical standards.

(3) At the MHB, clear procedures and principles for the selection and development of staff are laid down in writing through the following measures whereby equal opportunities and diversity are particular importance:

- "*Qualitätsmanagementkonzept (03.01.2022)*"
- "*Gleichstellungskonzept (28.08.2023)*"

(4) Special attention is paid to teaching and promoting of young scientists. The university is developing principles for its supervision and will commit the management of the individual academic work units to these principles. The following support structures and concepts have been established for the promotion of scientists in early career phases:

- "*Konzept zur Förderung des wissenschaftlichen Nachwuchses (14.09.2023)*".

§ 5 Responsibility of the heads of working units

(1) The head of a research working group is responsible for the entire unit he or she leads.

(2) The responsibility of the head of a research working group includes, in particular, the obligation to provide individual support for young scientists that is embedded in the overall concept of the university, to promote the careers of academic support staff and to communicate the principles of academic honesty.

(3) Cooperation in the research working units is such a way that the unit as a whole can fulfil its task, that the necessary cooperation and coordination take place and that all members are aware of their roles, rights and duties.

(4) Abuse of power and exploitation of dependency relationships shall be counteracted by suitable organisational measures both at the level of the individual work units and at the level of University Management.

(5) Academic staff enjoy a balance of support and personal responsibility appropriate to their career level.

§ 6 Evaluation of scientific performance

(1) The evaluation of scientific performance in first line is following qualitative standards and originality. Quantitative indicators can be included in the overall assessment in a differentiated and reflected manner. In addition to scientific performance, other aspects can be taken into account, such as special features in CVs (recognition of exceptional periods such as maternity leave, parental leave, disability, etc.), commitment to teaching, academic self-administration, public relations, knowledge and technology transfer or contributions in the interests of society as a whole. As part of the General Equal Treatment Act and the "Gleichstellungskonzept" of the MHB, aspects of equal opportunities and diversity are included in the evaluation of scientific performance.

§ 7 Cross-phase quality assurance

(1) Scientists carry out every step of the research process *de lege artis*. Quality assurance takes place continuously and across all phases.

(2) The origin of data, organisms, materials and software used in the research process must be identified, citing the original sources and it must be documented which requirements apply to subsequent use. If publicly accessible software is used, this must be documented in a persistent and citable manner, citing the source code, as far as this is possible and reasonable.

(3) The type and the scope of research data generated in the research process are described.

(4) An essential component of quality assurance is that it is possible for other scientists to replicate results or findings.

(5) If scientific results are made publicly accessible (also via channels other than publications), the quality assurance mechanisms applied are always explained. If inconsistencies or errors in such results are subsequently discovered or pointed out, they are corrected.

§ 8 Actors involved, responsibilities, roles

(1) The roles and the responsibilities of scientists involved in research projects must be suitable defined in appropriate manner and have to be clear at all times.

(2) Where necessary, roles and responsibilities must be adapted.

§ 9 Research design

- (1) When planning a research project, scientists take the current state of research into account and recognise it. As a rule this requires careful research into publicly accessible research achievements.
- (2) The University Management ensures the necessary framework conditions for this research within the scope of its budgetary possibilities.
- (3) Scientists apply methods to avoid (also unconscious) bias in the interpretation of findings, as far as this is possible and reasonable.
- (4) Scientists examine whether and to what extent gender and diversity can be significant for the research projects.

§ 10 Legal and ethical framework conditions for research

- (1) Scientists handle the freedom of research granted to them under constitutional law responsibly.
- (2) The University Management is responsible for ensuring that the actions of the members and affiliates of the university comply with the rules and promotes compliance with rules through suitable organisational structures. In the "*Grundordnung der Medizinischen Hochschule Brandenburg Theodor Fontane (17.06.2022)*", the University Management has developed the § 4 on the freedom of teaching, research and study as a binding principle.
- (3) In their behavior scientists shall observe their rights and obligations, in particular those resulting from legal requirements and from contracts with third parties.
- (4) Scientists shall obtain authorisations and ethics opinions where required and submit them to the competent authorities.
- (5) Scientists are constantly aware of the risk of misuse of research results, especially in the case of security-relevant research. The consequences of research are thoroughly assessed and the ethical implications of research are evaluated.

§ 11 Rights of use

- (1) Scientists shall conclude documented agreements on the utilisation rights to data and results from the research projects at the earliest possible date.
- (2) The utilisation of data and results is in particular the right of those scientists who collected the data.
- (3) The authorised users shall make arrangements on the question of whether and how third parties are granted access to the research data.

§ 12 Methods and standards

- (1) Scientifically sound and replicable methods are used in research.
- (2) When developing and applying new methods, scientists attach particular importance to quality assurance and the establishment of standards.

§ 13 Documentation

- (1) Scientists document all information relevant to the production of a research result in such a comprehensible manner as it is necessary and appropriate in the specialist area concerned in order to be able to review and to evaluate the results and enable replication. If specific professional recommendations exist for the review and evaluation, the scientific staff will document the results in accordance with the respective specifications. When developing research software, the source code is documented as far as it is possible and reasonable.
- (2) Individual results that do not support the hypothesis are also documented as a matter of principle. A selection of results is not permitted.
- (3) If documentation does not fulfil the requirements of paragraph 1 and 2, the limitations and reasons for this shall be explained in a comprehensible manner.
- (4) Documentation and research results must not be manipulated. They must be protected against manipulation as far as possible.
- (5) Primary data as a basis for publications shall be stored securely on durable and secure media for ten years, insofar as this is necessary for the purpose of verifiability.

§ 14 Establishing public access to research results

- (1) In principle, scientists contribute all their findings to the scientific discourse.
- (2) In individual cases, there may be reasons not to make results publicly accessible. In principle, the decision to make results publicly accessible must not depend on third parties, rather scientists decide on their own responsibility and taking into account the practices of the respective subject area whether, how and where they make their results publicly accessible. Exceptions are permitted in particular where the rights of third parties are affected, patent applications are in prospect, contract research or security-relevant research is involved.
- (3) If results are made publicly accessible, they are described in a complete and comprehensible manner. This also includes making the research data, materials and information on which the results are based, the method applied and the software used available, insofar as this is possible and reasonable. This is done according to the so-called FAIR principles: Findable, Accessible, Interoperable, Re-Usable. Exceptions are permitted in context of patent applications.
- (4) Self-programmed software shall be made accessible by indicating its source code, insofar as this is possible and reasonable. If necessary a license is granted. Workflows are comprehensively explained.
- (5) Own and third party preliminary work must be documented completely and correctly, unless this can be waived in exceptional cases in the case of own, already publicly accessible results. At the same time, the repetition of the contents of own publications is limited to the extent necessary for understanding.
- (6) Inappropriately small publications should be avoided.

§ 15 Authorship

(1) An author is someone who has made a genuine, comprehensible contribution to the content of a scientific text, data or software publication. Whether the genuine and comprehensible contribution exists depends on the subject-specific principles of scientific work and must be assessed on a case-by-case basis. A genuine, comprehensible contribution exists in particular if a scientifically active person has contributed in a scientifically relevant manner to

- the design and development of the specific research activities described and evaluated in the publication (not: mere applications for or acquisition of funds for superordinate framework projects, institutional units or equipment, mere management or supervisor position in the respective research institute or similar) or
- independent collection and processing of data, development of sources or programming of software (not: mere execution or routine technical tasks, mere implementation of predefined survey formats or similar) or
- independent analysis, evaluation or interpretation of data, sources or results (not: mere listing of data, mere compilation of sources or similar) or
- development of conceptual approaches or argumentative structures (not: mere consultation of other people`s drafts, mere introduction of unspecific suggestions, etc.) or
- drafting the manuscript (not: mere editorial adjustment, mere linguistic corrections, etc.).

(2) The criteria for authorship are described in section C of the "*Affiliationsrichtlinie der Fakultät für Medizin und Psychologie der MHB*".

(3) If a contribution is not sufficient to justify authorship, the support can be appropriately acknowledged in the footnotes, in the foreword or in the acknowledgments. Honorary authorship where no sufficient contribution has been made is just as inadmissible as the derivation of authorship solely on the basis of management or superior function.

(4) All authors must agree to the final version of the work to be published; they bear joint responsibility for the publication, unless expressly stated otherwise. Consent to publication may not be refused without sufficient reason. Rather, the refusal must be justified with verifiable criticism of data, methods or results.

(5) Researchers shall agree in good time – usually at the latest when formulating the manuscript – on who is to be the author of the research results. The agreement must be based on comprehensible criteria and take into account the conventions of each subject area.

(6) Co-authors of scientific publications are always jointly responsible for their content.

§ 16 Publication media

(1) The scientific quality of a contribution does not depend on the publication medium in which it is made publicly accessible. In addition to publications in books and specialist journals, specialists, data and software repositories as well as blogs may also be considered.

(2) Authors shall carefully select the publication medium, taking into account its quality and visibility in the respective field of discourse. A new publication organ is checked for its seriousness.

(3) Anyone who takes on an editorship carefully checks for which publication organs this is done.

§ 17 Archiving

- (1) Researchers shall store the research data or results that are made publicly accessible, as well as the central materials and information which they are based, in an adequate and traceable manner at the institution where they were created or in future repositories across locations. The standards of the relevant subject area are also decisive here. As a rule, the research data to be archived shall be saved as raw data.
- (2) Storage in accordance with paragraph 1 shall take place for a period of ten years. In this respect, too, the standards of the subject area concerned shall apply. The retention period begins with the establishment of public access to the respective data or results.
- (3) The paragraphs 1 and 2 also apply to the research software used.
- (4) If there are comprehensible reasons for not retaining certain data or only retaining it for a shorter period than in paragraph 2, the researcher shall explain these reasons in a comprehensible manner.
- (5) The University Management shall ensure that the infrastructure required for appropriate archiving is available.

§ 18 Confidentiality and neutrality in assessments and consultations

- (1) Honest conduct is the basis of legitimacy of a judgment process.
- (2) Researchers who assess manuscripts, applications for funding or the expulsion of persons in particular are obliged to maintain strict confidentiality in this regard. They shall immediately disclose all facts that could give rise to concerns of bias to the responsible body.
- (3) Confidentiality includes the fact that content to which access is gained within the scope of the function may not be passed on to third parties and may not be used for personal purposes.
- (4) The paragraphs 1 and 2 apply accordingly to members of scientific advisory and decision-making bodies.

Section II – Ombudsman system

§ 19 Ombudspersons

- (1) The university has an independent ombudsperson and a deputy. The deputy is provided for an event that there are concerns of bias with regard to the ombudsperson or the ombudsperson is prevented from fulfilling their function. The judgement as to whether there are concerns of bias is made in accordance to § 21 of the "*Verwaltungsverfahrensgesetz (VwVfG)*" for the State of Brandenburg. In case of doubt, the investigating commission shall decide in accordance with Section III.
- (2) Researchers of integrity with management experience can be appointed as ombudspersons or deputies. The subject cultures represented at the university should also be taken into account when making the appointment. The ombudsperson and their deputies may not belong to a central management body of the university during their term of office.

(4) The appointment is made by the University Management after selection by the University Senate. The selection shall be preceded by a proposal by the Research Commission of the MHB.

(5) The term of office of an ombudsperson or their deputy shall last three years. One re-election is permitted.

(6) Ombudsperson and their deputies shall receive the necessary substantive support and acceptance from the University Management in the fulfilment of their duties. Upon request, the University Management shall provide for measures to otherwise relieve the ombudsperson.

§ 20 Ombudsperson's activities

(1) The ombudsperson and their deputies shall carry out the ombudsperson's activities in accordance with § 19 independently, in particular independently of instructions or informal case-related influence by the University Management and other university bodies. The ombudsperson's work is confidential, i.e. confidentiality is maintained.

(2) All members and affiliates of the university contact the ombudsperson in matters of good research practice, but also regarding suspected scientific misconduct. Alternatively, members and affiliates of the university have the option of contacting the supra-regional ombudsman - committee "*Ombudsgremium für die wissenschaftliche Integrität in Deutschland*".

(3) The University Management ensures that the ombudsperson and their deputies are known at the university. The identity and contact details of the persons acting as ombudsperson are published on the MHB website in the section "*Service für Forschende*".

(4) As a neutral and qualified contact person, the ombudsperson advises on questions of good research practice and in cases of suspected scientific misconduct. As far as possible, they contribute to solution-orientated conflict mediation.

(5) The ombudsperson or their deputies shall receive enquiries confidentially and, if necessary, forward suspected cases of scientific misconduct to the responsible office at the university in accordance with Section III.

Section III – Procedure for dealing with suspected cases of scientific misconduct

§ 21 General principles for dealing with suspected cases of scientific misconduct

(1) All departments at the university that investigate suspected scientific misconduct within the scope of their responsibility are committed to protection both the person making the allegation and the person affected by the allegation (accused person) in an appropriate manner. The competent bodies are aware that the conduct of proceedings and the final, possible imposition of sanctions can constitute a considerable interference with the legal interests of the accused person.

(2) The investigations of allegations of scientific misconduct must be conducted at all times in accordance with the principles of the rule of law, fairly and with the presumption of innocence. The investigation is also confidential. Investigations are conducted without regard to the person and decision are made without regard to the person.

(3) The report by whistleblowers must be made in good faith. Whistleblowers must have objective evidence that standards of good research practice may have been violated. If the whistleblower is unable to verify the facts on which the suspicion is based or if there are uncertainties regarding the interpretation of the guidelines on good research practice in accordance with Section I with regard to an observed process, the whistleblower should contact the persons in accordance with § 20 paragraph 1 and 2 to clarify the suspicion.

(4) Neither the whistleblower nor the accused person should suffer any disadvantages for their own academic or professional advancement because of the whistleblowing. This applies to accused person until misconduct has been proven and established. In the case of persons in early career phases, the report of final theses and doctorates should not be penalized. The same applies to working conditions and possible contract extensions.

(5) The whistleblower is to be protected even if misconduct is not proven in the proceedings. This shall not apply if the allegation was made against better judge.

(6) All bodies involved in the proceedings shall endeavor to ensure that the entire proceedings are conducted as promptly possible. They shall take the necessary steps to conclude each stage of the proceedings within a reasonable period of time.

(7) The suspicious activity report in which the whistleblower does not disclose his/ her identity (anonymous report) shall be reviewed if the whistleblower provides reliable and sufficiently concrete facts that enable a review within reasonable effort.

(8) If the identity of the whistleblower is known to the competent body, the body shall treat the identity confidentially and shall not disclose it to third parties without the consent of the whistleblower. Consent should be given in text form. Information may also be disclosed without consent if there is a legal obligation to do so. Disclosure may also be made in exceptional cases if the accused person would otherwise not be able to mount a proper defence because the identity of the person providing the information is essential for this. Before the identity of the person providing the information is disclosed, they will be informed of the intended surrender. They can then decide whether to withdraw the suspicious activity report. If the report is withdrawn, it will not be disclosed unless there is a legal obligation to disclose it. The investigation procedure may nevertheless continued if a weighing of interest shows that this is necessary in the interest of scientific integrity in Germany or in the legitimate interest of the university.

(9) The confidentiality of the procedure is restricted if the whistleblower makes their suspicions public. The body responsible for the investigation decides on case-by-case basis at its own discretion how to deal with a breach of confidentiality by the whistleblower.

§ 22 Facts of scientific misconduct

(1) Scientific misconduct have occurred if a person working in academic capacity at the university intentionally or through gross negligence makes false statements in scientifically relevant context, unauthorized appropriates the academic achievements of other or impairs the research activities of others. The special offences under paragraph 5 to 8 remain unaffected.

(2) False statements are

- a) the invention of scientifically relevant data or research results,
- b) the falsification of scientifically relevant data or research results, in particular by suppressing or eliminating data or results obtained in research process without disclosing this, or by falsifying a representation or illustration,
- c) the incongruent presentation of image and corresponding statement,
- d) incorrect science-related information in a funding application or as part of the reporting obligation,
- e) claiming the authorship or co-authorship of another person without their consent.

(3) The following cases constitute unauthorized misappropriation of third party scientific work:

- a) unlabelled adoption of third party content without the required sources citation (plagiarism)
- b) unauthorised use of research approaches, research results and scientific ideas (theft of ideas),
- c) unauthorised disclosure of scientific data, theories and findings to third parties,
- d) assumption or unfounded assumption of authorship or co-authorship of a scientific publication, in particular if no genuine, comprehensible contribution was made to the scientific content of the publication,
- e) falsification in the scientific content,
- f) unauthorised publication and unauthorised making available to third parties as long as the scientific work, finding, hypothesis, teaching or research approach has not yet been published.

(4) An impairment of the research activities of others is deemed to have occurred in the following cases in particular:

- a) sabotage of research activities (including damaging, destroying or tampering with experimental set-ups, equipment, documents, hardware, software, chemicals or other items required by others for research purposes),
- b) falsification or unauthorised removal of research data or research document,
- c) falsification or unauthorised removal of the documentation of research data.

(5) Scientific misconduct on the part of academic staff at the university also arises – in the case of intent or gross negligence – from:

- a) co-authorship of a publication that contain false information or unauthorised third-party scientific work,
- b) the neglect of supervisory duties if another person has objectively scientific misconduct within the meaning of paragraph 1 to 4 and this would have been prevented or made considerably more difficult by the necessary and reasonable supervision.

(6) Scientific misconduct also arises from intentionally participation (in the sense of instigation or aiding and abetting) in the intentionally misconduct of others, which is deemed to be an offence under these regulations.

(7) Scientific misconduct from peer-reviewers or members of the university committees is deemed to have occurred if they intentionally or grossly negligently:

- a) make unauthorised use of their own scientific purposes of scientific data, theories or findings of which they have gained knowledge in the course of their work as an expert or committee member,
- b) disclose data , theories or findings to third parties without authorisation in breach of the confidentiality of the procedure in the course of their work as an expert or committee member,
- c) do not disclose facts or circumstances that could give rise to concern of bias to the competent body in the course of their work as an expert or committee member.

(8) Scientific misconduct shall also be deemed to have occurred if a person providing an expert opinion or a member of a university committee fails to disclose, against their better judgement and with the intention of gaining an advantage for themselves or another person, facts which indicate scientific misconduct on the part of other person within the meaning of paragraph 1 to 5.

§ 23 Initiation of an investigation

(1) Whistleblowers should contact an ombudsperson or a deputy in accordance with § 20 with a suspicious activity report. A report of suspected misconduct should be made in text form. It may be made verbally; in this case, a record must be made by the receiving organisation. If whistleblowers contact a member of the Investigation Committee directly with their report suspicion, the member shall forward the report of suspicion to a competent ombudsperson for reason of responsibility.

(2) By way of derogation from § 19 paragraph 1, § 22 et seq. of the Code of Criminal Procedure shall apply mutatis mutandis to concerns about the bias of ombudspersons in their role in the proceedings under Section III. The Investigation Committee shall decide in accordance with § 24.

(3) The competent ombudsperson or deputy shall examine confidentially whether there are sufficiently concrete indications that a person has committed a prosecutable offence according to § 22.

(4) If the ombudsperson comes to the conclusion that there are sufficiently substantiated grounds for suspicion in accordance with paragraph 3, he or she shall forward the suspected case of scientific misconduct to the Investigation Committee.

§ 24 Investigation Committee

(1) There is a permanent Investigation Committee at the university to conduct formal investigation. The Investigation Committee has at least two members plus the chairperson. When appointing members, the subject cultures represented at the university should also be taken into account. There is also a deputy for each member of the committee – with the exception of the chairperson. The chairperson conducts the business of the Investigation Committee and exercises domiciliary rights and attendance policing during the meetings. The Investigation Committee elects a person from its ranks to act as deputy chairperson. At least two members of the Investigation Committee are full professors of the university. At least one member of the Investigation Committee is a member of the mid-level academics of the university.

(2) The voting members of the committee and their deputies are appointed by the University Management after selection by the University Senate. The term of office is four years; re-

election is possible. In individual cases, the Investigation Committee may consult up to two non-voting experts from the subject area of the academic matter to be assessed as additional members.

(3) In the event of a concern of bias or if a member of the Committee is unable to attend for more than a short period of time, their deputy shall take their place. §§ 22 et seq. of the Code of Criminal Procedure apply accordingly to concerns about bias. Concerns of bias can be raised by all voting members of the Committee, by the university's ombudspersons or by accused persons. The Committee shall decide without the person against whom the complaint of bias is directed. Procedural acts that cannot postponed may still be carried out.

(4) All voting members of the Committee have equal voting rights; the chairperson also has the right to vote. Resolutions are passed by a simple majority; in the event of a tie, the chairperson has the casting vote. The Committee is only quorate if at least three persons are present and can vote validly.

(5) The members of the Committee and their deputies carry out their activities independently, in particular independently of instructions or informal, case-by-case influence from the University Management and other university bodies. Their work is carried out confidentially, i.e. in compliance with the principle of secrecy.

(6) The Investigation Committee works and meets confidentially and in private.

(7) The current composition of the Investigation Committee can be found on the MHB website in the section "*Service für Forschende*".

§ 25 Course of the formal investigation

(1) The Investigation Committee shall schedule a meeting as soon as possible. For the meeting, the accused person is given the opportunity in goodtime beforehand to make an oral statement to the Committee (hearing) or in writing regarding the allegation. The person making the allegation will also be given another opportunity to make a statement. If the accused person refrains from making a statement this alone may not be taken into account to their disadvantage. A decision must then be made on the basis of the file.

(2) The Committee may hear other persons orally whose opinion it deems useful for the proceedings at its due discretion. With regard to possible rights to refuse to give evidence, the provisions of the Code of Criminal Procedure apply accordingly.

(3) Any person who is heard by the Committee may call in a trusted person to assist them. The Committee must be informed in good time.

(4) In accordance with the traditional rules of free evaluation of evidence, the Investigation Committee examines whether it is convinced that scientific misconduct has been proven. Scientific misconduct can only be established if a majority decision has been taken within the commission. The consultations are subject to confidentiality. This does not affect the authority of the committee to discontinue the proceedings due to the lack of sufficient suspicion or in the case of less serious misconduct due to insignificance. If the proceedings are discontinued, there will be no remonstrations by the whistleblower.

(5) § 21 paragraph 8 and 9 shall apply accordingly to any disclosure of identity of the whistleblower.

(6) In the event of suspected breaches of disciplinary or labour law, the procedure is suspended.

(7) The Investigation Committee shall promptly submit a final investigation report to the University Management, which shall also contain the committee's proposal for sanctions. The essential basis of the committee's decision must be communicated.

(8) The documents of the formal investigation are kept at the university for ten years.

§ 26 Conclusions of the proceedings

(1) The University Management decides at its own discretion whether the accused person has been found guilty of scientific misconduct and whether and which sanctions and measures will be imposed on them. If the withdrawal of an academic degree is considered as a measure, the competent authorities will be informed.

(2) The decision and its main reasons will be communicated in writing to the informant and the accused person after the meeting. The parties are only entitled to the legal remedies granted by law against the decision.

(3) The decision is also communicated to the academic organisations concerned to and to third parties who have a justified interest in the decision. Whether and in what way this is the case is decided by the University Management at its own dutiful discretion. It shall also decide whether and how public is to be informed. Notifications in accordance with this paragraph may be accompanied by a statement of reasons.

§ 27 Catalogue of possible sanctions and measures

(1) If the University Management considers the scientific misconduct to be proven, it may impose the following sanctions and/ or take the following measures, either alternatively or cumulatively, within the framework of proportionality. Without claiming to be exhaustive, the catalogue is intended as an initial guide. As each case is likely to be different and the severity of the scientific misconduct found also plays a role, the decision may differ in each individual case.

1. Consequences under employment and labour law

- 1.1. Warning
- 1.2. Ordinary termination
- 1.3. Extraordinary termination
- 1.4. Cancellation of the contract.

2. Consequences under civil law

- 2.1. Issuing a ban from the premises
- 2.2. Claims for restitution against the person concerned (e.g. of stolen scientific material)
- 2.3. Claims for removal and injunctive relief under copyright law, personal rights, patent law and competition law
- 2.4. Claims for repayment (e.g. scholarship, third party funds) insofar as determined by the applicant
- 2.5. Claims for damages by the university or third parties in the event of personal injury, damage to property or the like.

3. Consequences under criminal law

Criminal consequences are always considered if there is a suspicion that scientific misconduct also constitutes an offence under the German Criminal Code (*StGB*) or administrative offence. Investigating authorities must be called in by the University Management.

4. Academic consequences

4.1. Written reprimand

4.2. Academic degrees can only be withdrawn by the university that awarded them. The university must be informed of serious scientific misconduct if it was related to the acquisition of an academic qualification. In particular, the following may be considered: Withdrawal of the doctoral degree or revocation or withdrawal of teaching authorization.

4.3. Requesting the retraction of scientific publications that are flawed due to the scientific misconduct as they are still unpublished, and to correct them insofar as they have been published (retraction); cooperation partners are to be informed – if necessary – in suitable form. In principle, authors and participating publishers are obliged to do so; if they do not take action, the MHB University Management will initiate the appropriate measures available to it.

4.4. Withdrawal of funding decisions or cancellation of funding contracts, insofar as the decision was made by the university or the contract was concluded by the university, including a demand for repayment of funds if necessary.

4.5. Exclusion from activities as a reviewer or committee member of the university for a period to be determined at that time.

4.6.

5. In cases of serious scientific misconduct, the University Management shall inform other affected research institutions or scientific organisations. In justified cases, it may also be appropriate to inform professional organisations. The university may be obliged to inform affected third parties and the public in order to protect the third parties, to maintain confidence in scientific honesty, to restore its scientific reputation, to prevent consequential damage and the general public interest.

(2) Measures pursuant to paragraph 1 are not unlawful because they were not stated in the letter pursuant to § 26 paragraph 3.

§ 28 Transitional provisions/ Application when leaving the university

(1) The offences of scientific misconduct under § 22 shall only apply to acts committed when these regulations were already in force.

(2) The procedural transition of this section shall only apply to information received after the entry into force of these regulations. Preliminary investigation, preliminary examination and enquiry proceedings already in progress when these regulations come into force shall be completed in accordance with the procedural regulations previously in force.

(3) An offence may also be prosecuted if the accused person is no longer academically active at the university, but was academically active there at the time of the offence.

Section IV – Entry into force of these regulations; Expiry of the previous directives

§ 29 Entry into force, expiry

(1) The Regulations of Safeguarding Good Research Practice and dealing with suspected cases of scientific misconduct were adopted at the meeting of the Senate of the MHB on 4 July 2024. They enter into force on the day after the Senate's resolution.

(2) At the same time, the MHB Guidelines on Safeguarding Good Research Practice and dealing with suspected cases of scientific misconduct, Version 2, dated August 2016, shall expire.

Neuruppin, 04 July 2024



Prof. Dr. Hans-Uwe Simon
President