How to create and implement a Research Integrity Promotion Plan (RIPP)

A guideline (ver. 2.0)

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Preamble

In SOPs4RI, we believe that all research performing organisations (RPOs) as well as research funding organisations (RFOs) need to have a plan for how to transfer the fundamental principles of the European Code of Conduct to actual responsible conduct of research in everyday work. We call this plan a RIPP – a Research Integrity Promotion Plan. A RIPP should outline the concrete steps that the organisation will take to promote research integrity. The RIPP should address several research integrity topics and outline policies for how these topics will be handled. We have described the topics to be addressed in a RIPP in two documents that can be downloaded from our webpage (here for RPOs, and here for RFOs). Our web page also contains a toolbox with concrete examples of guidelines for each of the topics that should be addressed. This document gives practical guidance on how to use the toolbox to design and implement a RIPP, tailored to the local context of a research or funding organisation.
Introduction

To assist in designing a RIPP and implementing concrete actions that will foster a culture of research integrity within a research or funding organisation, the model depicted in Figure 1 can be used. The model consists of three phases: Preparation, Execution and Monitoring. Each of these subsequently involves tasks to be carried out in multiple steps. Importantly, the model proposes a cyclical format of creating, maintaining and revising an integrity culture. As input to the first cycle, an organisation may use the list of topics to be addressed in a RIPP (9 for RPOs and 6 for RFOs). The idea behind this model is that throughout the first cycle, a RIPP will be created and implemented. This RIPP will then constitute the input to the next cycle. Below, we discuss each step of the model, guided by an illustrative example from a fictive university, called the Global Integrity College (GIC). Note that this example merely serves as an illustration: in practice an organisation might diverge from it, depending on the local context and needs of the organisation. For the sake of brevity and clarity, the example focusses on a single topic to be addressed in a RIPP, but organisations may wish to address multiple topics in one model cycle, hence creating the need for several steps to be carried out multiple times in parallel.

![Figure 1. The implementation model](image-url)
Step-by-step Plan

Preparation

Diagnosis

In this first stage, an organisation gathers information to assist in the diagnosis of what change is needed. It asks itself questions like: Which of the RIPP topics are relevant to our organisation? Which topics have already been appropriately addressed in current policies and procedures? Which require more attention? What would our organisation look like if all this was implemented? The answer to the latter question serves as an invitation to come up with an aspirational marker on the horizon, a vision to work towards.

Example: GIC’s vice chancellor asks a senior policy advisor to make an inventory of their research integrity policies, based on the list of 9 RIPP topics. They conclude that 6 topics currently are appropriately addressed, 2 are not particularly relevant to local context of the organisation, and one topic is in particular need of improvement. Currently, there is no research integrity training at GIC and hence the vice chancellor and the senior management team decide to focus on RI training.

How would you address this issue?
The next step requires an organisation to assess its readiness for change. Readiness refers to the capacity of the organisation and its members to take on the demands that effective change requires. This includes, among others, senior leadership’s capability to guide change, the availability of sufficient resources, and the preparedness for change among the organisation’s members. This step requires answering questions such as: Where, i.e. what organisational unit, would be the best place to start the change process? Which parts of the organisation have been facing the biggest problems with RI or are most prepared to take the next step? Where do we have the resources available?

*Example:* GIC’s senior management team decides that, because of a track record of several issues with RI in the medical faculty and the explicit willingness of several faculty’s senior staff members to address this, the medical faculty will be the first unit within the organisation to establish novel RI training procedures.

**How would you address this issue?**
In this step, an organisation identifies the right people to promote and execute the process, forming a *change coalition*. It asks itself: Who can serve as change agents and role models? How can we create a safe change environment with room for voice, mistakes, and learning? Important aspects to take into account comprise the potential need for specific training or preparation for the identified people; inclusion of all relevant types of staff: e.g. junior and senior researchers, mid-level management, and people centrally placed in the organisation’s social network and with the right characteristics: trustworthy, supportive, and honest.

**Example:** After consultation with several people within the medical faculty, GIC’s research integrity team decides to form a change coalition, including: the medical faculty’s vice dean of education, the IT support staff, representatives from PhD students and post docs, three of the lab leaders, a student-counsellor, a member of the research ethics committee, and a colleague from the educational office.

**How would you address this issue?**
Creating/Updating a RIPP

In the last preparatory step, the change coalition writes the actual RIPP, or the relevant part of it. In this, they describe the topics that will be addressed, in what way they will be addressed, and by whom. It is crucial to be specific and if possible, to provide links to relevant documents such as codes of conduct and guidelines. This comprises at least six key elements:

(i) **Goals**: Specifying individual, unit and organisational change related goals;

(ii) **Employee participation**: Involving all relevant staff-groups and faculty to create legitimacy for the envisioned change. This requires the identification of stakeholders that should be involved and the agreement on a shared vision for the process and outcome of the change.

(iii) **Organisational set up**: Describing the organisational set up for implementing the envisioned change;

(iv) **Using SOPs4RI toolbox or other relevant databases**: Finding the right tools in the toolbox that match these goals;

(v) **Specifying actions to be taken by specific people**; and

(vi) A set of indicators or targets that can be used in evaluating the effectiveness of the change process.

A template for such a RIPP can be found [here](#).

**Example**: The GIC research integrity team puts together a shared goal on what the training programme will look like: Every PhD-student will get a 2-day introductory course on RI and a 2-days follow-up course in their third year. A new mandatory course for senior researchers will be developed and implemented. It will adapt the University College London (UCL) Research Integrity Training Framework tool from the [toolbox](#), particularly the mandatory learning module for all senior staff. The team identifies all relevant stakeholders and assigns responsibilities for setting up the course and inviting all participants. It decides that participation rate, participants’ perception of the trainings’ effectiveness, and their engagement with the course, will be used as monitoring indicators. All of this is written down in GIC’s RIPP under the topic of *Research Integrity Training*. 
How would you address this issue?
In the execution stage, the change plan is rolled out. Before doing so, it is essential to make sure that all relevant stakeholders are properly informed and well aware of what is expected of them. In case the intended change involves a major restructuring of (some) stakeholders’ daily workflow, we suggest you consider a gradual change process. A gradual process can include several pilot tests, experiments, and local initiatives, which together make complex change easier to implement. At this stage, it is also crucial to allow change recipients to provide feedback and make local adjustments to broader change plans. After evaluating this local feedback, and finishing potential pilots, the change coalition should agree on the permanent course of action, which is presented as an updated version of the relevant RIPP section to senior management.

Example: The change coalition decides to create a pilot for some of the medical faculty’s research groups. After providing a course to all senior members of these groups and collecting their experiences and feedback, the course’s format is slightly changed to fit everybody’s needs. The course is subsequently offered to all senior staff members within the faculty in the remainder of the academic year.
Periodic assessment based on the predetermined set of indicators is required to verify whether the planned change is producing anticipated outcomes and whether any unintended side-effects are occurring. Also, an evaluation of the required resources is conducted. This stage gathers elaborate feedback on consequences of the change, including potential improvements, based on input from all relevant stakeholders.

**Example:** Based on interviews with the course participants, the policies are refined, the course is further adjusted to align with different settings and local needs. Multiple variants of the course are created to allow for flexibility in offering the course. This includes a generic course, offered to all researchers, and several discipline specific courses, tailored to the customs and practices within several research communities.
In this final stage of the cycle, it is important to institutionalise the novel procedures in the organisation. Based on the assessment of the change coalition, the RIPP is revisited, resources and responsibilities are allocated for long-term implementation, and the change coalition’s relevant experiences from their organisational unit are implemented into the procedures and policies of the entire organisation. Institutionalisation aims to integrate the changes into the organisation’s larger systems, including its culture and management systems.

**Example:** Based on the positive experiences from the medical faculty, GIC’s senior management team decides to make discipline specific training courses for senior researchers as a one day mandatory course. It allocates resources to allow future local committees, akin to the change coalition established in stage 3, to take disciplinary differences into account, plan and execute the course within their organisational unit. It also decides to revisit the state of affairs and need for research integrity training after three years. All of this is written in the GIC’s RIPP for Research integrity training and uploaded on the organisation’s webpage.

**How would you address this issue?**
Repeat

Above, the first cycle of the process towards a RIPP has been described. However, this process must be repeated at regular intervals. Based on the monitoring phase of one cycle, a new diagnosis of the next cycle can be readily performed. As mentioned earlier, the RIPP designed in the previous cycle should constitute the base input for subsequent cycles. Repetition of cycles must be done at regular intervals; we suggest at least every three or four years. To make sure not to create additional or redundant administrative workload, we suggest to couple the cycles to existing evaluation cycles already taking place regularly, e.g. external audits of research or educational performance. Integrating the updating and evaluation of the RIPP with existing policies of evaluation, might both reduce administrative burden and allow research integrity to become an integral aspect of the organisations’ policies and workflow.

References