

PROCEDURE

OF

THE COMMITTEE ON SCIENTIFIC INTEGRITY

(CIC) OF THE

Institute for Public

Gregorio Marañón

Sanitary Research

Code:	PR-CIC-02
Version:	2.0
Effective Date:	June 8, 2026
Prepared by:	liSGM Scientific Integrity Committee
Reviewed by:	liSGM Scientific Integrity Committee
Approved by:	liSGM Scientific Integrity Committee

CHANGE CONTROL

Version	Date	Description	Approved by
1.0	November 2025-05	Initial version of the procedure	Committee on Scientific Integrity of the liSGM
2.0	June 8, 2026 08	Comprehensive review: alignment with CIC Regulations, liSGM Code of Good Practice, v2.0, Law 2/2023, GDPR/LOPDGDD, Law 17/2022, and ALLEA 2023.	Committee on Scientific Integrity of the liSGM

1. PURPOSE

This procedure establishes the protocol for the Scientific Integrity Committee (CIC) of the Gregorio Marañón Health Research Institute (liSGM) regarding the receipt, registration, analysis, evaluation, and resolution of reports related to possible scientific misconduct, as well as the handling of inquiries and requests for mediation concerning scientific integrity.

This procedure governs the CIC's course of action in handling incidents related to scientific integrity, ensuring at all times the presumption of innocence, confidentiality, impartiality, proportionality, and respect for the rights of all parties involved. This procedure is part of the liSGM CIC Regulations (version 2.0, 2026), Law 2/2023 on the Protection of Whistleblowers, Law 17/2022 on Science, the GDPR (Regulation (EU) 2016/679), and the European Code of Conduct for Integrity in Research (ALLEA 2023).

The procedure distinguishes between:

- Serious research misconduct (fabrication, falsification, and plagiarism—FFP), which may lead to the initiation of formal proceedings.
- Questionable research practices (QRP), which may be resolved through guidance, mediation, or recommendations.
- Authorship disputes, conflicts of interest, and other issues related to research ethics.

2. SCOPE

This procedure applies to:

- All research, technical, administrative, and collaborating staff at the liSGM, regardless of their contractual or statutory status.
- Trainees (doctoral candidates, residents, master's students) conducting research at the liSGM.
- Visiting staff, fellows, and any person with a formal affiliation with the liSGM through an agreement or contract.
- External individuals or institutions who report incidents of scientific integrity related to liSGM projects or activities.
- Cases involving consultations or mediation regarding conflicts related to scientific practice or research ethics.

This procedure applies to all research conducted entirely or partially at the liSGM, including research funded by external sources, provided that the research activity takes place on the liSGM's premises or under the supervision of the liSGM.

Research conducted entirely at external institutions, even if funded by liSGM, is not subject to this procedure. In such cases, the CIC may refer the interested party to the appropriate body.

3. REFERENCES

1. **Regulations of the liSGM Scientific Integrity Committee.** Version 2.0, 2026. Primary reference document for this procedure.
2. **liSGM Code of Good Scientific Practice.** Institutional reference document on scientific conduct.
3. **Law 17/2022, of September 5, on Science, Technology, and Innovation.** Amends Law 14/2011 and introduces obligations regarding research integrity.
4. **Law 2/2023, of February 20, regulating the protection of individuals who report regulatory violations and the fight against corruption.** Transposes EU Directive 2019/1937. Regulates the reporting channel, the admissibility of anonymous reports (Art. 7.2.d), and the protection of whistleblowers. Establishes the minimum record retention period (Art. 9.2.j: 3 years).
5. **Regulation (EU) 2016/679 of the European Parliament and of the Council (GDPR).** It regulates the processing of personal data. Legal basis: Art. 6.1.c/e (legal obligation / public interest). Limitations on the right of access during an investigation: Art. 23.
6. **Organic Law 3/2018, of December 5, on the Protection of Personal Data and the Guarantee of Digital Rights (LOPDGDD).** Spanish implementing regulations for the GDPR.
7. **ALLEA (2023). The European Code of Conduct for Research Integrity (4th edition).** European reference code for research integrity. Berlin: ALLEA.
8. **ISCIII Procedure PR-CIC.02 (approved September 30, 2024, amended November 25, 2024).** Reference procedure of the Scientific Integrity Committee of the Carlos III Health Institute. Used as a model of best practices.
9. **liSGM Policy on Research Integrity and Ethics.** Supplementary institutional document.
10. **Internal regulations on occupational risk prevention and the Health and Safety Committee (CSS).** Applicable in cases of occupational risk arising from integrity conflicts.

4. DEFINITIONS

CIC: liSGM Scientific Integrity Committee.

Good scientific practices: a set of actions and responsibilities applicable to both institutions and all parties involved in the research process, compliance with which is aimed at preserving science that is ethical, sound, and of high quality.

Research misconduct: fabrication, falsification, or plagiarism in research proposals, conduct, or communication, committed intentionally or through gross negligence.

Fabrication: inventing data, results, or references and recording or publishing them as if they were real.

Falsification: manipulating research materials, equipment, or processes, or modifying, omitting, or suppressing data or results without justification, such that the research is not accurately represented.

Plagiarism: using or misappropriating data, results, ideas, or the work of others without giving sufficient credit to the original sources, thereby infringing on the rights of the original authors.

Questionable research practices: behaviors that, while not constituting serious misconduct, deviate from good scientific practices. These include, among others: self-plagiarism, unjustified authorship (“gifting” of authorship), failure to disclose conflicts of interest, negligent data management, duplicate publication, and manipulated peer review.

Conflict of interest: a situation in which professional judgment regarding a primary interest (the validity of research, the fulfillment of professional responsibilities) may be influenced by a secondary interest (financial gain, personal relationships such as friendship, enmity, hierarchy, or family ties).

Authorship conflict: A situation in which members of a research group cannot agree on aspects of authorship attribution, order of appearance in articles, or other authorship-related matters.

Whistleblower: An individual who reports to the CIC, in good faith and on reasonable grounds, a possible violation of scientific integrity. **The whistleblower** is protected from retaliation under Law 2/2023.

Respondent: The person or persons against whom the report or complaint is filed. They have the right to be informed of the allegations against them, to present their defense, and to be presumed innocent throughout the proceedings.

Case File: An organized collection of documents generated during the processing of a report filed with the CIC, identified by a unique alphanumeric code assigned at the time of registration.

Whistleblowing channel: An internal system of the liSGM established in accordance with Law 2/2023 for reporting irregularities, accessible via email atcic@iisgm.com or through the liSGM's official registry.

Non bis in idem: A legal principle that prevents the same person from being penalized twice for the same acts. In the context of this proceeding, it entails the suspension of the CIC case when there is a parallel judicial or disciplinary proceeding regarding the same acts.

5. RESPONSIBILITIES

CIC Chair

- Preside over CIC meetings and cast the deciding vote in the event of a tie.
- Approve the CIC's final reports.
- Convene regular and special meetings.
- Oversee compliance with procedures and deadlines.
- Declare any conflict of interest in writing and recuse themselves if necessary.

CIC Secretary

- Record incoming communications, issue acknowledgments of receipt, and assign case numbers.
- Draft meeting minutes and record the resolutions adopted.
- Maintain document traceability for all case files.
- Retain documentation in accordance with established retention periods (3 years).
- Send the conflict of interest disclosure form to all members before each evaluation.
- Declare any conflicts of interest on a case-by-case basis and recuse oneself if necessary.

CIC Coordinators (2)

- Conduct a preliminary evaluation of the submissions received.
- Determine whether the matter falls within the CIC's jurisdiction and notify the interested party of the decision.
- Compile all relevant original evidence (documentary, physical, and/or electronic).
- Request that the Chair call an extraordinary meeting when appropriate.
- Declare any conflict of interest on the record and recuse themselves if necessary.

CIC Members

- Participate in the analysis, deliberation, and issuance of resolution reports.
- Attend the meetings that are convened.
- Declare any conflict of interest on a case-by-case basis and recuse themselves if necessary.
- Maintain absolute confidentiality regarding the cases under review.

liSGM Management

- Implement the measures resulting from the CIC's reports.
- Ensure the proper application of the procedure and the independence of the CIC.
- Adopt measures to protect whistleblowers from retaliation (Law 2/2023).
- Receive the CIC's final reports and decide on institutional actions.

FIBHGM Management

- Support the implementation of agreed-upon measures when they affect FIBHGM staff.
- Receive notification of the final reports when the case involves staff under their supervision.
- Coordinate with HGUGM Management when the conflict involves hospital staff.

CONFLICT OF INTEREST: All members of the CIC are required to disclose any conflict of interest (direct or indirect) regarding each specific case, using the appropriate form, before participating in its evaluation. Any member who discloses a conflict of interest shall abstain from participating in the deliberations and the final decision regarding the affected case.

6. DESCRIPTION OF THE PROCEDURE

6.1 Phase 1. Reporting the Incident:

Channels of Communication

- Formal complaints: through the liSGM incident reporting channel ([Incident Report Form](#)) or by email toxic@iisgm.com , using the CIC Reporting Form (see documents). Formal complaints cannot be anonymous.
- Inquiries or requests for mediation: by requesting an appointment via email to the CIC or by emailing cic@iisgm.com , or by regular mail to the Gregorio Marañón Hospital Foundation for Biomedical Research. CIC Presidency. C/DR. ESQUERDO, 46. GOVERNMENT BUILDING, 28007 MADRID. These may be anonymous and will be treated as strictly confidential, or through the anonymous reporting channel established by the liSGM in accordance with Law 2/2023, accompanied by complete documentation.
- Ex officio: when a member of the CIC becomes directly aware of a possible violation of scientific integrity.
- At the request of the liSGM Administration.

Conditions for Admissibility

- Formal complaints must be based on verifiable facts, providing sufficient specific information or evidence, and may not be anonymous.
- Inquiries or requests for mediation must be accompanied by complete and sufficient documentation and contain reasonable indications and evidence of misconduct.

Anonymous Reports

Anonymous communications are admissible under Law 2/2023 (Art. 7.2.d). The CIC will accept them for processing in the following cases:

- When the relevance, significance, and scope of the facts presented warrant it.
- When the facts could result in irreparable harm or consequences. Due to the nature of the anonymous communication, the complainant will not receive an acknowledgment of receipt. The CIC will decide whether or not to accept the case for processing within a maximum of three months from the date of submission.

IMPORTANT: Under no circumstances will complaints based exclusively on rumors, subjective opinions, or value judgments without supporting documentation be accepted. Complaints filed in bad faith or with the intent to cause harm to the accused may result in appropriate disciplinary or legal action.

Whistleblower Protection

The liSGM guarantees the protection of the whistleblower against any form of retaliation, harassment, discrimination, or professional harm arising from the submission of a report made in good faith, in accordance with Law 2/2023. Any act of retaliation must be reported to the liSGM Management, which will take the appropriate measures.

Confidentiality

The confidentiality of all parties will be guaranteed from the moment the report is received. The identity of the complainant will not be disclosed to the person against whom the complaint is filed without the complainant's express consent, unless it is strictly necessary to ensure the right to a defense.

6.2 Phase 2. Registration and Preliminary

Evaluation Responsible Party

Chair or Secretary of the CIC, with support from the Coordinators.

Timeframe

- The maximum timeframe for the CIC to complete the evaluation process and issue its report shall be three months from the date the case is accepted for processing. This period does not include the deadlines set for the submission of clarifications and supplementary documentation requested from the parties involved. When justified by

the complexity or multidisciplinary nature of the case, this deadline may be extended, provided that the applicant is notified of the extension before the initial period expires.

- Acknowledgment of receipt will be provided within 7 calendar days of receiving the communication.

Actions by the Chair or Secretary

- Record the communication in the CIC registry.
- Issue an acknowledgment of receipt to the complainant (except in the case of anonymous complaints), identifying the case with a unique alphanumeric code (format: year-month-day-keyword. Example: 2026-06-08-key). The assigned case code will serve as the unique identifier for the case throughout the entire procedure. All documents generated must reference this code.
- Send the Conflict of Interest Declaration Form (Appendix II) to all CIC members for completion prior to the evaluation.
- Appoint the Coordinators responsible for the case.

Actions of the Coordinators

- Assess whether the report falls within the CIC's jurisdiction and whether it is sufficiently credible, specific, and documented.
- Determine whether the facts described constitute possible research misconduct or questionable practice.
- Notify the concerned party of the decision regarding the CIC's jurisdiction within 7 calendar days.
- If the report is insufficient, request additional information from the parties, specifying the deadline for its submission (this deadline does not count toward the 3-month period).
- Gather all relevant original evidence (documentary, physical, and/or electronic).
- If the case falls within the CIC's jurisdiction, request that the Chair convene an extraordinary meeting within a maximum of 10 business days.

Decision on Jurisdiction

- If the CIC has jurisdiction: the case is accepted for processing and Phase 3 begins.
- If the CIC lacks jurisdiction: the case is closed due to lack of jurisdiction and referred to the appropriate department or body, and the interested party is notified, indicating the body to which they should turn.
- If the complaint is manifestly unfounded or lacks sufficient evidence: it is dismissed with a statement of reasons, and the interested party is notified.

6.3 Phase 3. Evaluation of the case by the

CIC Chair

Scientific Integrity Committee (voting members, subject to a prior declaration of no conflict of interest).

Actions

- Review of all documentation and evidence submitted.
- Analysis of the information and collective deliberation.
- Request for additional documentation or clarifications from the parties when necessary (the time granted does not count toward the 3-month deadline).
- Possibility of conducting personal interviews with any person involved, including those who hold management or leadership roles regarding resources related to the conflict.
- Option to seek the opinion of external experts when the technical or scientific complexity of the case so requires, following a reasoned proposal to the Chair.

Hearing with the respondent (essential safeguard)

Before issuing the preliminary report, the CIC will notify the person against whom the complaint was filed of the allegations against them, providing sufficient detail to ensure their right to a defense, and will grant them a period of TEN (10) BUSINESS DAYS to submit any preliminary arguments they deem appropriate and to provide any documentation they consider relevant.

Referral Due to Occupational Risk

If the dispute shows signs of an occupational risk (harassment, workplace violence, psychological conflict, etc.), the CIC will refer the case to the FIBHGM Management and the Health and Safety Committee (CSS), without prejudice to continuing the evaluation of any scientific integrity issues that may exist. If the dispute involves HGUGM staff, their Management will also be informed.

Suspension of the Procedure — Non bis in idem

If, during the evaluation of the case, the CIC becomes aware that the same facts are the subject of a criminal proceeding or a formal disciplinary proceeding, the CIC's proceedings will be suspended until the resolution of such proceedings, in order to avoid double punishment for the same facts (the non bis in idem principle). The suspension will be notified to the parties and recorded in the case file.

6.4 Phase 4. Decision-Making Process

Decision-Making Mechanisms

- The CIC shall decide by a simple majority of the voting members present.
- In the event of a tie, the Chairperson's vote shall be decisive (casting vote).
- The following are entitled to vote: the Chair, Secretary, Vice Secretary, and Members.
- External advisors do not have the right to vote.
- Members who have declared a conflict of interest regarding the matter will not participate in the deliberation or the vote.

Types of Decisions

Based on the preponderance of the evidence and the respondent's prior statements, the CIC will issue an evaluation report, which may be one of the following types:

- 1. Request for a formal investigation:** The CIC finds that there is sufficient evidence of serious misconduct (FFP). It recommends establishing an investigative committee and initiating the corresponding administrative proceedings. The report is submitted to the liSGM Administration for it to take the appropriate measures.
- 2. Case Dismissed:** The CIC determines that the facts do not constitute research misconduct, either because the facts have not been substantiated or because the substantiated facts do not constitute misconduct. The case is closed with a reasoned report.
- 3. Case Dismissed Due to Lack of Jurisdiction:** The CIC determines that the described facts fall outside its jurisdiction (e.g., labor disputes, intellectual property issues unrelated to research, etc.). The case is referred to the competent body with explicit instructions.
- 4. Report Filed in Bad Faith:** The CIC determines that the report was submitted with fraudulent or malicious intent and lacks a reasonable basis. The liSGM Administration will be notified so that it may take the appropriate disciplinary or legal measures. In the case of complaints or reports filed with malicious intent, the CIC may conduct an investigation to identify the complainant and, if appropriate, file a complaint against them in court.
- 5. Request for Mediation:** The CIC determines that the conflict can be resolved through mediation. A CIC representative will be appointed to facilitate an agreement between the parties. Mediation is voluntary and confidential. If mediation fails, the CIC may reconsider opening a formal proceeding.
- 6. Guidance and Recommendations:** The CIC determines that the facts constitute a questionable practice (QRP) that does not require formal proceedings but does require guidance or training. Recommendations are issued to the parties and/or the liSGM Management.

A final report will be prepared for all resolutions, indicating the decision reached, with proper justification, which will be communicated to the parties and to the FIBHGM Management. If the decision is favorable to the person against whom the complaint was filed (dismissal or closure of the case), the CIC may urge the complainant to take the necessary steps to restore the reputation of the person against whom the complaint was filed and will monitor compliance. The liSGM Administration will adopt the necessary institutional measures to ensure such restoration.

6.5 Phase 5. Arguments and

Closure: Deadlines

Action	Deadline	Calculation
Notification of the initial decision to the parties	Within 3 months of acceptance for processing	Counts toward the 3-month period
Time limit to submitting arguments (parties)	10 business days from receipt of the decision	NO included toward the 3-month period
Response from the CIC to the objections	30 calendar days from the date of acknowledgment of receipt of the objections	NO included toward the 3-month period
Issuance of the final report	After responding to objections or once the deadline has passed without any objections	Case closed

Objections process

- The CIC will notify the complainant and the respondent of the initial decision, including the contents of the preliminary report.
- Both parties will have 10 business days from receipt of the decision to submit any objections they deem appropriate.
- The CIC will have a maximum of 30 calendar days from the date of acknowledgment of receipt of the responses to address them and issue the final report.
- If no statements are submitted within the established timeframe, the initial decision will become the final report.

Closure of the case

- Issuance of the final report containing the definitive decision, duly substantiated.
- Forwarding of the final report to the liSGM Directorate and the FIBHGM Management.
- Notification of the decision to the affected parties.
- Notification to the CSS or the HGUGM Management, if applicable.
- Filing and safekeeping of the complete case file with document traceability.

Informal Communications

Inquiries and requests for mediation will also generate a case file, even if they do not require a formal report from the CIC. All emails and communications must include

acknowledgment of receipt. The file will be archived along with the documentation generated and the decision adopted.

7. MINUTES AND REPORTS

Meeting Minutes

The minutes of each CIC meeting must include:

- Date, time, location, and format of the meeting (in-person/virtual).
- Members present and absent, indicating those who abstained due to a conflict of interest.
- Cases discussed (identified by code, with no personal information in the header of the minutes).
- Procedure followed, evidence presented and analyzed, discussions, and deliberations.
- Resolutions and decisions adopted, with an indication of the voting results.
- Who drafts, approves, files, and distributes the document.

The minutes shall be drafted by the Secretary and approved at the next regular meeting of the CIC, or within a maximum of 10 business days following the meeting.

Resolution Reports

The final report for each case must contain at least the following:

- Case number and date of initiation.
- Description of the facts that are the subject of the complaint.
- Analysis of the evidence submitted and the arguments of the parties.
- Type of decision adopted (in accordance with the types defined in Section 6.4).
- Reasons for the decision.
- Recommendations or proposed measures, if applicable.
- Date of issuance and signatures of the Chair and Secretary of the CIC.

Language and Style

The language used in the minutes and reports must be neutral, objective, and based on verifiable facts, while respecting privacy, the presumption of innocence, and the GDPR. No details that could lead to parallel judgments will be disclosed, nor will subjective assessments be included. In cases involving anonymous individuals, their identities will remain confidential.

8. CONFIDENTIALITY, PROTECTION, AND COMMUNICATION

Obligation of Confidentiality

All members of the CIC, as well as any person participating in the proceedings (external experts, support staff), have an absolute obligation of confidentiality

regarding the cases handled, their contents, and the individuals involved. This obligation extends indefinitely, even after leaving office.

Any breach of the obligation of confidentiality will be reported to the liSGM Directorate and the FIBHGM Management, which will take the appropriate disciplinary measures.

Personal Data Protection

The processing of personal data within the framework of this procedure is carried out in accordance with Regulation (EU) 2016/679 (GDPR) and Organic Law 3/2018 (LOPDGDD). The legal basis for the processing is compliance with a legal obligation and the exercise of public authority in the public interest (Art. 6.1.c and 6.1.e GDPR).

- The personal data collected will be strictly limited to what is necessary for the processing of the case.
- Data subjects have the right to access their personal data contained in the case file, subject to the limitations set forth in Art. 23 of the GDPR during the active investigation phase.
- The data will not be disclosed to third parties except where required by law or when strictly necessary for the resolution of the case.

Communication of Results

The outcome of the case will be communicated only to those who need to know it: the affected parties, the liSGM Administration, the FIBHGM Management, and, where applicable, the CSS or the HGUGM Management.

Protection Against Retaliation

The CIC must actively protect the complainant and witnesses, preventing any form of retaliation, harassment, or discrimination arising from their participation in the proceedings. The CIC will promote the imposition of sanctions in the event of retaliation, in accordance with Law 2/2023.

9. RECORDS

Documents generated as part of this procedure are confidential and will be retained for a minimum of THREE (3) YEARS from the date the case is closed, in accordance with the provisions of Article 9.2.j of Law 2/2023. Once this period has elapsed, the documents will be securely destroyed, ensuring the confidentiality of personal data.

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REGULATIONS OF THE SCIENTIFIC INTEGRITY COMMITTEE (CIC) of the Gregorio Marañón Health Research Institute (IISGM)

Drafted by	Reviewed by:	Approved by:
Dr. M. Relloso and Dr. M. Guembe	CIC	CIC meeting on November 5, November 2025 and recorded in Minutes No. 4.2025
Revised CIC	CIC	

These Regulations were revised by Dr. M. Relloso, approved by the members of the CIC at the Plenary Session on June 8, 2026, as recorded in Minutes No. 5.2026, and will take effect on the same day they are approved by the Committee.

REVISION HISTORY

REVISION	DATE	CHANGES AND COMMENTS
0	November 2025	Document created
1	June 2026	Document revision

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PREAMBLE

High-quality scientific research requires not only methodological rigor but also integrity in all aspects of the research process: from experimental design to the communication of results. National and international regulations recognize scientific integrity as a fundamental value that research institutions have an obligation to promote and safeguard.

The Gregorio Marañón University General Hospital (HGUGM) and the Gregorio Marañón Health Research Institute (hereinafter IISGM), whose legal entity is the Gregorio Marañón Hospital Foundation for Biomedical Research (hereinafter FIBHGM), assumes this commitment through the establishment of the Scientific Integrity Committee (hereinafter CIC), a body that serves as a consultative, mediating, and advisory body on matters of responsible research conduct.

These Regulations are issued pursuant to Law 14/2011, of June 1, on Science, Technology, and Innovation, as currently in force following the amendment introduced by Law 17/2022, of September 5; Law 2/2023, dated February 20, regulating the protection of individuals who report regulatory violations and the fight against corruption; Regulation (EU) 2016/679 of the European Parliament and of the Council (GDPR); and Organic Law 3/2018, of December 5, on the Protection of Personal Data and the Guarantee of Digital Rights (LOPDGDD).

The CIC serves as a confidential, advisory, and neutral first point of contact where researchers, students, technical staff, and other personnel can discuss concerns related to scientific conduct. Its operations are guided by the principles of independence, impartiality, confidentiality, fairness, and respect for the right of defense of all parties.

Among the CIC's responsibilities is the resolution of research conflicts, defined as those problems, issues, or disputes that may violate the provisions of the IISGM Code of Good Scientific Practice or that involve a deviation from good scientific practices.

The GENERAL OBJECTIVE of the CIC is to promote and safeguard integrity, transparency, and accountability in scientific research, seeking compliance with national and international regulations.

The specific objectives are:

- To establish channels for compliance with ethical and scientific standards in research.

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- To detect, prevent, and address cases of scientific misconduct.
- To train researchers and staff in scientific integrity and best practices.
- To promote accountability in the communication of results, including transparency and open data.
- To comply with the Code of Good Scientific Practice as required by national and European regulations.

Article 1. Purpose of the Regulations.

The purpose of these Regulations is to govern the functions and operating procedures of the liSGM's Scientific Integrity Committee (CIC), with the aim of mediating, preventing, and promoting best practices in scientific research.

The CIC is a confidential advisory, mediating, and consultative body whose actions do not replace any applicable administrative or judicial procedures. The CIC does not conduct formal investigations or impose sanctions; its role is to provide guidance, mediate, and, where appropriate, recommend the initiation of the corresponding formal procedures.

Members involved in CIC proceedings are required to act impartially and objectively, to disclose any actual or potential conflict of interest, and to recuse themselves or be recused from proceedings in which such a conflict arises, in accordance with the procedure established in Article 4 of these Regulations.

The CIC is committed to providing the highest level of protection for the information and the individuals involved in its proceedings, guaranteeing the right to a defense and the protection of all parties—whether complainant or respondent—at all stages of the proceedings.

Article 2. Composition, Appointment, Removal, and Renewal.

2.1 Composition of the CIC.

The CIC consists of the following positions:

- Chair: a member of the liSGM elected by the CIC Plenary and ratified by the liSGM Directorate. The position of Chair may not be held by members from outside the liSGM. The Chair's term of office shall be two years, renewable for an additional two years.

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- Secretary: a CIC member elected by the CIC Plenary. The Secretary shall assume the duties of the Chair in the Chair's absence.
- Vice Secretary: a CIC member elected by the CIC Plenary. The Vice Secretary will assume the duties of the Secretary in the event of the Secretary's absence.
- Ex officio members: The chairs or secretaries of the following commissions and committees, to be elected by those bodies, are ex officio members: the Training Commission, the Committee on Ethics in Drug Research (CEIm), the Committee on Animal Experimentation Ethics (CEEa), and the Biosafety Committee.
 - A representative from the FIBHGM.
 - Internal members: the remaining members of the Committee who belong to the liSGM, whose number will be determined according to needs and who have received appropriate prior training in scientific integrity.
 - External member(s): one or more advisory members with experience and expertise in scientific integrity who have no direct relationship with the center or with the procedures being processed.

The total number of members of the CIC shall be between nine and eleven. Efforts will be made to ensure gender parity in the Committee's composition, in accordance with the principles of equality promoted by Law 17/2022.

2.2 Duties of the Officers.

2.2.1 The Chair shall have the following duties:

- To serve as the representative of the CIC.
- Convene and preside over CIC meetings, both regular and special, as well as open, conduct, and adjourn sessions.
 - To sign the relevant minutes after they have been approved.
 - Sign the CIC's decisions and reports.
 - Authorize, with his or her signature, certificates, reports, and communications addressed to third parties.
 - To cast the deciding vote in the event of a tie, for the purpose of adopting resolutions.
 - Ensure compliance with the laws and these Regulations.
 - Endorse the CIC's minutes, resolutions, and reports.
 - Respond, on behalf of the CIC, to specific inquiries from researchers, the liSGM Directorate, or the competent authority.
 - If necessary, make decisions on behalf of the CIC in emergency situations or minor matters, reporting to the Plenary at the next session.

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- Ensure that CIC members comply with the obligation to disclose conflicts of interest.
- Report to the Occupational Safety and Health Commission on cases with a potential impact on workers' health, in coordination with the FIBHGM Management.
- Perform any other duties inherent to the position of CIC Chair.

2.2.2 The Secretary shall have the following duties:

- Perform all duties assigned by the President and assume the President's duties in the event of the President's absence.
- Draft and issue notices of CIC meetings, in accordance with instructions received from the Chair and with due notice.
- Draft the minutes of CIC meetings, listing the members in attendance, ensuring that, once approved, they are filed in the appropriate archive and signed by the President.
- Receive and account for all requests and communications sent to the CIC.
- Issue, with the President's approval, the certificates, reports, communications, and resolutions that are adopted.
- Oversee the annual drafting of the CIC's Annual Report and submit it to the liSGM Administration by March 31 of the following year.
- Manage the CIC's archives and the safekeeping of documentation, in coordination with the FIBHGM representative.

2.2.3 Deputy Secretary.

The CIC may appoint a Deputy Secretary who will carry out the duties assigned or delegated by the Secretary and will assume the Secretary's duties in his or her absence. In the simultaneous absence of the President and the Secretary, the Deputy Secretary will assume the duties of both if circumstances so require.

2.2.4 The duties of the members (internal, ex officio, or external) shall be:

- To receive the notice of the meeting containing the agenda for the corresponding session; information on the items listed on the agenda shall be made available to the members within the same minimum timeframe.
- To attend meetings or provide justification for their absence.

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- Conduct the evaluations entrusted to them and prepare a detailed report on their decisions, in accordance with the provisions of these Rules of Procedure.
- Participate in the debates during the sessions.
- Exercise their right to vote and cast dissenting votes, as well as explain the basis for their vote and the reasons justifying it.
- To raise requests and ask questions.
- Obtain the information necessary to perform their duties.
- Declare any actual or potential conflict of interest regarding the cases they are to evaluate by completing the conflict of interest declaration form provided for in Article 4.5 of these Regulations.
- Any other duties inherent to their status as members of the CIC.

2.2.5 The representative of the FIBHGM.

The FIBHGM representative shall attend meetings and have the same duties as the other members.

2.2.6 Case Coordinators.

For each case, the chairperson shall appoint three coordinators from among the members of the CIC to manage communication with the parties, monitor the case, and present it at CIC meetings.

2.3 Duties, rights, and grounds for termination of members.

Once the CIC has been established and for subsequent renewals of its members, the CIC itself will decide on the appointment and termination of members, subject to ratification by the liSGM Management.

2.3.1 Duties of CIC members:

- Attend meetings, prepare adequately for them, and participate actively in discussions.
- Maintain confidentiality regarding CIC discussions, files, and reports, even after their membership has ended.
- Declare any actual or potential conflict of interest regarding the matters to be discussed.
- Act with impartiality, objectivity, and independence of judgment.

2.3.2 Rights of CIC members:

- To be notified of meetings with the advance notice and documentation provided for in these Rules.

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- To participate with the right to speak and vote in CIC deliberations and decisions, except for the representative of the FIBHGM and invited external advisors.
- To receive the information necessary to perform their duties.
- To propose items for the agenda.
- To receive a letter of appointment that they may use for merit evaluation.

2.3.3 Grounds for termination or resignation.

All CIC members shall lose their status upon the occurrence of any of the following causes:

- Resignation, with the exception of resignations submitted by ex officio members.
- A final court ruling.
- Retirement.
- Death.
- Expiration of the term for which they were appointed, if applicable.
- Ceasing to be an active member of any of the institutions comprising the liSGM.
- Repeated and unjustified absence from CIC meetings. Repeated absence shall be understood to mean absence without just cause from three consecutive meetings or from half of the meetings held during the same calendar year.
 - Breach of the duty of confidentiality.
 - A conflict of interest arising from their status as a CIC member.
 - CIC members who hold their position by virtue of a previous office (ex officio members) shall lose that status upon ceasing to hold that office.

2.3.4 Renewal.

After four years of membership, members may apply for reelection (except those who serve by virtue of their position), ensuring that no more than 50% of the membership is renewed, excluding ex officio members. If the CIC deems it appropriate, it may allow the reelection of a member for reasons of continuity or accumulated experience.

To encourage the inclusion of new members, outgoing members may not seek reelection to the CIC in the next election cycle.

Members external to the CIC shall be elected, upon the proposal of CIC members, based on their merits and experience. Renewal shall take place every two years, and they may be reelected for an additional two-year term, up to a maximum of six years. In all

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cases, the need to maintain the accumulated experience within the Committee shall be taken into account.

Article 3. Functions of the CIC.

The CIC shall perform the following functions:

3.1 Confidential channel.

To serve as the first confidential, advisory, and neutral point of contact so that researchers, students, technical staff, and other personnel can discuss concerns related to scientific conduct informally and without initiating formal proceedings.

3.2 Advice and Guidance.

To provide information and advice to members of the research community on:

- Standards of good scientific practice and research integrity.
- liSGM's internal policies on responsible research conduct.
- Applicable ethical and regulatory protocols.
- How to address dilemmas or conflicts related to authorship, intellectual property, data analysis, etc.
- The scope of internal and external conflicts of interest and how to resolve them.

3.3 Informal conflict resolution.

Mediating conflicts among researchers (disputes over authorship, use of resources, supervision, etc.) informally, facilitating communication between the parties to find a solution before the conflict escalates.

3.4 Information on formal procedures.

Inform the person seeking assistance about the formal channels available for filing a complaint or report (which cannot be anonymous) if the situation warrants it. The CIC does not conduct formal investigations or impose sanctions; its role is to mediate, provide guidance, and, when appropriate, recommend that the relevant procedures be initiated.

3.5 Protection against retaliation.

Advise and guide individuals who fear retaliation for raising a concern in good faith, informing them of their rights and the protection mechanisms provided for in Law 2/2023 of February 20 and in these Regulations.

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3.6 Identification of systemic problems.

To identify recurring trends or problems within the institution that may affect the integrity of research and, while maintaining confidentiality, make recommendations to the liSGM Management for their correction.

3.7 Training and promotion of a culture of integrity.

Participate in the organization of workshops and training sessions to raise awareness among the research community about the importance of responsible conduct in research. Collaborate with the liSGM Training Committee in designing training activities on scientific integrity.

3.8 Updating the Code of Good Scientific Practice.

Propose to the liSGM Administration that the liSGM Code of Good Scientific Practice be updated when regulatory, scientific, or ethical developments so warrant, and in any case at least once every five years.

3.9 Annual Activity Report.

Prepare an annual activity report that will include, at a minimum: the number of inquiries and cases received, classified by type of matter; the number and type of decisions adopted; the training activities carried out; and the recommendations for systemic improvement made to the liSGM Management. The report shall be submitted to the liSGM Directorate and the FIBHGM Management before March 31 of the following year, and shall be approved by the CIC Plenary.

3.10 Other functions.

Any other functions assigned to it by current legislation or the governing bodies of the liSGM.

Article 4. Operation of the CIC.

The operation of the CIC shall be governed by the provisions of these Regulations and by current legislation regarding the legal framework of public administrations.

4.1 Meetings.

The Chair shall convene the CIC at least once per quarter for a regular session. The schedule of regular meetings for the following year shall be proposed and agreed upon at the Committee's last annual meeting, thereby establishing a tentative schedule with dates that may be altered—only for justified reasons—at the request of one or more members and provided that a quorum is present.

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Extraordinary meetings shall be convened by the Chair, either on his or her own initiative or at the request of at least one-third of the members entitled to vote, or at the proposal of the coordinators of a case when the urgency of the matter so requires. Extraordinary meetings shall be scheduled at least ten business days in advance.

The Secretary shall issue notices for both regular and special meetings at least one week in advance, and the relevant documentation shall be sent at least three days prior to the meeting. The location of the meetings and the agenda shall be specified in the notice.

Meetings may be held in person, virtually, or in a hybrid format, in accordance with the provisions of Article 17 of Law 40/2015, of October 1, on the Legal Regime of the Public Sector.

4.2 Meeting Documentation.

Each notice of meeting shall provide the means for CIC members to carry out their review work and, if required, report on any proceedings. The draft minutes of the previous meeting shall be sent by email along with the notice of meeting for review. Members' comments shall also be sent by email or made on the day of the meeting.

4.3 Quorum and Voting.

For the CIC Plenary Session to be validly constituted, at least one-third of its members must be present, either in person or remotely. No member may delegate their duties or be replaced at CIC sessions. Proxy voting is not permitted.

CIC decisions shall be adopted by a simple majority of the members present and eligible to vote. In the event of a tie, the Chair's vote shall be decisive (casting vote).

The following have the right to vote: the Chair, the Secretary, the Vice Secretary, and all members. The representative of the FIBHGM and any advisors or individuals from outside the CIC who may be called upon during the process do not have the right to vote.

4.4 Committees.

The CIC may conduct its work in plenary sessions and through committees. The CIC may establish committees to review procedures when the number, deadlines, or nature of the reports to be prepared so require. Committees shall consist of at least two members with voting rights and shall perform whatever functions are entrusted to them by the

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CIC Plenary. The committees' conclusions shall be submitted to the Plenary for approval.

4.5 Confidentiality and Conflict of Interest.

CIC members are bound by the principle of confidentiality regarding both the deliberations and the reports and case files. This obligation extends to external experts invited to participate in any proceeding.

For each case, the Secretariat will send all CIC members a conflict-of-interest disclosure form, which must be completed and returned before the session in which the case is discussed. Any member who declares a conflict of interest—whether actual or potential—shall abstain from participating in the deliberations and the corresponding vote, and may be replaced by an ad hoc expert if necessary.

Any party involved in a case may request the recusal of a CIC member due to a conflict of interest by submitting a written, reasoned request addressed to the Chair. The CIC Plenary will rule on the recusal within five business days, without the participation of the member in question.

4.6 Minutes.

The Secretary shall prepare minutes for each session held. The minutes shall include: the attendees, the meeting agenda, the location and the start and end times of the meeting, the format of the session (in-person, virtual, or hybrid), the main points of discussion, and the resolutions adopted, with an indication of the voting results. The minutes shall be approved at the next session.

The Secretary shall send the draft minutes to all CIC members at least ten days before the next session is held.

The minutes must be drafted in a manner that preserves the anonymity of the researchers involved, as required by the initiated procedure. The language of the minutes and reports must be neutral and objective, avoiding premature assessments or judgments, and including only verified and relevant information.

4.7 Archiving and Documentation.

The CIC archive will be kept in the custody of the FIBHGM. This archive will contain the original minutes, a copy of all reports and case files, as well as any other documentation generated during the information-gathering and evaluation process. This archive may be consulted by any CIC member and by the liSGM Directorate.

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To facilitate archiving and documentation, all proceedings will be assigned an identification number. The code will consist of the start date of the process (year/month/day) and a keyword (example: 20260608keyword).

Files related to complaints and inquiries shall be retained for a minimum of three years from the date of resolution of the procedure, in accordance with Article 9.2.j of Law 2/2023. The minutes of CIC meetings shall be retained indefinitely.

Archive documentation may be stored electronically, provided that its authenticity, integrity, availability, and traceability are guaranteed. Access to the electronic archive will be restricted to the Chair and the Secretary of the CIC, and to the FIBHGM representative in their capacity as custodian. The processing of personal data contained in the archive will comply with the provisions of the Second Additional Provision of these Regulations.

Committee members are required to ensure that all communication among themselves is conducted with the utmost confidentiality and that files are sent via official email.

4.8 External Experts.

When the CIC deems it appropriate, it may seek the opinion of external experts, who shall also be subject to the principle of confidentiality and must complete the conflict of interest disclosure form provided for in Article 4.5. External experts shall have a voice but no vote.

Article 5. Scope of Action.

5.1 Definitions.

For the purposes of these Regulations, the following definitions shall apply:

- Good scientific practices: a set of actions and responsibilities applicable to both institutions and all stakeholders involved in the research process, compliance with which is intended to preserve scientific integrity, reliability, and quality.
- Research misconduct: fabrication, falsification, or plagiarism in the proposal, conduct, or communication of research, committed intentionally or through gross negligence.
- Fabrication: inventing data, results, or references and recording or publishing them as if they were real.

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- **Falsification:** manipulating research materials, equipment, or processes, or modifying, omitting, or suppressing data or results without justification, such that the research is not accurately represented.
- **Plagiarism:** using or misappropriating data, results, ideas, or the work of others without giving sufficient credit to the original sources, thereby infringing on the rights of the original authors.
- **Questionable research practices:** behaviors that, while not constituting serious misconduct, deviate from good scientific practices. These include, among others: self-plagiarism, unjustified authorship (“gifting” of authorship), failure to disclose conflicts of interest, negligent data management, duplicate publication, and manipulated peer review.
- **Conflict of interest:** a situation in which professional judgment applied to a primary interest (the validity of research, the fulfillment of professional responsibilities) may be influenced by a secondary interest (financial gain, personal relationships such as friendship, enmity, hierarchy, or family ties).
- **Authorship conflict:** a situation in which members of a research group cannot agree on aspects of authorship attribution, order of appearance in articles, or other authorship-related matters.

5.2 Consideration of Unethical Practices.

Scientific misconduct is defined as any problems, issues, or disputes that may violate or deviate from the provisions of the liSGM Code of Good Scientific Practice and the ICHE6(R3) Code.

5.3 Scope.

The liSGM Code of Good Scientific Practice applies to all its research staff, including those in training and those performing research-related functions—technical and support staff—regardless of the nature of their relationship with the liSGM or whether their employment is permanent or temporary.

5.4 Types of Violations.

The following shall be considered serious misconduct: fabrication, falsification, and plagiarism.

The following shall be considered questionable practices: self-plagiarism, unjustified authorship (“gifting” of authorship), failure to disclose conflicts of interest, negligent data management, duplicate publication, manipulated peer review, and other similar conduct.

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5.5 Matters Not Accepted.

The CIC will not consider issues regarding the validity of scientific hypotheses or the quality of the work, but only the integrity of the process. Nor will it consider issues that go beyond the scope of the liSGM Code of Good Scientific Practice.

Disputes over authorship will be resolved in accordance with the provisions of the liSGM Code of Good Scientific Practice, while also taking into account the guidelines established by the publication's editors and the provisions set forth in the liSGM's procedures for the use of research results.

The CIC shall have no jurisdiction to intervene in matters that are currently being addressed in legal proceedings. In such cases, the CIC shall suspend its actions until a final judicial decision is rendered, without prejudice to any precautionary measures that may be adopted in accordance with Article 6.3 of these Regulations.

5.6 Education and Prevention.

The CIC is committed to proactively promoting the organization of workshops, disseminating guides to best practices, and advising researchers on matters of scientific integrity.

Article 6. Regulation of the CIC's Procedural Framework.

6.1 Incident Reporting Procedure.

These Regulations govern the CIC's procedures and operating standards. The detailed procedure for handling cases of misconduct is set forth in a specific document approved by the CIC.

Reports of complaints or issues related to the CIC must be submitted through the liSGM's communication channel. For in-person consultations, which will be evaluated informally and confidentially, an appointment must be scheduled via the CIC's email (cic@iisgm.com).

All researchers affiliated with the liSGM or collaborators are required to report any known or suspected cases of misconduct. Individuals are expected to act in good faith when raising a concern (which may be anonymous) or filing a complaint (which may NOT be anonymous) regarding misconduct, or when cooperating with the procedures for resolving such cases.

Reports must be based on facts and must provide supporting documentation or specific evidence. Research notebooks will be

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used as documentary evidence if necessary (it is recommended to follow the instructions in Annex I).

Formal complaints may not be anonymous, except in cases where the relevance, significance, and scope of the facts presented warrant it, or when such anonymity could result in irreparable harm or consequences for the complainant, in accordance with Article 7.2.d of Law 2/2023 of February 20. Complaints must be accompanied by complete and sufficient documentation, as well as sufficient indications and evidence of misconduct. Inquiries, however, may be anonymous in all cases.

6.2 Procedure for Handling Incident Reports.

Stages and Procedures:

FIRST. The procedure is initiated through the IISGM's communication channel or, in the case of in-person inquiries or requests for an in-person consultation, by scheduling an appointment via the CIC's email (cic@iisgm.com).

SECOND. Upon receiving the report, an acknowledgment of receipt will be issued within a maximum of seven calendar days; the report will be assigned a code and a file will be opened in the CIC's records. Three case coordinators will be assigned. The coordinators will evaluate the report to determine whether it falls within the definition of malpractice and is sufficiently credible and specific to allow for the identification of evidence of malpractice.

The coordinators will inform the CIC and the complainant whether or not the Committee has jurisdiction to consider the matter, and may also recommend other bodies to which the complainant should turn. If the Committee has jurisdiction, the coordinators will convene a special meeting of the CIC within ten business days.

If they consider the inquiry to be insubstantial, they may request additional information from the parties for evaluation at the CIC meeting. The coordinators will take all reasonably necessary measures to obtain all original evidence (physical and/or electronic) relevant to the analysis of the case.

If the matter does not constitute a potential case within the CIC's jurisdiction or falls under another area of responsibility, the procedure will not be initiated, and, if appropriate, the interested party will be referred to the relevant department.

THIRD. At the extraordinary CIC meeting, the case will be discussed, all evidence will be reviewed, and the following actions may be taken: the case may be dismissed, a mediation process may be initiated, or a process may be initiated that involves filing a request for intervention due to an internal conflict.

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The CIC will issue a report that will preserve anonymity where deemed appropriate, and this report will be sent to the person who filed the complaint, the liSGM Directorate, and the FIBHGM Management so that appropriate administrative actions may be considered.

If the report concludes that a workplace risk exists (harassment, internal conflicts, workplace violence, and/or psychological harassment), the case will be referred to the FIBHGM Management, and the report will be forwarded to the Occupational Safety and Health Committee (CSS) to initiate the appropriate administrative procedures.

6.3 Decision-Making Process.

The CIC will decide by a simple majority of the members present and eligible to vote. In the event of a tie, the Chair's vote will be decisive (casting vote).

The maximum timeframe for the CIC to complete the evaluation process and issue its report shall be three months from the date the case is accepted for processing. The timeframes set for the submission of clarifications and supplementary documentation requested from the parties involved shall not be included in this period. When justified by the complexity or multidisciplinary nature of the case, this period may be extended, provided that the applicant is notified of the extension before the initial period expires.

Before the final report is issued, the person under investigation will have ten business days to submit comments on the CIC's preliminary report. The CIC will have a maximum of thirty calendar days from receipt of the comments to respond to them and incorporate them, if appropriate, into the final report.

Types of decisions: Based on the preponderance of the evidence, the CIC will issue an evaluation report containing one of the following decisions:

- Request for investigation: This is considered a possible case of misconduct, and it is recommended that the protocol for processing a request for intervention due to an internal conflict or administrative proceeding be activated, as appropriate.
- Request Dismissed: The inquiry is dismissed as a case of misconduct.
- Case closed due to lack of jurisdiction: The matter falls outside the CIC's scope and is referred to the appropriate body or department.
- Report made in bad faith: This will be brought to the attention of the liSGM Management so that they may take the measures they deem appropriate.
- Request for mediation: The CIC will appoint a representative to meet with the parties to reach an agreement.

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In all cases, a final report will be prepared stating the CIC’s decision, which will be communicated to the parties and to the FIBHGM Management.

A request for mediation may lead to an agreement between the parties and the resolution of the matter. The coordinators will inform the CIC of the initial agreement, and the CIC will issue a report containing the necessary considerations and recommendations for each case.

Informal communications—whether through the communication channel or in person—do not require a CIC report, but they must result in a case file that will be presented at the CIC meeting and must be properly archived and safeguarded.

The CIC will thoroughly assess the scope of the case file and whether there is evidence of misconduct in other investigations in which the individual involved is participating.

The meeting minutes must document the proceedings, the evidence presented, discussions, agreements, and decisions. In the case of anonymous proceedings, consultations, or mediation, the minutes must preserve the anonymity of the parties.

6.4 Confidentiality, Protection, and Communication.

Strict confidentiality: All CIC members are under an absolute obligation of confidentiality. In the event of a breach, the matter will be brought to the attention of the liSGM Directorate and the FIBHGM Management so that they may take the measures they deem appropriate.

The outcome will be communicated only to those who need to know it (institutional authorities, affected parties).

The CIC must protect the complainant and witnesses, ensure that any form of retaliation, harassment, or discrimination is prevented, and report and seek sanctions against those who engage in such conduct, in accordance with the provisions of Law 2/2023 of February 20, which regulates the protection of individuals who report regulatory violations. The prohibition on retaliation includes, among other things: dismissal, non-renewal of a contract, reputational damage, blacklisting, or any other unfavorable treatment.

When there is evidence that a report was made in bad faith, the CIC will investigate it, seek redress for damages, and may take appropriate action against the whistleblower.

Article 7. Regulatory Framework.

The CIC carries out its functions within the framework of the following regulations and reference documents:

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Spanish Regulations:

- Law 14/2011, of June 1, on Science, Technology, and Innovation, as currently in force.
- Law 17/2022, of September 5, amending Law 14/2011, of June 1, on Science, Technology, and Innovation.
- Law 2/2023, dated February 20, regulating the protection of individuals who report regulatory violations and the fight against corruption.
- Organic Law 3/2018, of December 5, on the Protection of Personal Data and the Guarantee of Digital Rights (LOPDGDD).
- Law 40/2015, of October 1, on the Legal Framework for the Public Sector.
- liSGM Code of Good Scientific Practice (current version).

European Regulations:

- Regulation (EU) 2016/679 of the European Parliament and of the Council of April 27, 2016, on the protection of natural persons with regard to the processing of personal data (GDPR).
- Directive (EU) 2019/1937 of the European Parliament and of the Council of October 23, 2019, on the protection of persons reporting on breaches of Union law.
- Commission Recommendation (EU) 2018/790 of April 25, 2018, on access to and preservation of scientific information.

International reference documents:

- The European Code of Conduct for Research Integrity (ALLEA — All European Academies, 4th edition, 2023). <https://allea.org/code-of-conduct/>
- Declaration National on Scientific
https://www.csic.es/sites/www.csic.es/files/declaracion_nacional_sobre_integridad_cientifica_castellano-ingles.pdf
- Manual on Conflicts of Interests of the CSIC.
https://www.csic.es/sites/www.csic.es/files/manual_de_conflictos_de_intereses_del_csic_version_espanol_ingles.pdf
- Singapore Statement on Research Integrity. <https://wcrif.org/guidance/singapore-statement>
- Montreal Statement on Research Integrity in Cross-Boundary Research Collaborations (2013). <https://wcrif.org/montreal-statement/file>
- The San Francisco Declaration on Research Assessment (DORA). <https://sfedora.org/read/>

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- The European Charter for Researchers and The Code of Conduct for the Recruitment of Researchers. <https://euraxess.ec.europa.eu/>
- Seven Reasons to Care about Integrity in Research (Science Europe). <https://www.scienceeurope.org/>
- CSIC Code of Good Scientific Practice (revised edition, 2021).
- ENRIO Handbook on Whistleblower Protection in Research. https://oeawi.at/wp-content/uploads/2023/08/2023-ENRIO_Handbook-on-Whistleblower-Protection-in-Research.pdf

Article 8. Final Provisions.

8.1 Amendment of the Regulations.

Amendments to these Regulations must be approved by a simple majority of the CIC members entitled to vote who are present at the meeting, provided that the quorum consists of at least an absolute majority of said members. The Regulations will be reviewed approximately every five years, and in any case whenever changes occur in the applicable regulations.

8.2 Regulatory Gaps.

In the event of a situation not provided for in these Regulations, the Committee shall act in accordance with general principles of law, applicable regulations in force, and decisions adopted by a simple majority of its members.

8.3 Personal Data Protection.

The processing of personal data carried out within the framework of the CIC's activities shall comply with the provisions of Regulation (EU) 2016/679 (GDPR) and Organic Law 3/2018 (LOPDGDD). The personal data of researchers, CIC members, and other individuals involved in the proceedings will be processed exclusively for the purpose of fulfilling the Committee's functions and will not be disclosed to third parties except in cases provided for by law.

CIC members are required to maintain confidentiality regarding the personal data to which they have access in the performance of their duties, even after they have ceased to be members of the Committee. The liSGM/FIBHGM is the data controller for the CIC's personal data. Data subjects may exercise their rights of access, rectification, erasure, restriction of processing, data portability, and objection by contacting the HGUGM's Data Protection Officer.

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8.4 Repeal Provision.

The Regulations of the liSGM Scientific Integrity Committee, approved on November 5, 2025, are hereby repealed, as are any provisions of equal or lower rank that conflict with the provisions of these Regulations.

8.5 Entry into Force.

These Regulations shall enter into force on the same day they are approved by the CIC.

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ANNEX I

Research Log (Basic or Clinical) as Documentary Evidence.

The Research Notebook is the official means of maintaining a complete record of a researcher's activities regarding any matter related to intellectual or industrial property. The notebook serves as key documented evidence of the researcher's role in the work being conducted.

The Research Log and the information it contains are the property of the FIBHGM, and the IP is the custodian of the log and is responsible for its filing and preservation.

Instructions for the proper use of the research notebook:

A Research Notebook is a tool for recording research; it is therefore used to document hypotheses, experiments, and the analysis or interpretation of results.

The research notebook should be viewed as a journal in which each and every experiment conducted is recorded, along with any incidents of any kind that may have occurred.

The primary characteristic of a research notebook is that it must clearly and unambiguously state what was done, how it was done, who did it, and when it was done. Furthermore, it must contain all the information necessary to reproduce the experiment.

Use of Research Notebooks:

The research notebook must have a permanent binding—that is, it must be hardcover with sewn pages—since this ensures that the only way to remove a page is by cutting it out. The pages must be numbered, and care must be taken to ensure that each entry is properly dated and signed.

In general, the notebook must be maintained carefully and diligently so that, at any later time, the author or another scientist can repeat any experiment or procedure using only the notebook as a guide.

What information must be recorded and how:

- The experimental design must clearly identify and quantify the materials used and their source, whether commercial, internal, or from third parties.
- All observed results or data must be recorded, including negative results.

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Storage and Safekeeping of Notebooks:

- The notebook must be stored in a secure location (with access restricted to individuals not involved in the research), and its safekeeping is the responsibility of the Principal Investigator (PI)/group leader or a person to whom the PI delegates this responsibility.
- The Principal Investigator must maintain a record of the notebooks.
- The notebook may be stored for a minimum of 5 years, although ideally it should be kept indefinitely so that it can be used at any time, bearing in mind that the validity date for protection purposes will be the one that appears in the records.
- The information generated must be stored on the FIBHGM network and on a dated, write-protected disc, preferably non-rewritable CDs or DVDs. The disc must be kept in a secure location and referenced in the laboratory notebook. If possible, a backup copy should be maintained on an external server.