

# Research Handbook

Concise practical information to assist in the planning and implementation of research projects

Version 3 - March 2023

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### **About This Handbook**

This research handbook is intended to support researchers in the Neurological Department and contains information about local routines. Additional information and forms referred to here are available in the Research Section's folder on the OUS network:

K:\Felles\NVR\NEV\Forskningsseksjonen. OUS has also developed a research handbook: "From Idea to Publication" by Karin C. Lødrup Carlsen and Annetine Staff. This is a more comprehensive and general document.

### **ANCHORING AND APPROVAL** Research Procedure - REK, SLV, and PVO

Everyone planning a research project must be familiar with the general research procedure for OUS. Research projects involving patients or health information must be approved by REK. Studies reporting results from quality work related to clinical operations are exempt from this requirement. For studies involving drugs, there is now a joint application to REK and the Norwegian Medicines Agency. All studies must be approved by the Privacy Ombudsman at OUS.

### **Anchoring of Applications**

When applying for external funding for research projects, the application must be anchored with the department head and possibly the research leader in the clinic before submission.

### **Signing of Agreements**

As a general rule, all types of contracts or agreements requiring a signature from OUS must be reviewed by a lawyer at Research Support (grants@ous.hf-no). The lawyer will assess whether the right level for signature is the project leader, department head, or in some cases the research administrative leader for the institution. The email response from research support can then be used as documentation that the contract has been considered when forwarding for signature, for example, to the department head.

## **Clinical Study Committee**

All clinical studies that recruit participants among patients in the department or otherwise affect clinical operations must be reported to the Clinical Study Committee. This committee is the department's primary platform for anchoring, approving, overseeing, and supporting the work of clinical studies. The workflow for the Clinical Study Committee is outlined here and is more comprehensively presented on the OUS network:

K:\Felles\NVR\NEV\Forskningsseksjonen\Klinisk studiekomite.

The Neurological Department aims to increase activity in clinical treatment studies and offer more patients the opportunity to receive experimental treatment as participants in research projects.

Researchers who receive inquiries from industry or academic partners with a request to participate in clinical studies are encouraged to respond positively if the study is considered relevant, while also reporting the study on their own registration form (K:\Felles\NVR\NEV\Forskningsseksjonen\Klinisk studiekomite\Innmeldingsskjema) to the Clinical Study Committee's email address: [kliniskestudier.nevro@ous-hf.no](mailto:kliniskestudier.nevro@ous-hf.no).

The first meeting - the registration meeting - is intended to assess whether the study is scientifically and ethically justifiable, whether we have sufficient resources to conduct the study according to the protocol, and whether there may be a risk of conflict of interest with other ongoing studies regarding patient recruitment or resources.

If it is agreed to continue towards conducting a clinical study, a **study group** should be established. Depending on the nature of the project, personnel from the R&D department in the Neuro Clinic may contribute here. The study group continues to work on securing relevant approvals and contracts, both with the sponsor and other involved parties such as MBK, radiology, pharmacy, and affected sections in the department. For projects in collaboration with the industry, a contract is prepared with the assistance of **Inven2**. If the study is financed by an academic partner, an agreement is made directly with OUS.

When all necessary formalities are in place, this is reported to the Clinical Study Committee with a completed Checklist for Clinical Studies (K:\Felles\NVR\NEV\Forskningsseksjonen\Skjemaer), and a second meeting is set up for startup approval. Here, the checklist, local agreements, budget, and contracts are reviewed, and agreements are made on any job advertisements with duration and percentage of employment based on the budget and inclusion goals. After the start, there will generally be an annual follow-up meeting and a closing meeting at the end of the study to monitor status, identify challenges, and possibly agree on adjustments in how the study is to be conducted.

## FINANCIAL MANAGEMENT

Financial management in research projects is, as a general rule, the responsibility of the individual project leader. As a project leader, one must therefore have an overview of procedures and regulations and ensure that one continuously has sufficient insight into the cash flow in one's own projects.

## External Grants

When a researcher is granted a project support application, for example from Health South-East or the Research Council, the funds should be placed under a separate project number. An allocation can receive a separate project number when all these criteria are met:

- The funds are given for a specific assignment to be carried out in OUS.
- There is a requirement for reporting on the use of funds to the donor.
- A project period for implementation is specified.
- The allocated amount is over 50,000 NOK. The recipient of such a grant must report this on the form "Creation of Project" (K:\Felles\NVR\NEV\Forskningsseksjonen\Skje maer\Creation of Project). This is sent by email to the financial manager in the Neuro Clinic with a copy of the allocation letter.

The financial manager or financial contact in the Neuro Clinic with delegated responsibility ensures that a project number is created, which is placed under cost center 450701. The allocation letter will determine the project's end date. Therefore, it is important that this is specified in the allocation letter, and if this information is missing, it must be obtained from the donor. Funds from such external grants can be transferred from year to year until the end date. If there is a need to postpone the end date, confirmation from the donor is required. Unused funds at the end of the project can be returned to the donor or released to cover general expenses related to the department's research activities.

## Contract Research

For clinical contract research, such as industry-financed drug studies, the economy is managed according to a contract, which will be prepared with assistance from Inven2. Here, there will often be piece-rate financing for the inclusion of patients and completed examinations, etc. These funds will typically be transferred retrospectively to OUS based on reported results, which are communicated back to the client through Inven2. When such revenues are to cover the buyout or employment of personnel, the main rule is that this is agreed based on an assessment of the budget and inclusion goals at the startup approval in the Clinical Study Committee, where the financial manager in the Neuro Clinic also participates.

Funds received for contract research should be used to cover ongoing costs related to the assignment and not for other purposes. The hospital's current regulations are, therefore, that such funds are not transferable from one fiscal year to the next. This differs from how it has been some years ago when research groups could be left with a surplus after such studies in "fund accounts" at Inven2. The financial interaction between the hospital and industrial partners is facilitated by Inven2, but the funds are managed by OUS. Such non-transferable project funds related to contract research are under cost center 309503.

**Small Grants and Honoraria** It is possible to create separate project numbers under cost center 450701 for allocations from NOK 50,000 and upwards. If the donor needs account information to transfer funds, this can be obtained from research coordinator Monisha Sharma and conveyed to the donor, along with the project number, so that the funds end up in the right place in the system. The donor should specify an end date, and the funds must be used up by this time.

For small scholarships or other allocations where the amount is less than NOK 50,000, a separate project number will not be created. The funds are then placed under cost center 309503 and must be used within the same fiscal year. No separate accounting is generated here, and deposits and withdrawals of this type of funds must occur in dialogue with research coordinator Monisha Sharma to ensure that the Research Section has an overview of the balance for such small funds.

Researchers who give lectures or undertake other assignments for commercial actors have the option of doing this in their free time and receiving an honorarium, with implications for their scientific conflicts of interest, or doing it within working hours and letting the department receive the honorarium. The income can then be used for own research within the same year in line with the principles described for small funds above.

### **Gifts to Research**

Gifts to research at OUS should preferably go through the Funds Foundation. This is a system that ensures fair competition for gift funds and prevents undesirable ties between donors and individual researchers. Further information and contact details for the Funds Foundation can be found on the hospital's website. Donors can specify the desired area of use for the donation, and the Funds Foundation will be able to internally announce funds based on the donor's wishes. More information can be found here: <https://oslo-universitetssykehus.no/om-oss/gaver-til-sykehuset>.

If individual researchers are to receive donations directly from personal donors outside this scheme, it is recommended to enter into dialogue with the financial contact for research in the clinic to ensure that this happens in the right way.

### **Contribution Margin**

Most projects at OUS are charged with an internal contribution margin, also called "overhead". For allocations with application deadlines before and after September 1, 2022, this amounts to ~13% and ~15% of all salary costs, respectively. Further information about and a calculator for contribution margin can be found here:

K:\Felles\NVR\NEV\Forskningsseksjonen\Dekningsbidrag.

The purpose of the contribution margin is that activities based on earmarked funds should cover their share of common costs and indirect costs at the hospital. This cost comes on top of social costs of ~37% of salary. In practice, this means that to be able to pay out NOK 600,000 in researcher salary, financing of about NOK 950,000 must be obtained to break even, after a total surcharge of ~58% for social expenses and contribution margin. Most major donors, such as Health South-East, have incorporated this into their lump sum allocation rates. But this surcharge must be considered when budgeting projects and be especially careful when seeking support from smaller donors. For allocations with application deadlines after September 1, 2022, the following donors are exempt from contribution margin:

- National and regional quality registers

- The Cancer Registry
- Patient and relative associations, foundations, and other non-profit donors
- KLINBEFORSK
- Innovation funds from HSØ
- Marie S. Curie Action and certain other EU programs

### **Ordering of Goods and Services**

As a main rule, orders should be made through the Iproc ordering system. In 2023, this is handled by office manager Evy Berntsen for IT equipment and Monisha Sharma for other general orders. Chiara Cappelletti at R&D handles orders for lab equipment for certain groups affiliated with the Research Unit for Neurosciences. OUS has negotiated agreements with specific suppliers for a range of goods and services, and this entails an obligation to use these instead of others. If one needs to use a supplier that is not in the hospital's ordering system, it must be added before an order can be placed.

To do this, one must apply on a specific form (K:\Felles\NVR\NEV\Forskningsseksjonen\Skjemaer) filled out by the researcher and submitted via research coordinator Monisha Sharma.

Reimbursement for travel, conference participation, and other expenses must be applied for via the Personnel Portal where one specifies the cost center and project number. Please note that this is not possible for IT equipment, office supplies, or other equipment one may need for a project. One cannot go out and buy on one's own what is desired for a research project and expect reimbursement. If in doubt about this, one should consult with research coordinator Monisha Sharma in advance.

### **Project Accounting**

The project leader is obliged to keep track of the project's finances and manage them responsibly. An overview of incoming and outgoing funds from each project can be obtained by going to "LIS for OUS" via the intranet, navigating to the correct project number, and selecting "project report". Many donors require annual reports from the recipient about progress and finances in the project. The project report in the LIS system can be useful when preparing accounts for the donor in connection with such reporting.

Be aware that project accounts in the OUS system can be overdrawn. Purchases are not automatically blocked when the money runs out, as it is with a private bank account. Therefore, one can end up spending money that is not available if one does not keep track.

As support for project leaders in managing their own projects, the financial contact for research in the clinic will prepare a report for all with active project accounts twice a year, spring and autumn. Here one will get an overview of their projects with a special reminder of project numbers that have overspent, or are nearing or have passed the end date. In case of uncertainties or challenges related to this bi-annual status report, it is recommended to contact

the research coordinator or financial manager. For project leaders with larger portfolios, a short meeting with a joint review will generally be planned.

### Closing of Projects

The project leader is responsible for ensuring that a research project is properly concluded. Be aware that the "duration of a research project" is a multifaceted concept where not all end dates necessarily coincide:

- Project duration agreed upon with the donor
- End date for the project account in the OUS financial system (should correspond to the above)
- End date for a potential PhD project as agreed with UiO
- End date for an employment contract for a research fellow or other project collaborator
- The date when the salary funds for a project position are exhausted
- End date for a research project according to the REK application

The project leader must ensure that there is reasonable correspondence between these dates. When a project number reaches its end date, the account should be balanced to zero. Unused funds are then no longer transferable unless an extension of the project is sought in accordance with the donor. Overspending in the project at the end date should be avoided. If one still ends up in such a situation, the project leader must account for this to the department head and possibly cover the deficit with other available funds.

### Registration of Project Participation

OUS has developed documents describing the correct registration and documentation of outpatient contacts for research project participants (K:\Felles\NVR\NEV\Forskingsseksjonen\Regi stringing ved studiedeltakelse). Refer to these for details, but crucial are 1) "Does the person receive health care as part of a normal treatment course?" and 2) "Is the relevant contact part of a normal treatment course?". The contact is then registered as illustrated here:

		study-specific contact	
		yes	no
patient in normal course	yes	project code; research program UNNULL fee	normal contract registration
	no	must not be registered in DIPS	not possible

### EMPLOYMENT

**Creation and Announcement of Position** The main contact for the practical aspects of employing research personnel in the Neurological Department is research coordinator Monisha Sharma. For clinical studies, there is often dialogue with the R&D department, which organizes study nurses and study coordinators for several studies in the Neuro Clinic and arranges combined positions

where the individual project often represents a smaller fraction. When a grant or contract provides the basis for employing personnel for a project, the first step is to create a project number, as mentioned above. Then, the project leader must convey the following key information about the position they wish to create to research coordinator Monisha Sharma: Title, percentage of the position, time period, project number, funding source, and cost center. The research coordinator then forwards the matter on a separate form to HR. Once the creation of the position is approved by HR, it receives a so-called SU-number. As a general rule, positions should be advertised, unless the grant is given to a named applicant. The project leader writes a proposal for the job advertisement, which is posted by Monisha Sharma on WebCruiter. This should be based on the Department's template (K:\Felles\NVR\NEV\Forskningsseksjonen\Skjemaer). The project leader must expect that this process from grant to completed advertisement takes some time.

### **Interview and Recommendation**

Once the application deadline has passed, the project leader will receive incoming applications in PDF format via email from Monisha Sharma. The most qualified applicants are invited for an interview. The elected representative for scientific staff in the Neuro Clinic should be invited to the interview, or one might also include the research group leader. Once a decision is made about which applicant to offer the position, the name and annual salary are reported to Monisha Sharma, who then forwards it to HR through the Personnel Portal. Based on this, HR sends out an offer letter with a contract.

### **Salary**

Setting the salary for researchers in positions financed through external funds should be aligned with the department's general practice, while considering the job description, competence, and experience. One should first engage in dialogue with the leader of the Research Section at the Neurological Department and if needed, with the department head. The salary determined must be finally approved by the department head and HR.

### **OFFICE AND LABORATORY FACILITIES**

Researchers need a permanent office space to work from. For clinically oriented research projects that are based on patient-near work in the ward and outpatient clinic, it will often be most appropriate to use office spaces in the hospital. Many project collaborators will also have combined positions and work partly clinically. The use of office spaces must then be clarified with the clinical sections.

### **Research Unit for Neurosciences**

Research environments in the Neuro Clinic that conduct laboratory research - especially with molecular biological and cell biological methods - have joined together to form the Research Unit for Neurosciences, which has office and laboratory facilities in Domus Medica 4. When initiating research projects where the project leader believes there is a need to use the facilities at the Research Unit for Neurosciences, they should contact section leader Tone Berge as early as possible to discuss capacity and needs.



## **BIOBANKING AND SAMPLE HANDLING**

Research Support at OUS has its own Biobank section, which is very competent and helpful in answering all biobank-related questions.

### **Project-specific Biobanks**

The project leader is responsible for ensuring that biological material collected for research purposes is stored and handled in a safe manner and in accordance with current regulations. Be aware that long-term storage of biological material must take place in an approved biobank. For researcher-initiated projects approved by REK, this often means that the REK application also included the establishment of a project-specific biobank. Such biobanks are clearly delimited to the individual project.

It is the project leader's responsibility to have a clear plan for where and how sample material should be stored. If the research group does not have space in a suitable freezer, contact can be made with the section leader for research in the Neurological Department and/or for the Research Unit for Neurosciences to inquire about possibilities. However, available capacity cannot be guaranteed, so this must be planned by the project leader well in advance. OUS uses long-term storage at Myren for storing samples not used in ongoing projects. This is the storage offer where the capacity is best.

An alternative to project-specific biobanks is general research biobanks, including the Neuroscience Register and Biobank, which is described in more detail below.

### **Sample Handling and Short-term Storage**

Some projects will be based on collected biological material being sent to partners outside OUS for analysis and possible long-term storage. This will, for example, often be the case for contract research led by industry partners. In such projects, there may be a need for simple sample processing and short-term storage in the department until shipment.

There are some freezers and centrifuges in the departments from before, and -80 freezers have also been purchased for the outpatient clinics at Ullevål and Rikshospitalet for this purpose. The goal is to have practical equipment available for clinical studies, without it taking up too much space or resources. Nevertheless, it is the project leader's responsibility to ensure that they have access to the necessary equipment to carry out a project, and to get agreements or acquisitions in place before the start of the project. Samples should be stored for a maximum of two months in a short-term freezer in the department or outpatient clinic before it must be defined as long-term storage, and the project leader must take responsibility to find another suitable place.

## **NEUROSCIENCE REGISTER AND BIOBANK**

After significant effort from key individuals, the Neuro Clinic has obtained approval and established a comprehensive research and quality register with an associated biobank. This provides unique opportunities for both quality work and research projects, and it is a goal for the Neurological Department that research studies use this as much as possible and facilitate each project's contribution to the inclusion of patients in the register and the collection of data and

sample materials. The register and biobank are administered from the R&D department in the Neuro Clinic. More information can be found here: <https://oslo-universitetssykehus.no/avdelinger/nevroklinikken/forskning-og-utvikling-nevroklinikken/nevrovitenskapelig-register-og-forskningsbiobank>.

Patients can give broad consent to neuroscience research by inclusion in the register. A few general "core variables" about diagnosis, demographics, and general health condition, which are the same for all who are included in the register, are to be collected. In addition, the various research environments have developed sub-registers with relevant variables for each disease group. One can then apply to REK to conduct research projects using the data later, based on the broad consent. The consent in principle also includes health information from the medical record. The sub-registers are mainly based on the MedInsight database.

For quality work, it is permissible to register patient data without consent, but these cannot be included in research projects. The broad consent also covers the collection of biological material and "surplus material" from clinical sampling. Research groups wishing to use data or samples from the Neuroscience Register and Biobank must go through a simple application process. The leader of the register is Kristian Berhard Nilsen and the biobank is led by Kaja Selmer.

## **IT RESOURCES AND DATA STORAGE**

Obligations and E-learning Courses The regulations related to privacy and research data are strict and too extensive to detail in this handbook. All researchers are obliged to familiarize themselves with this field and annually complete mandatory e-learning courses (PIIP and PIFF) through <https://kurs.helse-sorost.no/>.

IT Services at OUS and UiO All OUS employees have a username and access to the OUS network, while access to clinical systems requires a clinical role. Be aware that employment as a researcher alone unfortunately can make it difficult to access DIPS, which creates challenges for the implementation of clinical projects.

In an OUS context, only OUS-approved IT equipment can be used. There are restrictions on internet use and limited possibilities for installing new programs on OUS machines. There are specific procedures for reporting new IT needs and applying for acquisitions, but these are cumbersome and costly processes that are seldom fruitful for small individual projects.

OUS researchers also have the opportunity to obtain a user account at UiO, which offers more flexible services. University employees, PhD fellows, postdoctoral fellows, and main supervisors can get a user account for free. Others can pay for a UiO laptop and user account from project funds according to a separate agreement between OUS and UiO.

### **Secure Storage of Research Data**

All researchers are obliged to familiarize themselves with the regulations for handling research data and understand the difference between directly identifiable, indirectly identifiable (also called de-identified or pseudonymized), and anonymized data.

In projects where OUS is the data processor, storage of personal data must use OUS-approved, secure services. These primarily include the area K:/sensitive on the OUS network, MedInsight databases, and the Service for Sensitive Data (TSD), operated by UiO. Only project collaborators who are directly involved in the study and need the information in their work with the project should have access to the information stored in one of these secure areas. A project-specific area on K:/sensitive is applied for on the Min Sykehuspartner web portal.

### **Data or Material Transfer**

Many research projects will involve sharing data and/or collected biological material with partners outside of OUS, often also outside the country. Sometimes this may be anchored in protocol, consent, and application processing at REK and PVO from the beginning. Other times, the original project documentation is more openly formulated, and specific research collaborations involving material sharing are developed during the project.

As a main rule, the transfer of data or material should be anchored in an agreement between the institutions. This can be part of a contract or a more targeted agreement of the type often called a material transfer agreement (MTA) or data transfer agreement (DTA) in English. Such agreements are often characterized by very legally oriented language and can be challenging for the individual researcher to assess. Involvement of OUS Research Support (*Forskningsstøtte*) is recommended when entering into such agreements.

Often they should be signed by a representative of the institution, such as the department head or the leader of Research Support. Depending on how the transfer is anchored in the original approval from REK or PVO, the project leader must assess whether it also requires notification or application to any of these instances before data or samples can be transferred or received.

### **PATIENT AND PUBLIC INVOLVEMENT**

Research projects should involve patient representatives who can contribute inputs, including prioritizing research questions, user-friendly implementation of the project, and dissemination of results to patient environments and the public. Many donor institutions make specific requirements for patient participation in their calls for proposals.

The R&D department in the Neuro Clinic has developed a program for training patient representatives, informational materials, and recommendations for how participation can be implemented in practice.

### **COMMUNICATION, PROFILING, AND REPORTING**

Project and research group leaders are responsible for internal communication and personal follow-up of each researcher in their group, see also under the organization of research in the department.

### **Websites**

The primary homepage for research groups at the Neurological Department is [www.ous-research.no/neurology](http://www.ous-research.no/neurology). It is desirable that the information there is as up-to-date as possible at all times and reflects the organization of the research groups with their current members and ongoing projects. Updates to these sites can be easily made in dialogue with web responsible Trond Olav Berg ([Trond.Olav.Berg@rr-research.no](mailto:Trond.Olav.Berg@rr-research.no)).

For clinical treatment studies that recruit patients, it is mandatory to post this on the hospital's websites and [helsenorge.no](http://helsenorge.no), and OUS wishes that other observational studies without intervention are also posted here. This is done by filling out a registration form found in eHandbook, which is sent to [post.kommunikasjon@ous-hf.no](mailto:post.kommunikasjon@ous-hf.no).

### **Social Media**

Some research groups or individual projects in the department have their own user accounts on social media. This can be a good way to disseminate information and profile to patient environments, colleagues, and other interested parties. At the same time, one must be aware that one may receive direct inquiries from patients and relatives, which may require thoughtful handling.

The Communications Department recommends Twitter as a social platform for reaching out to research colleagues at other institutions. The section leader for research will maintain a Twitter account and disseminate information to this group, such as publications and lectures from the department's researchers.

### **PUBLISHING**

#### **Open Access and Publication Costs**

It is an important principle that research funded by the community should also be accessible to the public. This underpins the Government's guidelines for Open Access and the so-called Plan S. The dissemination can, in principle, occur in two ways: Publication in Open Access channels, or self-archiving in so-called knowledge archives - such as DUO. Self-archiving may involve a delay, allowing the journal exclusive publication for the initial period. Currently, there are slightly different requirements depending on which institution has funded the research.

In the classic model for a traditional, closed subscription journal, there is no cost to publish, but institutions pay for subscriptions. This is now incompatible with Plan S (unless one can self-archive from the time of publication) and therefore increasingly becoming outdated. The term 'hybrid journal' is used for journals where the corresponding author can choose whether to pay extra for Open Access or not. This now applies to most well-known medical and neurological journals like Lancet, Neurology, and Brain. Pure Open Access journals have a model where publication costs are paid, and articles are made freely available online to everyone. This category also includes well-known journals, like PLOS One, BMC journals, and the Frontiers series.

However, this category also includes many "predatory journals" where unscrupulous publishers make money by publishing as many articles as possible, without sufficient regard for scientific

quality. Publishing in such journals supports a problematic practice and can also be directly harmful to your professional integrity - so caution is needed!

Whether you publish in a hybrid journal or a pure open access journal, it will incur a publication cost, so-called Article Processing Charges (APC). This is the researcher's own responsibility, and if one is to publish in journals where APC is not covered by other arrangements, one must budget for this in their projects. Previously, there was a "publishing fund" where one could apply for reimbursement of such fees. This was discontinued in 2018. The department or clinic does not have funds for this.

However - there are agreements between UiO/OUS and the publishers that now cover such costs for many journals. The development in the field has pushed forward agreements where institutions also have open access costs baked into the same agreement as the subscription. These agreements are renegotiated periodically, so the field is a bit unclear, but there are good websites (see under links).

### **Reporting to Cristin**

Cristin (Current research information system in Norway) is a national research information system. All scientific original articles should be entered here, and this reporting forms the basis for statistics that are used, among other things, to allocate clinics research-stimulating funds based on effort.

Those who publish scientifically will annually be asked to check that publications and institutional affiliations on the articles are correct in Cristin. University staff will automatically be registered in the system, while other OUS-employed authors must be entered via a superuser, who at the Neurological Department is research coordinator Monisha Sharma. She is also the contact person for reporting corrections.

## **ORGANIZATION OF RESEARCH IN THE DEPARTMENT**

### **Research Groups and Project Leader Responsibility**

OUS has its own "Level 1" guideline for the establishment of research groups and a job description for research group leaders. It is established that research should be organized into well-defined research groups with clear scientific leadership.

The research group leader is a role, rather than a position, and involves academic, ethical, social, and culture-building responsibilities. Key tasks for a research group leader include:

- Coordinating the group's activities,
- Securing funding by applying for external resources,
- Mentoring and educating new researchers,
- Building academic networks,
- Ensuring that everyone in the group knows and follows relevant regulations,
- Helping to publicize results,
- Working to create a positive and social work environment.

The primary responsibility for each research project, including financial management and personnel employed in a specific project, lies with the project leader. Be aware that research studies in practice can have interwoven and complex structures. For example, if a researcher has received support for a study as a project leader, but data collection uses a REK project led by another colleague, both have a shared responsibility.

### **Leadership, Contacts, and Links:**

Research Leader in the Neuro Clinic: John-Anker Zwart [j.a.zwart@medisin.uio.no](mailto:j.a.zwart@medisin.uio.no)

Head of the Neurological Department: Mathias Toft [mtoft@ous-hf.no](mailto:mtoft@ous-hf.no)

Section Leader for Research: Torbjørn Elvsåshagen [telvsaha@ous-hf.no](mailto:telvsaha@ous-hf.no)

Research Coordinator: Monisha Sharma [monish@ous-hf.no](mailto:monish@ous-hf.no)

Administrative Research Support OUS: Department Head Martin Sending [grants@ous-hf.no](mailto:grants@ous-hf.no)

Financial Manager in the Neuro Clinic: Pirakash Nagarajah [pirnag@ous-hf.no](mailto:pirnag@ous-hf.no)

Section Leader for the Research Unit for Neurosciences: Tone Berge [tone.berge@medisin.uio.no](mailto:tone.berge@medisin.uio.no)

Communications Manager for the Neuro Clinic: Ivar Greiner [ivagre@ous-hf.no](mailto:ivagre@ous-hf.no)

Web contact for [www.ous-research.no](http://www.ous-research.no): Trond Olav Berg [Trond.Olav.Berg@rr-research.no](mailto:Trond.Olav.Berg@rr-research.no)

Data Protection Officer at OUS: Leader Tor Åsmund Marthinsen [personvern@ous-hf.no](mailto:personvern@ous-hf.no)

Inven2: [post@inven2.com](mailto:post@inven2.com)

Research documents in OUS eHandbook: <https://ehandboken.ous-hf.no/folder/28>

Learning Portal: <http://laeringsportalen.helse-sorost-no>

About open-access agreements: <https://www.ub.uio.no/skrive-publisere/open-access/avtaler-og-rabatter/index.html>

Search tool for publishing channels and current agreements:

<https://kanalregister.hkdir.no/publiseringskanaler/Forside>

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Cristin: [www.cristin.no](http://www.cristin.no)

### **ABOUT THIS HANDBOOK**

Research Handbook for the Neurological Department was prepared by Lasse Pihlstrøm, first time in 2020, and revised by Torbjørn Elvsåshagen in March 2023. It is intended as a practical informal guide to navigate a complex field and does not replace the need to thoroughly familiarize oneself with official documents. The goal is to regularly update the information and have the latest version available in the Neurological Department's research folder on the OUS network.

Please report to [laspih@ous-hf.no](mailto:laspih@ous-hf.no) or [telvsaha@ous-hf.no](mailto:telvsaha@ous-hf.no) if you have input for the handbook, or to report outdated information, ambiguities, errors, or omissions.