

General Induction Pack (OHBA)

For those not working with the MRI scanner

- OHBA Building Guide
- OHBA Building Access Request Form
- OHBA Fire Safety Guidelines
- Magnet Safety Instructions
- OHBA Accident Reporting Procedures
- WIN Computing Guide
- Data Security
- Responsibility of Researchers with Respect to Ethics
- Authorship Guidelines

All these documents are also available on the WIN website at www.win.ox.ac.uk





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Welcome to the WIN!

I hope you will have a very stimulating and enjoyable time with us. The staff, students and fellows at WIN strive to make this a pleasant, open and highly interactive work environment.

In this pack we provide information about some of the basic issues related to working at WIN. You will also find extensive guidance and documentation on the WIN website: www.win.ox.ac.uk

You undoubtedly will have questions as you start. Do not hesitate to ask anyone in the lab for help. If you are unsure who to ask about a particular issue, the best first contact point is admin@win.ox.ac.uk. The WIN admin team is happy to help with any queries relating to administrative issues around getting started at WIN, access to our buildings, any issues relating to carrying out research at WIN, etc.

Please also join us at our regular WIN Wednesday meetings. It is a great opportunity to meet people, hear about the research, and hear from some excellent speakers from WIN and beyond. The programme is at www.win.ox.ac.uk/events

I look forward to personally meeting you at some point soon.

With best wishes.

Heidi Johansen-Berg

Director, Wellcome Centre for Integrative Neuroimaging

OHBA Building Guide

For new Staff and Students



The Oxford Centre for Human Brain Activity (OHBA) is part of the University Department of Psychiatry based at the Warneford Hospital, comprising (across two floors)

- Reception
- Siemens Prisma 3T MRI scanner and control room
- TRIUX™ neo scanner and control room
- EEG lab
- Brain stimulation lab
- Clinical rooms, Participant waiting area, Participant changing area and Disabled WC
- IT hub, Seminar room, Staff offices, Kitchen and Staff WCs

Access

Access into OHBA and associated buildings is enabled by swiping your University card in the reader located next to the main entry doors. If you do not have a University card then please contact your Department Administrator. Access to the main OHBA building is largely confined to those based within the OHBA building.

The OHBA MRI magnet is always on, and can represent a hazard. For that reason, it is important that you do not give access to anyone to OHBA unless they are your guest and you take full responsibility for them. If you lose or misplace your University Card, you must tell either the OHBA admin team (admin@ohba.ox.ac.uk) as soon as you discover the loss.

Before access to the Centre is granted you need to attend magnet safety course annually and complete a one-off building induction. Magnet Safety Training is run at either FMRIB or OCMR (advertised on the WIN intranet). Differing categories of building access will be granted to different groups of staff using OHBA:

- OHBA residents: 7 days a week, 6am-10pm
- o Regular users (non-resident): Monday-Friday 9am-5pm
- OHBA senior staff: 7 days a week, 24 hours

MRI control room access is restricted to radiographers, senior MR physicists, Siemens personnel, and members of staff who have completed advanced safety and scanner training (see SOP OHBA_oo6 Scan Operator Training).

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Entering and leaving the building

OHBA has an intruder alarm which should be deactivated using the alarm code by the first person who enters the building each morning, and automatically sets at 10pm every evening.

Before leaving OHBA at the end of the dayyou should check whether there are any other users still present.

If prior to 10pm and you are the last to leave the building:

- Ensure all windows and doors are closed and blinds drawn. In particular, check the window in the staff toilet downstairs.
- Switch off all lights.
- Ensure the door shuts properly behind you.

If you remain in the building after 10pm it is your responsibility to manually deactivate the alarm prior to 10pm and activate it when you leave.

General Safety & Security

Alarms

Fire: When the fire alarm is activated everyone in the building must leave by the nearest fire escape and move away from the building. The fire evacuation point is in front of the Psychiatry Main Building. There can be no delays in leaving the building except to remove a subject from the scanner. Leave all personal belongings behind.

Security: The main OHBA building is fitted with an intruder alarm, with keypads inside the main entrance lobby, next to the middle door (opposite the MEG lab) and by the staff side entrance. The alarm is activated and deactivated with a code that will be given to you during the building induction.

If you mistakenly set off the alarm, or are otherwise aware of a false alarm please ring the University Security Control Room – 01865 272944 – immediately.

Scanner: There are also a number of alarms associated with the MEG/MRI scanner instrumentation. If you hear an alarm gong off in the scanner room then is it usually important that one of the members of senior staff be notified that the alarm is sounding. If you are uncertain whether someone should be notified please err on the side of caution and use the emergency contacts list on the scanner room door.

Disabled access toilet: There is a local alarm fitted in both of the disabled access toilets that is activated by pulling the red cord. Sounders activate in the OHBA reception, MEG lab area and the open plan offices. If you hear this alarm go immediately to the toilet to assess whether help is needed. If required contact the First Aider or emergency services.

Manual Handling

Activities that involve the manual lifting or moving of heavy items may only be carried out by individuals that have been on a manual-handling course. The main risk activity within OHBA is the lifting of subjects into the scanner, but this equally applies to the movement of equipment about

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the Centre. The University runs courses throughout the year which can be booked via the Safety Office website (www.admin.ox.ac.uk/safety).

Pregnancy

If you become pregnant you should advise the Department Safety Officer, in complete confidence, at the earliest opportunity to discuss changes to your working practices during your pregnancy. Please note that there are no known risks to the unborn child from high magnetic fields but we recommend that you do not enter the magnet rooms during your pregnancy. For further information see the pregnant worker risk assessment at http://www.win.ox.ac.uk/support.

Kitchen Area

On the ground floor is the OHBA kitchen that is available for all staff. There is a coffee machine, a refrigerator, a microwave, and a dishwasher for your use, as well as a a hot water boiler and filtered water tap. Tea, instant coffee and sugar sachets are provided by the department, and bottles of milk are delivered regularly and can be found in the fridge. If these run out, please replenish using stocks from the main Psychiatry department kitchen. There is also a coffee machine which uses coffee beans. If you would like to use this please see the instructions printed above the coffee machine which explain how to pay.

It is important to try to keep this area clean and tidy. Please place your cutlery and crockery in the dishwasher or wash and dry them by hand to reduce clutter on the sides. The dishwasher is turned on by the cleaner each evening, but needs emptying by staff each morning. Please help with this whenever you can. Also be aware that the kitchen is immediately adjacent to a work area so it is important to keep noise down to a tolerable level and consumption of odorous food should be kept to a minimum.

There is a cafeteria in the main Warneford Hospital, which sells sandwiches and snacks between 8am and 3pm and hot lunch between midday and 2pm. There are also associated vending machines close by.

Parking and Bikes

Parking directly outside of OHBA is strictly for research participants and OHBA visitors only. Please do not temporarily block cars that are parked outside. All vehicles parked on the Warneford site car parks will be required to display either a valid parking permit or pay and display ticket. Contact Moira Westwood (Departmental Administrator) for details about staff permits.

Cycle racks are also available outside OHBA in the bicycle shed. Please contact admin@ohba.ox.ac.uk for the door code.

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Oxford Centre for Human Brain Activity SOP Reference: OHBA_004_V2_Appendix A Title: OHBA Building Access Request Form

OHBA Building Access Request Form

Name (BLOCK CAPS):	
Group affiliation:	
Phone number:	
Contact email address:	
University Card number:	End date of contract/project:
Supervisor or line manager:	
OHBA Building Induction session – Date attended:	
Magnet Safety Training Part 1 (FMRIB/OCMR) – Da	ite attended:
Please tick which staff group category you fall into	:
☐ Facility User (non-resident – typically for one study) ☐ OHBA Resident	☐ Regular Facility User (non-resident)☐ OHBA Senior Staff
(Access to the MRI control room requires additiona	I training, see SOP OHBA_004_V2 Building Access.)
and the Magnet Safety Instructions. I fully underst	will attend magnet safety training on a yearly basis
Signature:	Date:
Personal data supplied on this form is treated in accorda available upon request.	ance with the WIN building access data protection policy,
FOR INTERNAL	USE ONLY:
Authorised by (#):	
Approved access category:	
☐ Collect card from reception (non-resident one-study users)☐ 7 days a week, 6am-10pm (OHBA residents)	☐ Monday-Friday, 9am-5pm (non-resident regular users) ☐ 24/7 (OHBA senior staff only)**
Approved by (**):	

[#] MRI Manager or Lead Research Radiographer

^{**}OHBA Professor of Imaging Neuroscience for 24/7 access including MRI (see www.win.ox.ac.uk/support for contact details and SOP OHBA_004_V2 for criteria for this sign off).

Oxford Centre for Human Brain Activity SOP Reference: OHBA_005_V1

SOP Title: Fire Safety

SOP Number OHBA_005_V1

SOP Title Fire Safety

	NAME	TITLE	SIGNATURE	DATE
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AUTHORISER	Clare Mackay	Professor of Imaging Neuroscience, OHBA		
AUTHORISER	Sven Braeutigam	MEG physicist		
AUTHORISER	Phil Burnett	Department of Psychiatry Safety Office		
AUTHORISER	Steve Emery	University of Oxford Fire Officer		

Effective Date	
Review Date	

Oxford Centre for Human Brain Activity
SOP Reference: OHBA 005 V1

SOP Title: Fire Safety

1. PURPOSE

The purpose of this Standard Operating Procedure (SOP) is to describe the OHBA specific procedures to be followed regarding fire. This is to be used in conjunction with the University of Oxford Fire policy and procedures.

2. INTRODUCTION

The whole of OHBA is part of an automatic fire alarm and detection system which is monitored by the University Security Services

"Fire Action" notices have been installed throughout OHBA which instruct actions to be taken. In the event of a fire call 999. On evacuation the assembly point is outside the Main Entrance to the Department of Psychiatry.

3. SCOPE

This SOP applies to all staff and visitors who work within OHBA.

4. RESPONSIBILITIES

All personnel working in OHBA should take responsibility for the following:

- to understand fully these guidelines and ask for clarification, if in doubt.
- to prevent possible causes of fire no smoking is allowed within OHBA and please switch off all electrical appliances when not in use or when you are the last to leave OHBA.
- to be familiar with the operating of the Fire Alarm System (see next page)
- to raise the alarm immediately upon discovering, suspecting, or hearing report of a fire and to call 999 to confirm a real fire stating: Fire at OHBA,
 Department of Psychiatry, Warneford Hospital, OX3 7JX
- to know where the Fire Alarm Break Glass Units are located, particularly in your work area.
- to know the location of fire extinguishers, particularly in your work area.
- to attend an University of Oxford Fire Safety Course.
- to know where the fire exits are located.
- to see that these fire exits and all staircases, landing and corridors are kept free from obstructions.
- to see that all fire exits are immediately and easily accessible from the inside.
- to see that fire doors are KEPT CLOSED (and NOT PROPPED OPEN) at all times and on hearing the alarm to close all doors to prevent the spread of smoke and fire.

Oxford Centre for Human Brain Activity SOP Reference: OHBA_005_V1

SOP Title: Fire Safety

IF YOU ARE WORKING IN THE MRI SCANNER OR MEG PLEASE SEE THE LOCAL RULES FOR THAT AREA FOR FURTHER FIRE POLICIES.

5. PROCEDURE

FIRE ALARM ACTIVATION

- By breaking the glass on any fire alarm call point (only requires push action).
- Automatically when heat or smoke from a fire is in contact with the relevant type of automatic detector head, where these are installed.

RAISING THE ALARMS

Any person suspecting/discovering a fire should immediately:

USE NEAREST FIRE ALARM BREAK GLASS UNIT CALL 999 TO CONFIRM A FIRE WITHIN OHBA CLOSE THE DOOR ON THE FIRE EVACUATE BUILDING

ON HEARING THE ALARM

- Stop all work.
- Do not continue telephone calls or collect any belongings.
- Close all doors and windows behind you and leave the building.
- Evacuate the building and report to the Fire Evacuation point outside the Main Entrance to the Department of Psychiatry Building. Take any people out of the work areas en route.
- Do not re-enter OHBA until authorised to do so by the Fire Officer.

MRI

- If scanning, IMMEDIATELY remove subject from magnet then press the emergency power down button (not the quench button) located to the left of the scanner control computer or in the scan room, and evacuate OHBA.
- MRI Authorised members of Personnel have the responsibility of locking the MRI scan room door before leaving the unit.
- If the fire is in the MRI scan room itself, and the Fire Officer or fire brigade require emergency access to the magnet room itself, then a suitably knowledgeable member of staff should be summoned to press the EMERGENCY QUENCH button located in either the MRI scan room or MRI control room and evacuate the area.

Oxford Centre for Human Brain Activity SOP Reference: OHBA_005_V1

SOP Title: Fire Safety

MEG

- No specialist precautions need to be followed.
- Evacuate the area and building as per the general OHBA fire guidance listed in Section 5 above.

MEDICAL GASES IN FIRE CONDITIONS

- Gas cylinders must be kept in designated areas only. In the event of a fire, all
 cylinders not involved in the fire should be moved to a safe place, if possible.
 Make sure that before moving cylinders, valves are turned OFF.
- Cylinders and medical gas installations should be kept as far as possible from all sources of heat and temperatures above 49°C (120°F).
- Oil, grease or other combustible substances should never be used on valves, gauges, regulators or any fitting associated with medical gas cylinders or installations.
- Oxygen presents particular hazards. Use of open flame or soldering equipment should be strictly prohibited if oxygen from a piped supply or cylinder is in use within 6 metres.

6. FORMS TO BE USED

Be familiar with the instructions on the "Fire Action" notice in your work area.

7. INTERNAL AND EXTERNAL REFERENCES

SOP OHBA_016_V1 MRI Local Rules
University of Oxford Fire Safety Policies
(https://www.admin.ox.ac.uk/safety/firesafe/firepol/)

8. CHANGE HISTORY

SOP No.	EFFECTIVE DATE	SIGNIFICANT CHANGE	PREVIOUS SOP No.

Magnet Safety Instructions

For anyone working in buildings housing MRI Magnets



The MRI scanners at WIN are built around high field superconducting magnets. The magnets are at least 50,000 times stronger than earth's magnetic field and are always on. The following procedures must be followed at all times when working in the magnet areas.

- 1. The magnets are **always on**, 24 hours/day, 365 days/year; therefore, these instructions must be followed at all times.
- 2. The magnets are within 'Controlled Areas,' which can only be accessed by a trained operator. If you are running an experiment, the operator will give you access to the controlled area for the duration of your scanning session.
- 3. The biggest safety concern is the strong pull that the magnets exert on some metallic items. This includes keys, coins, scissors, wheelchairs, screwdrivers etc. No ferromagnetic item may be taken into the magnet rooms and must be left in the lockers outside the controlled area, or in the subject room.
- 4. Some individuals may have metal in their bodies, either because of surgery or an accident. Therefore, it is essential that anyone who enters the controlled area be screened using the Magnet Safety Screening Form.
- 5. All researchers must fill in a Magnet Safety Screening Form annually. If there are any changes to a researcher's condition (for example surgery or pregnancy) that could affect their suitability to enter the magnet rooms, they should not enter the controlled area, and seek advice from the radiography staff.
- 6. Any person, whether visitor or scanner subject, that wishes to enter the controlled area must be screened using the Magnet Safety Screening Form. The procedure is outlined in the SOP: Screening Subjects for Safety to Scan, which should be read by all those admitting someone to the controlled area.
- 7. In the event of an emergency around the magnet areas follow the appropriate emergency procedure (posted on the walls in the control room). Make sure that a physicist or operator has been informed contact phone numbers are posted near the magnet rooms if the emergency is out of normal hours.

Accident Reporting Procedures



For incidents occurring at OHBA

In the event of an emergency, the appropriate emergency services should be summoned.

- Call 999 for emergency medical assistance
- Call 999 in the event of a fire
- Call 01865 289999 for University Security Services

In the case of a medical emergency or any other form of accident, however small, you should report it. Examples would include cuts, bruises, needle jabs etc. that occur as accidents or incidents within OHBA.

As a first point of call speak to the lead radiographer or MEG physicist (Juliet Semple or Sven Braeutigam).

Other than for very minor incidents, an accident/incident form should be completed using the University online Health & Safety Incident Report Form: https://oxforduni-remoteforms.info-exchange.com/Incident

The senior radiographer and MEG physicist should also be informed if staff are aware of a near-miss incident, for example where someone could have been injured or put at risk, even if no injury occurred.

Department Safety Officer: Phil Burnet – 01865 223621 - phil.burnet@psych.ox.ac.uk
Centre Safety Rep: Sven Braeutigam – 01865 283816 – sven.braeutigam@psych.ox.ac.uk

WIN Computing Guide



How to access the WIN Computing Resources

WIN houses advanced data processing and storage facilities, which are available to researchers working at FMRIB or OHBA.

Accounts are charged on a flat fee basis. The charges are:

£125 per month (£1500 p.a.) for a normal account

£17.50 per month (£210 p.a.) for a low usage account

In addition, should you only need to download data, free accounts are available. If you will be collecting MRI scans at the Centre you will require one of these accounts to access the data, even if you plan to analyse this elsewhere.

Low usage accounts have no access to the cluster and 10GB of storage space.

Normal accounts have full access to shared WIN cluster compute facilities plus 200GB of scratch (temporary, unbacked up) storage space and 20GB of storage space in the home directory.

There are no charges based on compute time.

New research projects involving personal data (i.e., data of a living person) should complete a Data Privacy Impact Assessment (DPIA) screening form and based on that assessment a Data Privacy Assessment (DPA) or full DPIA (see Data Security section).

Additional disk charges will be incurred for space beyond the normal account allocation in the home folder. Backed up group storage is also available for rental by group leaders at the same rate of £50 per TB per annum, pro-rata (no minimum block size). High performance, group scratch space is also available for data that does not need backup. There is no charge for scratch storage space.

Subject to appropriate DPA or DPIA approval, WIN's new high-performance computation platform hosted by the Bio-Medical Research Computing group (BMRC) is available. Full account holders may request access to the CPU and GPU compute resources housed there at no additional charge. Storage on the BMRC cluster is not included in the account fee and should be rented directly from BMRC at the research group level. BMRC storage is charged at the rate of £60 per TB per annum and has no backup so you should ideally rent additional space at WIN, copying important data to our system to protect the data.

It is a University IT statute that accounts are NOT shared, so every individual who needs access to the Centre's IT facilities will require their own account.

To obtain a WIN computing account:

- 1. Log-in to https://register.fmrib.ox.ac.uk/ using your Oxford username (SSO).
- 2. Click on update profile and fill in your details. Use the Computer Account(s) box at the top right of the page to request an account. Please make sure to enter your grant code provided by your PI. If the code is new, you will need to contact computing-help@win.ox.ac.uk to add it to the system for the first time.
- 3. You will be notified when your account has been set up.
- 4. An introduction to the computing facilities and extensive user guides are available at https://www.win.ox.ac.uk/research/it.

Display Screen Equipment Assessment

Please be aware that the use of computer equipment (Display Screen Equipment) for extended periods can result in upper limb disorders. Users are advised that frequent short breaks from their

computers, for example 5-10 minutes after 50-60 minutes of activity should be planned to reduce this risk. Online training and assessment is available at https://safety.admin.ox.ac.uk/display-screen-equipment. This site also gives details on how to arrange for eyesight tests, the cost of which, for University employees, will be met by the Department. For more information on DSE assessment, please contact your department safety officer.

Data Security

Guidance for Researchers



All data containing personal details needs to be dealt with in a responsible manner, protecting the individual's identity and complying with General Data Protection Regulation (GDPR).

The Data Protection Act 2018 requires that any personal data held is secure, accurate and relevant.

Personal Data includes **any** material that contains personal details (name, date of birth, contact details, initials etc). Within WIN, this includes paper and electronic files containing contact information, patient history or un-anonymised image data.

Data that does not contain personal details are not subject to the same restrictions, but should be handled in a careful, sensitive, and responsible manner, with care taken to avoid loss of the data.

For full and up-to-date guidance on data security visit

- https://www.infosec.ox.ac.uk
- https://researchsupport.admin.ox.ac.uk/gdpr
- https://www.win.ox.ac.uk/research/it/i-want-to/store-access-and-protect-my-data/protection

In particular you should take into consideration the advice given on the University's Data Handling pages at https://www.infosec.ox.ac.uk/handling-information which includes advice on best practice for processing and storing the various data types, including specific advice on which centrally provided cloud services may be for the different data types.

Where your research involves the handling of the personal data of a living individual consider whether it is possible to irreversibly anonymise the data prior to processing. If this is not possible (which will typically be the case with MRI images), you will be required to complete a Data Privacy Impact Assessment screening form, and depending on the outcome of this, a Data Privacy Assessment (DPA) or DPIA. A DPIA can take considerable time to complete and approve so should be carried out at the earliest opportunity. The screening, DPA and DPIA forms are available from the Compliance web site - https://compliance.admin.ox.ac.uk/data-protection-forms

Wherever possible, if full anonymisation is impossible, data should be at pseudonymised (all MRI data downloaded from WIN's scan archive facility are already pseudonymised). For details on the appropriate processes see: https://www.win.ox.ac.uk/research/it/i-want-to/store-access-and-protect-my-data/protection/anon.

Area of greatest risk

The areas of greatest risk are portable media (portable hard/SSD drive, memory stick etc) and laptops, which can easily be removed from the Centre and be lost or stolen, or data that is stored on **un-approved** cloud storage services. **The only approved synchronising cloud storage service is the Nexus 365 OneDrive or Teams services**. Your attention is also drawn to the use of imaging data within presentations (see below), which are often given outside the Centre.

Action points

- Personal Data must be kept in a secure manner that minimises the risk of loss or inappropriate access.
- Paper (including lab books, image printouts) or removable media (CDs/DVDs, memory sticks, portable drives) containing Personal Data must be appropriately filed, preferably in locked

- cabinets/drawers. They must not be left lying around the Centre. Memory Stick/USB Pen drives used to store sensitive information must be encrypted to the AES128 or AES256 standards.
- Personal Data stored in computer files, excluding image data (e.g., Excel files, databases, contact details, test scores with personally identifiable content) must be encrypted at rest to an appropriate standard (see below). Efforts should be taken to avoid other users accessing such data, such as changing the access permissions (see section on encryption below).
- All image data should be pseudonymised (either converted to a form that does not store this
 data and named appropriately or in the case of DICOMs, have the identifiers removed from the
 headers using an approved anonymisation tool), and the key held either in a secure database
 (such as the WIN scan database) or encrypted (see below). Image files that must contain
 subject details (e.g., pre-processed DICOMs with full subject details) must be securely stored
 (physical media locked away and all files/devices encrypted).
- Consider fully anonymising data where practical (irreversibly dissociating the data from the subject's details).
- Pseudonymised data must not be stored in any way that could allow identification of the subject (e.g., by use of initials or name in the filename or folder structure).
- All Personal Data should remain within WIN approved resources as a general principle. If data
 needs to be removed from Centre approved resources (e.g., for analysis at home/another site),
 the personal details *must* be removed from the data (this includes a de-face of MRI data).
- Device backups must be encrypted to at least the same level as the source device, e.g., encrypted Time Machine or BitLocker encrypted.

Deletion of data and disposal of media

Data that are no longer needed must be disposed of in an appropriate way to ensure destruction of the personal data.

- Personal data must be deleted from hard drives when no longer used. Merely deleting the file
 on the disk may not be enough, traditional hard drives need to be securely erased or
 destroyed. SSDs and flash drives should be encrypted before first use. Backups of the data
 should also be considered in this process. Secure deletion from backed up WIN file stores
 (/vols/Data and home folders) is not possible (files will remain in the backup until the backups
 containing the files age out of existence) so sensitive data held there should be encrypted, in
 which case, destruction of the encryption key is sufficient to achieve this requirement.
- Paper records should be placed in the paper destruction bin located in the FMRIB building printer alcove on the first floor.
- If you have CDs/DVDs to destroy, contact admin@win.ox.ac.uk who can arrange destruction.
- Hard drives should be securely erased (see above website for details) or given to WIN IT staff for destruction when this is not possible (for example when non-functional.

Presentations

It is important that any presentations you give do not contain personal data. This particularly applies to image data that can contain personal information, either on the image itself or embedded within the DICOM header (if DICOM-based formats are used). For still and movie images of subjects/patients, a non-DICOM based file should be used (e.g., JPEG, GIF, TIF, AVI, MPEG), and created without personal data incorporated into the image.

Subject names or initials should not be used on any slides.

Where you have an audio/video recording of a living individual ensure you have written approval from the subject to its use in a public presentation. Written release forms are also required for recorded seminars and lectures from all presenters. Please see https://www.win.ox.ac.uk/about/fags 'Can I record a talk?' for more information.

Presenter release form (for talks): https://www.win.ox.ac.uk/files/about-us/2022-23-external-presenter-release-licence-external-fv.docx

Participant release form (for group discussions): https://www.win.ox.ac.uk/files/about-us/participant-release-form.pdf

Encryption

Encryption involves the use of a unique code to disguise data, and without the code, the data are nearly impossible to decipher. It is possible to purchase devices with built-in encryption (look for FIPS 140-2 Level 3 compliance) or software can be used to achieve this. There are several packages are available freely or this may be provided as part of your computer/device standard software. Full instructions on this can be found at https://www.win.ox.ac.uk/research/it/i-want-to/store-access-and-protect-my-data/protection/encryption.

Information Security

Guidance for Administrators



In the course of your work at the university, you will handle personal data for university students and staff, as well as external visitors, collaborators, and research participants.

'Personal data' means any information relating to an identifiable living individual who can be identified from that data or from that data and other data.

Use of personal data must comply with data privacy principles and legislation. This compliance means that personal data needs to be:

- processed fairly, lawfully and in a transparent manner;
- used only for limited, specified stated purposes and not used or disclosed in any way
- incompatible with those purposes;
- adequate, relevant and limited to what is necessary;
- accurate and, where necessary, up to date;
- not kept for longer than necessary; and
- kept safe and secure.

Examples of these types of personal data you may be handling as an administrator include

- Bank details
- · Date of Birth
- Passport Information
- Home addresses
- CV of researchers/applicants
- Grant applications
- Medical information

Examples of uses for this type of personal data include

- Taxi bookings for internal or external individuals
- Filling in, holding, or submitting expense claim forms
- Booking travel or travel insurance for internal or external individuals
- Processing or passing on CVs for job candidates or visitors
- Assisting with grant applications or gathering of information from researchers for applications

Securing information while still needed

When this data is on printed paper, do not leave paper or documents out on desks or in trays when you are not using it, particularly overnight. When not in use, please secure in a locked cabinet or drawer. Do not make unnecessary copies or give the documents to those who do not need to use the information.

When you are using personal data, you should lock your screen when you are away from your computer. If you need guidance on how to do this, please ask.

When this data is digital (email, documents on your computer), create a password for your spreadsheets or other documents, so they cannot be opened without the password. If you need help adding a password to your documents, please ask.

Please do not forward on emails or information to others who do not need it. If you do need to share files with personal data with others, you should use OneDrive through your Nexus365 account. If you need help with this, please ask.

Please note that personal data is allowed on university-owned devices only, and when the device is a laptop, it must be encrypted. If you do not know if your laptop is encrypted, please talk to the IT team.

When data is no longer needed

Once you have completed handling the data and the reason for having the data has been fully completed, you should dispose of the data.

When these forms of data are digital, you should delete the email or relevant files and documents. If you have shared any items on a cloud system (for example, OneDrive), you should remove the sharing access.

If you have printed any emails or documents with personal information, dispose of it in the secure shredding bin rather than putting it in the rubbish or recycling.

Examples of reasonable timelines for keeping personal data include

- Keeping passport and date of birth details until the trip you have booked has taken place and the individual has completed their round-trip
- Keeping candidate/visitor CVs until the job or visit has commenced
- Keeping expense forms until you know the person has been paid, or 6 months after submission of the form
- Keeping video, photo or audio recording consent forms until the media is no longer stored by the University.

If there is a problem and personal data has been disclosed or used in different way than the individual expected

If the data has been seen by or given to individuals who shouldn't see it (they aren't involved with the event/reason you have the data), it is essential you let your line manager know right away.

The situation should be reported to the Information Compliance Team (ICT): data.breach@admin.ox.ac.uk (ext. 80660/80523/16172).

The University has a legal duty to report any serious breach to the Information Commissioners Office (ICO) within **72 hours** of becoming aware of it. After you submit your report, the ICT will provide guidance and support, and decide whether the breach needs to be reported to the ICO.

Responsibility of Researchers



with respect to research ethics

- WIN seeks to promote best practice in research ethics in all studies carried out at the Centre.
- All scans done at WIN must be carried out with due attention to the appropriate ethical practices, whether that be CUREC or HRA/NHS ethics, or the technical development SOP.
- 3. The Principal Investigator who is named on the ethics application is primarily responsible for ensuring that all procedures carried out are in line with their protocol and ethical approval, and that all researchers with delegated responsibilities are appropriately trained and competent to carry out their tasks. WIN does not take on responsibility to check every detail.
- 4. The primary responsibility of the radiographer or scanner operator during scanning is to ensure the safe scanning of the participant. If the radiographer or scanner operator is not confident that the participant can be scanned safely, they will decline to scan the participant.
- 5. In line with the guidance given in the HCPC Standard of Conduct, Performance and Ethics, radiographers or scanner operators should only scan when they have seen a signed consent form for that participant and that study. In the case of scans done under the technical development SOP this would be the signature on the participant's scanning log. This is their check that some form of ethics approval and consent process has been undertaken, however it remains the researchers,' and ultimately the PI's responsibility to ensure that consent was appropriately given.
- 6. Recommended procedures and practices relating to MRI research can change over time, and radiographers and other centre staff are there to help with this. If current best practice changes, then researchers should ensure that these new procedures are followed and, when necessary, ethics amendments made in a timely way.
- 7. If any researcher or centre member is concerned that best practice in research ethics is not being followed then they would take this up, in the first instance, with the PI. If concerns remain then the issue should be raised with the Centre Director and if necessary RGEA or CUREC.
- 8. As well as any auditing or checks that may be carried out by RGEA, CUREC or ethics committees, the centre will periodically carry out random checks on the site file of one study to ensure that proper procedures are being carried out. This includes correct forms being used, dates being appropriate, delegate logs being up-to-date and subject paperwork being in order.

Authorship Guidelines

For WIN Researchers

WIN members often provide each other with support, training and advice and this is a very positive feature of our collective working environment. Such occasional support typically does not meet criteria for formal recognition such as co-authorship. However, there are situations in which contributions are substantial and deserve formal recognition. To ensure that credit is given appropriately, including to those that contribute "behind the scenes", WIN has guidelines on authorship principles and identifying co-authorships and acknowledgements in practice. This document deals with appropriate acknowledgement of *individuals*. It is also important to acknowledge funders and core facilities, and to cite papers describing tools or datasets being used where appropriate. Template text for acknowledgement of the WIN grant, commonly used facilities, and lists of papers describing commonly used tools, are available on the WIN intranet:

- https://www.win.ox.ac.uk/research/publications/win-authorship-guidelines
- https://www.win.ox.ac.uk/research/publications/win-authorship-guidelines/acknowledging-additional-win-support-tools-protocols-datasets
- https://www.win.ox.ac.uk/research/publications/win-affiliations-acknowledgements

General principles for authorships

Generally, an author is considered to be someone who:

- has made a substantial intellectual contribution to a published study. This could be through the design, execution, analysis or interpretation of the research AND
- has been involved in the drafting and revision of the work AND
- · accepts accountability for relevant aspects of the work

These are general principles, and each journal will have its own rules for authorship. More information and guidance are available on the University of Oxford Research Integrity pages (https://researchsupport.admin.ox.ac.uk/governance/integrity/publication)

This document is intended to help WIN researchers identify when authorship might be appropriate and to ensure that potential co-authors are given the opportunity to contribute. It is good practice to have discussions about authorship early in a project and to revisit those discussions regularly, as contributions may change over time. Those who do not meet criteria for authorship but who have contributed in some way to a paper can be recognised through acknowledgements.

Guidelines for tools

At WIN, we benefit from access to shared tools such as pulse sequences, acquisition protocols and analysis software. Many of these tools are well-established and are designed to be easily used by researchers without need for direct involvement of the tool creator. We maintain a list of WIN tools, along with tool creators and any associated papers or conditions of use (link). It is important to ensure that you cite any relevant paper(s) for tools that you use, as these are also important in recognizing your colleagues' contributions.

When a new tool is made available, it is often valuable to involve the tool creator in a study making use of the tool. We encourage users to contact creators if they want to suggest collaboration on a new project. Through collaboration, the creator is given the opportunity to contribute from the planning stages and can ensure that tools are used and interpreted appropriately. Tool creators are not obliged to support researchers in this way, but most tool creators welcome this opportunity. Where the level of involvement is substantial, then coauthorship might be appropriate and should be discussed at an early stage. Tool creators or group leaders are encouraged to let WIN members know (e.g via Monday message or WIN Wednesday presentation) when a new tool becomes available.

Occasionally, direct involvement of a tool creator may be a *condition* of using a particular tool (for example if the tool is not yet at a stage where researchers could use it independently). In these cases, researchers should contact tool creators before using the tool and agree how the tool creator can support the research team in responsible use of the tool.

Guidelines for data

Researchers should only use data with appropriate permission and in line with any ethical approvals and data security rules that apply. All researchers are reminded of their responsibility to have undertaken Data Privacy and Information Security Training as per University requirements (link).

If direct arrangements (outside of WIN's open neuroimaging framework) are made for data sharing between researchers, then we recommend that the researchers discuss expectations around level of involvement and collaboration up front. Where the level of involvement is substantial, then co-authorship might be appropriate and should be discussed at an early stage. Where datasets are citable, it is good practice to include citations for any datasets used.

<u>WIN's Open Neuroimaging project</u> aims to make centre data, tools, and code openly available. With this system, researchers will be able to access some datasets without direct contact with the data creators. Rules and expectations around acknowledgement and authorships will be specified for each dataset.

Support from Core Centre Staff

WIN is fortunate to have some extremely experienced physics, radiography, experimental, IT and other support staff to facilitate the research of the Centre. Many studies benefit from their professional expertise and skillset, and acknowledging this help is appropriate and appreciated. We do not prescribe a form of words to put in acknowledgements, but we encourage authors to acknowledge teams, and in some cases individuals, without whom the research would not be possible. For example, scanning projects acknowledging the radiography team, and high-performance computing projects acknowledging the computing team.

Some projects benefit from significant direct involvement of a core staff member who invests specific time, expertise and intellectual input into a project. Where the level of involvement is substantial, then co-authorship might be appropriate and should be discussed at an early stage. If you are unsure as to whether it is appropriate to include a member of core staff as an author, then seek advice from your group leader or member of the WIN management board.

Guidelines for identifying co-authorships and acknowledgements in practice

At the project presentation stage (WIP meetings), researchers will be encouraged to identify any tools, approaches, or datasets they will be using that might require involvement beyond the immediate research team. This will provide an early opportunity to identify potential collaborators to bring on board at the planning stage.

It is recognised, however, that not all requirements will be captured in this way, that projects evolve over time, and that some contributions might be overlooked. We therefore want to give people the opportunity to request co-authorships when appropriate. Such requests need to be reasonable, and *final* decisions on authorships will continue to rest with any given study's senior researcher (typically the senior author on the paper).

To facilitate these requests, a paper's first author should notify all WIN members shortly before submission to the journal (minimum 2 weeks is recommended), in order to allow for any additional co-authorships to be requested. Specifically, the notification should include the paper title, author list, abstract, and acknowledgements. This should be done by emailing these details to admin@win.ox.ac.uk and we will ensure that the notification is circulated to all WIN members, within a week.

If someone has contributed to the study and feels they have been overlooked, this is their chance to discuss this with their supervisor/line-manager, who can raise this with a study's senior author if appropriate. Where a group leader is keeping a list of tools, this is their chance to raise any queries concerning contribution of the tool creator.

Announcing paper submissions in this way will require minimal extra work on the part of the paper authors, need not delay their submission, and will only require centre members and group leaders to briefly read upcoming paper titles & abstracts. This might even help raise awareness of what research is going on across the centre and increase collaboration!

Final note on externally sourced tools/data

Please be aware that some of the tools that we have available to us have been provided from external labs, for example pulse sequences and datasets. These may have licence conditions that we have signed up to and that must be observed. Typically, these conditions include the citation of papers, and the acknowledgement of individuals or groups. In certain cases they may require the inclusion of external individuals as co-authors. A summary of the most widely used licence terms is also maintained on the intranet (link).

We hope that the above guidelines will help Centre members navigate authorships and acknowledgements in a fair and transparent way.

Heidi Johansen-Berg Director, Wellcome Centre for Integrative Neuroimaging