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Section Title:	Academic, Administration & Finance
Policy Number:	New 301
Policy Name:	Research Misconduct
Approval Authority:	President's Senior Leadership Team
Responsible Executive:	Vice President with Oversight of Grants & Sponsored Programs
Responsible Unit:	Grants & Sponsored Programs
Date Adopted:	

POLICY STATEMENT

Ramapo College of New Jersey (hereinafter referred to as the "College") is committed to uphold the highest ethical standards in research. This policy is based on the U.S. Department of Health and Human Services Public Health Service Policies on Research Misconduct – Final Rule, Code of Federal Regulations, Vol. 42, Part 93 (Federal Register, Vol. 70, p. 28370 (May 17, 2005). Further, for the purposes of research activities that are not sponsored by Health & Human Services, this policy shall be applied and its procedures may only be adjusted as required by the sponsoring agency.

PURPOSE OF POLICY

The purpose of this policy is to communicate the standards expected of faculty, staff, administrators, and academic professionals who participate in sponsored research at or for the College. The purpose of the procedure is to describe the process followed in those instances in which research misconduct is suspected to have occurred. To the extent permissible, this policy and procedure applies to all sponsored research activity stewarded by the College.

TO WHOM DOES THE POLICY APPLY

This policy applies to all College employees engaged in research activities, whether they are externally funded or not. This includes faculty (full-time, part-time/adjunct, lecturers, professional staff who teach), administrators, staff, as well as individuals contracted by the College to engage in research that is supported by federal, private, or College funds.

SUPPLEMENTAL RESOURCES

- Procedure 301: Research Misconduct
- Appendix 301: Definitions
- Policy 407: Fundraising Gifts & Grants (under review)
- Policy 220: Grants and Sponsored Programs Compliance (under review)
- Policy 649: Financial Conflicts of Interest (Sponsored Research)

- Public Health Service Policies on Research Misconduct – Final Rule, Code of Federal Regulations, Vol. 42, Part 93 (Federal Register, Vol. 70, p. 28370 (May 17, 2005)

CONTACT

Vice Provost for Academic and Faculty Affairs (in capacity as the Research Integrity Officer at the College)

PROCEDURE 301: RESEARCH MISCONDUCT

I. Overview & Principles

Allegations of research misconduct are taken very seriously, as are the needs to protect the rights of those who make such complaints in good faith and the rights of those who are accused of research misconduct. The purpose of this policy and the following procedures are to achieve these goals and to comply with federal regulations including but not limited to:

- the Department of HHS and the National Science Foundation (NSF) regulations which define the responsibilities of PHS and NSF research grant awardees for dealing with and reporting possible misconduct in research efforts (42CFR, Part 50, Subpart A and 45CFR, Part 689).
- the PHS Act, which requires that each agreement for a grant, contract, or cooperative arrangement for the conduct of biomedical or behavioral research must have, as part of it, assurances that the institution has established an administrative process to review reports of scientific misconduct in connection with biomedical and behavioral research conducted at or sponsored by the institution.

In addition, the NSF has similar regulations governing the conduct of researchers supported by NSF grants. Implicit in these requirements is an understanding that the institution reports any investigation of scientific misconduct that appears to be substantiated. The process described below will be followed when an allegation of research misconduct is received by an institutional official. This process is intended to carry out the College's responsibilities under the PHS Policies on Research Misconduct, 42 CFR Part 93. It does not apply to authorship or collaboration disputes and applies only to allegations of research misconduct that occurred within six (6) years of the date the institution or HHS received the allegation, subject to the subsequent use, health or safety of the public, and grandfather exceptions in 42 CFR § 93.105(b).

Further, for the purposes of research activities that are not sponsored by HHS, these procedures may be adjusted but only as required by the sponsoring agency.

Principle 1. Responsibility

1. All College employees and students (hereinafter referred to as "institutional members"), are responsible for reporting suspected research misconduct. Institutional members will cooperate with the RIO and other institutional officials in the review of allegations and the conduct of inquiries and investigations.
2. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, the individual may contact the RIO to discuss a hypothetical

scenario without naming individuals. Should the hypothetical scenario fall within the definition of research misconduct, the RIO will counsel the individual to follow the process for alleging research misconduct. Should the hypothetical scenario fall outside the purview of research misconduct yet merits further inquiry, the RIO will refer the individual to the appropriate office or entity on campus, which may include but is not limited to: Provost's Office/Teaching and Learning Core; Equity, Diversity, Inclusion & Compliance (EDIC); People Operations & Employee Resources (POER); the College Ombudsperson; the Institutional Review Board (IRB); and/or the Institutional Animal Care & Use Committee (IACUC).

3. The individual making the allegation is expected to maintain confidentiality of the report, and to cooperate with the entirety of the assessment, inquiry, and/or investigation processes.

4. If an individual deliberately and knowingly files a false accusation of research misconduct, they will be subject to disciplinary review and possible sanction, in accordance with applicable law/regulation, College policy and/or collective negotiations agreement.

Further, for the purposes of research activities that are not sponsored by HHS, these responsibilities may be adjusted but only as required by the sponsoring agency.

Principle 2. Protections

1. No institutional member may retaliate against individuals bringing forth allegations, witnesses, or others involved in the allegation or investigation.
2. Allegations of research misconduct are handled confidentially in accordance with 42 CFR § 93.108 as follows: The College will limit disclosure of the identity of respondents and complainants to those who need to know in order to carry out a comprehensive, competent, objective, and fair research misconduct proceeding; and the College, except as otherwise prescribed by law, will limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding.
3. In accordance with 42 CFR Part 93, respondents may consult with legal counsel or a non-attorney personal adviser (who is not a principal or witness in the case) to seek advice, and may bring the legal counsel or personal adviser to interviews or meetings on the case. The College may permit a legal counsel/personal adviser to be present at interviews and meetings; however, the College restricts the legal counsel/personal adviser's role to advising (as opposed to representing) the respondent.

4. Throughout the research misconduct proceeding, the RIO will review the matter to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of the research process. The RIO shall, at any time during a research misconduct proceeding, notify ORI immediately if they have a reason to believe that any of the following conditions exist:
    - Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
    - HHS resources or interests are threatened;
    - Research activities should be suspended;
    - There is a reasonable indication of possible violations of civil or criminal law;
    - Federal action is required to protect the interests of those involved in the research misconduct proceeding;
    - The research misconduct proceeding may be made public prematurely and HHS action may be necessary to safeguard evidence and protect the rights of those involved; or
    - The research community or public should be informed.

    In the event of such a threat, the RIO will, in consultation with other College officials and ORI, take appropriate interim action to protect against any such threat.

    Further, for the purposes of research activities that are not sponsored by HHS, these protections may be adjusted but only as required by the sponsoring agency.

II. Procedures

Generally, all inquiries and investigations will be carried through to completion and all significant issues will be pursued diligently. The RIO must notify ORI in advance if there are plans to close a case at the inquiry, investigation, or appeal stage on the basis that respondent has admitted responsibility, a settlement with the respondent has been reached, or for any other reason, except:

- closing of a case at the inquiry stage on the basis that an investigation is not warranted; or
- a finding of no misconduct at the investigation stage, which must be reported to ORI, as prescribed in this policy and 42 CFR § 93.315.

A. Assessment and Inquiry

Individuals with concerns regarding potential research misconduct by an institutional member should contact the RIO. Allegations of research misconduct are to be submitted in writing, along with any evidence they have related to the incident, to the RIO.

1. Upon receipt of the allegation, the RIO will initiate an assessment to determine the validity of the allegation. The initial assessment should be completed within seven (7) days from the receipt of the allegation and associated evidence. The RIO need not interview the complainant, respondent, or other witnesses, or gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified. The RIO shall, on or before the date on which the respondent is notified of the allegation, obtain custody of, inventory, and sequester all research records and evidence needed to conduct the research misconduct proceeding.
2. If the RIO determines that the criteria for an inquiry are met, they will immediately initiate the inquiry process. The purpose of the inquiry is to conduct an initial review of the available evidence to determine whether to conduct an investigation. An inquiry does not require a full review of all the evidence related to the allegation. Should the inquiry result in no findings or insufficient evidence to substantiate the allegation, the RIO will keep all materials related to the allegation confidentially for six (6) years. Should the inquiry support the allegation, the RIO will proceed to the next step in the process.
3. Prior to commencing an inquiry, the RIO must make a good faith effort to notify the respondent in writing. If the inquiry subsequently identifies additional respondents, they must also be notified in writing. On or before the date on which the respondent is notified, or the inquiry begins, whichever is earlier, the RIO must take all reasonable and practicable steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence and sequester them in a secure manner. Except in instances where the research records or evidence encompass scientific instruments are shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. The RIO may consult with ORI for advice and assistance in this regard.
4. The RIO, in consultation with the College Provost/VP for Teaching, Learning, and Growth, will appoint an inquiry committee and chair as soon after the initiation of the inquiry as is practicable. While the membership of the committee may vary depending on the nature of the allegation, the committee, at minimum, will consist of:

a. the RIO, and
b. three (3) individuals from the College, of which two must have the background related to the allegation.

5. No member of the committee should have unresolved personal, professional, or financial conflicts of interest with those involved with the inquiry. The respondent may request that the RIO not appoint specific individuals from the College to serve on the committee on the grounds of a conflict of interest.
6. At the committee's first meeting, the RIO will review the charge with the committee, discuss the allegations, any related issues, the appropriate procedures for conducting the inquiry, assist the committee with organizing plans for the inquiry, and answer any questions raised by the committee. Specifically, the charge for the inquiry committee:
    - sets forth the time for completion of the inquiry;
    - describes the allegations and any related issues identified during the allegation assessment;
    - states that the purpose of the inquiry is to conduct an initial review of the evidence, including the testimony of the respondent, complainant and key witnesses, to determine whether an investigation is warranted, not to determine whether research misconduct definitely occurred or who was responsible;
    - states that an investigation is warranted if the committee determines:
        a. there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct and is within the jurisdictional criteria of 42 CFR § 93.102(b); and
        b. the allegation may have substance, based on the committee's review during the inquiry.
    - Informs the inquiry committee that they are responsible for preparing or directing the preparation of a written report of the inquiry that meets the requirements of this policy and 42 CFR § 93.309(a).

7. The inquiry committee will normally interview the complainant, the respondent, and key witnesses as well as examining relevant research records and materials. Then the inquiry committee will evaluate the evidence, including the testimony obtained during the inquiry, and submit a draft inquiry report. A written inquiry report must be prepared that includes the following information:
    - the name and position of the respondent;
    - a description of the allegations of research misconduct;
    - the funding support for the research in question, including, for example, grant numbers, grant applications, contracts and publications listing said support; and

- the basis for recommending or not recommending that the allegations warrant an investigation.

The College's legal counsel should review the report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the inquiry committee. After consultation with the RIO, the committee members will decide whether an investigation is warranted based on the criteria in this policy and 42 CFR § 93.307(d).

8. The RIO shall notify the respondent whether the inquiry found an investigation to be warranted, include a copy of the draft inquiry report for comment within 10 calendar days**,** and include a copy of or refer to 42 CFR Part 93 and the College's policies and procedures on research misconduct. Any comments that are submitted by the respondent or complainant will be attached to the final inquiry report. Based on the comments, the inquiry committee may revise the draft report as appropriate and prepare it in final form. The committee will deliver the final report to the RIO, who will then deliver it to the College Provost. The Provost, in consultation with the RIO, will make a decision whether an investigation is warranted.

9. Within 30 calendar days of the Provost's decision that an investigation is warranted, the RIO will provide ORI with the Provost's written decision and a copy of the final inquiry report. The RIO must provide the following information to ORI upon request:

- the institutional policies and procedures under which the inquiry was conducted;
- the research records and evidence reviewed, transcripts or recordings of any interviews (if applicable);
- copies of all relevant documents; and
- the charges to be considered in the investigation.

10. The inquiry, including preparation of the final inquiry report and the decision of the Provost on whether an investigation is warranted, must be completed within 60 calendar days of initiation of the inquiry, unless the RIO determines that circumstances clearly warrant a longer period. If the RIO approves an extension, the inquiry record must include documentation of the reasons for exceeding the 60-day period. If the Provost decides that an investigation is not warranted, the RIO shall secure and maintain for 7 years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment by ORI of the reasons why an investigation was not conducted. These documents must be provided to ORI or other authorized HHS personnel upon request.

Further, for the purposes of research activities that are not sponsored by HHS, these procedures may be adjusted but only as required by the sponsoring agency.

B. Investigation

1. The investigation must begin within 30 calendar days after the determination by the Provost that an investigation is warranted. The purpose of the investigation is to explore and examine the allegation and evidence to determine whether research misconduct has occurred, by whom, and to what extent. While the investigation will focus on the initial allegation made, should evidence reveal that additional instances of research misconduct may have occurred, the committee may justify broadening the scope of the investigation. If at any point the evidence points to potential harm to human subjects, College students, or the public, the committee must broaden their scope beyond the initial allegation to further investigate this evidence. Under 42 CFR § 93.313 the findings of the investigation must be set forth in an investigation report.

2. On or before the date on which the investigation begins, the RIO must:
   - notify the ORI Director of the decision to begin the investigation and provide ORI a copy of the inquiry report; and
   - notify the respondent in writing of the allegations to be investigated.

The RIO must also give the respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of the investigation. The RIO will, prior to notifying the respondent of the allegations, take all reasonable and practicable steps to obtain custody of and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceedings that were not previously sequestered during the inquiry.

3. The investigation committee will convene, with members appointed by the RIO in consultation with the Provost. The investigation committee must consist of individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the investigation and should include individuals with the appropriate scientific expertise to evaluate the evidence and issues related to the allegation, interview the respondent and complainant and conduct the investigation. Individuals appointed to the investigation committee may also have served on the inquiry committee.

4. At the first meeting of the investigation committee, the RIO will define the subject matter of the investigation in a written charge to the committee that:

   - Describes the allegations and related issues identified during the inquiry;
   - Identifies the respondent;

- Informs the committee that it must conduct the investigation;
- Defines research misconduct;
- Informs the committee that it must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, research misconduct occurred and, if so, the type and extent of it and who was responsible;
- Informs the committee that in order to determine that the respondent committed research misconduct it must find that a preponderance of the evidence establishes that:
    a. research misconduct, as defined in this policy, occurred (respondent has the burden of proving by a preponderance of the evidence any affirmative defenses raised, including honest error or a difference of opinion);
    b. the research misconduct is a departure from accepted practices of the relevant research community; and
    c. the respondent committed the research misconduct intentionally, knowingly, or recklessly; and
- Informs the committee that it must prepare or direct the preparation of a written investigation report that meets the requirements of this policy and 42 CFR §93.313.

5. The RIO will convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. The investigation committee will be provided with a copy of this statement of policy and procedures and 42 CFR Part 93. The RIO will be present or available throughout the investigation to advise the committee as needed.

6. The investigation committee and the RIO must:
- Use diligent efforts to ensure that the investigation is thorough and sufficiently documented and includes examination of all research records and evidence relevant to reaching a decision on the merits of each allegation;
- Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practicable;
- Interview each respondent, complainant, and any other available person who has been identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent; record or transcribe each interview; provide the recording or transcript to the interviewee for

- correction, and include the recording or transcript in the record of the investigation; and
- pursue diligently all issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continue the investigation to completion.

7. The investigation is to be completed within 120 days after its commencement, including conducting the investigation, preparing the report of findings, providing the draft report for comment and sending the final report to ORI. However, if the RIO determines that the investigation will not be completed within this 120-day period, they will submit to ORI a written request for an extension, setting forth the reasons for the delay. The RIO will ensure that periodic progress reports are filed with ORI, if ORI grants the request for an extension and directs the filing of such reports.

8. At the conclusion of the investigation, the committee will submit a draft written report to the Provost. This report must include:

a. The individual(s) accused of research misconduct.

b. The nature of the allegation of research misconduct and the specific allegations considered in the investigation. This will include any allegations that were investigated that were beyond the committee's original scope, as well as the justification for investigating those additional allegations.

c. Identification and summary of research records and evidence reviewed, including any items that were gathered but not reviewed.

d. A statement of the findings for each specific allegation, to include:

- the type of research misconduct (falsification, fabrication, plagiarism, etc.);
- the individual(s) who committed it and the time frame;
- the committee's assessment of whether the misconduct was committed intentionally, knowingly, or recklessly;
- the accused individual(s)' explanations, which may include an argument that the alleged research misconduct is honest error or difference of opinion;
- any research related to the misconduct, and whether or not it was published/exhibited and if so, when and where;
- the identification of any and all financial support of the scholarship related to the misconduct, be it federal, private, or College funds; and
- the identification of any pending applications or proposals for support related to the misconduct.

e. Recommended sanctions to be imposed by the College.

9. The RIO must give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to the evidence on which the report is based. The respondent will be allowed 30 days from the date they

receive the draft report to submit comments to the RIO. The respondent's comments must be included and considered in the final report. In distributing the draft report, or portions thereof, to the respondent, the RIO will inform the recipient of the confidentiality under which the draft report is made available.

10. The RIO will assist the investigation committee in completing the final investigation report, including ensuring that the respondent's comments are included and considered, and transmit the final investigation report to the Provost, who will determine whether or not the finding(s) support the allegation(s) of research misconduct. Should the report conclude there was no support to the allegations, the Provost will notify the respondent in writing of the results of the committee's investigation, and keep all materials related to the allegation in the respondent's confidential personnel file for seven (7) years. Should the report support the allegations, the Provost will notify the respondent in writing of the finding(s) by sharing the committee's report less the committee's recommended sanctions. The Provost will also notify the respondent in writing that, unless an appeal (see section E below) with evidence is made within 10 days:

- a report of the finding(s) will be submitted to the granting agencies, journal editors, publishers, or other agencies in receipt of any research related to the allegations,
- the Committee's report without the committee's recommended sanctions will be submitted to the College President or their designee.

The Provost will also submit their recommended sanctions, taking into consideration pertinent institutional policy and/or collectively negotiated agreements, and the committee's recommendations which may be further developed in consultation with the College's General Counsel.

The RIO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

Further, for the purposes of research activities that are not sponsored by HHS, these investigation protocols may be adjusted as required by the sponsoring agency.

C. Appeals

The accused individual(s) have the right to appeal the report and may do so in writing to the Provost within the 10-day period. The appeal must include evidence that disproves the findings of the report.

If an appeal with evidence is filed, the Provost must supply it to the investigation committee for review.

If no appeal is filed; an appeal is filed without evidence; or an appeal with evidence is filed and the evidence is found to be unsubstantiated, the Provost will inform all granting

agencies, journal editors, publishers, or other agencies in receipt of any scholarship of the findings.

Further, for the purposes of research activities that are not sponsored by HHS, these appeal procedures may be adjusted but only as required by the sponsoring agency.

D. Final Decision

The Provost will notify the College President or their designee in a report that contains the committee's report, a copy of the notification to granting agencies, etc., and any recommended sanctions to be imposed by the College.

Upon receipt and review of the Provost's report, if:

- no appeal is filed;
- an appeal is filed without evidence, or
- an appeal with evidence is filed and the evidence is found to be unsubstantiated, the President or their designee will issue the sanctions in writing to the accused individual(s), and notify the appropriate offices or entities on which the sanctions may have an impact (e.g., Academic Dean for course scheduling; People Operations and Employee Resources Department; etc.).

The investigation concludes with the issuance of sanctions by the President or their designee; there are no further appeals.

Further, for the purposes of research activities that are not sponsored by HHS, this final decision making process may be adjusted but only as required by the sponsoring agency.

III. Reporting of Findings and Actions to ORI

Unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation, submit the following to ORI:

- a copy of the final investigation report with all attachments, along with any documentation related to an appeal;
- a statement of whether the College accepts the findings of the investigation report and appeal, if appropriate;
- a statement of whether the College found misconduct and, if so, who committed the misconduct; and
- a description of any pending or completed administrative actions against the respondent.

Further, for the purposes of research activities that are not sponsored by HHS, this reporting may be adjusted but only as required by the sponsoring agency.

IV. Records Retention

The RIO must maintain and provide to ORI, upon request, "records of research misconduct proceedings" as that term is defined by 42 CFR § 93.317. Unless custody has been transferred to HHS or ORI has advised in writing that the records no longer need to be retained, records of research misconduct proceedings must be maintained in a secure manner for seven years after completion of the proceeding involving the research misconduct allegation. The RIO is also responsible for providing any information, documentation, research records, evidence or clarification requested by ORI to carry out its review of an allegation of research misconduct or of the institution's handling of such an allegation.

The entirety of the investigation will be kept within the individual's confidential personnel file.

Further, for the purposes of research activities that are not sponsored by HHS, these retention practices may be adjusted but only as required by the sponsoring agency.

Appendix 301: Definitions

- **Allegation** means a statement or indication of possible research misconduct made to a College official.
- **Authorship** means the definition of authorship that varies across academic disciplines. In general, authorship means the mechanism for allocation of credit to the individuals for their contribution to the intellectual value of any research or related material that is being presented to an audience. Authorship has important academic, social, intellectual property, and financial implications. Authorship also implies responsibility and accountability for the material that is being presented. Disputes of authorship are not considered research misconduct, however, plagiarism (defined below) is considered research misconduct.
- **College** means Ramapo College of New Jersey.
- **Complainant** means the individual(s) who submits an allegation of research misconduct.
- **Conflict of interest** means the real or apparent interference of an individual's interest with the interests of another person, where potential bias may occur due to prior or existing personal or professional relationships.
- **Employee** means, for the purpose of this policy and procedure only, any individual under the employ of the College, including faculty (full-time, part-time/adjunct, lecturers, professional staff who teach), administrators, and staff,

as well as individuals contracted by the College to engage in research that is supported by federal, private, or College funds.

- **Fabrication** means the invention/making up of data or results and recording or reporting them.
- **Falsification** means the manipulation of research materials, equipment, or processes; the change or omission of data or results such that the research is not accurately represented in the research record.
- **HHS** means the U.S. Department of Health and Human Services, the parent agency of the Public Health Service and the National Institutes of Health.
- **Inquiry** means the gathering of information and initial fact-finding to determine whether an allegation or apparent reported or observed instance of research misconduct warrants an investigation.
- **Institutional members** means employees (staff, faculty, and administrators) of the College
- **Investigation** means the formal examination and evaluation of all relevant facts to determine if research misconduct has occurred and, if so, to determine the responsible individual and the seriousness of the misconduct.
- **ORI** means the Office of Research Integrity that oversees research misconduct inquiries and investigations on behalf of the Secretary of Health and Human Services. For the purposes of research activities that are not sponsored by HHS, ORI shall refer to the relevant parent agency's entity with whom responsibility over research misconduct and investigations is vested.
- **Plagiarism** means the appropriation of another person's ideas, processes, results, or words without acknowledgement of the original author, or assigning appropriate credit.
- **PHS** means the U.S. Public Health Service, an operating component of the Department of Health & Human Services.
- **PHS regulation** means the Public Health Service regulation establishing standards for institutional inquiries - and investigations into allegations of scientific misconduct, which is set forth at 42 C.F.R. Part 50, Subpart A, entitled "Responsibility of PHS Awardee and Applicant Institutions for Dealing with and Reporting Possible Misconduct in Science."
- **PHS support** means PHS grants, contracts, or cooperative agreements or applications therefor.
- **Research** for the purposes of this policy and procedure only, is defined as, according to federal regulations, a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. The terms scholarship and creative work may also be considered research.

- **RIO** means the Research Integrity Officer, whose role is designated in this policy, namely, the Vice Provost for Academic and Faculty Affairs, who will act as the College's RIO.
- **Research Misconduct** means fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, performing, or reviewing research or in reporting research results. Research Misconduct does not include honest error or differences of opinion (§93.103, 42 CFR Part 93- June 2005). It also does not include authorship disputes. The College reserves the right to require adherence to other definitions of research misconduct as required by contractual obligations with external sponsors of research. To be considered research misconduct, the action must represent a "significant departure from acceptable practices;" have been "committed intentionally or knowingly or recklessly;" and be "proven by preponderance of evidence." These are the minimum standards for establishing irresponsible behavior.
- **Research record** means any data, document, computer file, or other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of an allegation of research misconduct. A research record includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; correspondence; videos; photographs; X-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; surveys and collected survey responses; consent forms; medical charts; and patient research files.
- **Respondent** means the person against whom an allegation of Research Misconduct is directed or who is the subject of a Research Misconduct proceeding.
- **Retaliation** means any action that adversely affects the employment or other institutional status of an individual that is taken by an institution or an employee because the individual has, in good faith, made an allegation of research misconduct or of inadequate institutional response thereto or has cooperated in good faith with an investigation of such allegation.
- **Sponsored Research** is research activity that is supported by internal or external funding.