

## Research Misconduct: Guidelines and Procedures

---

Responsible Office: Grants and Sponsored Projects

Effective Date: March 4, 2009

Responsible Official: University Director, Grants and Sponsored Projects Last Revision: March 9, 2021

---

### I. Statement of Purpose

Research is among the most professionally regarded and highest forms of scholarship. Maintenance of high ethical standards of conduct in research activities is of vital concern to Fairleigh Dickinson University because research misconduct can inflict profound harm on the pursuit of knowledge. The purpose of this policy is to provide timely, fair, and effective procedures to address instances of research misconduct. A further purpose of this policy is ensure that research activities at Fairleigh Dickinson University are conducted in a manner that complies with University policy; applicable state and Federal laws; and the requirements of grant-makers and sponsors.

Fairleigh Dickinson University (“FDU”) is committed to preserving the public trust, and upholding the integrity of its faculty, staff, students and affiliates in the design, conduct and investigating, reporting **research misconduct**. This policy promotes the identification of misconduct of research by establishing standards that provide a reasonable expectation that the design, conduct, and reporting of research performed under **Public Health Service (PHS)** sponsored grants or cooperative agreements will be consistent with federal laws and regulations applicable to research misconduct including [42 U.S.C. 289b](#) and [42 C.F.R. Part 93](#).

The U.S. Department of Health and Human Services (HHS) and institutions that apply for or receive Public Health Service (PHS) support for biomedical or behavioral research, biomedical or behavioral research training, or activities related to that research or research training share responsibility for the integrity of the research process. HHS has ultimate oversight authority for PHS supported research, and for taking other actions as appropriate or necessary, including the right to assess allegations and perform inquiries or investigations at any time. Institutions and institutional members have an affirmative duty to protect PHS funds from misuse by ensuring the integrity of all PHS supported work, and primary responsibility for responding to and reporting allegations of research misconduct, as provided in this part.

### I. Scope

This University-wide policy is based on the Federal Policy on Research Misconduct and applies in that capacity to faculty, executives, professional administrators, staff, students, trainees, fellows, interns, and any and all individuals who are affiliated with and may be involved in research at Fairleigh Dickinson University, and all research conducted by such individuals, whether or not conducted on site or federally funded, and protocols for such research, including those undertaken in fulfillment of a course requirement.

### II. Definitions

**Research Misconduct:** Means any fabrication, falsification, plagiarism of research publications, including theft or reporting of research data, misappropriation of funds, or other practices that seriously deviate from those that are commonly accepted within the research community for proposing, conducting, or reporting research.

(a) Fabrication is making up data or results and recording or reporting them.

(b) Falsification is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

(c) Plagiarism is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

(d) Research misconduct does not include honest error or differences of opinion.

This definition includes violations of University policy pertaining to research, including: the failure to obtain proper review and approval of the Institutional Review Board (IRB) that is responsible for the protection of human subjects in research, as well as failure to obtain appropriate oversight and approval for use of animals in research, radioactive materials, or other biohazards, as well as the failure to comply with rules and guidelines set forth by the committees responsible for these areas.

**Research:** A systematic, intensive investigation intended to increase knowledge or understanding, in all academic fields, that is a basic, applied or demonstrated investigation.

**Researcher:** The term Researcher includes faculty, executives, professional administrators, staff, students, trainees, fellows, and interns academically affiliated with Fairleigh Dickinson University who conduct or oversee the conduct of research activities within the facilities of the University and/or in any affiliated or designated off-site locations, whether or not the research is externally funded.

**Complainant:** Any person bringing an allegation of Research Misconduct.

**Respondent:** Any person/researcher accused of Research Misconduct.

### III. Duties

Researchers have a duty to perform their research activities in an ethical fashion. Any Researcher who engages in any form of Research Misconduct shall be subject to disciplinary action, up to and including termination of employment or other affiliation with Fairleigh Dickinson University.

### IV. Procedures

#### ***A. Lodging of Complaints and Initial Inquiry***

1. Complaints of alleged research misconduct shall be lodged with the College Dean or School Director as a written and signed statement. The complaint must state, with reasonable specificity, the alleged misconduct in which the Respondent has engaged. The College Dean or School Director shall meet with the Complainant and Respondent to seek an explanation and informal resolution of the complaint using good-faith efforts to resolve the Complainant's concerns informally. Scholars or persons with relevant expertise and knowledge may be consulted by the College Dean or School Director as needed.

2. If unable to resolve the complaint, the College Dean or School Director shall appoint at least two tenured faculty members and additional representatives, as needed, who shall have no conflict of interest, and must be objective, impartial, possess subject matter competencies, understand the importance of confidentiality, and immediately conduct a preliminary inquiry using good-faith efforts to resolve the Complainant's concerns informally and/or determine whether there is sufficient evidence to merit a formal investigation. The Respondent may challenge the participation of any ad hoc members appointed to the Inquiry Committee on any of the foregoing grounds. The College Dean or School Director shall make a final determination as to the fitness of any person to serve on the Inquiry Committee. As part of the assessment, the Respondent shall receive a copy of the written complaint or narrative, this Research Misconduct Policy, and provided an opportunity to respond to the complaint in writing to the College Dean or School Director within 15 days of receipt of notification.

3. If at the conclusion of the Initial Inquiry process, the College Dean or School Director, with the approval of the University Provost and Senior Vice President for Academic Affairs ("University Provost"), determines that no formal investigation is merited, then the College Dean or School Director shall dismiss the allegations and conclude the inquiry. The Respondent and the Complainant shall be informed of the determination.

4. If at the conclusion of the Initial Inquiry process, the College Dean or School Director, with the approval of the University Provost, determines that an investigation is merited, then the College Dean or School Director shall refer the matter for further investigation (as per Part B below).

5. The College Dean or School Director shall consult with the University Director of Grants and Sponsored Projects (OGSP) to determine whether the Respondent's research is externally funded. When the project is sponsored by the federal government, the Director of OGSP shall notify the federal funding agency and the Office of Research Integrity (ORI) of the US Department of Health and Human Services (DHHS) of the University's decision to proceed with a formal investigation on or before the date the investigation begins (as per Part B below).

6. The entire Inquiry process shall be conducted and concluded within a 60-day period. The College Dean or School Director shall determine if an extension is warranted and shall document the reasons for exceeding the 60-day period.

### ***B. Formal Investigations of Complaints***

1. The charge of the Investigative Committee is to make a thorough, competent, objective and fair response to allegations consistent with and within the time limits of 42 CFR Part 93, whether an act of research misconduct has occurred or has not. The Investigative Committee shall undertake a thorough analysis of the complaint. It shall obtain all relevant information; interview persons with relevant knowledge; interview the Respondent and the Complainant; and consider any other relevant information and/or research undertaken by the Respondent. The University will provide a good faith effort in providing a written notice to the Respondent at the time of or the beginning of the inquiry. The Respondent may be accompanied by any person (including counsel) who will serve in an advisory capacity only to the Respondent. If the faculty member's legal counsel participates in the proceedings, the University may also have its legal counsel attend and participate in a like capacity.

2. The University Provost shall appoint an ad hoc Investigative Committee consisting of at least five (5) members of the tenured faculty who are objective, impartial, possess subject matter competencies, and understand the importance of confidentiality. The College Dean or School Director of the Respondent may also recommend the inclusion and/or

consultation with additional ad hoc representatives to the Investigative Committee with the approval of the University Provost from inside (or outside) the University, who have scholarly expertise in the subject discipline underlying the complaint.

3. Any appointed member of the Investigative Committee must not have any unresolved personal, professional, or financial conflicts of interest with the complainant, respondent or witnesses. An appointed member who believes that s/he cannot be impartial, who believes that s/he lacks sufficient qualifications, or has any of the above, unresolved issues, shall recuse themselves from the investigative process. The Respondent may challenge the participation of any ad hoc members appointed to the Investigative Committee on any of the foregoing grounds. The University Provost shall make a final determination as to the fitness of any person to serve on the Investigative Committee. Persons with appropriate scientific expertise may also be included, are required to be impartial and follow the above requirements.

4. If the Investigative Committee finds that the complaint is not founded, and the University Provost concurs with this finding in consultation with the College Dean or School Director, then proceedings shall be terminated. In such an event, the University Provost shall inform the College Dean or School Director, the Investigative Committee, Complainant, the Respondent, and the Director of Grants and Sponsored Projects that the investigation has been terminated.

5. If the Investigative Committee finds that the complaint is founded, and the University Provost, in consultation with the College Dean or School Director concurs with this finding, then the University Provost shall inform the Investigative Committee, the College Dean or School Director, the Complainant, the Respondent, and the Director of Grants and Sponsored Projects in writing of the determination, including: a copy of the inquiry report and include a copy of or refer to 42 CFR 93 and the institution's policies and procedures adopted under its assurance. Further, at the onset or any time during the investigation, the University Provost, in consultation with the College Dean or School Director, has the authority to suspend the Respondent from engaging in sponsored or unsponsored research activities, from expending research funds, and engaging in teaching activities, if the University has reason to believe that health or safety of the public is at risk, DHHS resources or interest are threatened, there is reasonable indication of possible violations of civil or criminal law, federal action is required to protect the interests of those involved in research misconduct proceedings, the University believes that the research misconduct proceeding may be made public prematurely, and/or the research community or the public should be informed.

A finding of research misconduct requires that— (a) There be a significant departure from accepted practices of the relevant research community; and (b) The misconduct be committed intentionally, knowingly, or recklessly; and (c) The allegation be proven by a preponderance of the evidence. [CFR 93.104]

6. At the conclusion of the investigation, the Investigative Committee shall prepare and submit a written report of its findings and recommendations to the University Provost, the College Dean or School Director. The Investigative Committee shall describe how the investigation was conducted; identify all persons from whom information was obtained, and list all forms of research that it reviewed. Following further review and consultation, the University Provost may accept, reject or modify the recommendations of the Investigative Committee, or remand the matter to the Investigative Committee for further investigation. The Respondent shall be provided an opportunity to meet and discuss the report, to provide written comments on the draft report of the investigation and provide provisions for the investigation committee to consider and address the comments before issuing the final report. The respondent shall

have five (5) calendar days to submit a written response to the report to the University Provost, College Dean or Director before any action is taken.

The University Provost shall make the final decision that shall promptly be provided to the Investigative Committee, the College Dean or School Director, Complainant, and Respondent and to the University Director of the Office of Grants and Sponsored Projects (OGSP).

7. The OGSP is responsible for keeping the ORI apprised of the progress of the review, communicating the University's findings and appeal proceedings, and for providing a final investigative report to the ORI and the federal funding agency (if applicable) within 120 days from the start of the investigative process, or at the conclusion of additional extensions as may be granted by the University in concurrence with ORI. Information to ORI must also include statements of whether the University accepts the findings or the appeal proceeding, whether the University found research misconduct, who committed it, and a description of any pending or completed disciplinary actions against the Respondent. This procedure shall also apply if the terms of a grant funded by a non-federal agency require that the University provide notification of research misconduct.

8. The University Provost shall consult with and seek the approval of the College Dean or School Director to consider and impose disciplinary action against the Respondent or the Complainant in accordance with University policy, any applicable collective bargaining agreement, the Student Handbook, or the Faculty Handbook of Fairleigh Dickinson University.

9. The Respondent or the Complainant against whom the College Dean or School Director has recommended disciplinary action may immediately invoke any applicable grievance procedure provided in the Faculty Handbook of Fairleigh Dickinson University (FDU), the Student Handbook of FDU, and/or any collective bargaining agreement and/or any University policy. The request shall be made to the University Provost, in writing, within five (5) business days after the date of determination. The Respondent or Complainant shall state, with reasonable specificity, the reasons for requesting a review. The University Provost shall issue a written response to the Respondent or Complainant with a copy to the College Dean or School Director within ten (10) business days after receipt of the request for a review. Deadlines for initiating grievance procedures to challenge discipline shall be stayed until the date of the response of the University Provost. When applicable, the ORI shall be appropriately notified of this request explaining the need for the extension of time.

10. The investigation shall be concluded within 180 days from the date of the College Dean or School Director's receipt of an initial complaint, except for good cause.

## **V. Other Matters**

1. The University considers the action of lodging a complaint of research misconduct a serious matter. Consequently, complaints of research misconduct must be made in good faith and with a reasonable belief that misconduct has occurred. A complaint is not made in good faith if it is made with reckless disregard, malicious intent, or willful ignorance of facts that could disprove an allegation of misconduct. Based on the recommendation of the Investigative Committee and acceptance by the University Provost, College Dean or School Director disciplinary action shall be imposed against anyone who makes a bad-faith charge of research misconduct. Furthermore, all reasonable and practical efforts will be

made, if requested and as appropriate, to protect or restore the reputation of person alleged to have engaged in research misconduct but against whom no findings of research misconduct is made.

2. The University shall not discipline or retaliate against any person who makes a good-faith charge of research misconduct. All reasonable and practical efforts to protect or restore the position of any complainant, witness, or committee member and to counter potential or actual retaliation against these complainants, witnesses and committee members.

3. The University shall ensure that confidentiality, to the extent practicable, is maintained throughout the process. Further, information regarding confidentiality is included in Section VII.

4. In the event that a preliminary inquiry or an investigation is terminated by the University Provost, College Dean or School Director, the University shall purge all records related to the complaint from any personnel files maintained by the University Provost, College Dean or School Director, Office of Grants and Sponsored Projects, or Human Resources Department on the Respondent. Depending upon the circumstances, the University Provost, College Dean or School Director shall, with the concurrence of the Respondent, notify any and all agencies and individuals who are aware of the complaint about the outcome of the preliminary assessment or investigation.

## **VI. Confidentiality [from 42 CFR 93]**

(a) Disclosure of the identity of respondents and complainants in research misconduct proceedings is limited, to the extent possible, to those who need to know, consistent with a thorough, competent, objective and fair research misconduct proceeding, and as allowed by law. Provided, however, that:

(1) The institution must disclose the identity of respondents and complainants to ORI pursuant to an ORI review of research misconduct proceedings under CFR 93.403.

(2) Under CFR 93.517(g), HHS administrative hearings must be open to the public.

(b) Except as may otherwise be prescribed by applicable law, confidentiality must be maintained for any records or evidence from which research subjects might be identified. Disclosure is limited to those who have a need to know to carry out a research misconduct proceeding.

## **VII. Training Requirements**

**Institutional Resources:** Fairleigh Dickinson University will provide Responsible Conduct in Research training to key personnel identified on federally funded research. The University utilizes the Collaborative Institutional Training Initiative (CITI), a web-based module for Responsible Conduct in Research training, in order to comply with this requirement. In addition to Key Personnel, the PIs must notify the GSP office if there are others working on any PHS-funded research projects, regardless of title or position, responsible for the design, conduct, or reporting of the research that will include post-doctoral fellows, students, professional research staff, collaborators or consultants. All such personnel will also be required to complete the training. The training is required to be completed every three (3) years. Additional training and reference to federal policies are included at the end of this policy.

## VIII. *Federal References and Additional Information on Compliance*

U.S. Department of Health and Human Services (Including Public Health Service and the National Institutes of Health)

- [42 CFR 93, Public Health Policies on Research Misconduct](#)
- [The Office of Research Integrity](#)
- [Office of Research Integrity Policy on Plagiarism](#)
- [Office of Research Integrity: Handling Misconduct](#)
- [Office of Research Integrity: Federal Policies](#)