

Pace University Policy on Research Misconduct

Policy on Research Misconduct

Pace University is committed to maintaining the highest professional and ethical standards in all of its research activities and carrying out its responsibilities under Public Health Service (PHS) Policies on Research Misconduct, 42 CFR Part 93. Pace University ensures that all reports of research-related misconduct will be promptly and discretely investigated and that appropriate corrective action will be taken if improper conduct has occurred. The University also pledges that it will neither take nor allow anyone acting on its behalf to engage in any retaliatory action against anyone for reporting or inquiring in good faith regarding actual or suspected University-related improper conduct of research.

All misconduct in the pursuit of research, scholarly, and creative work, as defined in this document, falls under this policy. Pace will investigate all such allegations following the general procedures set out by ORI regardless of whether or not the alleged misconduct occurred on a funded project.

A. Definition of Research Misconduct by the Office of Research Integrity (ORI) of U.S. Department of Health and Human Services (HHS).

<http://ori.hhs.gov/definition-misconduct>

Research misconduct means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.

- (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.

B. Procedures for Reporting and Investigating Research Misconduct

1. Pace University Annual Reports to ORI

In order to assure continuance of the ability of Pace University to obtain Federal funding for research, the University is required to report annually to the Public Health Service (PHS) Office of Research Integrity (ORI) as to whether there are any instances of research misconduct. This is undertaken by the Associate Provost for

Sponsored Research once each year. The Office of Sponsored Research must receive a report from the Dean of each College or School as to whether there have been any allegations of research related misconduct. Once all of these reports have been received, the Associate Provost for Sponsored Research submits the required ORI report.

2. Reporting of Research Misconduct at Pace University

As a member of the Pace University community, you have several options for reporting suspected improper conduct of research, or violations of University policies, or federal, state, or local laws. Whenever it is reasonable to do so, you are encouraged to first discuss such concerns with your supervisor and/or the University administrator who has authority over the area in which your concern arises. For allegations of research misconduct, the appropriate reporting official is the Dean of your College or School. Alternatively you may report research misconduct to the Associate Provost for Sponsored Research, or to the Provost directly. This can be done anonymously if preferred.

3. Investigations of Allegations of Misconduct at Pace University

All allegations of research misconduct reported to the Dean, Associate Provost for Sponsored Research, or Provost will be investigated by the respective Dean (or his/her designees), unless otherwise decided by the Associate Provost for Sponsored Research. The Associate Provost for Sponsored Research shall provide the necessary direction and resources for an investigation. All efforts shall be undertaken to maintain confidentiality during the investigation. The investigation is a formal process that requires securing and sequestering records at the time the respondent is notified of the allegation, recording or transcribing all interviews and providing copies to the interviewee, and insuring that the hearing complies with ORI rules. If the Dean determines that research misconduct has occurred, that misconduct is reported to the Associate Provost for Sponsored Research who is the Research Integrity Officer for Pace University.

For any investigation, the researcher shall be given the opportunity to review any evidence used to substantiate the charge and to submit rebuttal information and materials. The researcher shall have the right to receive advice throughout the process from an advisor of his/her choosing. If either the reporter or the accused researcher is dissatisfied with the decision of the Associate Provost for Sponsored Research or her/his designees and wishes to pursue the matter, s/he shall promptly appeal the decision to the Provost. The Provost shall review all evidence gathered by the Dean, Associate Provost for Sponsored Research, or her/his designees, interview the reporter and the accused researcher, investigate further where warranted, and solicit outside expert opinion if needed.

The research misconduct inquiry shall follow the procedures set by ORI (42 CFR 93.310 and 93.311), which is quoted directly below. Answers to frequently asked

questions can be found on the ORI website:

<https://ori.hhs.gov/sites/default/files/QandA.reg.6-06.pdf>.

Institutions conducting research misconduct investigations must:

(a) *Time*. Begin the investigation within 30 days after determining that an investigation is warranted.

(b) *Notice to ORI*. Notify the ORI Director of the decision to begin an investigation on or before the date the investigation begins and provide an inquiry report that meets the requirements of § 93.307 and § 93.309.

(c) *Notice to the respondent*. Notify the respondent in writing of the allegations within a reasonable amount of time after determining that an investigation is warranted, but before the investigation begins. The institution must 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 investigation.

(d) *Custody of the records*. To the extent they have not already done so at the allegation or inquiry stages, take all reasonable and practical 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 that where the research records or evidence encompass scientific instruments 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. Whenever possible, the institution must take custody of the records (1) Before or at the time the institution notifies the respondent; and (2) Whenever additional items become known or relevant to the investigation.

(e) *Documentation*. 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 the allegations.

(f) *Ensuring a fair investigation*. Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practicable, including participation of persons with appropriate scientific expertise who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the inquiry or investigation.

(g) *Interviews*. Interview each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and 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.

(h) *Pursue leads.* Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of additional instances of possible re- search misconduct, and continue the investigation to completion.

Investigation time limits:

(a) *Time limit for completing an investigation.* An institution must complete all aspects of an investigation within 120 days of beginning it, including conducting the investigation, preparing the report of findings, providing the draft report for comment in accordance with §93.312, and sending the final report to ORI under § 93.315.

(b) *Extension of time limit.* If unable to complete the investigation in 120 days, the institution must ask ORI for an extension in writing.

(c) *Progress reports.* If ORI grants an extension, it may direct the institution to file periodic progress reports.