

VASSAR COLLEGE

Standards in the Conduct of Research

From the *Vassar College Faculty Handbook*: *The conduct of sponsored research and consulting activities places special responsibilities upon the faculty member and the College to ensure the highest standards of professional behavior consistent with the academy's commitment to free and open inquiry in the pursuit of new knowledge, the dissemination of knowledge, and new applications of knowledge. The federal and state governments, other sponsoring organizations, professional societies, and the college itself have instituted policies to deal with a range of crucial issues relating to the performance of research, the environment in which research is conducted, relationships between sponsors and the recipients of research support, and ownership and transfer of intellectual products that may be developed in the course of sponsored activities.*

Vassar College abides by the policies, principles, and regulations set forth in the Federal Policy on Research Misconduct, published in the Federal Register, requiring institutions to foster an environment that discourages misconduct in all research and confronts possible misconduct associated with research for which Federal funds have been requested. This statement intends to carry out the College's responsibilities under Public Health Service (PHS) Policies on Research Misconduct, 42 CFR Part 93. Should a particular allegation arise, the requirements of the agency supporting the research will be followed to the extent they deviate from the below.

The general policy of 42 CFR Part 93 states:

“(a) Research misconduct involving PHS support is contrary to the interests of the PHS and the Federal government and to the health and safety of the public, to the integrity of research, and to the conservation of public funds.

(b) 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.”

Definitions¹ of research 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.

¹ For full list of relevant definitions, refer to 42 CFR 93.200-227.

Requirements for findings of research misconduct: A finding of research misconduct made under this part 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.

Institutional Inquiry (refer to 42 CFR 93.307-309)

Allegations of scientific misconduct should be brought before the Dean of the Faculty, who will protect to the fullest possible extent the privacy of those who report apparent misconduct. The Dean of the Faculty will initiate a process to consist of an initial inquiry, to be followed, when warranted, by investigation.

The Office of the Dean of the Faculty, in consultation with other senior institutional officials, will appoint an *ad hoc* committee to undertake initial inquiry of any allegation of research misconduct, make a determination and prepare a report *within sixty calendar days*, unless circumstances warrant a longer period. College officials and the *ad hoc* committee will secure the expertise necessary and appropriate for conducting an authoritative and thorough evaluation of the relevant evidence, including consideration of actual or apparent conflict of interest. The *ad hoc* committee will prepare a report on the evidence reviewed, summarizing interviews and presenting the inquiry's conclusions. Should an inquiry last longer than sixty calendar days, the report shall contain documentation of the reasons for exceeding the sixty-day period. The subject(s) of the inquiry will be provided with a copy of this report and given opportunity to comment on allegations and/or findings (his/her comments shall be made part of the record). Affected individual(s) will be treated confidentially to the fullest possible extent.

Should the *ad hoc* committee conclude that further investigation is not warranted, detailed documentation of the inquiry will be preserved for a minimum of three years. This documentation shall be provided to the Office of Research Integrity (ORI) or other authorized personnel upon request.

If an inquiry determines that the allegations are not confirmed, College officials will seek to restore the reputations of the persons affected and protect the positions and reputations of those who in good faith made the allegations.

Should findings from an inquiry provide sufficient basis for conducting an investigation, the *ad hoc* committee, in consultation with the Office of the Dean of the Faculty and other institutional officials, shall undertake further investigation *within thirty calendar days after the completion of the institutional inquiry*.

Institutional Investigation (refer to 42 CFR 93.310-316)

The investigation shall be conducted by an *ad hoc* committee appointed by the Office of the Dean of the Faculty, taking precautions against real or apparent conflicts of interest. Notice of an investigation shall be provided to ORI on or by the date the investigation begins. An investigation must be completed *within 120 days of its initiation*, including the submission of the final report to ORI (If the College is unable to complete the investigation in this timeframe, a written request for extension must be submitted to ORI).

The investigation normally will include examination of all documentation and interviews whenever possible with all individuals who have or might have information about the allegation, including accusers and accused. Respondent(s) comments will be part of the investigation record. The *ad hoc* committee shall secure the expertise necessary and appropriate for conducting an authoritative and thorough evaluation of the relevant evidence. Thorough documentation substantiating investigation findings shall be prepared and maintained.

The affected individual(s) will be afforded confidential treatment to the fullest possible extent. Should the investigation determine that the allegations are not confirmed, the institution will seek to restore the reputations of persons alleged to have engaged in misconduct and to protect the positions and reputations of those who in good faith made the allegations.

Should the allegations of misconduct be substantiated, appropriate sanctions shall be imposed, following institutional procedures concerning the same.

Further Institutional Responsibilities (refer to 42 CFR 93.317-319)

Notification of the Office of Research Integrity: ORI expects institutions to carry inquiries and investigations through to completion and to pursue diligently all significant issues. The College must notify ORI in advance if it plans to close a case at the inquiry, investigation, or appeal stage on the basis that the respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except the 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 (refer to 42 CFR 93.315). ORI may conduct an oversight review of the institution's handling of the case and take appropriate action.

ORI must be notified at any stage of either an inquiry or investigation of any immediate health hazard, need to protect federal funds or equipment, or need to protect the interests of persons involved in the inquiry or investigation (including those who have made or who are the subject of allegations, their associates, and investigators), or if it is probable that the alleged misconduct is about to be reported publicly. In addition, ORI must be notified when there is reasonable indication of possible violation of civil or criminal law.

Retention and custody of records: The College must maintain and provide upon request to ORI (or other pertinent agencies as required by regulation) records of research misconduct proceedings. Unless custody has been transferred to the cognizant agency, or the agency 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 not less than seven years after completion of the proceeding. The College is also responsible for providing any information, documentation, research records, evidence or clarification requested by ORI or another agency to carry out its review of an allegation of research misconduct or of the institution's handling of such an allegation. Upon request, the College shall transfer custody of, or provide copies of, any institutional record relevant to a research misconduct allegation covered by 42 CFR Part 93.
