Institutional Research Misconduct

I. Policy Statement and Purpose

Sound research methodologies and accurate reporting of research results are essential to scientific discovery and the sharing of knowledge that benefits society. Although instances of honest errors in research occur, Athens State University encourages honest and accurate research and investigates all instances of significant deviations from acceptable research practices such as fabrication, falsification, misappropriation, plagiarism, and any fraudulent research activity.

II. Definitions

Principal Investigator: individual desiring to conduct research and publish findings. Primary responsibility for assuring that the rights and welfare of the individuals involved are protected continues to rest with principal investigators conducting the research. This responsibility is shared by others engaged in the conduct of the research. Faculty who assign or supervise research conducted by students have an obligation to consider carefully whether those students are qualified to safeguard adequately the rights and welfare of subjects.

Research: a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.[45 CFR 46.102]

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 appropriating 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.

III. Criteria to Determine a Finding of Research Misconduct

To determine a finding of research misconduct all three of the following conditions must be met:

1. A significant departure from acceptable research practices and norms.
Conducting research involving human or animal subjects without prior approval of the Institutional Research Board (IRB) or the Institutional Animal Care and Use Committee (IACUC) is considered a significant departure from acceptable research practices. Instances of significant deviations from acceptable research practices such as fabrication, falsification, misappropriation, plagiarism, and any fraudulent research activity is also considered a significant departure from acceptable research practices. In contrast, simple errors such as misinterpretation of data, errors in calculations, differences in conclusions reached after analysis of the data, and problems caused by poor research are not considered significant departures from acceptable research practices and norms. The IRB Administrator or the IACUC Chair can provide training and additional examples of research practices that may be considered significant departures from acceptable practices and norms.

2. **The action taken was committed intentionally, knowingly, or recklessly.**
The investigator cannot use the defense that they were not aware their actions were a violation of this policy or any other University, state, or federal policies governing research practices and the protection of human or animal subjects. The University offers free training through Collaborative Institutional Training Initiative (CITI) on responsible research. The IRB Administrator or the IACUC Chair manages the training program and will assist investigators with the online training.

3. **The allegation was proven after review of all of the available evidence.** All of the available evidence will be collected, reviewed, and discussed during the deliberations between the Provost/Vice President for Academic Affairs (VPAA) the appropriate Dean. Witnesses may be called and the investigator will be allowed to present a written statement that will be considered during the deliberations. The investigator’s statement will be included with the final report. The investigator must notify the VPAA if they will be represented by legal counsel during any interactions with University personnel at least three business days in advance of such interactions. The University reserves the right to retain similar representation during those interactions.

**IV. Investigation of Research Misconduct Allegations**

The Provost/Vice President of Academic Affairs will investigate each allegation of research misconduct to determine if an honest error in research occurred or if a serious and willful violation occurred. The University will use the definition of research misconduct provided by the Office of Research Integrity (ORI) within the U.S. Department of Health and Human Services (HHS) located at [U.S. Department of Health and Human Services - Office of Research Integrity](https://www.ors.od.nih.gov) when investigating allegations of research misconduct governed by this policy. The ORI and the University IRB Administrator or the IACUC Chair can provide investigators with detailed examples of violations of research misconduct and examples of research practices considered unacceptable within the research community. Questions related to this policy should be directed to the Provost/Vice President for Academic Affairs.
The Office of the Provost/Vice President for Academic Affairs is responsible for receiving allegations of research misconduct and tasked with resolving allegations of research misconduct. All allegations of research misconduct and the identity of those accused of misconduct will be kept confidential during the investigation to protect identity.

V. Allegation Resolution Procedures

The University will follow the below three stages to resolve allegations of research misconduct:

1. **Inquiry:** This initial stage will determine whether an allegation warrants a formal investigation. Confidentiality must be maintained to protect the identity of all parties beginning with this stage and throughout the other two stages.

2. **Investigation by the Provost/Vice President for Academic Affairs (VPAA):** The VPAA will collect and thoroughly examine all the available evidence to determine whether research misconduct took place. The accused investigator will be allowed to submit a written statement to the VPAA. The VPAA may interview witnesses and the investigator during the investigation. The VPAA will make a final determination through a preponderance of the evidence. In most cases, the investigation and the determination should be made within sixty (60) calendar days of receipt of an allegation of research misconduct.

3. **Resolution:** Within fifteen (15) calendar days of final determination, the VPAA will notify the principal investigator and, if warranted, take appropriate disciplinary action or measures to correct the investigator’s unacceptable behavior. The Provost/ Vice President of Academic Affairs may consult with the IRB Administrator/IACUC Chair and/or IRB Committee Chair to determine if outside agencies should be notified of the incident and the corrective measures taken by the University.

VI. Appeal Process

The investigator may appeal the decision with ten (10) calendar days after notification. The Provost/Vice President for Academic Affairs should appoint an Appeals Committee within seven (7) calendar days to review the appeal. The Appeals Committee will be comprised of three members and shall include no members of the IRB/IACUC. The Committee shall complete its review within seven (7) calendar days and provide a report to the Provost/Vice President of Academic Affairs of its decision. The Provost/Vice President for Academic Affairs, after consultation with the Dean, shall determine what disposition to make of the case. The determination will be communicated to the investigator within seven (7) calendar days of the receipt of the report to the Provost/Vice President for Academic Affairs.
VII. Responsibility for this Operating Policy

Policy Owner

As part of the initial approval of this policy by the President and subsequent to the original dissemination of the policy, the Provost/Vice President for Academic Affairs is the policy owner for the ongoing evaluation, review, and approval of this policy. Subsequent reviews and revisions to this policy must be in accordance with approved operating policy procedures and processes.

This policy will be reviewed every three years or more frequently as needed by the Policy Owner. Revisions will be reviewed/affirmed by the Faculty Senate and the Cabinet and approved by the University President. This policy will be updated/published in the University’s Policy Library.

Responsibility for Policy Implementation

The President has assigned the responsibility of implementing this policy to the Provost/Vice President for Academic Affairs.