

RESEARCH MISCONDUCT POLICIES AND PROCEDURES

The pursuit of truth motivates academic research at Earlham College. Furthermore, Earlham's Principles and Practices state, "Integrity calls us to be truthful, honest, and fair and to take responsibility for our actions and decisions." It is with these values in mind that the community expects the highest standards of conduct from all faculty, staff, and students in research activities.

The purpose of this policy statement is to inform research participants of the College's research misconduct policies, to identify general types of research misconduct, and to set in place mechanisms to deal with alleged violations of these principles.

The policy is based upon Earlham's Quaker ideals and the expectations of the external academic community, including private and public funding agencies. Applicable law, regulations and requirements include, but are not limited to, those appearing in the Code of Federal Regulations at 42 CFR Parts 50 and 93 (http://ori.hhs.gov/sites/default/files/42_cfr_parts_50_and_93_2005.pdf) as per the statutes and regulations for research provided by The Office of Research Integrity (ORI) under the U.S. Department of Health and Human Services, and at 45 CFR 689 (<https://www.nsf.gov/oig/pdf/cfr/45-CFR-689.pdf>) for the National Science Foundation.¹

Policy

Earlham College expects that research and scholarship carried out within the community will be characterized by the highest standards of integrity and ethical behavior. Each member of the College community has a personal responsibility for implementing this policy in relation to any scholarly work with which they are associated and for helping their associates in continuing efforts to avoid misconduct in research, scholarship and any other activity that might be considered in violation of this policy. Failure to comply with this policy is considered to be a violation of the ethical standards of the College and of the trust placed in each member of the community, and will be dealt with according to the procedures specified herein.

Earlham has a long history of engaging in student-faculty collaborative research and including student researchers as co-authors on resulting publications. In the event of suspected student research misconduct, Earlham will investigate and apply sanctions in accordance with institutional student academic misconduct policies (See Earlham College's *Student Standards of Community Respect* (<http://www.earlham.edu/policies-and-handbooks/community/student-code-of-conduct/>) and the *Student Handbook* (<http://www.earlham.edu/student-handbook/academic-life/>.) unless research misconduct extends to public dissemination of results via means such as journal publication or grant

¹ Per the [White House's Federal Research Misconduct Policy of December 6, 2000](#), all federal agencies or departments supporting intramural or extramural research are required to have research misconduct policies or regulations.

proposal submission. In such cases, student conduct may necessarily be subject to the federally mandated procedures laid out herein with any subsequent sanctions determined in accordance with the *Student Standards of Community Respect*.

Definitions

Research misconduct, as used herein, includes the following:

- Fraudulent or improper practice in conducting research² or reporting the results of research, including intentional falsification, fabrication, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the academic community for proposing, conducting, and/or reviewing or reporting research³. It does not include honest error or honest differences in interpretations or judgments of data.
- Serious misappropriation of research funds, including but not limited to diversion of such funds to personal or non-College use. The term “serious misappropriation,” as used herein, is not contemplated to include minor deviations within budget categories, nor funds expended under reasonable circumstances within the scope and goals of the originally proposed research.
- Failure to follow grant appropriation requirements, including requirements for proper stewardship, accounting and reporting of grant funds, for any grant, whether from federal granting agency such as NIH or NSF, a private foundation, or other source.

Complainant means a person who in good faith makes an allegation of research misconduct.

Respondent means the person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.

Procedures⁴

Earlham College will conduct all investigations of research misconduct in accordance with the following procedures and any further regulations (a) accepted by the institution prior to commencement and (b) applicable to the research or scholarship in question.

² For the purpose of this policy, the College considers the term "research" to encompass research, scholarship, and creative performance.

³ Authorship disputes may or may not meet the definition of research misconduct. For NSF, authorship disputes qualify as plagiarism and therefore research misconduct but for the ORI they do not (See [Plagiarism and Authorship Disputes](#)). Earlham encourages the community to engage in inclusive authorship practices in accordance with discipline specific expectations and will follow the Research Misconduct Procedures outlined herein to adjudicate authorship disputes and determine if they qualify as research misconduct in accordance with the presiding definitions. Please see the [ORI's Authorship article](#) or [Terry McGlynn's post on Negotiating Authorship](#) for advice on best practice.

⁴ See the Procedure Flowchart in the Appendix (page RM-10) for a visualization of the process.

1. *Allegations*

Allegations of research misconduct should be reported immediately in writing to the Academic Dean (academicdean@earlham.edu). Allegations cannot be made anonymously, but the confidentiality of those who, in good faith, report apparent misconduct will be protected to the extent possible.

Appropriate interim administrative actions, including suspension of all research activities, may be taken at any point in this process if such actions are necessary to protect public health, the welfare of human or animal subjects of research or to prevent the inappropriate use of funds or equipment and the integrity of the research process.⁵

2. *The Inquiry*

Upon receipt of a report of research misconduct, the Academic Dean (or the Dean's designee) will initiate an inquiry. The purpose of the inquiry is to make a preliminary evaluation of the available evidence and testimony of the respondent, complainant, and key witnesses to determine whether there is sufficient evidence of possible research misconduct to warrant an investigation, NOT to reach a final conclusion about whether misconduct definitely occurred or who was responsible. The preliminary inquiry will conclude within 60 days and proceed as follows:

- a. At the time of or before beginning an inquiry, the Academic Dean (or the Dean's designee) must make a good faith effort to notify the respondent(s) in writing.
- b. On or before the date on which the respondent is notified of the inquiry, or the inquiry begins, whichever is earlier, the Academic Dean (or the Dean's designee) will promptly take all reasonable and practical steps to obtain custody of the research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence, and sequester them in a secure manner.
- c. Within 45 calendar days of initiating the inquiry, the Academic Dean (or the Dean's designee) will complete this initial inquiry and prepare a written draft report of inquiry which will state:
 - i. The name and position of the respondent;
 - ii. A description of the allegations of research misconduct;
 - iii. Any federal or other external support, including grant identification numbers, applications, contracts, and publications with which the research misconduct is associated;
 - iv. The institutional policies and procedures under which the investigation was completed;

⁵ In the event of such institutional action, Earlham will notify all relevant federal agencies such as ORI.

- v. The names and positions of those conducting the inquiry; and
 - vi. A recommendation to investigate or not based upon documentation of the evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents.
- d. The respondent will receive a copy of the draft report of inquiry promptly upon its completion. Within 10 days of receipt, the respondent may attach any comments to the report, which will become part of the final inquiry report and record.
 - e. Based upon the respondent's comments, the Academic Dean (or the Dean's designee) may revise the inquiry report as appropriate.

2.1. The Inquiry – Allegations NOT Substantiated

If the Academic Dean (or the Dean's designee) does not find sufficient supporting information to substantiate the allegation, the inquiry is complete and the respondent will be officially notified within 60 days of the inquiry initiation. Diligent efforts will be undertaken, as appropriate, to restore the reputation of the individual alleged to have engaged in misconduct.

2.2. The Inquiry – Allegations Substantiated

If, however, the Academic Dean (or the Dean's designee) finds sufficient evidence to suggest that the allegations may be true, within 30 days of finding that an investigation is warranted but prior to the investigation beginning the Academic Dean (or the Dean's designee) will:

- a. Notify the respondent(s), including any additional respondents identified during the inquiry, in writing of the allegations and the decision to investigate.⁶
- b. Consult with the Director of Sponsored Programs and Foundation Relations to determine any additional regulations pertaining to formal investigations of research misconduct when federal or other external support, publications, or the health and safety of the public are involved.
- c. Where applicable, follow the reporting procedures of any federal agencies, such as ORI, and publishers regarding the decision to investigate.
- d. Sequester any additional pertinent research records that were not sequestered during the inquiry. The need for additional sequestration of records may occur for any number of reasons, including Earlham College's decision to investigate additional allegations not considered during the

⁶ Earlham will provide respondent(s) 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.

inquiry stage or the identification of records during the inquiry process that had not been previously secured. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

- e. Appoint an investigating committee and committee chair to conduct the formal investigation. Individuals on the committee will have the necessary expertise to conduct the investigation. These individuals may be scientists, administrators, subject matter experts, lawyers, members of relevant standing committees (e.g. the Institutional Review Board and Institutional Animal Care and Use Committee) or other qualified persons, and they may be from inside or outside Earlham College. Individuals appointed to the investigation committee may also have served on the inquiry committee.

Upon constitution of the committee, the Academic Dean (or the Dean's designee) will notify the respondent of the proposed committee membership. If the respondent submits a written objection to any member of the investigation committee on the grounds of a conflict of interest, the Academic Dean will determine whether to replace the challenged member with a qualified substitute.

3. *The Investigation*

The investigation will begin within 30 days after determining that an investigation is warranted. The investigating committee will conduct a formal examination and evaluation of all relevant facts to determine specifically whether research misconduct has been committed, by whom, and to what extent. They may interview individuals with relevant information, examine research data (both published and unpublished), and seek expert opinion from both inside and outside the College to aid in the scientific or scholarly audit. A finding of research misconduct requires that (a) there be a significant departure from accepted practices of the relevant research community; (b) the misconduct be committed intentionally, knowingly, or recklessly; and (c) the allegation be proven by a preponderance of the evidence⁷.

The investigating committee must complete all aspects of the investigation within 110 days of Earlham College's initiation of the investigation, including, in chronological order:

- a. Conducting the investigation;
- b. Preparing a draft investigation report;
- c. Sending the draft investigation report to the respondent;
- d. Allowing 10 days for the respondent to review the draft report and append comments to be included in the final investigation report;

⁷ Per [42 CFR Parts 50 and 93](#), a *preponderance of the evidence* means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.

- e. Reviewing and formulating a response to any comments submitted by the respondent to be included in the final investigation report; and
- f. Submission of the final investigation report to the Academic Dean (or the Dean's designee).

Having completed its investigation, the investigating committee will submit its findings of fact and recommendations in writing to the Academic Dean (or the Dean's designee). The final investigation report should include:

- a. The name and position of the respondent;
- b. A description of the nature of the allegations of research misconduct;
- c. Any federal or other external support, including grant identification numbers, applications, contracts, and publications with which the research misconduct is associated;
- d. A description of the specific allegations of research misconduct for consideration in the investigation;
- e. The institutional policies and procedures under which the investigation was completed;
- f. The names and positions of those conducting the inquiry;
- g. A summary of the research records and evidence reviewed that is accompanied by a list of any evidence taken into custody but not reviewed;
- h. A statement of findings for each separate allegation of research misconduct identified during the investigation, which indicates whether research misconduct did or did not occur and identifies the type of research misconduct (e.g. fabrication, falsification, or plagiarism, and whether it was conducted intentionally, knowingly, or with reckless disregard) with a summary of supporting facts and analysis; and
- i. Any comments made by the respondent on the draft investigation report.

In cases where research misconduct has been identified the report should also list, (a) any publications needing correction or retraction, (b) current and pending applications or proposals for financial support from federal or other granting agencies and (c) any current or pending administrative sanctions imposed on the respondent by the college.

Within 10 days of receipt, the Academic Dean (or the Dean's designee) will provide notification of the findings as follows:

3.1. The Investigation – NO Finding of Misconduct

If findings fail to confirm an instance of research misconduct, all participants in the investigation, including the Director of Sponsored Programs and Foundation Relations, will be so informed in writing by the Academic Dean (or the Dean's designee). Diligent efforts will be undertaken, as appropriate, to restore the reputation of the individual alleged to have engaged in misconduct.

3.2. *The Investigation – Finding(s) of Misconduct*

If the allegations are substantiated and research misconduct has occurred, or the respondent admits to guilt prior to the conclusion of the inquiry or investigation, the Academic Dean (or the Dean's designee) will inform the following parties⁸ in writing:

- a. all participants in the investigation, including the Director of Sponsored Programs and Foundation Relations;
- b. relevant federal agencies, including those sponsoring the research (notification will conform with the agency's regulations);
- c. journals and other scholarly venues if manuscripts emanating from fraudulent research have been submitted or published; and/or
- d. other relevant parties, such as professional societies and collaborators.

Further, in cases where research misconduct allegations are substantiated, Earlham College administration in accordance with relevant Handbooks in effect, and with potential input from the investigating committee and any pertinent standing committees, will determine what sanctions will be imposed by the college and so notify in writing the respondent to be sanctioned within 10 days after the findings have been reported. Administrative action does not preclude actions brought by outside parties such as federal agencies and publishers.

Appeals

Earlham will allow a respondent to appeal a finding of misconduct to the President of the College. To initiate an appeal, the respondent must present a written appeal to the President within 10 days of the Academic Dean (or the Dean's designee) notifying the respondent of a finding of misconduct. Within 30 days of receiving the appeal, the President will:

1. review the appeal along with the final investigation report;
2. consult with the investigating committee, as needed; and
3. submit a decision confirming or overturning the finding of misconduct in writing to the respondent and the Academic Dean (or the Dean's designee).

After receipt of the President's decision, the Academic Dean (or the Dean's designee), will report the findings per the notification procedures detailed in step 3.2 of the *Procedures* section.

⁸ While Earlham offers an institutional appeals process, it is not required by federal law. In the event that a respondent chooses to utilize the institutional appeal process, notification of those parties detailed here at points b, c, and d will be delayed until after the Academic Dean (or the Dean's designee) receives the President's written decision on the appeal unless mandated by the rules of those specific agencies such as the Office of Research Integrity (ORI). In the event that the President confirms a finding of misconduct, these parties will be notified.

Confidentiality

During all stages of research misconduct proceedings, including allegations, inquiry and investigation stages, confidentiality of both the accused and those who, in good faith, report suspected research misconduct will be protected to the greatest extent possible. Knowledge of the proceedings will be limited to those who need to know, consistent with a fair research misconduct proceeding, and as allowed by law.

Except as may otherwise be proscribed under applicable law, confidentiality will be maintained for any records or information from which research subjects might be identified, and disclosure is limited to those who have a need to know to carry out a research misconduct proceeding.

Conflict of Interest

Adequate precautions will be taken to ensure that individuals responsible for carrying out any part of the research misconduct proceeding do not have unresolved personal, professional or financial conflicts of interest with the complainant, respondent or witnesses.

Non-retaliation

Earlham College will not retaliate, and will not tolerate any retaliation by any person, against a College employee who, *in good faith*, reports an allegation of, or concern about research misconduct or provides assistance to the Academic Dean (or the Dean's designee) or the investigating committee in connection with any inquiry or investigation under this policy. The College will exert all reasonable and practical efforts to protect or restore the position and reputation of any complainant.

Further, these protections apply to witnesses and all those who cooperate with investigations of research misconduct, including those who serve as inquiry and investigating committee members.

False Allegations

Non-retaliation does not apply to an accuser who files an accusation of research misconduct *with malicious or dishonest intent*. If a committee has reason to believe that the accuser made unfounded charges *with malicious or dishonest intent*, the committee will recommend consideration of appropriate sanctions, in accordance with governing handbooks, by relevant faculty committees and by the administration.

Notice to Complainants

The Academic Dean (or the Dean's designee) may choose to notify the complainant who made the allegation and provide relevant portions of the inquiry or investigation report as part of the comment process but it is not requisite. All comments from the complainant

must be submitted within 5 days of the date on which the complainant received the report and will be incorporated into the records of the proceedings.

Cooperation with Federal Agencies

Earlham will offer full and continuing cooperation with all relevant federal agencies throughout institutional research misconduct proceedings and agency proceedings, including oversight review and any subsequent administrative hearings or appeals. This includes providing all research records and evidence under the institution's control, custody, or possession and access to all persons within its authority necessary to develop a complete record of relevant evidence.

Sequestration of Records

Earlham will, either before or when the Academic Dean notifies the respondent of the allegation, inquiry or investigation, promptly 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. Additionally, Earlham will undertake all reasonable and practical efforts to take custody of additional research records or evidence that is discovered during the course of a research misconduct proceeding. 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.

Where appropriate, Earlham will provide the respondent copies of, or reasonable, supervised access to the research records.

Record Retention

All materials related to inquiries and investigations of research misconduct will be maintained for at least 7 years after the completion of the inquiry or investigation, regardless of findings. This includes research records, transcripts or records of interviews, draft and final reports and written and email communications.

Revised and approved by Cabinet on November 27, 2018 following faculty consultation.

RESEARCH MISCONDUCT APPENDIX I

Procedure Flowchart

