ELIZABETH CITY STATE UNIVERSITY
Institutional Policy on Research Misconduct

Preamble

Elizabeth City State University (ECSU) pursues federal, state and local resources to support teaching, research and community outreach activities. The major responsibility for maintaining standards of intellectual integrity rests with the individual scholars and with the departments in which they work. ECSU expects the highest standards of professional and ethical conduct. To that end, unethical behavior in research represents a breach of the confidence among faculty, staff, and students as well as other research scientists that is central to the advancement of knowledge.

1. Policy Statement

In all of its research activities, Elizabeth City State University expects the highest standards of professional and ethical conduct. Research integrity cannot feasibly be separated from any other professional efforts to establish and maintain the expectations and honor of being designated at ECSU. Unethical behavior in research represents a breach of the confidence among faculty and other research scientists that is central to the advancement of knowledge. It also undermines the confidence that the public and research subjects should have in the reliability of the University. For these reasons, the University considers Research Misconduct, as defined below, a betrayal of fundamental scientific and research principles, and shall deal promptly with all instances of possible Research Misconduct. All employees or individuals associated with ECSU shall report observed, suspected, or apparent misconduct in research to the Chief Research Officer (CRO) or the Research Compliance Officer (RCO).

2. Definitions of Terms

Adjudication: The formal procedure for reviewing and evaluating the evidentiary record and report of an investigation and for determining whether to agree with the recommended findings and to impose appropriate corrective actions.

Allegation: A disclosure of possible research misconduct through any means of communication; any written or oral statement or other communication of possible research misconduct made to an ECSU official or the (RCO).

Complainant: The individual/person submitting an allegation of Research Misconduct.

Good Faith: As applied to a Complainant, Respondent or Witness, includes having a belief in the truth of one’s Allegation or testimony that a reasonable person in any of these roles could have, based on the information known to the Complainant, Respondent or Witness at the time. An Allegation of or cooperation with a Research Misconduct proceeding is not
in good faith if made with knowing or reckless disregard for information that would negate
the Allegation or testimony. Good faith as applied to a member of the Standing Committee
or any Ad Hoc Committee or a Preliminary Reviewer includes cooperating with the
Research Misconduct proceeding by carrying out the duties assigned impartially for the
purpose of helping the University meet its responsibilities under this Policy. A member of
the Standing Committee or any Ad Hoc Committee or a Preliminary Reviewer does not act
in good faith if his/her acts or omissions are dishonest or influenced by personal,
professional or financial conflicts of interest with those involved in the Research
Misconduct proceeding.

**Good Faith Allegation:** An allegation of Research Misconduct made by a Complainant
who believes that Research Misconduct may have occurred. An allegation is not in good
faith if it is made with reckless disregard for or willful ignorance of facts that would
prove the allegation.

**Inquiry:** The process under the Policy for information gathering and preliminary fact-
finding to determine if an allegation or apparent instance of Research Misconduct has
substance and therefore warrants an Investigation.

**Investigation:** The process under the Policy for the formal examination and evaluation
of all relevant facts to determine whether Research Misconduct has occurred, and, if so, the
responsible person and the seriousness of the misconduct.

**Investigator:** Any person, including but not limited to any person holding an academic
or professional staff appointment at Elizabeth City State University, who is engaged in the
design, conduct, or reporting of Research.

**ORI:** The Office of Research Integrity within the Department of Health and Human Services.

**PHS:** The unit of Public Health Services with the Department of Health and Human Services.

**Plagiarism:** The appropriation of another person’s ideas, processes, results or words
without giving appropriate credit.

**Preponderance of the Evidence:** Proof by information that, compared with that opposing
it, leads to the conclusion that the fact at issue is more probably true than not.

**Research:** A systematic investigation designed to develop or contribute to generalizable
knowledge. The term encompasses basic, applied demonstration and research, as well as
research training activities. All basic, applied and demonstration research in all fields of
knowledge.

**Research Misconduct:**

1) 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.

2) Research Misconduct also includes (in addition to those acts specified in paragraph 1 above):

a) Material failure to comply with applicable federal requirements for protection of researchers, human participants, or the public; or for ensuring the welfare of laboratory animals;

b) Material failure to disclose all real or perceived conflict of interests; or

c) An abuse of confidentiality, such as the use (or release to others) of ideas or preliminary data of others which were given in the expectation of confidentiality, such as those gained from

(i) Access to privileged information through the opportunity for editorial review of manuscripts submitted to journals; and

(ii) The opportunity for peer review of proposals by external entities or by internal committees such as the Institutional Review Board, the Institutional Biosafety Committee or other committees through which one gains access to privileged research-related information.

**Research misconduct** does not include disputes regarding honest error or honest differences in interpretations or judgments of data, and is not intended to resolve bona fide scientific disagreement or debate. Research misconduct is also not intended to include “authorship” disputes such as complaints about appropriate ranking of co-authors in publications, presentations, or other work, unless the dispute constitutes plagiarism (as defined above).

**Research Record:** Any data, document, computer file, computer diskette, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of a Charge of Research Misconduct. A Research Record includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; printed or electronic correspondence; memoranda of telephone calls; videos; photographs; X-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; consent forms; medical charts; and patient research files.

**Respondent:** The person against whom an allegation of Research Misconduct is directed, or the person whose actions are the subject of an Inquiry or Investigation.
Responsible Academic Officer: With respect to any Respondent, the Chair, Dean or Director of the Department, School, Institute, Center or equivalent unit at the University of which such Respondent is a member.

Retaliation: Any action that adversely affects the employment or other university or professional status of an individual (e.g., complainant, witness, or investigator) that is taken by an institution or another individual (e.g., the respondent) because the first individual has in good faith made an allegation of research misconduct or of inadequate university response thereto or has cooperated in good faith with an investigation of such allegation.

Witness: Any individual who testifies or provides information with regard to an Allegation or whose Research Record is used as evidence during the course of a Research Misconduct proceeding.

3. Response to an Allegation of Research Misconduct: Prerequisites for Finding of Research Misconduct

A. A response to an Allegation shall consist of three phases:

i. Inquiry: The gathering of preliminary information and fact-finding to assess whether such Allegation has substance and if so, whether an Investigation is warranted (an “Inquiry”);

ii. Investigation: The formal development of a factual record with respect to such Allegation and the examination and evaluation of such record leading to dismissal of the case or a recommendation of a finding of Research Misconduct and/or other appropriate corrective actions (an “Investigation”); and

iii. Adjudication: The formal procedure for reviewing and evaluating the evidentiary record and report of an Investigation and for determining whether to agree with the recommended findings and to impose appropriate corrective actions.

B. A finding of Research Misconduct requires the satisfaction of all of the following prerequisites:

i. There has been a significant departure from accepted practices in the relevant research community;

ii. The Research Misconduct has been committed intentionally, knowingly or recklessly; and

iii. The Allegation is proven by a Preponderance of the Evidence.

C. It is expected that the Complainant, the Respondent and any other person involved in the administrative procedures described in this Policy will act in good faith in participating in such procedures.
4. **Individual Reporting Responsibilities**

This policy applies to all individuals that includes but not limited to faculty, staff, and students who are engaged in the conduct of research, whether or not the research is funded, and to anyone affiliated with Elizabeth City State University engaged in research through a Sponsored Program to the extent of that research. The first step that should be taken is to discuss the situation with and seek the advice of the department chair or director of the unit, unless there are concerns of impartiality or confidentiality. In such case, the individual can discuss the situation with the Chief Research Officer or the Research Compliance Officer. With or without the advice of the chair/director, any individual who, in good faith, has reason to believe an act of research misconduct has occurred or is occurring shall notify the department chair/supervising director of the individual suspected of such misconduct.

5. **Investigation and Resolution Steps**

A. Anyone having reason to believe that a member of the faculty, staff, and/or student has engaged in misconduct in research should consult informally and in confidence with his or her own department chair or equivalent unit head regarding the situation. If the results of such discussions confirm the seriousness of the report, then the matter should be reported, in writing, by that department chair to the Dean. This procedure shall also be followed in the event that an investigatory committee appointed in accordance with Section 5D below, obtains information that any individual, other than the one(s) under investigation, has allegedly engaged in misconduct in research.

Allegations of research misconduct may be received directly by the department chair. Any allegations must be forwarded to the appropriate department chair.

Upon receipt of written allegations, the Dean shall immediately notify the accused of the alleged violation of the Policy.

B. As soon as possible after receipt of the report, the Dean and the Provost, in consultation with the department chair of the department in which the accused employee is primarily employed, shall conduct an inquiry, consisting of information-gathering and initial fact-finding to determine whether the charge warrants an investigation. The Dean shall also take appropriate action to preserve and protect the data and other records of the individual's research and any funding involved in the research. The accused shall be provided reasonable access to the data and other evidence supporting the allegations. Any ambiguity regarding which administrative official should conduct the inquiry shall be resolved by the Provost. The inquiry should normally be concluded within 30 days, and no more than 60 days of its initiation. Exceptions to this 60-day limit require the approval of the Chancellor.

A written report of the inquiry shall be prepared by the Dean and the Provost that states what evidence was reviewed, summarizes relevant interviews, and includes the
conclusions and recommendations of the inquiry. A copy of the report shall then be given to the accused employee. If the accused employee comments on the report, those comments shall be made a part of the record. If the judgment is made by the Dean and Provost that the charge does not warrant an investigation, any reference to the charge in the personnel file of any individual shall be removed promptly. All materials relating to the charge and the determination shall be sent to the Chancellor, who shall be responsible for their security. Such records shall be maintained for at least three years.

C. If it is determined that the charge warrants further investigation, the Dean in consultation with the Provost and with the appropriate department chair, shall within 30 days of the conclusion of the inquiry (a) appoint an ad hoc committee composed as provided herein and refer the matter to it, (b) take appropriate action to preserve and protect the data and other records of the individual's research and any funding involved in the research, and (c) notify the accused individual of the initiation of the investigation and of his or her opportunity to appear on his or her behalf before that committee, and (d) take appropriate steps to notify research sponsors of the initiation of an investigation in accordance with applicable law and regulations, including, if applicable, notification of the Office of Research Integrity of HHS or the National Science Foundation, as applicable, and (e) notify the Research Compliance Office and the Office of Sponsored Programs. The Dean may also suspend the individual accused from further participation in the project in question, but only if the Dean determines that serious harm to the individual or others would be threatened by the individual's continuance of his or her duties.

The Compliance Office and the appropriate research review committee will assist the Dean in evaluating risk and harm in cases where the research should be suspended, especially where human or animal subjects, or infectious agents are involved. Any such suspension shall not interrupt payment of salary.

D. The ad hoc committee shall consist of at least five senior University faculty members who, in the judgment of the Dean, are without conflict of interest, and have appropriate expertise to carry out a thorough and authoritative evaluation of the relevant evidence. Differences of professional opinion held in good faith and without prospect of personal financial gains shall not be construed as conflicts of interest. External scholars or persons with expertise in other areas may be included in this number where warranted by the nature of the field or the allegations.

E. The ad hoc committee chair shall establish a schedule for the conduct of the investigation according to which the investigation will take place. It is the responsibility of the involved parties to comply with that schedule. The committee shall conduct a prompt and thorough investigation in order to ascertain the facts of the case and to determine whether the individual has violated this Policy, and if so, to what extent. Early in the course of the investigation the committee shall discuss the matter in confidence with the individual accused and with all persons with whom he or she has collaborated in
relation to the work under review. Throughout the investigation the committee shall protect to the maximum extent possible the privacy of all those involved, including specifically the accused and those who, in good faith, reported the alleged misconduct.

F. The hearings shall be closed to the public unless the accused faculty or staff member and the committee chair agree that they may be open. The individual accused shall have the opportunity to be present, the right to counsel, the opportunity to present the testimony of witnesses and other evidence, the opportunity to confront and cross-examine witnesses, and the opportunity to examine all documents and other evidence. It is the responsibility of all parties to make themselves available according to the schedule established by the chair for the exercise of the opportunities provided above. If a party chooses not to make him-self or her-self available, the committee may proceed in his or her absence. The scope of the investigation shall be determined by the committee chair in his or her discretion according to the charge and the facts. The committee shall consider only such evidence as is presented at the hearing. The committee shall use its judgment in deciding what evidence presented is fair and reliable, and in doing so it is not bound by the rules of evidence. A written transcript shall be kept of all proceedings in which evidence is presented. Upon request, a copy thereof shall be furnished to the accused at the University's expense. Except as herein provided, the conduct of the hearing is under the charge of the chair of the hearing.

G. A preliminary report will be provided to the accused to who will be given an opportunity to respond orally, or in writing, before final recommendations are made. To the extent they can be identified, the person(s) who made the allegations should be provided with those portions of the report that address their role and opinions in the investigation.

H. If the majority of the committee finds that the individual has violated this Policy, it shall recommend, in writing, an appropriate course of action to the Dean. Its recommendations may include appropriate sanctions. Its recommendations shall include adequate steps to insure that the institution meets its obligations, if any, to third parties affected by the violation, including co-investigators and coauthors, funding agencies and other research sponsors, professional journals, and relevant clients.

I. The Dean shall consider the committee's recommendations, and in consultation with the Provost, produce a written decision as promptly as possible addressed to the accused which shall accept or reject all or any part of the committee report, conclusions, and recommendations as in his or her judgment is warranted by the evidence. The Dean shall report to the Chancellor the full account of the hearings and the basis for his or her own decision.

J. In the event the Dean finds the Policy to have been violated, the Dean shall take all appropriate steps to insure that the institution meets its obligations to all parties affected by the violation. In the case of a Policy violation, the Dean's report shall
include an assurance to the Chancellor of the steps the Dean has taken to notify all affected parties. To the extent any disciplinary action taken includes a recommendation to the Chancellor from the Dean for suspension from employment, diminishment in rank, or for dismissal, that portion of the Dean's decision shall proceed in accordance with the established University policies and procedures on such matters for faculty, EPA non-faculty, or staff, as appropriate.

K. The investigation should normally be concluded, and the Dean's decision reached, within 120 days of its initiation. Exceptions require the approval of the Chancellor.

L. The Dean shall be responsible for compliance with any reporting requirements imposed by the research sponsor, including any such requirements concerning reporting to the Office of Research Integrity of HHS or the National Science Foundation, where applicable. The Dean shall also be responsible for requirements relating to health hazards, protection of federal funding or equipment, protection of human or animal subjects, possible criminal violations, protection of the interests of the accused or accuser, or the probability of public reports of the allegations; and requirements relating to anticipated delays in the investigation process; and requirements relating to notification of the funding agency of the outcome of the investigation.

M. The Dean and the Provost, where appropriate, shall undertake diligent efforts, as appropriate, to restore the reputations of persons alleged to have engaged in misconduct in research when allegations are not confirmed and also undertake diligent efforts to protect the positions and reputations of those persons who, in good faith, made the allegations.

6. **Timelines**
Reasonable time limits for the conduct of the inquiry, investigation, adjudication, and appeal phases (if any), with allowances for extensions where appropriate, provide confidence that the process will be well managed. This policy provides for the following time frame for managing allegations of potential research misconduct:

**Report of Allegation(s) to the Department Chair:** Immediate

**Department Chair’s Written Allegations Report to the Dean:** Within 7 business days of receiving the report

**Dean’s Notification of the Allegations to the Accused and the Provost:** Immediate

**Dean and Provost (in consultation with the chair) Inquiry:** Must be concluded 30-60 days after initiation

**Dean’s written report of the Inquiry/ Copy to the Accused/ Accused Statements added/ Judgement by the Dean and Provost that the Charge Warrants Investigation:** Within
15 business days of the inquiry OR

**Dean’s written report of the Inquiry/ Copy to the Accused/ Accused Statements added/ Judgement by the Dean and Provost that the Charge does NOT Warrant Investigation:**
Within 15 business days of the inquiry

**Dean’s Appointment of an Ad Hoc Committee (in consultation with Provost and appropriate chair):** Within 30 business days of the conclusion of the inquiry

**Conclusion of the Investigation/ Report to the accused/ Recommendation to the Chancellor:** Within 120 days of its initiation.

7. **Safeguards for Informants**
Safeguards for informants give individuals the confidence that they can bring allegations of research misconduct made in good faith to the attention of appropriate authorities or serve as informants to an inquiry or an investigation without suffering retribution. The University provides safeguards for informants by:

   a. Protection against retaliation for informants who make good faith allegations.
   b. Fair and objective procedures for the examination and resolution of allegations of research misconduct.
   c. Diligence in protecting the positions and reputations of those persons who make allegations of research misconduct in good faith.

8. **Safeguards for Subjects of Allegations**
Safeguards for subjects of allegations give individuals the confidence that their rights are protected and that the mere filing of an allegation of research misconduct against them will not bring their research to a halt or be the basis for other disciplinary or adverse action absent other compelling reasons. The University provides safeguards for subjects of allegations by the following:

   a. Provision of timely written notification of subjects regarding substantive allegations made against them.
   b. Provision of a written notification of subjects having the opportunity to respond to allegations, the supporting evidence and the proposed findings of research misconduct (if any).
   c. Reasonable access to the data and other evidence supporting the allegations.

9. **Resources**
Requirements for Institutional Policies and Procedures on Research Misconduct

42 CFR Part 50 and 93

The University of North Carolina Policy on Research Misconduct (500.7)