

## **Emerson College Alleged Academic Research Misconduct Policy**

### **Statement of Policy**

Emerson College is committed to the highest ethical standards in research as well as teaching, creative activities and publication. Anyone in the Emerson community who is directly involved with these activities bears the primary responsibility for ethical pursuits of knowledge. Persons found guilty of willful misconduct are subject to disciplinary action by the College.

Research misconduct, for the purpose of this policy, means fabrication (making up data or results and recording or reporting them), falsification (manipulating research materials, equipment, or processes, or changing or omitting data or results and recording or reporting them so that the research is not accurately represented in the research record) or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error or difference of opinion. (42 CFR 93.103)

Included in the Human Subjects Review Committee's mission is the promotion of ethical standards of research conduct and to publicize the procedures for reporting research misconduct.

### **Education**

Deans, directors, chairs and graduate advisors shall be reminded annually by the Human Subjects Review of the policies and procedures on research misconduct and their responsibility to inform all faculty, students and staff of the need for integrity in research by Committee. The Human Subjects Review Committee will disseminate information and educate the community.

### **Committee on Research Misconduct**

An appointed Committee on Research Misconduct's mission is to ensure thorough, fair and expeditious proceedings of research misconduct allegations and, if appropriate, to recommend possible disciplinary action, policy changes or other actions to ensure that similar misconduct does not happen in the future.

The College shall:

- (1) respond to each allegation of misconduct at the institution
- (2) foster an environment that supports responsible research and discourages research misconduct
- (3) deal promptly with allegations or evidence of possible misconduct
- (4) The College will take all reasonable and practical steps to protect positions and reputations of complainants, witnesses and committee members and protect them from retaliation

- (5) provide confidentiality to the extent required by 42 CFR 93.108
- (6) take all reasonable and practical steps to ensure cooperation of respondents and other institutional members with misconduct proceedings in providing information, research records and evidence
- (7) cooperate with Health and Human Services during any research misconduct proceeding or compliance review
- (8) assist in administering or enforcing any Health and Human Services administrative actions imposed on its institutional members
- (9) have active assurance compliance

All employees and students who receive allegations of research misconduct or who have knowledge of research misconduct or reason to believe that such misconduct has occurred must submit allegations to the Director of Graduate Studies. The allegations may be oral or written and signed or unsigned. The person who makes a good faith allegation of research misconduct is the “complainant.” The person against whom the allegation is made is the “respondent.” Upon receipt of the allegations the Director will

1. Decide whether the allegations raise questions of research misconduct, applying the standards set forth in 42 CFR 93.307 (a). The Director may utilize resources such as the General Counsel to make this determination. If the allegations raise other issues (for example, discrimination, sexual harassment, financial impropriety, or job performance) the Director will refer the allegations to the appropriate College officer for action.
2. If the Director determines that the allegations raise questions of research misconduct, the Director will notify the Chief Academic Officer (“CAO”) of the need to secure all materials related to the allegations and the CAO shall take all action necessary to secure such materials in accordance with 42 CFR 93.305, 93.307(b), and 93.310(d).
3. If the Director determines that the allegations do not raise questions of research misconduct, the Director will inform the CAO in writing that the allegations are outside the purview of this policy and provide the reasons for the Director’s recommendation not to pursue them.

The CAO, upon recommendation of the Director to pursue the allegation(s) of research misconduct, shall appoint a Committee on Research Misconduct (“CRM”). The CAO may draw members of the CRM from faculty, administrators, or any other person with skills, experience, or knowledge that the CAO deems relevant.

### **Conflict of Interest**

The CAO shall ask each CRM member, in writing, whether he or she has previous personal knowledge or involvement in the circumstances giving rise to the allegations and whether that member has any personal, professional, or financial conflicts of interest

with the complainant, respondent, or potential witnesses. The CAO shall remove any CMR member who has any unresolved conflict of interest.

### **Inquiry**

The CRM, upon receiving allegations of research misconduct from the CAO shall

- (1) Give notice to the respondent and, to the extent the CAO has not already done so, obtain custody of the research records and other evidence, all as set forth in 42.CFR 93.307 (b). Whenever notice is required to be given under this policy, it shall be given in accordance with 42 CFR 93.216.
- (2) Review the evidence to determine whether an investigation is warranted, applying the criteria in 42 CFR 93.307 (d).
- (3) Prepare an inquiry report in accordance with 43 CFR 93.307(e) and 93.309.
- (4) Provide the respondent an opportunity to comment on the inquiry report and attach any comments received to the report.
- (5) Give notice of the results of the inquiry in accordance with 42 CRF 93.308

The CRM must complete the inquiry within 60 calendar days of its initiation unless circumstances clearly warrant a longer period. If the inquiry takes longer than 60 days to complete, the inquiry record must include documentation of the reasons for exceeding the 60 day period. The CRM, in conducting its inquiry, shall take all steps required under 42 CRF 93.108 to protect confidentiality of complainants, respondents, and research subjects.

### **Sources of information may include:**

Interviews  
Written statements  
Physical evidence  
Documents  
subjects

### **Inquiry Process**

The inquiry is a fact-finding, nonadversarial proceeding to determine if sufficient credible evidence exists in support of any allegations to warrant a full investigation.

1. The inquiry will begin with information gathering where the CRM may interview complainant in person, by telephone or may ask the complainant to submit a written statement or answer questions posed by the committee.

2. The CRM shall decide whether to pursue the inquiry into the allegations or to terminate the inquiry. If it decides to terminate consideration of all allegations the CRM will prepare a report in accordance with 42 CFR 93.308.
3. The committee may interview other individuals to obtain pertinent information for the inquiry. These may be conducted by telephone, through questions in person. Each party will be interviewed separately. Other means of obtaining information also may be pursued in accordance with 93.307.
4. After the inquiry, the committee will decide by vote whether a full investigation of any or all allegations is warranted. The documented report and other related material will be held in the Office of Graduate Studies for seven years.

### **Investigation Phase**

The CRM has the responsibility to conduct a thorough and unbiased investigation to gain full knowledge of the evidence. When the CRM completes the inquiry phase and decides that the evidence supporting the allegation(s) supports a full investigation, the CRM shall:

1. Notify the Director of Graduate Studies who will give notice to the Office of Research Integrity (ORI) in accordance with 42 CFR 93.309.
2. Begin the investigation within 30 days after determining that an investigation is warranted.
3. Give notice to the respondent in accordance with 42 CFR 93.310(c).
4. To the extent they have not done so already, take custody of the records in accordance with 42 CFR 93.310(d).
5. Document the investigation in accordance with 42 CFR 93.310(e)
6. Take steps to insure a fair investigation, conduct interviews, and pursue leads, all as required by 42 CFR 93.310 (f-h), within the time limits set forth in 42 CFR 93.211. The CRM shall apply the evidentiary stands set forth in 42 CFR 93.106.
7. Provide complainant and respondent the opportunity to comment on the investigation report in accordance with 42 CFR 93.312.
8. Prepare an investigation report that meets the requirements of 42 CFR 93.313.
9. Give notice to ORI in accordance with 42 CFR 93.315.
10. Complete the research misconduct process in accordance with 42 CFR 93.316.

Records of the proceedings and copies of reports will be kept in the office of the Director of Graduate Studies for seven years.

The College will use all reasonable and practical efforts, if requested and appropriate, to protect or restore the reputation of any complainant, witness or committee member and to counter any potential retaliation against the above.

The CAO informs the institution's research members participating in or otherwise involved in research as described in 42 CRF 93.302 about its policies and procedures for responding to allegations of research misconduct and the institution's commitment to compliance with policies and procedures.

The College will offer full and continuing cooperation to ORI during its oversight review or subsequent administrative hearings or reviews.

At any time during the research misconduct proceeding, the College will notify ORI immediately if it believes that there are any risks to the health or safety of the public, Health and Human Services' resources or interests threatened, reasonable indication of possible violations of criminal or civil law, federal action required to protect the interests of those involved in the research misconduct proceeding; research activities should be suspended; the College believes the research misconduct proceeding may be made public prematurely so that appropriate steps should be taken to safeguard evidence and protect rights; the research community or public should be informed.

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