

<b>Title:</b> <b>Research Misconduct Policy</b>	<b>Policy Category:</b> <b>Research</b>
<b>Issuing Authority:</b> <b>Office of the Vice President for Research</b>	<b>Responsibility:</b> <b>Office of Research Compliance</b>
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### Policy Statement/Background:

Stony Brook University (hereinafter referred to as the University) is committed to excellence in all scholarly endeavors. Individuals must adhere to the highest professional standards of scientific integrity in planning, conducting or in reporting the results of research activities conducted under the auspices of this University.

### Scope

Research misconduct (as defined herein) and the terms of this policy are applicable to all University faculty, staff, and students engaged in scholarly activities (funded or unfunded) using University facilities, the facilities of another institution, or any other off-campus site. This policy also applies to visitors and users of the campus or off-campus University facilities.

**Research Misconduct** is fabrication, falsification, or plagiarism, in proposing, performing, or reviewing research or in reporting research results.

- **Fabrication** is making up data or results and recording or reporting them.
- **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.
- **Plagiarism** is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit. Note:

Unless the activity in question is funded by the National Science Foundation (NSF), this statement of policy and procedures does not apply to authorship or collaboration disputes. These exclusions from the Plagiarism definition are consistent with the federal Office of Research Integrity's position on the matter (see <http://ori.hhs.gov/ori-policy-plagiarism>).

Research misconduct may include the destruction, absence of, or respondent's failure to provide research records where these actions constitute a significant departure from accepted practice of the relevant research community. Honest errors or differences of opinion are not considered to be research misconduct.

Research misconduct exists when:

- There is a significant departure from accepted practices of the relevant research community; and
- The misconduct is committed intentionally, knowingly, or recklessly; and
- The allegation is proven by a preponderance of the evidence.

### **Policy:**

All faculty, staff, and students will report observed, suspected or apparent research misconduct, and will cooperate with the Research Integrity Officer (hereinafter referred to as the RIO) and other University officials in the review of allegations and the conduct of Inquiries and Investigations. All parties have an obligation to provide evidence relevant to research misconduct (defined below) allegations to the RIO or other University officials.

The Assistant Vice President for Research Compliance serves as the RIO for the University. This individual has primary responsibility for implementation of the University's policies and procedures on research misconduct. In doing so, the RIO may delegate some or all responsibilities to, and/or work in conjunction with, a staff member from the Office of the Vice President for Research.

The University Provost is the Deciding Official (hereinafter referred to as the DO) for the University. The DO makes the final determination on allegations of research misconduct and any appropriate University actions.

The University will thoroughly investigate, in a fair and timely manner, all allegations brought forward by a complainant acting in good faith, in which there is a credible reason to believe that an individual or individuals

(hereafter referred to as the respondent[s]) have committed research misconduct.

## **Procedures**

### **A. General**

- 1. Discussing possible misconduct:** All faculty, staff, and students will report observed, suspected, or apparent research misconduct to the Research Integrity Officer (RIO). If an individual is unsure whether a suspected incident falls within the definition of research misconduct, they may confer with the RIO about concerns of possible misconduct and will be counseled about appropriate procedures for reporting allegations if deemed appropriate. The individual may also initially meet with, or contact, the RIO to discuss the suspected research misconduct informally, which may include discussing it anonymously and/or hypothetically. If the circumstances described by the individual do not meet the definition of research misconduct, the RIO will refer the individual or allegation to other offices as appropriate.
- 2. Confidentiality:** The RIO will (1) limit disclosure of the identity of respondents and complainants to those who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding; and (2) except as otherwise prescribed by law, limit the disclosure or any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding.
- 3. Protecting respondents, complainants, witnesses, and committee members:** University members may not retaliate in any way against respondents, complainants, witnesses, Inquiry/Investigation committee members or others involved in the research misconduct process. University members should immediately report any alleged or apparent retaliation against these parties to the RIO, who will review the matter and, where appropriate, refer the matter to applicable University officials. See Section D below for additional details.
- 4. Triage and Precedence Procedures:** The RIO, with assistance of legal counsel and others as required, will determine if an allegation impacts multiple regulatory areas (e.g., human subjects, animal subjects, conflict of interest, grant expenditures, etc.). Review of the allegation of misconduct will precede all other internal

University proceedings that relate to or arise out of the alleged misconduct unless:

- a) Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
- b) A criminal investigation is being conducted (the internal process may commence once completed).

**Note:** Misconduct involving a collaborating site will be handled through coordination between the institutional RIOs.

**5. Conflict of Interest:** If a conflict of interest is alleged by any party at any point in the Assessment, Inquiry or Investigation phases of the case, the RIO will review the allegations and determine whether a conflict exists. A conflict exists if any committee members or expert has any relevant unresolved personal, professional or financial conflicts of interest with the parties involved or the subject matter, and there is a basis to believe that the individual could not conduct themselves in a thorough, competent, and fair manner. The RIO's decision regarding the existence of a conflict shall be final. If the RIO is alleged to have a conflict of interest the Vice President for Research or if necessary, another qualified vice president or dean, shall determine whether a conflict exists and that decision shall be final.

**6. Interim Administrative Actions and Notifying the Office of Research Integrity** (where Public Health Service funds are involved) **or the Office of the Inspector General** (where National Science Foundation funds are involved) **of Special Circumstances:** Throughout the research misconduct process, the RIO will review the situation to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of the PHS or NSF supported research process. In the event of such a threat, the RIO will, in consultation with other University officials and ORI/OIG, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of federal funds and equipment, reassignment of personnel or the responsibility for the handling of federal funds and equipment, additional review of research data and results or delaying publication. The RIO must notify ORI/OIG immediately if, at any time during a research misconduct process, the RIO has reason to believe that any of the following conditions exist:

- a) Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;

- b)** Health and Human Services resources or interests are threatened;
- c)** There is reasonable indication that research activities should be suspended;
- d)** There is reasonable indication of possible violations of civil or criminal law;
- e)** Federal action is required to protect the interests of those involved in the research misconduct proceeding, (or, in the case of NSF funds, of others potentially affected);
- f)** The research misconduct process may be made public prematurely and HHS action may be necessary to safeguard evidence and protect the rights of those involved; or
- g)** The research community or public should be informed.

## **B. Making an Allegation of Research Misconduct**

Allegations of research misconduct may be presented verbally or in writing by the complainant to the RIO (see contact information at the end of this policy). The complainant is responsible for making allegations in good faith, and maintaining confidentiality. The complainant must cooperate at all phases of the research misconduct process, including Inquiry and Investigation if required. If anonymity is requested, the RIO will use its best efforts to maintain such anonymity throughout the process.

## **C. Assessment**

The purpose of the Assessment is to conduct an initial review of the allegation to determine whether it is:

- 1.** Sufficiently credible and specific so that potential evidence of research misconduct may be identified; and
- 2.** Whether the allegation falls within the definition of research misconduct above.

**Note:** Allegations of Research Misconduct submitted to the University by a federal entity may be considered by the RIO in consultation with the DO as (1) credible and specific such that potential evidence of research misconduct may be verified, and (2) to fall within the definition of research misconduct and may move directly to Investigation.

**Note:** Allegations of Research Misconduct submitted to the University by a sponsor agency or a professional journal that include the findings of an inquiry process in which the respondent was notified and had an opportunity to comment, may be considered by the RIO in consultation

with the DO as (1) credible and specific such that potential evidence of research misconduct may be verified, and (2) to fall within the definition of research misconduct and may move directly to Investigation.

### **Assessment Process**

The RIO will:

- Complete the Assessment within four (4) weeks of receipt of an allegation of research misconduct;
- Consult (confidentially and as necessary) with legal counsel and others as deemed appropriate during the Assessment period;
- Interview the complainant, respondent or other witnesses, or gather data beyond any that may have been submitted with the allegation as necessary to determine whether the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified;
- Notify the respondent (if appropriate) and provide opportunities for the respondent to review/comment/respond to allegations, review and provide a copy of the University's Research Misconduct Policy and advise the respondent of the option to consult with legal counsel or a non-lawyer personal adviser (who is not a principal or witness in the case) to advise during the research misconduct process;
- Provide the respondent reasonable supervised access to the research records, where appropriate;
- Obtain custody of, inventory, and sequester research data, records and evidence deemed pertinent to the allegation of research misconduct and maintain it securely during the course of a research misconduct proceeding as soon as deemed necessary, preferably on or before the date of which the respondent is notified of the allegation. Chain of custody will be documented. Receipts will be provided for evidence taken into custody;
- Keep the University Provost (DO) and others who need to know apprised of the progress of the review of the allegation of research misconduct; &
- Complete a written Assessment report that describes the specific allegation(s), the date received and source, description of evidence gathered/reviewed, reasons for determination of whether or not an Inquiry is warranted, and, in the case where an Inquiry is warranted, provide guidance to Inquiry committee on issues it might pursue.

## **D. Inquiry**

The purpose of the Inquiry is to conduct an initial review of the available evidence to determine whether to conduct an investigation (i.e., as soon as the Inquiry committee believes there is (or is not) evidence to warrant an investigation, the Inquiry committee's job is done). An Inquiry does not require a full review of all the evidence related to the allegation.

### **Inquiry Process**

The Inquiry process should be completed within 60 calendar days from its initiation. The Inquiry process is considered complete when the DO decides whether an Investigation is warranted. If the RIO determines that circumstances clearly warrant a longer period, the Inquiry record will include documentation of the reasons for exceeding the 60-day period. If the activity includes NSF funds, interim status reports may be required if the Inquiry process continues beyond 90 days.

### **During the Inquiry Phase**

The RIO will:

- Make a good faith effort to notify the respondent in writing. If the Inquiry subsequently identifies additional respondents, they will be notified in writing;
- Make a good faith effort to identify sponsored funds associated with the allegations and notify sponsor(s) as may be required by sponsor policies and/or funding agreements;
- If not done during the assessment phase, take all reasonable and practical steps to immediately obtain custody of all the research records and evidence needed to conduct the research misconduct process, inventory the records and evidence and sequester them in a secure manner, except that 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;
- Appoint an Inquiry committee and committee chair as soon after the initiation of the Inquiry as is practical. The Inquiry committee will consist of individuals who do not have a conflict of interest with those involved with the Inquiry and should include individuals who have the professional time and resources, as well as the appropriate scientific expertise to evaluate the evidence and issues related to

the allegation(s), interview the principals and key witnesses, and conduct the Inquiry;

- Notify the respondent of the proposed committee membership and provide the respondent an opportunity to object to a proposed member. Objections must be provided to the RIO within 10 calendar days of the respondent having been notified of the names of the committee members. The RIO will make the final determination regarding a challenge to a proposed committee member; &
- Charge the Inquiry committee, with legal counsel present, as follows:
  - Inform the Inquiry committee that they are obligated to carry the process through to completion and to pursue diligently all significant issues;
  - Set forth the time for completion of the Inquiry (see above);
  - Describe the allegations and any related issues identified during the Assessment phase;
  - State that the purpose of the Inquiry is to conduct a review of the evidence, including the testimony of the respondent, complainant and key witnesses, as well as conducting interviews as appropriate to determine whether an Investigation is warranted, not to determine whether research misconduct definitely occurred or who was responsible;
  - State that an Investigation is warranted if the committee determines: (1) there is a reasonable basis for concluding that the allegation(s) falls within the definition of research misconduct, and (2) the allegation(s) may have substance, based on the committee's review during the Inquiry; &
  - Inform the Inquiry committee that they are responsible for preparing or directing the preparation of a written report of the Inquiry that meets the requirements of this policy.

### **The Inquiry Committee**

The Inquiry committee will:

- Examine the relevant research records and materials;
- Interview the complainant, the respondent, and any key witnesses as necessary. The complainant, respondent and any other parties interviewed will be given a copy of the transcript of their interview to confirm, within one week, the accuracy of the record (e.g., scientific terms used etc.). Then the Inquiry committee will evaluate the evidence, including the testimony;
- Engage additional expert analysis (e.g. forensic, statistical, or special analysis of the physical evidence) as necessary;



- Decide, in consultation with legal counsel and the RIO, whether an Investigation is warranted based on the criteria in this policy and any applicable sponsor regulations. The scope of the Inquiry does not include deciding whether misconduct definitely occurred, determining definitely who committed the research misconduct or conducting exhaustive interviews and analyses. However, if a legally sufficient admission of research misconduct is made by the respondent, misconduct may be determined at the Inquiry stage if all relevant issues are resolved, and if the RIO and Inquiry committee do not believe that other potential misconduct exists; &
- Provide a final written Inquiry Report.

### **Inquiry Report**

The Inquiry committee will prepare a written Inquiry Report in accordance with a template provided by the RIO.

- University counsel will review the Inquiry report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the Inquiry committee.
- The complainant and respondent will be given ten (10) calendar days from receipt of the Inquiry Report to comment on the Inquiry Report and have their comments considered by the Inquiry committee and attached to the report. Based on the comments, the Inquiry committee may revise the draft report as appropriate and prepare it in final form.
- The RIO will transmit the final Inquiry report and any comments from the respondent and/or complainant to the DO; who will determine in writing whether an Investigation is warranted. The Inquiry is completed when the DO makes this determination. When the DO has reached a final decision on the case, the RIO will notify both the respondent and the complainant in writing.
- The RIO will notify the respondent and complainant in writing within 30 days of the determination of whether or not an Investigation is warranted (notification must be made before the Investigation begins), as well as any new allegations (not addressed in the Inquiry or in the initial allegation of misconduct. Prior to such notice, the RIO will take all reasonable and practical steps to obtain custody of and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceeding that were not previously sequestered during the Inquiry.
- In cases where the DO determines that an Investigation is not warranted. The RIO within 30 days of such determination will notify sponsors, witnesses and other University offices (as appropriate).

## **Notification to Federal Oversight Agencies (ORI, OIG) (as applicable)**

Within 30 calendar days of the DO's decision that an Investigation is warranted (and prior to the beginning of the investigation), the RIO will provide ORI or OIG with the DO's written decision and a copy of the Inquiry report. The RIO will also notify the Vice President for Research of the DO's decision. The RIO will provide the following information to ORI upon request: (1) the University policies and procedures under which the Inquiry was conducted; (2) the research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents; and (3) the charges to be considered in the Investigation.

## **Documentation of Decision Not to Investigate**

If the DO decides that an Investigation is not warranted, the RIO shall secure and maintain for seven (7) years after the termination of the Inquiry sufficiently detailed documentation of the Inquiry to permit a later assessment (by the ORI or other oversight entity) of the reasons why an Investigation was not conducted.

## **E. Investigation**

The purpose of the Investigation is to develop a factual record by exploring the allegations in detail and examining the evidence in depth, leading to recommended findings on whether research misconduct has been committed, by whom, and to what extent. The Investigation will also determine whether there are additional instances of possible research misconduct that would justify broadening the scope beyond the initial allegation (particularly important where the alleged research misconduct involves clinical trials or potential harm to human subjects or the general public or if it affects research that forms the basis for public policy, clinical practice, or public health practice). The Investigation will begin within 30 calendar days after the determination by the DO that an Investigation is warranted.

## **Investigation Process**

The Investigation is to be completed within 120 days of beginning it (180 days if NSF funding is involved), including conducting the Investigation, preparing the report of findings, providing the draft report for comment (and sending the final report to ORI or OIG, as applicable). However, if the RIO determines that the Investigation will not be completed within this 120-day period (180 days if NSF funding is involved), the RIO will submit

to ORI /OIG a written request for an extension, setting forth the reasons for the delay. The RIO will ensure that periodic progress reports are filed with ORI/OIG, if ORI/OIG grants the request for an extension and directs the filing of such reports.

## **The RIO**

The RIO will:

- Sequester any additional research records. The need for additional sequestration of records for the Investigation may occur for any number of reasons, including the University's decision to investigate additional allegations not considered during the 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;
- Appoint an Investigation committee and the committee chair as soon after the beginning of the Investigation as is practical. The Investigation committee will consist of individuals who have the professional time and resources, and who do not have any conflict of interest with those involved with the Investigation. The Investigation committee should include individuals who have the appropriate scientific expertise to evaluate the evidence and issues related to the allegation, interview the respondent and complainant and any relevant witnesses. Individuals appointed to the Investigation committee may also have served on the Inquiry committee. When necessary to secure the necessary expertise or to avoid conflicts of interest, the RIO may select committee members from outside the University;
- Notify the respondent of the proposed committee membership to provide the respondent an opportunity to object to a proposed member. Objections must be provided to the RIO within ten (10) calendar days of the respondent having been notified of the names of the committee members. The RIO will make the final determination regarding a challenge to a proposed committee member;
- Convene the first meeting of the Investigation committee, with legal counsel present, to:
  - Review the written charge to the committee, the Inquiry report, and the prescribed procedures and standards for the conduct of the Investigation, including the necessity for confidentiality and for developing a specific Investigation plan. The Investigation committee will be provided with a copy of

this policy and procedures and federal regulations as appropriate (e.g., 42 CFR Part 93, 45 CFR 689, etc.) as well as all documents reviewed during the Inquiry. The RIO will be present or available throughout the Investigation to advise the committee as needed.

- Inform the Investigation committee that they must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, research misconduct occurred and, if so, the type and extent of it and who was responsible; The University has the burden of proof for making a finding of research misconduct. Respondent has the burden of proving by a preponderance of the evidence any affirmative defenses raised, including honest error or a difference of opinion;
- Inform the Investigation committee of the definition of research misconduct and the standard of proof necessary to issue of finding of research misconduct; &
- Inform the Investigation committee that they are responsible for preparing or directing the preparation of a written report of the Investigation that meets the requirements of this policy at the conclusion of the committee's investigation.

### **The Investigation Committee and the RIO**

The Investigation Committee and the RIO will:

- Use diligent efforts to ensure that the Investigation is thorough and sufficiently documented and includes examination of all research records and evidence relevant to reach a decision on the merits of each allegation;
- Take reasonable steps to ensure an impartial and unbiased Investigation;
- Describe the weight given to the various witnesses and pieces of evidence, noting inconsistencies, credibility and persuasiveness;
- Interview each respondent, complainant, and all other available individuals identified as having information regarding any relevant aspects of the Investigation, including witnesses identified by the respondent, and record or transcribe each interview, provide the recording or transcript to the interviewee for correction (interviewee has 7 days to review the transcript and provide any feedback), and include the recording or transcript in the record of the Investigation;
- Summarize each argument that the respondent raised in his or her defense against the allegation. Address each of the respondent's arguments and explain whether any reasonable argument has merit, and if not, explain why not;

- Pursue diligently all significant issues and leads discovered that are determined relevant to the Investigation, including any evidence of any additional instances of possible research misconduct, and continue the Investigation to completion;
- Note the use of additional expert analysis outside the Investigation committee including the forensic, statistical, or special analysis of the physical evidence.
- Identify the relevant research community, articulate the accepted practices in the relevant research community, and how any research misconduct was a departure from these accepted practices (e.g., standards from professional societies, state and federal regulations and/or expert opinion); &
- Provide a final written Investigation Report.

### **Investigation Report**

The Investigation committee, with guidance from the RIO, will prepare a written Investigation Report in accordance with a template provided by the RIO.

- University counsel will review the report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the Investigation committee.
- The RIO will give the respondent a copy of the draft Investigation report for comment, and if requested, a copy of, or supervised access to, all documents on which the report is based. If a copy of the documents is requested, respondent will be financially responsible for duplication costs. The respondent will be allowed thirty (30) days from the date they receive the draft report to submit comments to the RIO. The respondent's comments will be given to the Investigation committee for review and included in the final report. The report must be kept confidential by the respondent.
- The RIO will provide the complainant a copy of the draft Investigation report, or relevant portions of it, for comment. The complainant's comments must be submitted within thirty (30) days of the date on which they receive the draft report and the comments will be included in the final report. The report must be kept confidential by the complainant.

## **Finalizing the Investigation Report - Decision by the Provost (Deciding Official)**

The RIO will assist the Investigation committee in finalizing the draft Investigation report, including ensuring that the respondent's (and complainant's, as applicable) comments are included and will transmit the final Investigation report to the Provost, who will determine in writing: (1) whether they accept the Investigation report, its findings, and the recommended University actions; and (2) the appropriate University actions in response to the accepted findings of research misconduct. If this determination varies from the findings of the Investigation committee, the DO will, as part of their written determination, explain in detail the basis for rendering a decision different from the findings of the Investigation committee. Alternatively, the DO may return the report to the Investigation committee with a request for further fact-finding or analysis.

When a final decision on the case has been reached, the RIO will notify both the respondent and the complainant in writing. After informing federal agencies as applicable (ORI, OIG), the DO will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the respondent in the work, or other relevant parties should be notified of the outcome of the case. The RIO is responsible for ensuring compliance with all DO decisions and notification requirements of funding or sponsoring agencies.

### **F. University Administrative Actions**

If the DO determines that research misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken, after consultation with the RIO, legal counsel, and others as deemed appropriate. The administrative actions may include:

- Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;
- Disciplinary actions in accordance with any applicable labor agreements;
- Restitution of funds to the grantor agency as appropriate; and
- Other action as appropriate.

## **G. Other Considerations**

### **Additional Allegations**

If during the research misconduct process additional allegations of research misconduct are brought forth against the respondent, the RIO shall notify the respondent in writing within 10 days of said notification.

### **Termination or Resignation Prior to Completing Inquiry or Investigation**

The termination of the respondent's University employment, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the research misconduct process or otherwise limit any of the University's responsibilities.

If the respondent, without admitting to the misconduct, elects to resign their position after the University receives an allegation of research misconduct, the assessment of the allegation will proceed, as well as the Inquiry and Investigation, as appropriate based on the outcome of the preceding steps. If the respondent refuses to participate in the process after resignation, the RIO and any Inquiry or Investigation committee will use their best efforts to reach a conclusion concerning the allegations, noting in the report the respondent's failure to cooperate and its effect on the evidence.

### **Finding of No Research Misconduct: Notification of Outcome and Expunging of Records**

Following a final finding of no research misconduct (including, where applicable, ORI concurrence where required by 42 CFR Part 93), the RIO will, at the request of the respondent and with approval by the DO, undertake all reasonable and practical efforts to notify involved parties (witnesses, etc.) of this outcome. Depending on the particular circumstances and the views of the respondent, the RIO may consider notifying those individuals aware of, or involved in, the Investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of research misconduct was previously publicized, and expunging all reference to the research misconduct allegation from the respondent's personnel file.

## **Protection of the Complainant, Witnesses and Committee Members**

During the research misconduct process and upon its completion, regardless of whether the University or ORI determines that research misconduct occurred, the RIO will undertake all reasonable and practical efforts to counter potential or actual retaliation against, any complainant who made allegations of research misconduct in good faith and of any witnesses and committee members who cooperate in good faith with the research misconduct process. The DO will determine, after consulting with the RIO, and with the complainant, witnesses, or committee members, respectively, what steps, if any, are needed to restore their respective positions or reputations or to counter potential or actual retaliation against them. The RIO is responsible for implementing any steps the DO approves.

### **H. Federal Agency Requirements**

#### **PHS Funded Activities**

The Office of Research Integrity (ORI) oversees and coordinates PHS activities relating to misconduct.

Where PHS funds are involved, the requirements at 42 CFR 93 must be met by the University. Possible actions to be taken by ORI (including initiation of its own Investigation) are identified in 42 CFR 93, and should be noted.

Unless an extension has been granted, the RIO will, within the 120-day period for completing an Investigation, submit the following to ORI: (1) a copy of the final Investigation report with all attachments referenced in the report (include a list of attachments); (2) a statement by the DO (Provost) of whether the University accepts the findings of the Investigation report; (3) a statement of whether the University found misconduct and, if so, who committed the misconduct; and (4) a description of any pending or completed administrative actions against the respondent.

The RIO will maintain and provide to ORI upon request "records of research misconduct proceedings" (as defined by 42 CFR 93.317). Unless custody has been transferred to HHS or ORI has advised in writing that the records no longer need to be retained, records of research misconduct proceedings will be maintained in a secure manner for 7 years after completion of the proceeding or the completion of any PHS proceeding involving the research misconduct allegation. The RIO is also responsible for providing any information, documentation, research records, evidence or clarification



requested by ORI to carry out its review of an allegation of research misconduct or of the University's handling of such an allegation.

The RIO will notify ORI in advance if there are plans to close a case at the Inquiry or Investigation stages on the basis that respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except: (1) closing of a case at the Inquiry stage on the basis that an Investigation is not warranted; or (2) a finding of no misconduct at the Investigation stage, which will be reported to ORI, as prescribed in this policy and 42 CFR 93.315.

For PHS funded activities, this policy applies only to allegations of research misconduct that occurred within six years of the date the University or federal agency received the allegation, subject to the subsequent use, health or safety of the public, and grandfather exceptions in 42 CFR 93.105(b) of PHS policy.

### **NSF Funded Activities**

The Office of the Inspector General (OIG) oversees and coordinates NSF activities related to misconduct.

Where NSF funds are involved, the requirements set forth at 45 CFR 689 must be met by the University. Possible actions to be taken by OIG (including initiation of its own Investigation) are identified in 45 CFR 689, and should be noted.

If the University wishes NSF to defer conducting its own Inquiry and Investigation on the matter in question, NSF requires:

- Immediate notification if an initial Inquiry supports a formal Investigation
- Updates throughout investigations
- Notification prior to decision to conduct an investigation if:
  - The seriousness of apparent misconduct warrants
  - If immediate health hazards are involved
  - If NSF's resources, reputation, or other interests need protecting
  - If federal action may be needed to protect the interests of a subject of the Investigation or of others potentially affected, or
  - If the scientific community or the public should be informed.
- Submission of the final report from any Investigation. OIG will assess the accuracy and completeness of the report and whether the investigating entity followed reasonable procedures. It will

either adopt the findings in part or in whole, or, normally within 30 days, initiate a new Investigation.

- Periodic status reports if the Inquiry stage takes longer than 90 days, or if the Investigation takes longer than 180 days (at which point, NSF may commence with its own Investigation).

OIG may initiate its own Inquiry, or contact the University to encourage the initiation of an Inquiry if alleged misconduct is brought to its attention by means other than via reporting from the University.

If NSF conducts a formal Investigation, prompt written notice will be made to the individual or institutions to be investigated, unless notice would prejudice the Investigation, or unless a criminal Investigation is underway or under active consideration. In the case of consideration of a criminal Investigation by the Department of Justice, Federal Bureau of Investigation, etc., the OIG will determine what information may be disclosed to the subject of the Investigation. Specific procedures pertaining to inquiries, Investigations and appeals are available in the NSF regulations on the matter (see 45 CFR 689).

### **Definitions:**

None

### **Contact:**

Additional information about this policy is available here:

#### **Office of Research Compliance**

Assistant Vice President for Research Compliance (RIO)

W5530, Frank Melville Jr. Memorial Library

Stony Brook, NY 11794-3368

Phone: (631) 632-9036

Fax: (631) 632-9839

<https://www.stonybrook.edu/commcms/research-compliance/index.php>

### **Relevant Standards, Codes, Rules, Regulations, Statutes and Policies:**

- [DHHS: Federal Research Misconduct Policy](#)
- [DHHS: ORI Policy on Plagiarism](#)
- [Stony Brook Office of Research Compliance Website, Research Misconduct](#)