

Procedures for Responding to Alleged Research Misconduct at Northeastern University¹

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¹ These guidelines are applicable to US funded research and/or research conducted on a US campus.

Definition of Research Misconduct

Research Misconduct is defined by the [Office of Research Integrity \(ORI\)](#) as *fabrication, falsification, and plagiarism*.

1. *Fabrication*: making up data or results and recording them in the research record.
2. *Falsification*: 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.
3. *Plagiarism*: the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

The U.S. federal definition of Research Misconduct does not include deception, conflicts of interest, misrepresentation of data or other ethical breaches in the definition of research misconduct. However, these breaches of professional responsibility may be subject to other professional and institutional proceedings, not limited to the faculty handbook, university policy or federal, state, or local law. If an allegation comes to the RIO that does not meet the definition of Research Misconduct, but is subject to another legal or administrative process, the RIO will make the appropriate referral(s).

The definition of Research Misconduct varies from country to country. If funding tied to a foreign sponsor is implicated in the proceedings, Northeastern will take those sponsor requirements into account throughout the assessment, inquiry, and investigation phases². For example, the United Kingdom adheres to the [Concordat to Support Research Integrity](#), which includes misrepresentation and a failure to meet legal, ethical, and professional obligations in the definition of Research Misconduct.

Role of the Rio

The Research Integrity Officer (RIO) is appointed by the Senior Vice Provost for Research (SVP) and has the primary responsibility for overseeing the procedures described in this document. The RIO assesses the Allegation(s) to ascertain whether they could, if true, constitute Research Misconduct; determines when the Allegation(s) warrant further inquiry; oversees inquiries; and oversees the activities of any Investigation Committees to ensure compliance with and the appropriate federal policies, if applicable.

The RIO is also responsible for making timely reports to the relevant external agencies, as required, and for appropriately maintaining documentation of all Research Misconduct proceedings. The RIO is also responsible for administrative support, contacting people, and scheduling during the inquiry and investigative process.

Code of Conduct

Allegation is defined by 42 C.F.R. § 93.201 as “a disclosure of possible research misconduct through any means of communication. The disclosure may be by written or oral statement or other communication to an institutional or HHS official”.

The RIO and the Inquiry and Investigative Committee (Committee) will abide by the following integrity safeguarding measures when conducting Research Misconduct inquiries and Investigations:

² Northeastern University has international campuses located in the United Kingdom and Canada. In the event of an allegation of research misconduct on an international campus, Northeastern will work closely with the involved offices and respondent(s) as necessary as Research Misconduct policies and procedures may vary by country.

- The RIO, Committee, Complainant, and witnesses shall act in good faith³.
- No one shall attempt to prejudice or coerce the judgment or decisions of the RIO, and/or members of the Committee.
- No one shall attempt to prejudice or coerce the testimony of any witness, the Complainant, or the Respondent.
- No one shall engage in or threaten retaliation.
- Disclosure of an Allegation and the resulting Research Misconduct proceedings will be limited to a need-to-know basis.
- Protect the privacy of all Complainants, to the maximum extent possible.
- Provide confidential treatment to the Respondents and any witnesses, to the maximum extent possible.
- Any breaches of confidentiality shall be directed to the RIO for review and further action, if any.

The RIO should be informed immediately of any actual or threatened violation of these safeguards. In addition, the SVP shall be informed of any complaint or report that any members of the Committee and/or the RIO have not acted in good faith in carrying out any of their duties.

Conflicts of Interest

- A. Individuals with a personal, professional, or financial interest for or against a Respondent are expected to disclose the interest and recuse themselves from any role in reviewing the Allegation(s) of Research Misconduct. At each stage of these Procedures, conflicts of interest will be solicited from nominated Committee members (who will be replaced as appropriate if relevant conflicts emerge), and the Respondent will be given the opportunity to identify to the RIO any conflict of interest that the Respondent believes would prevent a nominated Committee member or other individual tasked under the Policy from providing fair and unbiased service, describing each perceived conflict in detail.
- B. In the event the Respondent identifies, and the RIO confirms a conflict of interest involving a nominated Committee member, the SVP, with guidance from the RIO, and as needed in consultation with the applicable college dean, will nominate a substitute Committee member.

Reports of Research Misconduct

Anyone, regardless of university affiliation, can make an Allegation of Research Misconduct. The Complainant need not be a member of the Northeastern community and may choose to make a report anonymously. Northeastern shall make diligent efforts to honor the request of any Complainant that their identity be kept confidential during the Allegation review.

Northeastern offers multiple avenues for reporting suspected Research Misconduct:

- By email: researchcompliance@northeastern.edu
- By using the [Research Misconduct Anonymous Report Form](#), hosted by EthicsPoint
- By calling the EthicsPoint Hotline: 1-855-350-9390
- In person with Research Compliance staff upon request

³ Good Faith is defined as an honest belief or the absence of fraudulent intent. It is the opposite of bad faith, wherein someone would act in a way that intentionally obscures the truth.

EthicsPoint provides an anonymous and confidential reporting line for all members of the university community. All reports submitted to EthicsPoint are protected under the [Whistleblower Policy](#).

All Allegations will be communicated in writing to the SVP by the RIO.

Research Misconduct Allegations should be made promptly to ensure the university can act immediately. Per [42 CFR Part 50, Subpart A](#), allegations for misconduct that occurred more than 6 years from the most recent citation of the work in question are at the discretion of the RIO. After receiving an Allegation, the RIO will determine if the specific US or international research misconduct regulations that apply.

When a Research Misconduct Allegation is received, the university will take action to protect the funds or equipment of any governmental or other research sponsor or to otherwise assure compliance with the terms of any sponsored research contract. Such measures could include additional oversight of expenditure or oversight of equipment use if necessitated by the allegations presented.

Admission of Research Misconduct

- A. If a member of the university community admits to Research Misconduct, the RIO will submit the admission with a copy to the admitting person, SVP, applicable college dean, department chair and the research sponsor, if required. The SVP will weigh any recommendations for disciplinary action as made by the RIO and/or faculty panel and forward them to the Provost in accordance with these procedures.
- B. If a member of the university community admits to misconduct, but disputes whether the admitted misconduct falls outside the scope of the [Policy on Research Misconduct](#), or admits to Research Misconduct for fewer than all pending Allegations against them, the RIO will conduct a Preliminary Assessment of the unresolved Allegations and proceed accordingly.

Preliminary Assessment

A Preliminary Assessment is conducted by the RIO to determine if the Allegation meets the university's definition of Research Misconduct and falls within an actionable timeline. The Preliminary Assessment does not assess if Research Misconduct has occurred. The RIO's review during the Preliminary Assessment is intended to remove clearly erroneous, unsubstantiated, or bad faith Allegations before the Respondent is subject to an Inquiry or Investigation. Research Misconduct Allegations are directed to the Office of Research Compliance. The RIO will determine whether an Inquiry is warranted, if the Respondent's alleged conduct could constitute Research Misconduct or unacceptable research practices, and if there is credible evidence to support further review of the Allegation.

The RIO shall prepare a Preliminary Assessment Report outlining the basis for their determination:

If an Inquiry is warranted

The RIO shall:

- Transmit copies of the Preliminary Assessment Report to the Respondent and the SVP.

If an Inquiry is not warranted

The RIO shall:

- Document the determination. At the discretion of RIO, notify the Complainant of the outcome of the Preliminary Assessment.

- Notify the SVP, who shall initiate an Inquiry.
 - At the discretion of RIO, notify the Complainant of the outcome of the Preliminary Assessment.
- The RIO's determination that an Inquiry is not warranted, unless overturned by the SVP, shall conclude review of the Allegation.

If the RIO determines that an Inquiry is not warranted, the Complainant may challenge the RIO's determination in writing and with accompanying rationale. The RIO must respond to the challenge in writing, either by accepting it and taking appropriate action or rejecting it for stated cause.

If the Complainant is not satisfied by the RIO's response, the Complainant may request it be reviewed by the SVP. This request must be made in writing, with rationale, and must be filed with the SVP.

Sequestration and Preservation of Evidence

Research records resulting from research awarded and/or conducted at the university are the property of the university. Research records may include, but are not limited to:

- Any data, document, email, computer file, computer diskette, or any other written or non-written account or object that reasonable may be expected to provide evidence or information regarding the proposed, conducted, or reported research.
- Grant or contract applications whether funded or unfunded.
- Grant or contract progress and other reports.
- Physical or oral materials related to the research record, such as: laboratory notebooks; laboratory records, both physical and electronic; theses; abstracts; oral presentations; internal reports; manuscripts and publications; notes; correspondence; videos; photographs; X-ray film; slides; biological materials; computer files and printouts; equipment use logs.
- Documentation supporting the research record, such as: laboratory procurement records; animal facility records; human and vertebrate animal subject protocols; other institutional approvals; consent forms; clinical records directly related to research; research subject files.
- Any documents provided to any institutional official by a Respondent during the Research Misconduct proceeding.

Once the determination is made to begin an Inquiry, RIO takes all reasonable and practicable steps to:

- Obtain custody of all research records and evidence needed to conduct the Research Misconduct proceedings,
- Inventory the records and evidence,
- Sequester records and evidence in a secure manner (collaborating with OIS/ITS/OGC/NU Campus Police as necessary) and,
- Store all records and evidence in a secure location.

The RIO may sequester additional evidence at any point during the subsequent proceedings as necessary to ensure preservation of evidence required for Investigation and to accommodate ongoing research access needs. The RIO will document an inventory of all evidence sequestered under the RIO's control.

The RIO accords all appropriate rights to the Respondent in the act of sequestering research records. Research records will be sequestered in a manner which causes minimal disruption to research. Upon request, the RIO will provide the Respondent with an inventory of items sequestered and will provide copies, when possible, of sequestered items. Not all items may be easily duplicated or shared with the Respondent.

Interviews

During the Assessment, Inquiry, and/or Investigation stages, it may be necessary to interview the Respondent, the Complainant (if known), subject matter experts, and any other available persons or witnesses who have been reasonably identified as having relevant information.

Interviews will be recorded, and a transcription will be made available, upon request, to the interviewee for their records.

Interviewees have the right to legal representation (counsel), at their own expense. In addition to or in lieu of counsel, Respondents also have the right to have a member of their support system present during any interviews (i.e., spouse, partner, child).

Inquiry

- A. Upon determining that an Allegation of Research Misconduct meets the university's definition of Research Misconduct, the RIO will notify the Respondent, Complainant, and SVP in writing of the need for an Inquiry⁴.
- B. The RIO, with guidance from the SVP, will appoint a Committee comprised of full-time faculty members. The Committee will conduct an Inquiry to determine whether an Investigation is warranted. The goal of the Inquiry stage is to assess the initial merits of each Allegation, as outlined below. Each member of the Committee shall determine that an Investigation is warranted if, in their judgment:
 - a. The Respondent's alleged conduct could constitute Research Misconduct.
 - b. There is sufficient evidence of possible Research Misconduct to warrant an Investigation.
 - c. There is sufficient credible evidence of such merit that an Investigative Committee could reasonably conclude that Research Misconduct occurred.
- C. If necessary and when appropriate, the SVP may appoint experts from outside the university to participate in the Inquiry and serve on the Committee. The SVP may elect to impanel external consultants to serve as subject matter experts or to serve on the Committee. The Respondent will be notified, in writing, of the proposed Committee membership. The Respondent will be given an opportunity to object to any proposed member based on a personal, professional, or financial conflict of interest. Any objections will be submitted to the RIO for review. The RIO will render a decision as to if a conflict exists.
- D. The Committee should initially conduct interviews as detailed in the Interview section above. The Committee shall prepare an Inquiry Report with the following information:

⁴ An "inquiry" consists of preliminary information-gathering and preliminary fact-finding to determine whether an allegation or apparent instance of misconduct has substance. An investigation must be undertaken if the inquiry determines the allegation or apparent instance of misconduct has substance.

https://www.nsf.gov/pubs/policydocs/pappg18_1/pappg_12.jsp

- a. The name and position of the Respondent, if the Respondent is a current or former university employee, or the name and degree program of the Respondent if the Respondent is a current or former university student.
 - b. The nature of the alleged Research Misconduct and how it does or does not fit within the definition of Research Misconduct.
 - c. A description of the evidence it reviewed and the sufficiency, credibility, and merit of that evidence.
 - d. Summaries of any interviews conducted.
 - e. A determination of whether an Investigation is warranted.
- E. Additionally, the Inquiry Report may include any evidence of serious deviation from commonly accepted practices and an analysis of the Allegation considering such practices.
- F. The RIO will deliver to the Respondent a copy of the draft Inquiry Report. A copy of the evidence on which the report was based will be included with the draft Inquiry Report or the Respondent will be afforded supervised access to it. The Respondent is afforded the right to inform the Committee in writing of any errors claimed or to provide any other comments relevant to the Allegation(s) that the Respondent wishes to make. The Committee will consider any timely written comments from the Respondent to determine whether to amend the draft Investigation Report.
- G. The final Inquiry Report with all attachments is submitted to the SVP.
- a. If a majority of the Committee finds that the Allegations meet the definition of Research Misconduct and there is sufficient credible evidence that warrants further action, the RIO will formally convene the Research Misconduct Investigation and inform the Complainant and SVP.
 - b. If the Committee finds that the Allegation does not meet the university's definition of Research Misconduct and/or does not warrant further action, and the SVP concurs, the RIO formally dismisses the Allegation.
- H. The Committee will finalize its Inquiry Report, attach any timely written comments from the Respondent and provide the report to the RIO. The RIO will deliver a copy of the final Inquiry Report to the SVP and the Respondent. The RIO will notify the Complainant of the Committee's determination. If an Investigation is warranted and PHS funds⁵ are involved, the RIO will provide ORI and the Respondent with the written determination and a copy of the Inquiry Report within 30 days. NSF requires the RIO to provide immediate notification. The Investigation must begin within 30 days after determining that an Investigation is warranted (unless extensions are granted by ORI).

Investigation

- A. The Investigation⁶ is the formal, thorough examination and evaluation of all facts relevant to an Allegation to determine whether Research Misconduct occurred and to assess its extent, gravity, and actual and potential consequences.

⁵ Public Health Services (PHS) funding is overseen by the U.S. Department of Health and Human Services (HHS), impose special reporting requirements on investigators funded by PHS.

<https://www.govinfo.gov/content/pkg/FR-2011-08-25/pdf/2011-21633.pdf>

⁶ An "investigation" is a formal development, examination, and evaluation of a factual record to determine whether misconduct has taken place or, if misconduct has already been confirmed, to assess its extent and consequences or determine appropriate action.

https://www.nsf.gov/pubs/policydocs/pappg18_1/pappg_12.jsp

- B. The SVP will have discretion to carry the Inquiry Panel forward to Investigation, convene a new Investigation Panel, or replace/supplement specific Panel members for the Investigation.
- C. Prior to the start of the Investigation the RIO shall notify the SVP and the Office of General Counsel (OGC) of the initiation of the Investigation.
 - a. If the Allegation involves research supported by an external funding agency, the RIO shall also notify the funding source of the Investigation, providing the name of the Respondent, the general nature of the Allegation, and identifying the relevant grant.
- D. Neither the RIO nor the SVP shall participate in the Investigative deliberations of the Committee or vote on whether Research Misconduct occurred. If the Committee so requests, the RIO shall secure special scientific or technical assistance to evaluate an Allegation.
- E. During the Investigation, the Committee is responsible for conducting a thorough examination of all facts and evidence relevant to the Investigation to determine, based on a preponderance of evidence, whether Research Misconduct has occurred and, if so, to determine the responsible person and the nature and seriousness of the Research Misconduct.
 - a. The Committee may also identify, in the course of its duties, if there are issues which would justify broadening the scope of the misconduct proceeding beyond the initial Allegation.
- F. The Committee may interview, or re-interview, any relevant parties as detailed in the Interview section above.
- G. The Committee shall examine all evidence that it deems pertinent to the Allegation. At its discretion, the Committee may also inspect laboratories and examine laboratory specimens, materials, procedures, and methods. The Respondent shall be provided copies of or supervised access to all evidence reviewed by the Committee.
- H. The Committee comes to a finding for the Allegation(s), determining whether Research Misconduct occurred, by whom and to what extent, considering that a finding of Research Misconduct requires a preponderance of evidence, a significant departure from accepted practices in the relevant scientific community, and the Research Misconduct must have been committed intentionally, knowingly, or recklessly.
- I. The Committee will summarize its findings in a written Investigation Report to the SVP including:
 - a. The name and position of the Respondent if the Respondent is a current or former university employee, or the name and degree program of the Respondent if the Respondent is a current or former university student.
 - b. The relevant application or grant number if the Allegation(s) involves sponsored research.
 - c. A description of the Allegation and the name, if known and not held in confidence, of the Complainant.
 - d. A summary of the evidence reviewed, including an account of how and from whom it was obtained.
 - e. The Committee's conclusion as to whether it is more likely than not that Research Misconduct occurred.
 - f. Copies of the audio recording of each interview or hearing conducted during the Investigation.
 - g. A copy of these procedures and any other relevant NU policies or procedures relevant to the findings of the Committee.
- J. The Committee will prepare a draft Investigation Report that states the Committee's findings and the facts on which the findings were based, addresses any rebuttal or exculpatory evidence presented by the Respondent, and states whether the Respondent's actions were in fact Research Misconduct.

- K. The RIO will deliver to the Respondent a copy of the draft Investigation Report. A copy of the evidence on which the report was based will be included with the draft Investigation Report or the Respondent will be afforded supervised access to it. The Respondent is afforded the right to inform the Committee in writing of any errors claimed or to provide any other comments relevant to the Allegation(s) that the Respondent wishes to make. The Committee will consider any timely written comments from the Respondent to determine whether to amend the draft Investigation Report.
- L. The Committee will finalize its Investigation Report, attach any timely written comments from the Respondent and provide the report to the RIO. The RIO will deliver a copy of the final Investigation Report to the research sponsor, SVP and Respondent. The RIO will notify the Complainant of the Committee's determination.
- M. Any member of the Committee who does not agree with the determination of the majority may file a dissent to the Investigation Report.

Resolution and Outcome

When Allegations are not confirmed by the Inquiry or the Investigation, the university will consider, as appropriate and feasible, ways to restore the reputations of persons alleged to have engaged in misconduct, and to protect the positions and reputations of those persons who, in good faith, made Allegations.

If there are findings of Research Misconduct, the RIO will notify the Office of Academic Affairs, which may initiate its own proceedings, including disciplinary procedures.

Record Retention

All Inquiry and Investigatory files and final reports will be maintained and secured by the RIO for a period of seven years from the date of receipt of the Allegation(s), or for the period required by applicable regulations.

Use of External Parties

The RIO reserves the right to utilize external parties as necessary. In any such engagements, the external parties would be required to sign a confidentiality agreement to ensure that the respondent's reputation, identity and privacy are protected.

References

NSF OIG: <https://oig.nsf.gov/investigations/research-misconduct>

PHS ORI: <https://ori.hhs.gov/>