

3356-10-16 Research misconduct.

- (A) Policy statement. Among the basic principles of Youngstown state university (university) are the pursuit of truth and the responsible exercise of academic freedom. From these principles derive such ideals and values as the freedom and openness of inquiry, academic honesty, and integrity in scholarship and teaching. The university affirms and honors the preservation, growth, and flourishing of these values throughout all its activities, including teaching and learning, research, scholarly inquiry, and creative scholarly endeavor. Accordingly, research misconduct is adverse to the concept of academic freedom and its responsible exercise. It is from this background that the board of trustees implements this policy for handling allegations of misconduct in research.
- (B) Purpose. To address alleged or apparent misconduct in research and in scholarly and creative activities, irrespective of funding source.
- (C) Scope. This policy applies to all individuals involved in research and in scholarly and creative activities, including university faculty, staff, scientists, technicians, students, volunteers, visiting researchers or collaborators engaged in research or individuals working under an independent contract for services, and paid by, under the control of, or affiliated with the university at the time of misconduct.
- (D) Definitions (for purposes of this policy).
- (1) Definitions used in this policy shall conform to those cited in 42 C.F.R. 93 (public health service policies on research misconduct, department of health and human services) and in 45 C.F.R. 689 (national science foundation, misconduct in science and engineering research):
- (a) “Allegation” – any written or oral statement or other indication of possible research misconduct to an institutional officer that triggers the procedures described in this policy.
- (b) “Complainant” – a person who in good faith makes an allegation of research misconduct.
- (c) “Conflict of interest” – the real or apparent interference of a person’s interest with the interests of another, where

potential bias may occur due to prior or existing financial, personal or professional relationships.

- (d) “Deciding official (DO)” – the DO is the institutional official who makes final determinations on allegations of research misconduct and any institutional administrative actions. The DO will not be the same individual as the research integrity officer and should have no direct prior involvement in the institution’s allegation, inquiry or investigation assessment. Normally, the provost is the DO at the university. If the provost has a conflict of interest or is otherwise unable to fulfill this role, the president shall appoint the DO.
- (e) “Fabrication” – making up data or results and recording or reporting them.
- (f) “Falsification” – manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented by the research record.
- (g) “Good faith allegation” – allegations of research misconduct made by a complainant who honestly believes that research misconduct occurred based on the information known at the time.
- (h) “Inquiry” – preliminary information gathering and fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
- (i) “Investigation” – the collection and review of all relevant evidence of the alleged research misconduct, including but not limited to research records, documentation, interviews of those involved and knowledge about the activities under investigation to determine if research misconduct occurred and to recommend appropriate corrective actions.
- (j) “National science foundation office of inspector general (NSF OIG)” – the office within NSF that oversees investigations of research misconduct and conducts NSF inquiries or investigations into these allegations.

- (k) “Office of research integrity (ORI)” – the office overseeing and directing public health service research integrity activities on behalf of the secretary of health and human services. This includes oversight of research misconduct inquiries and investigations as well as institutional compliance.
- (l) “Plagiarism” – the appropriation of another person’s ideas, processes, results, or words without giving appropriate credit.
- (m) “Preponderance of evidence” – proof by information that compared with that opposing it, leads to the conclusion that the fact at issue is more likely true than not.
- (n) “Research integrity officer (RIO)” – the institutional official responsible for assessing allegations of research misconduct and determining when such allegations warrant inquiries, overseeing inquiries and investigations; and other responsibilities described in this policy. The DO appoints the RIO. Normally, the director of research services will serve as the RIO of the university.
- (o) “Research misconduct” – fabrication, falsification, ~~plagiarism in proposing, performing or reviewing research, or in reporting research results~~ committed by an individual or through the use or assistance of other persons, entities or tools, including artificial intelligence-based tools, in proposing and reviewing research proposals, performing research or in reporting research results.
- (p) “Research record” – the record of data or results that embody the information resulting from research as well as the record of methods and analysis that led to those data or results, including but not limited to proposal or contract applications, funded or unfunded grants or contracts, progress and other reports, lab notebooks, notes, correspondence, videos, photographs, x-ray files, equipment use logs, biological materials, laboratory procurement records, animal facility records, human and animal subjects protocols, medical charts, patient research

files, abstracts, theses, oral presentations, computer files, codes and printouts, manuscripts and publications, musical scores and composition, and choreography.

- (q) “Respondent” – the person against whom an allegation of research misconduct is made or who is the subject of the research misconduct proceeding.
- (r) “Retaliation” – an adverse action taken against an individual in response to a good faith allegation of research misconduct or good faith cooperation with research misconduct proceedings of the university.

- (2) Nothing in these definitions shall be deemed to include honest error or differences in opinion as research misconduct.

(E) Guidelines.

- (1) Responsibility to report research misconduct. Any person, upon observing or having evidence of suspected research misconduct or believing specific actions, activities, or conduct constitutes research misconduct, as defined in this policy, may make an allegation. Such persons contemplating an allegation are encouraged to first discuss the allegation in confidence with the RIO, who will advise the person(s) about the procedures to be followed under this policy.
 - (a) If an allegation of research misconduct is made to an institutional official other than the RIO, details of the substance of the allegation will be immediately transmitted to the RIO in writing.
 - (b) If the allegation is against the RIO or there is an apparent or actual conflict of interest, the DO will appoint a substitute RIO to act as the RIO in implementing this policy.
- (2) This policy applies to allegations of research misconduct within six years of the date the university, oversight agency or funding entity receives an allegation of research misconduct (42 C.F.R. 93.105). Exceptions include:
 - (a) The respondent(s) continues or renews any incident of

alleged research misconduct that happened before the six-year limitation through the citation, republication or other use of research record(s) that is alleged to have been fabricated, falsified or plagiarized for the benefit of the respondent(s).

- (b) The university determined that the alleged research misconduct may have a substantial adverse effect on the health or safety of the public.
- (3) A finding of research misconduct under this policy requires that:
- (a) There be a significant departure from accepted practices of the relevant research community;
 - (b) The misconduct be committed intentionally, knowingly, or recklessly; and
 - (c) The allegation be proven by a preponderance of the evidence.
- (4) Cooperation with research misconduct proceedings.
- (a) Respondent(s), complainant(s) and witness(es) are responsible to fully cooperate with the RIO and other university officials in the review of allegations and in the conduct of inquiries and investigations of research misconduct. These individuals are obligated to provide evidence relevant to the research misconduct proceedings to the RIO, the inquiry and investigation committees, other university officials and any appropriate oversight agency or funding entity.
 - (b) Failure to cooperate with research misconduct proceedings constitutes grounds for disciplinary proceedings against students, faculty and staff under the student code of conduct, applicable collective bargaining agreements, or office of human resources disciplinary proceedings. Failure to cooperate constitutes grounds for termination of a volunteer's agreement with the university.
 - (c) If third parties and other non-university personnel refuse to

cooperate in research misconduct proceedings upon request, their refusal may constitute grounds for termination of their affiliation with the university.

(5) Confidentiality.

(a) The RIO will limit the disclosure of the identity of respondent(s) and complainant(s), if known, and any records of evidence from which research subjects might be identified, to individuals who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding and except as required under certain circumstances, including but not limited to by law, the oversight agency, the rules of the contract or award with the funding entity, the need to inform the research community to protect the research integrity or the human subjects involved, or as part of a corrective action.

(b) Except as otherwise required by this policy or by federal, state, or local law or regulation, it is a violation of this policy for any member of the faculty, professional administrative staff or classified staff, an individual providing services pursuant to an independent contract, or a member of the student body to violate the confidentiality of a proceeding under this policy.

(c) The RIO, in consultation with the DO, may in their discretion consult with experts outside the university community for proper conduct of the review and proceedings and inform other institutional personnel and officials responsible for oversight of the respondent's research activities and institutional response or corrective actions.

(6) Protections.

(a) The university will not tolerate retaliation in any way against complainants, respondents, witnesses, or committee members participating in a research misconduct proceeding. Any alleged or apparent retaliation from other university members against these individuals should be reported immediately to the RIO, who will review and

make all reasonable and practical attempts needed to protect or restore the position and reputation of the person whom the retaliation is against. Retaliation by university members will be grounds for university disciplinary procedures.

- (b) The RIO and other institutional officials will make all reasonable and practical attempts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct or any other violation is made. The university may, to the extent possible, work with the respondent(s) to rectify the reputation of the respondent(s), including providing a letter stating that there were no findings of research misconduct.

(7) Notifications of oversight agencies and funding entities.

- (a) The RIO will make notifications to oversight agencies and funding entities, including but not limited to ORI and the NSF OIG, when allegations of research misconduct relate to sponsored research, on or before the start of the investigation and at the conclusion of the investigation.
- (b) The RIO will immediately notify the appropriate oversight agency if there is reason to believe that any of the following conditions exist:
 - (i) The health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
 - (ii) Federal resources or interests are threatened;
 - (iii) Research activities should be suspended;
 - (iv) There is indication of possible violations of civil or criminal law;
 - (v) Federal action is required to protect the interests of those involved in the research misconduct proceeding;

- (vi) The research misconduct proceeding may be made public prematurely and agency action may be necessary to safeguard evidence and protect the rights of those involved; or
 - (vii) The research community or public should be informed, as determined by the institution or appropriate oversight agency or funding entity.
- (F) Resolutions and corrective action.
 - (1) Interim institutional administrative actions.
 - (a) The RIO will review the circumstances throughout the research misconduct proceedings to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of externally supported research.
 - (b) If such a threat exists, the RIO will, in consultation with the DO, other institutional officials and the relevant oversight agency, take appropriate interim action to protect against any such threat. This may include, but is not limited to:
 - (i) Additional monitoring of the research activities and the handling of external funds and equipment;
 - (ii) Reassignment of personnel or of the responsibility for the handling of external funds and equipment; or
 - (iii) Additional review of research data and results or delaying publication.
 - (2) Admissions and resolutions. The respondent(s) should be given the opportunity to admit that research misconduct occurred and that the respondent(s) committed research misconduct, at any phase of the proceedings under this policy. The RIO will acquire a written admission describing the specifics of the research misconduct. The DO, in consultation with the RIO, committee members and other university officials may terminate the proceedings when an allegation has been admitted and all relevant

issues are resolved, and further determine corrective actions. The RIO will notify the relevant oversight agency or funding entity. A resolution may be reached when the oversight agency agrees with terminating the research misconduct proceedings and approves the proposed resolution.

- (3) Institutional corrective actions.
 - (a) If the DO determines the presence of research misconduct, the DO will decide on the appropriate corrective actions to be taken, after consultation with the RIO and other university officials.
 - (b) Appropriate corrective actions may include, but are not limited to:
 - (i) A letter of reprimand;
 - (ii) Special monitoring of respondent(s) of future work;
 - (iii) Removal of respondent(s) from the particular project;
 - (iv) Termination of the active award;
 - (v) Restitution of funds from the agency;
 - (vi) Correction or withdrawal of all pending or published abstracts, manuscripts, publications and grant applications originating from research where misconduct was determined (42 C.F.R. 93.313);
 - (vii) Disciplinary actions for faculty, staff or students, in accordance with the applicable collective bargaining agreement, disciplinary proceedings established by the office of human resources, or the student code of conduct (rule 3356-8-01.1 of the Administrative Code; university policy 3356-8-01.1 “The Student Code of Conduct”); or
 - (viii) Termination of an individual’s volunteer agreement with the university.

(G) Procedures.

- (1) The office of research services is charged with developing procedures to implement this policy.
- (2) Procedures and other information concerning research misconduct, including regulations, charges of committees and outlines for inquiry and investigation reports are available in the office of research services and “PI handbook” at <https://ysu.edu/office-research-services> on the [YSU portal, Research Services card](#).

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Certification

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