

January 13, 2015

**RESOLUTION TO APPROVE AMENDMENT TO THE FACULTY HANDBOOK  
RELATED TO RESEARCH MISCONDUCT**

WHEREAS, Article II, Section 1 of the By-Laws of the Board of Trustees (“By-Laws”) for Case Western Reserve University (“the University”) states, in relevant part, that the Board of Trustees shall oversee the educational programs of the University; and

WHEREAS, the Faculty Senate voted at its November 24, 2014 meeting to approve an amendment to Chapter 3, Part Two, Article II of the Faculty Handbook regarding research misconduct; and

WHEREAS, amendments to Chapter 3 of the Faculty Handbook require recommendation of the President and approval of the Board of Trustees.

NOW, THEREFORE, BE IT RESOLVED THAT:  
the Executive Committee of the Board of Trustees  
of Case Western Reserve University approves the  
amendment to the Faculty Handbook regarding  
research misconduct as set forth on Exhibit A.

APPROVED  
by the  
EXECUTIVE COMMITTEE  
CASE WESTERN RESERVE UNIVERSITY  
BOARD OF TRUSTEES  
*Elizabeth Keefer*  
SECRETARY OF THE CORPORATION

EXHIBIT A

Chapter 3: Part II

ARTICLE II. Policy for Responding to Allegations of Research Misconduct\*

Sec. A. Introduction

1. General Policy

Research misconduct will not be tolerated or accepted at Case Western Reserve University. Scientific integrity and ethics are highly valued and expected from all members of the University community. While ensuring compliance, the University will make all efforts to protect the rights and reputations of all individuals including the respondent and good faith complainant.

The University will regularly provide information to researchers and staff members on the policies related to research misconduct and the importance of compliance. Preventative measures are by far the most productive and least damaging to all involved. Our goal is to initiate department-level discussions among students, faculty, and staff researchers to examine the contemporary stresses felt on academic research ethics, and to consider ways to deal with those stresses. The University supports Responsible Conduct of Research (RCR) training efforts across campus and expects individual researchers to be actively engaged in meeting the RCR educational requirements of funding agencies.

The University's basic procedural approach to handling allegations of research misconduct is to investigate as soon as misconduct is suspected, inform and cooperate with the Office of Research Integrity (ORI), and to follow the proceeding policies.

2. Scope

This policy and the associated procedures apply to all individuals at Case Western Reserve University engaged in any research whether it is supported by the U.S. Public Health Service (PHS) or not. The PHS regulation, 42 Code of Federal Regulations (CFR) Part 93, applies to any research, research-training or research-related grant or cooperative agreement with PHS. This University policy applies to any person paid by, under the control of, or affiliated with the institution, such as scientists, trainees, technicians and other staff members, students, fellows, guest researchers, or collaborators at Case Western Reserve University. While the University's authority to investigate, to compel cooperation, and to impose sanctions against those who are not members of the University Community is limited, the University will nonetheless investigate all allegations of misconduct involving research.

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**Sec. C. Rights and Responsibilities**

**1. Research Integrity Officer**

<https://research.case.edu/Compliance/ResearchIntegrity.cfm>

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**Sec. F. The Inquiry Report**

**1. Elements of the Inquiry Report**

The written inquiry report shall contain the following information: (1) The name and position of the respondent(s); (2) A description of the allegations of research misconduct; (3) The PHS support involved, including, for example, grant numbers, grant applications, contracts, and publications listing PHS support or other non-PHS support; (4) The basis for recommending that the alleged actions warrant an investigation; and (5) Any comments on the report by the respondent or the complainant. The report should also include recommendations on whether any other actions should be taken if an investigation is not recommended. The Office of General Counsel will review the report for legal sufficiency.

**2. Comments on the Report by the Respondent and the Complainant**

The Research Integrity Officer will provide the respondent with a copy of the inquiry report for comment and rebuttal, along with a copy of this policy. The Research Integrity Officer may provide the complainant, if he or she is identifiable; with a summary of the inquiry findings that addresses the complainant's role and opinions in the investigation.

**a. Confidentiality**

The Research Integrity Officer may establish reasonable conditions for review to protect the confidentiality of the report.

**b. Receipt of Comments**

Within 10 calendar days of receipt of the report or summary, the respondent (and complainant, if applicable) will provide their comments, if any, to the inquiry committee. If the respondent needs more time, the respondent may request an extension of time, which shall be granted whenever practicable. Any comments that the complainant or respondent submits on the report may become part of the final inquiry report and record. Based on the comments, the inquiry committee may revise the report as appropriate.

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## H. The Investigation Report

### 1. Elements of the Investigation Report

The Research Integrity Officer, in conjunction with the Investigation Committee, shall prepare the draft and final institutional investigation reports in writing and provide the draft report for comment as provided elsewhere in these policies and procedures and 42 CFR Section 93.312. The final investigation report shall:

- a. Describe the nature of the allegations of research misconduct;
- b. Describe and document the PHS support (if applicable), including, for example any grant numbers, grant applications, contracts, and publications listing PHS support;
- c. Describe the specific allegations of research misconduct considered in the investigation and the charge to the Investigation Committee;
- d. Include the institutional policies and procedures under which the investigation was conducted, if not already provided to ORI;
- e. Identify and summarize the research records and evidence reviewed, and identify any evidence taken into custody, but not reviewed. **The report should also describe any relevant records and evidence not taken into custody and explain why.**
- f. Provide a finding as to whether research misconduct did or did not occur for each separate allegation of research misconduct identified during the investigation . For each instance where research misconduct was found, the Investigation Committee's report shall do the following
  1. identify it as falsification, fabrication, or plagiarism;
  2. identify the criteria for determining that it was a significant departure from accepted practices, that it was committed intentionally, knowingly, or recklessly, and that it was proven by a preponderance of the evidence;
  3. summarize the facts and the analysis supporting the conclusion and consider the merits of any reasonable explanation by the respondent and any evidence that rebuts the respondent's explanations;
  4. identify the specific PHS support or other support;
  5. identify any publications that need correction or retraction;
  6. identify the person(s) responsible for the misconduct ;
  7. list any current support or known applications or proposals for support that the respondent(s) has pending with non-PHS Federal agencies; and



**Board of Trustees**  
**Executive Committee**

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2. Include and consider any comments made by the respondent and complainant on the draft investigation report.

**Comments on the Draft Report**

a. Respondent

The Research Integrity Officer will provide the respondent with a copy of the draft investigation report, and concurrently, a copy of, or supervised access to, the evidence on which the report is based and notify the respondent that any comments must be submitted within 14 days of the date on which he/she received the draft report. If the respondent needs more time, the respondent may request an extension of time, which shall be granted whenever practicable. The respondent's comments will be attached to the final report and are considered in the final investigation report.

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**Sec. I. Requirements for Reporting to ORI**

1. The University shall promptly provide to ORI after the investigation: (1) A copy of the investigation report (as outlined in Section H-1 above) and all attachments; (2) A statement of whether the institution found research misconduct and, if so, who committed it; (3) A statement of whether the institution accepts the findings in the investigation report; and (4) A description of any pending or completed administrative actions against the respondent. (Only actions involving respondents who receive funding from PHS will be reported to ORI.)
2. The University shall maintain and provide to ORI upon request all relevant research records and records of its research misconduct proceeding, including results of all interviews and the transcripts or recordings of such interviews. [this sentence was moved from Section H to Section I, but content remains the same]