

Adopted May, 1988

THE JOHNS HOPKINS UNIVERSITY POLICY ON INTEGRITY IN RESEARCH

Introduction

The Johns Hopkins University's excellence in research rests, in part, on its faculty's and students' dedication to objective inquiry and uncompromising pursuit of truth. Integrity in the performance of research is essential, and it must be scrupulously and vigorously maintained. Even a single act of research fraud tarnishes the University's reputation and the credibility of all its faculty, staff and students, and hinders the pursuit of new knowledge.

Definition

Research fraud is the intentional falsification or fabrication of data or results, plagiarism, misconduct in the application of research procedures so as to bias results, or other deceptive research or reporting practices.

Policy

Research fraud constitutes unacceptable conduct by faculty, staff or students. It is the responsibility of all members of the University community to adhere to strict standards of integrity in their research and to report fraudulent acts when they are known or are suspected to have occurred. It is the responsibility of faculty and other supervisors of research to monitor carefully the research under their supervision and to subject research procedures and findings to rigorous evaluation. It is the responsibility of each Division of the University to maintain an atmosphere that fosters integrity in research and to adopt procedures for dealing expeditiously and fairly with allegations or research fraud.

PROMOTING INTEGRITY IN RESEARCH

Integrity is so fundamentally important to research that it is assumed that individual researchers will maintain it automatically. The integrity of the University's research must rely on its individual researchers, but each division can act to support the efforts of its faculty, staff and students to maintain honesty in research. In order to promote integrity in research, each Division will assume the responsibility:

1. Clearly define individuals' responsibilities in the performance of research. These include: appropriate procedures for the collection and reporting of data and results; the responsibilities of faculty for the research conducted under their supervision; and, the accountability of authors for publications that bear their names.
2. Inform its faculty, students and staff of their responsibilities. It should not be assumed that researchers will know all of their responsibilities, or that they will be able to judge the appropriateness of procedures, without guidance from the Division.
3. Develop mechanisms to maintain an atmosphere that encourages integrity in research. Elements of a healthy environment include: the open exchange of ideas; the free discussion of the pressures that may threaten integrity in research; an emphasis on the quality rather than the quantity

of research; and promoting the realization of the interdependence of faculty, students and staff.

PROCEDURES FOR DEALING WITH ALLEGATIONS OF RESEARCH FRAUD

Each Division of The Johns Hopkins University will adopt and periodically disseminate and publicize written procedures for dealing with allegations of research fraud. The procedures should promote the fair and timely resolution of allegations of research fraud and conform to the following principles:

1. Clear Reporting Mechanisms and Responsibilities

The Deans and Directors of the Divisions have the responsibility for insuring the resolution of allegations of research fraud. ("Directors" refers here and throughout to the Director of the Applied Physics Laboratory and the Director of the Peabody Institute.) The individuals to whom suspected incidents should be reported must be clearly identified and publicized within the Division. The roles of all individuals involved in the disposition of an allegation must be clearly specified.

To encourage persons to come forward with information regarding suspected research fraud, even where the accusation involves persons normally charged with responsibility for the resolution of such accusations, procedures adopted by each Division should provide for alternative means of reporting acts of research fraud. Moreover, a Division's procedures should require individuals to abstain from any participation in the disposition of charges of research fraud when they bear a personal interest in the outcome.

2. *Confidentiality*

The procedures must maintain confidentiality to protect both accused persons and informants to the maximum extent possible. Therefore, as few individuals as is reasonable should be involved in resolving allegations of research fraud.

Records of allegations, evidence and proceedings should be kept by the Dean or Director in a sequestered file.

3. *Inquiry vs. Investigation*

Procedures should include two major phases: an inquiry and an investigation.

An inquiry is the initial step after an allegation of research fraud is made. It is intended to identify groundless or frivolous allegations and generally involves fewer people and is less formal than an investigation.

An investigation is conducted after an inquiry has established that there are grounds for doing so. An investigation is considered to have started when the Provost is notified that an inquiry has found sufficient grounds to proceed.

In conducting an inquiry or an investigation, consideration should be given to the protection of evidence.

4. *Notification*

An individual accused of research fraud must be notified in writing prior to the initiation of an investigation. In the event an inquiry finds an allegation to be groundless, the accused individual should be notified in writing if the allegation was made in writing.

The Provost should be informed by the Dean or Director of allegations of research fraud and the progress of inquiries and investigations. The time of such notification is at the discretion of the Dean or Director, but it must occur no later than the conclusion of an inquiry.

Sponsors of research and other external organizations affected by research fraud, e.g., journals, should be notified at an appropriate time. Notification should normally occur after an investigation has established that research fraud has been committed. If required by regulation or if in extraordinary circumstances where, in the judgment of the Dean or Director or the Provost, there are compelling reasons for earlier disclosure, external organizations may be alerted to the pending charges of research fraud prior to the completion of an investigation. In any event, the General Counsel of the University must be consulted prior to any communication outside of the University.

5. *Role of the General Counsel*

The Dean or Director should consult the General Counsel of the University as soon as is reasonable after an allegation of research fraud. The consultation should occur before the initiation of an inquiry.

6. *Allegations that Involve More Than One Division*

In the event of allegations that involve individuals from more than one Division or individuals with appointments in more than one Division, the Provost and the Deans or Directors of the involved Divisions will coordinate the resolution of the allegations. The Provost will help to reconcile differences in the divisional procedures that may have a substantive effect on the fairness of the proceedings, and the decision of the Provost will be final.

7. *Protecting Informants*

Informants may be in sensitive positions relative to colleagues and superiors. The Division's procedures should include provisions to protect informants from retaliation. Consideration should be given to the creation of mechanisms for informal, confidential discussion of possible acts of research fraud, prior to the initiation of an inquiry.

8. *Disciplinary Actions*

Disciplinary actions taken as a result of a finding that research fraud has occurred must be consistent with appointment and tenure policies for faculty and with disciplinary policies for students and staff.

9. *Appeals*

The disposition of an allegation of research fraud may be appealed to the Provost, whose decision shall be final.

**THE JOHNS HOPKINS UNIVERSITY
POLICY ON INTEGRITY IN RESEARCH
ADDENDUM A**

Additional Administrative Requirements for PHS-Supported

Activities

1. General. This Addendum lists selected Public Health Service (PHS) requirements and information for dealing with and reporting alleged misconduct in science. These apply in addition to the "Policy on Integrity in Research" to all research, research training, applications for support or research or research training, or related activities for which PHS funds have been provided or requested. This information and requirements provided in this Addendum are not fully inclusive and interested persons are advised to consult with their divisional sponsored projects office or the University Office of Sponsored Projects (338-5490) for complete information. The PHS regulations are found at 45 CFR Part 50 Subpart A.

2. Definition: "Research fraud, "Misconduct in Science," "Misconduct."

For purposes of this Addendum, the definition of "Research fraud" provided in the

"Policy on Integrity in Research" is enlarged to include:

Practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, conducting or reporting research. These serious deviations do not include honest error or honest differences in interpretations or judgments of data.

As so enlarged, "Research fraud" is virtually identical to the definition of

"Misconduct" or "Misconduct in Science" used by PHS.

3. Retention of Records. Records of allegations, evidence and proceedings of inquiries and investigations, and related activities shall be kept for a minimum of three years from the later of (a) the date of conclusion of any activity or (b) the acceptance of any required final report by PHS. All such records shall be made available to DHHS upon request.

4. Initiation and Term of Inquiry. Inquiries must be initiated immediately upon allegation or other evidence of possible misconduct. An Inquiry must be completed within 60 calendar days of its initiation unless circumstances clearly

warrant a longer period. This period includes the time required for preparation of the report of inquiry.

5. Initiation, Reporting and term of Investigation. An investigation, if required, will be initiated within 30 days of the completion of an inquiry. The decision to initiate an investigation must be reported in writing to the Director, Office of Scientific Integrity (OSI), NIH, on or before the date the investigation begins; such notification will be provided within 24 hours if possible criminal violations are involved. An investigation should ordinarily be completed within 120 days of initiation; extensions beyond 120 days must be requested in writing from OSI.

6. Expertise. Appropriate and impartial expertise will be secured as necessary to carry out a thorough and authoritative evaluation of the relevant evidence in any inquiry or investigation.

7. Due Process and Confidential Treatment. All affected individuals will be afforded: confidential treatment to the maximum extent possible; a prompt and

thorough investigation; and an opportunity to comment on allegations and findings of the inquiry and/or the investigation.

8. Criminal Violations. OSI must be notified within 24 hours of obtaining a reasonable indication of possible criminal violations.

9. Interim Administrative Actions. Appropriate interim administrative actions must be taken during an investigation, if necessary to protect Federal funds or to ensure that the purposes of the Federal financial assistance are being carried out.

10. Reporting Additional Facts to OSI. OSI must be promptly advised of any developments during the course of an investigation which disclose facts that may affect current or potential DHHS funding for the individual (s) under investigation or that the PHS needs to know to ensure appropriate use of Federal funds and otherwise protect the public interest.

11. Protecting and Restoration of Reputations. Efforts will be made to protect and restore the reputations of persons alleged to have engaged in misconduct when allegations are not confirmed.

12. Investigation Final Report to OSI. OSI will be notified of the final outcome of an investigation with a written report that thoroughly documents the investigative process and findings.

13. Incorporation of All Requirements of 42 CFR Part 50 Subpart A. All requirements of 42 CFR Part 50 Subpart A not included herein in whole or in part are hereby incorporated in this Addendum.

December 28, 1989