

University Policy 3.03.06**Research Misconduct****Policy Approval Date: August 12, 2011****Policy Effective Date: September 1, 2011****Procedure Approval Date: November 16, 2021****Procedure Effective Date: December 1, 2021****POLICY STATEMENT**

Capella University strives to promote a climate of honesty in research and is committed to fostering research that is both sound and ethical. Capella University expects that research will be conducted with integrity and individuals engaged in research will review this policy and otherwise make themselves aware of what constitutes ethical and responsible conduct in research. Capella University researchers, including employees, learners, and others engaged in academic research as part of their employment or educational responsibilities, are expected to refrain from research misconduct. Research misconduct includes, but is not limited to falsification, fabrication, plagiarism, misappropriation, failure to maintain adequate research records, or other practices that deviate from those that are commonly accepted within the academic community for proposing, conducting, or reviewing research, or in reporting research results.

Research supervisors and others in positions of responsibility for the conduct of research activity are expected to exercise adequate supervision of those under their direction to ensure the integrity of the research being conducted. Capella University employees and learners share the responsibility to promptly report any suspected research misconduct. The university assumes primary responsibility for investigating and resolving allegations of research misconduct made against its employees or learners.

The consequences of research misconduct may include but are not limited to non-acceptance of submitted coursework, failing grade on an assignment, lower grade in a course, failing grade in a course, written warning, loss of Institutional Review Board (IRB) approval, suspension from the university, removal from the program, administrative withdrawal or dismissal from the university, or cancellation of previously awarded course credits or degrees.

The university recognizes the importance of open debate regarding correct methodologies and protocols and that honest errors are an inevitable part of the research process.

RATIONALE

The Office of Research Integrity (ORI) within the U.S. Department of Health and Human Services mandates that all institutions engaged in research funded by the Public Health Service have in place robust policies for mitigating and handling research misconduct. Although Capella is not mandated by law to implement such policies and procedures, best practices in research suggest the need for a research misconduct policy that is applicable to all researchers engaged in academic research at Capella University, whether learners, faculty, or staff.

DEFINITIONS

Academic Research

Academic research is defined as research conducted by Capella University learners as part of their doctoral project, or Capella employees. It does not include that which has been designated solely as classroom research. It can include both human subjects research, or studies designated as “not human subjects research” by the Institutional Review Board.

Allegation and Good Faith Allegation

An allegation includes any written or oral statement or other substantive indication of possible research misconduct. A good faith allegation, otherwise referred to as an allegation in good faith, is an allegation made with the honest belief that research misconduct may have occurred. An allegation is not in good faith if it is made with reckless disregard or willful ignorance of facts that would disprove the allegation.

Doctoral Project

A culminating program activity such as a dissertation, doctoral capstone, applied improvement project, or evidenced-based practice used to fulfill the requirements of the doctorate degree.

Fabrication

Fabrication is the illegitimate construction of data or results and recording or reporting them.

Falsification

Falsification of data, research procedures, or data analysis can range from selective reporting, such as purposeful omission of conflicting data with the intent to falsify conclusions, to changing data or results such that the research is not accurately represented in the research record.

Honest Errors

Honest errors are occasional mistakes or oversights that occur during the research process.

Institutional Review Board (IRB)

An IRB is a committee established in accord with and for the purposes expressed in [45 CFR 46](#).

Investigation

Investigation is the formal examination and evaluation of all relevant facts to determine if an instance of research misconduct has occurred. If research misconduct is confirmed, the investigation should determine the seriousness of the offense and the extent of any adverse effects resulting from the misconduct.

Misappropriation

Misappropriation is the unauthorized use of another person’s personal or intellectual property, as well as unauthorized use of another person’s research ideas or proposals.

Plagiarism

Plagiarism is presenting someone else’s ideas or work as one’s own. Plagiarism includes, but is not limited to, copying verbatim or rephrasing ideas without properly acknowledging the source

by author, date, and publication medium. Writers must paraphrase, summarize, or quote the ideas and words of others while simultaneously acknowledging the source.

Research Misconduct

Research misconduct includes but is not limited to falsification, fabrication, plagiarism, misappropriation, failure to maintain adequate research records, or other practices that deviate from those that are commonly accepted within the academic community for proposing, conducting, reviewing research, or in reporting research results. Research misconduct does not include honest error or honest differences in interpretations or judgments of data. A finding of research misconduct requires all of the following:

- A significant departure from accepted practices of the relevant research community
- Misconduct committed intentionally, knowingly, recklessly, or negligently
- An allegation proven by a preponderance of the evidence

Research Record

A research record is any data, document, computer file, computer drive, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of an allegation of research misconduct.

Retaliation

Retaliation is any adverse action taken by the university or an employee of the university in retribution for a good faith allegation of research misconduct.

PROCEDURES

I. Application to Doctoral Learners

- A. This policy and these procedures apply to all allegations of plagiarism and/or other research misconduct involving academic research after receipt of Capella University IRB approval or a “not human subjects research” designation letter from the Capella University IRB.
- B. All allegations of plagiarism involving academic research before receipt of Capella University IRB approval or a “not human subjects research” designation letter will be processed according to the provisions in university policy *3.01.01 Academic Integrity and Honesty*.

II. Research Misconduct Investigation Principles

Research misconduct investigations are guided by the following principles:

- A. Confidentiality should be maintained as much as possible.
- B. Any conflicts of interest, real or potential, must be minimized.

III. Reporting Research Misconduct Allegations

Any individual may report observed or suspected incidents of research misconduct to the university-designated research compliance team. Research misconduct allegations must be

documented in writing. The research compliance team may document a written allegation based upon information received by any means.

The research compliance team will inform the IRB chair of the allegation. If the respondent is a university employee, the research compliance team will notify Human Resources. The university reserves the right to take interim administrative actions to protect the health and safety of research subjects, the interest of staff and colleagues, the integrity of research data and the research process, and university funds and equipment. All research activities must cease pending the results of the research misconduct investigation.

IV. Academic Resources

- A. The Publication Manual of the American Psychological Association (APA) and Academic Writer are tools to help learners identify work that must be referenced, including their own published works, and determine how it must be cited.
- B. To avoid any instances that may be construed as plagiarism, learners should consult the APA style guide to apply the proper citation format.
- C. However, where this policy and the APA style guide diverge, this policy will take precedence.

V. Resolution Process for Research Misconduct Allegations

A. Investigation

1. Purpose

The purpose of the investigation is to assess whether the allegation constitutes a good faith allegation of research misconduct, to determine if research misconduct has occurred, and to determine proper sanctions and/or corrective actions. IRB protocol compliance is reviewed as part of the research misconduct investigation.

2. Notification of Respondent and Response

The research compliance team will notify the respondent of the allegation of research misconduct. The respondent will have seven calendar days to submit a response and any supporting materials.

3. Evaluation of Evidence

a. The research compliance team will comprehensively evaluate relevant materials presented and facts as soon as practicable. The research compliance team may also interview other individuals as part of the investigation.

b. The respondent will be given the opportunity to present their position to the team.

c. Once the research compliance team has concluded the investigation, they will prepare an investigation summary. The respondent will receive a copy of the investigation summary and will be allowed 14 calendar days to prepare written comments.

d. The investigation summary, the respondent's comments, and recommendations will then be submitted by the research compliance team to the Dean, Office of Research & Scholarship (ORS).

B. Resolution

1. The Dean, ORS will review the investigation summary, respondent comments, and recommendations. They will determine whether the Research Compliance Committee (RCC) is needed for consultation.
 - a. If RCC consultation is not needed, the Dean, ORS will determine if research misconduct was found and will determine any corrective actions or sanctions.
 - b. If RCC input is needed, the RCC will convene to review all evidence. The RCC will make a request to the research compliance team for additional evidence, if needed. The RCC will make a recommendation to the Dean, ORS regarding the presence of research misconduct, corrective actions, and sanctions. The Dean, ORS will make a final determination after reviewing the recommendation of the RCC.
 2. The Dean, ORS may at their discretion choose corrective/disciplinary action as warranted by the circumstances of each case.
 3. Revoked Degrees
 - a. If the Dean, ORS believes that a degree conferred by Capella University should be revoked as a result of a research misconduct finding, the respondent is notified of the recommendation and may submit an appeal within seven calendar days.
 - b. The university president (or president's designee) reviews the appeal, makes a determination, and emails the respondent to notify them of the decision.
 - c. If the recommendation to revoke the degree is upheld, the Capella University Board of Trustees must review the case and vote to revoke the degree. Decisions made by the Board of Trustees are final and cannot be appealed.
 - d. The respondent will receive written notification of the final determination and any corrective/disciplinary action to be taken.
 4. The Dean, ORS will determine whether a dissertation or other work must be withdrawn from publication and whether any other external agencies or individuals should be notified of the outcome of the case.
- C. Appeal Process
1. Learners must appeal a resolution decision within seven calendar days of being sent notification of the decision.
 2. Learners must include an explanation of the extenuating circumstances surrounding the research misconduct and the impact the circumstances had on their actions.
 3. Learners must include their plan for future academic success and correction of any research misconduct.
 4. Learners are not permitted to register for any Capella course (including non-credit courses, residencies, etc.) pending the outcome of their appeal.
 5. The university president (or president's designee) reviews the appeal, makes a determination, and emails the learner to notify them of the decision.
 6. The decision of the university president/designee is final. Matters that have been reviewed and have received a final decision under this policy are not eligible for further review under another policy.

VI. Retaliation

- A. Retaliation constitutes prohibited conduct under this policy.

B. A claim of retaliation against a university employee will be handled separately under the appropriate University or Human Resources policy.

VII. Other Misconduct

Misconduct that occurs within courseroom research projects will be handled in accordance with university policy 3.01.01 *Academic Integrity and Honesty* or other applicable university policies.

POLICY OWNERS

Academic Owner: Office of Research and Scholarship

Operations Owner: Office of Research and Scholarship

RELATED DOCUMENTS

University policy 3.01.01 Academic Integrity and Honesty

University Policy 3.03.02 Publication of Dissertations

University policy 3.03.05 Conflict of Interest in Research

University policy 4.02.02 Learner Code of Conduct

The Common Rule ([45 CFR 46](#))

The Belmont Report

Declaration of Helsinki

Nuremburg Code

REVISION HISTORY

Original Policy Approval Date: August 12, 2011

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