

This Policy was in effect from February 3, 2006 through December 31, 2025, and has been superseded by a new Policy.

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Appendix I. Columbia University Institutional Policy on Misconduct in Research

The Columbia University Institutional Policy on Misconduct in Research was adopted by the University Senate on February 3, 2006.

Introduction

Columbia University believes that the occurrence of misconduct is a threat to the basic principles of research. Misconduct in research damages the integrity of the profession and undermines the credibility of scholars. It is also antithetical to the values the University strives to maintain and promote.

The University takes seriously all allegations of misconduct, and believes that the procedures for the inquiry, investigation and adjudication of any misconduct should be clear for all parties involved. The University is also cognizant of the need for protections for the complainant, the respondent and all witnesses involved in any misconduct proceeding. This Policy is designed to address both of these issues.

Definitions of certain key terms used in this Policy are provided in Section B below.

This Policy is based on the Federal Policy on Research Misconduct (the “*OSTP Policy*”) of the Office of Science and Technology Policy. In accordance with the OSTP Policy, as used in this Policy, “*Research Misconduct*” means any Fabrication, Falsification or Plagiarism in proposing, performing or reviewing Research or reporting Research results. Research Misconduct does not include honest error or differences of opinion. In addition, this Policy does not cover authorship disputes unless they involve Plagiarism.

This is a University-wide Policy which applies to all individuals, including Officers of Instruction, Officers of Research, Officers of the Libraries, students and members of the research staff, who may be involved in research at the University and all Research conducted by such individuals, whether or not federally funded, and proposals for such Research, other than Research undertaken in fulfillment of a course requirement (unless there is an expectation of publication or dissemination outside the University of the results of such Research).

Definitions

“*Complainant*”: the individual bringing an allegation of Research Misconduct.

“*Fabrication*”: the making up of data or results and the recording or reporting thereof.

“*Falsification*”: the manipulation of Research materials, equipment or processes, or the change or omission of data or results such that the Research is not accurately represented in the Research Record.

“*Good Faith*”: as applied to a Complainant, Respondent or Witness, includes having a belief in the truth of one’s Allegation or testimony that a reasonable person in any of these roles could have, based on the information known to the Complainant, Respondent or Witness at the time. An Allegation of or cooperation with a Research Misconduct proceeding is not in good faith if made with knowing or reckless disregard for information that would negate the Allegation or testimony. Good faith as applied to a member of the Standing Committee or any *Ad Hoc* Committee or a Preliminary Reviewer includes cooperating with the Research Misconduct proceeding by carrying out the duties assigned impartially for the purpose of helping the University meet its responsibilities under this Policy. A member of the Standing Committee or any *Ad Hoc* Committee or a Preliminary Reviewer does not act in good faith if his/her acts or omissions are dishonest or influenced by personal, professional or financial conflicts of interest with those involved in the Research Misconduct proceeding.

“*Plagiarism*”: the appropriation of another person’s ideas, processes, results or words without giving appropriate credit.

“*Preponderance of the Evidence*”: proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.

“*Research*”: all basic, applied and demonstration research in all fields of knowledge.

“*Research Record*”: the record of data or results that embody the facts resulting from the research inquiry, including, without limitation, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports and journal articles.

“*Respondent*”: the individual who is the subject of an allegation of Research Misconduct.

“*Responsible Academic Officer*”: with respect to any Respondent, the Chair, Dean or Director of the Department, School, Institute, Center or equivalent unit at the University of which such Respondent is a member.

“*Witness*”: any individual who testifies or provides information with regard to an Allegation or whose Research Record is used as evidence during the course of a Research Misconduct proceeding.

Compliance with Laws, Regulations and Policies

The administrative procedures to be followed by the University pursuant to this Policy are, in all cases, subject to the requirements of law. The University will comply with all applicable federal and state laws, regulations and policies with respect to Research Misconduct.

All federal agencies that conduct or support research have been directed to implement the OSTP Policy. To the extent that any Research that is subject to allegations of Research Misconduct was supported by, or is proposed to be supported by, any federal agency that has not implemented the OSTP Policy, or the terms of this Policy are inconsistent with such agency's policy, the terms of such agency's policy shall apply to the administrative processes described herein. Such other terms, if any, will be described in Annexes to this Policy, as amended from time to time.

The Committee on the Conduct of Research

1. The University has formed a special standing committee of Officers of Instruction, Officers of Research, Officers of the Libraries (collectively, the "*Officers*") and students designated The Committee on the Conduct of Research (the "*Standing Committee*") which will be responsible for setting and communicating standards with respect to Research Misconduct and overseeing the administrative procedures relating to the review of any allegation of Research Misconduct.
2. The members of the Standing Committee will be appointed by the Executive Vice President for Research (the "*EVPR*"). The Standing Committee shall have at least eleven members, at least five of whom shall be selected from the Officers and students at the Columbia University Medical Center ("*CUMC*") and at least five of whom shall be selected from the Officers and students of the University other than those at CUMC. The Standing Committee shall include at least one Officer of Research at CUMC, one Officer of Research at a campus of the University other than CUMC, one Officer of the Libraries and one student involved in Research at the University. The EVPR shall appoint one of the members as Chair of the Standing Committee. The Standing Committee members shall have staggered four-year terms which may be renewable.
3. The safeguards described in Section K shall be provided to the members of the Standing Committee, as applicable.

The Making of an Allegation

1. Any individual who has questions with respect to possible Research Misconduct or who is considering making an allegation of Research Misconduct may privately meet with any member of the Standing Committee, any other Officer of Instruction, Officer of Research or Officer of the Libraries or any Officer in the Office of Research Administration or a University Ombuds Officer for advice or to discuss such questions.
2. The University encourages reasonable efforts to be made to resolve issues of alleged Research Misconduct prior to the commencement of formal administrative procedures pursuant to this Policy. If an individual believes that there are grounds for making an allegation of Research Misconduct, such individual may initially so notify the appropriate Responsible Academic Officer, who will use his or her good faith efforts to resolve such individual's concerns informally. The administrative procedures described in this Policy shall not be

applicable to any such informal process.

3. In the event that the concerns of any individual are not resolved informally to the satisfaction of such individual, such individual may make a formal allegation of Research Misconduct (an “*Allegation*”). Any Allegation shall be made in writing and delivered to the Chair of the Standing Committee or the EVPR.
4. An allegation of Research Misconduct may have profound implications for the Complainant, the Respondent and any Witness in a Research Misconduct proceeding and any individual making an allegation of Research Misconduct should take great care in documenting the basis of any charge.

Response to an Allegation of Research Misconduct; Prerequisites for Finding of Research Misconduct

1. A response to an Allegation shall consist of three phases:
 - **Inquiry:** the gathering of preliminary information and fact-finding to assess whether such Allegation has substance and if so, whether an Investigation is warranted (an “*Inquiry*”);
 - **Investigation:** the formal development of a factual record with respect to such Allegation and the examination and evaluation of such record leading to dismissal of the case or a recommendation of a finding of Research Misconduct and/or other appropriate corrective actions (an “*Investigation*”); and
 - **Adjudication:** the formal procedure for reviewing and evaluating the evidentiary record and report of an Investigation and for determining whether to agree with the recommended findings and to impose appropriate corrective actions (an “*Adjudication*”).
2. A finding of Research Misconduct requires the satisfaction of all of the following prerequisites:
 - there has been a significant departure from accepted practices in the relevant research community;
 - the Research Misconduct has been committed intentionally, knowingly or recklessly; and
 - the Allegation is proven by a Preponderance of the Evidence.
3. It is expected that the Complainant, the Respondent and any other person involved in the administrative procedures described in this Policy will act in good faith in participating in such procedures.

The Inquiry Phase

1. Upon receipt of an Allegation, the Chair of the Standing Committee shall (a) notify (i) the Complainant, (ii) the Respondent, (iii) the appropriate Responsible Academic Officer and (iv) if the Allegation involves a Respondent who is an Officer of Instruction, Officer of Research, Officer of the Libraries, student or member of the research staff at CUMC (a “*CUMC Respondent*”), the Executive Vice President for Health Sciences (the “*EVPHS*”) of the filing of the Allegation and the sources thereof and (b) in consultation with members of the Standing Committee, select three or more persons who are Officers of Instruction, Officers of Research, Officers of the Libraries or students (the “*Preliminary Reviewers*”), who may or may not be members of the Standing Committee, to assess the Allegation. In selecting the Preliminary Reviewers, the Chair of the Standing Committee should consider appointing a representative of the Complainant’s and/or the Respondent’s peer group. If the Inquiry subsequently identifies additional Respondents, the Chair of the Standing Committee shall so notify them.

2. On or before the date on which a Respondent is notified of the filing of an Allegation against him/her and at any other time during the Research Misconduct proceeding when additional records or evidence are discovered, the Standing Committee shall promptly take all reasonable and practical steps to obtain custody of all of the Research Record and evidence needed to conduct the Research Misconduct proceeding, inventory the Research Record and evidence, and sequester them in a secure manner, except that where the Research Record or evidence encompasses scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments.
3. The Preliminary Reviewers shall review such evidence and interview such persons as may be necessary to make an assessment of whether the Allegation has substance and whether an Investigation is warranted.
4. The safeguards described in Section K below shall be provided to the Complainant, the Respondent, any Witness and any Preliminary Reviewer, as applicable, during the Inquiry.
5. Upon completion of the Inquiry, the Preliminary Reviewers shall provide the Respondent with a draft written report (the “*Inquiry Report*”) of their findings and recommendation as to whether or not there is sufficient evidence to undertake an Investigation. The Preliminary Reviewers shall also provide the Complainant with copies of those portions of the Inquiry Report relevant to the Complainant. The Respondent and the Complainant may comment on the draft Inquiry Report.
6. Following the review by the Preliminary Reviewers of any comments on the draft Inquiry Report provided by the Respondent or the Complainant, the Preliminary Reviewers shall provide the Standing Committee with a final Inquiry Report.
7. The Standing Committee may accept or reject the recommendation of the Preliminary Reviewers and shall promptly provide the Complainant, the Respondent and the appropriate Responsible Academic Officer with written notification of its decision, indicating in such notification the principal reasons for such decision and a copy of the final Inquiry Report.
8. In general, an Inquiry should be completed within 60 days of its initiation, provided that the Standing Committee may approve one or more reasonable extensions to the extent deemed necessary or appropriate.

The Investigation Phase

1. If, at the conclusion of an Inquiry, the Standing Committee determines that an Investigation is warranted, the Chair of the Standing Committee Columbia University Institutional Policy on Misconduct in Research shall so notify, in addition to the persons listed in Section G.6 above, (a) the EVPR, (b) if the Allegation involves a CUMC Respondent, the EVPHS, and (c) if the Allegation involves federally funded research (or an application for federal funding), the applicable funding agency or agencies (collectively, the “*Funding Agency*”).
2. The Standing Committee shall appoint an *ad hoc* committee (the “*Ad Hoc Committee*”) to conduct the Investigation, which shall consist of at least three members, none of whom is a member of the Standing Committee or served as a Preliminary Reviewer with respect to the Allegation relating to such Investigation and at least one of whom is an expert in the area of research that is the subject of such Investigation. In constituting the *Ad Hoc Committee*, the Standing Committee shall select as members those persons who have the expertise pertinent to the matter and who will carry out the Investigation thoroughly, fairly and

promptly and should consider appointing a representative of the Respondent's or the Complainant's peer group. The Standing Committee may appoint a person who is not affiliated with the University to the *Ad Hoc* Committee if such person has the requisite expertise. The Standing Committee shall select one of the members as the Chair of the *Ad Hoc* Committee.

3. The *Ad Hoc* Committee shall:

- use diligent efforts to ensure that the Investigation is thorough and sufficiently documented and includes the examination of all Research records and evidence relevant to reaching a decision on the merits of the Allegation;
- take reasonable steps to ensure an impartial and unbiased Investigation to the maximum extent practicable;
- interview the Complainant, the Respondent and any other available person who has been reasonably identified as having information regarding any relevant aspects of the Investigation; and
- pursue diligently all significant issues and leads discovered that are relevant to the Investigation.

4. The safeguards described in Section K below shall be provided to the Complainant, the Respondent, any Witness and any member of the *Ad Hoc* Committee, as applicable, during an Investigation.

5. Upon completion of the Investigation, the *Ad Hoc* Committee shall provide the Respondent with (a) a draft written report (the "*Investigation Report*") of its findings and recommendations as to whether or not a finding of Research Misconduct should be made and, if so, what corrective actions would be appropriate under the circumstances and (b) a copy of, or supervised access to, the evidence on which the Investigation Report is based. The *Ad Hoc* Committee shall also provide the Complainant with copies of those portions of the draft Investigation Report that are relevant to the Complainant. The Respondent and the Complainant may comment on the draft Investigation Report, provided that any such comments must be given to the *Ad Hoc* Committee within 30 days of receiving such draft.

6. Following the review by the *Ad Hoc* Committee of any comments on the draft Investigation Report provided by the Respondent or the Complainant, the *Ad Hoc* Committee shall provide the Standing Committee with a final Investigation Report.

7. The Standing Committee may accept, reject or modify the recommendations of the *Ad Hoc* Committee and shall promptly provide the Complainant, the Respondent, the appropriate Responsible Academic Officer, the EVPR and if applicable, the EVPHS and the Funding Agency, with written notification of its decision, indicating in such notification the principal reasons for such decision.

8. In general, an Investigation should be completed within 120 days of its initiation, *provided* that the Standing Committee may approve one or more reasonable extensions to the extent deemed necessary or appropriate.

The Adjudication Phase

1. If the Standing Committee accepts the *Ad Hoc* Committee's recommendation that a finding of Research Misconduct should be made, the EVPR shall review the reports of the *Ad Hoc* Committee and the Standing Committee and shall consult with the appropriate Responsible Academic Officer and, if the Respondent is a CUMC Respondent, the EVPHS. After such review and consultation, the EVPR may accept, reject or modify the recommendations of the Standing Committee and shall promptly provide the Complainant, the Respondent, the appropriate Responsible Academic Officer and, if applicable, the EVPHS and the Funding

Agency with written notification of his/her decision, indicating in such notification the principal reasons for such decision.

2. The safeguards described in Section K below shall be provided to the Complainant, the Respondent, any Witness and any member of the *Ad Hoc* Committee, as applicable, during an Adjudication.
3. In general, an Adjudication should be completed within 60 days of its initiation, provided that the EVPR may approve one or more reasonable extensions to the extent deemed necessary or appropriate.

Appeal

1. A Respondent shall have the right, within 30 days after his/her receipt of the notification of the EVPR's decision with respect to an Adjudication, to file a written appeal with respect to the decision of the EVPR to the Provost of the University as to either the finding of Research Misconduct or the corrective actions imposed. The Provost may affirm, overturn or modify the decision of the EVPR. The decision of the Provost shall be final in all respects with respect to the University and the Respondent shall have no further right of appeal.
2. The Provost shall promptly provide the Complainant, the Respondent, the appropriate Responsible Academic Officer and, if applicable, the EVPHS and the Funding Agency with written notification of his/her decision, indicating in such notification the principal reasons for such decision.
3. In general, an appeal should be completed within 30 days of its filing with the Provost, provided that the Provost may approve one or more reasonable extensions to the extent deemed necessary or appropriate.

Safeguards

1. **Confidentiality:** To the extent possible consistent with a fair and thorough investigation and as allowed by law, knowledge about the identity of a Complainant, a Respondent and any Witnesses shall be limited to those persons identified in this Policy and others who need to know and all written materials and information with respect to any proceedings shall be kept confidential.
2. **Conflicts of Interest:** The Standing Committee shall take reasonable steps to ensure that all individuals responsible for carrying out any part of the administrative procedures described in this Policy do not have unresolved personal, professional or financial conflicts of interest with the Complainant, Respondent or any Witness.
3. **Safeguards for a Complainant:** In addition to any other safeguards provided for in this Policy, the following safeguards shall be provided to a Complainant:
 - If an Allegation has been made by a Complainant in good faith, the University shall ensure that:
 - the Complainant is treated fairly and reasonably;
 - all reasonable and practical efforts are made to protect the Complainant from potential or actual retaliation;
 - the procedures described in this Policy are fair and objective; and
 - diligent efforts are made to protect or restore the position and reputation of the Complainant.

However, in the event that the Standing Committee determines that a Complainant has made an Allegation for malicious reasons, or was otherwise not acting in good faith in making such Allegation, the Committee shall recommend that appropriate action be taken against such Complainant.

- During an Inquiry, the Complainant shall have the right to meet with the Preliminary Reviewers.
- During an Investigation, the Complainant shall have the right:
 - to identify persons who have information regarding any relevant aspects of the Investigation to be interviewed by the Ad Hoc Committee;
 - to be accompanied by counsel for advisory purposes only when appearing before the Ad Hoc Committee; and
 - to obtain a copy of a transcript of his/her own testimony, if any, and to correct such transcript, if necessary.

4. Safeguards for a Respondent: In addition to any other safeguards provided for in this Policy, the following safeguards shall be provided to a Respondent:

- Respondent is assumed not to have committed Research Misconduct unless and until a finding of such has been made in accordance with this Policy and should be protected from penalty and public knowledge of any accusation until judged culpable. The Respondent in turn shall cooperate with the administrative procedures described in this Policy, including by providing information, research records and evidence to the University representatives referred to herein when so requested.
- The University shall not impede the ability of a Respondent to continue to do his/her work, and shall ensure that other disciplinary or adverse action not be taken, during the period of any Inquiry or Investigation unless the EVPR determines that there are compelling reasons to suspend the Respondent's work or take such action during all or a portion of such period.
- During an Inquiry, the Respondent shall have the right:
 - to meet with the Preliminary Reviewers;
 - to have reasonable access to the data and other evidence supporting the Allegation; and
 - to respond to the Allegation orally and in writing.
- During an Investigation, the Respondent shall have the right:
 - to appear before the Ad Hoc Committee to present testimony on his/her behalf;
 - to identify persons who have any information regarding any relevant aspects of the Investigation to be interviewed by the Ad Hoc Committee;
 - to be accompanied by counsel for advisory purposes only when appearing before the Ad Hoc Committee; and
 - to obtain a copy of a transcript of his/her own testimony, if any, and to correct such transcript, if necessary.
- During an appeal, the Respondent shall have the right to review the final Investigation Report.
- The University shall take all reasonable and practical efforts, if requested and as appropriate, to protect or restore the reputation of any Respondent against whom no finding of Research Misconduct is made.

5. Safeguards for Witnesses.

If a Witness has cooperated with a Research Misconduct proceeding in good faith, the University shall ensure that:

- all reasonable and practical efforts are made to protect such Witness from potential or actual retaliation; and
- diligent efforts are made to protect or restore the position and reputation of such Witness.

6. Safeguards for Preliminary Reviewers and Committee Members.

The University shall ensure that:

- all reasonable and practical efforts are made to protect a Preliminary Reviewer or a member of the Standing Committee or any Ad Hoc Committee from potential or actual retaliation; and
- diligent efforts are made to protect or restore the position and reputation of such Preliminary Reviewer or member.

7. Guarantees.

If, as a result of a finding of Research Misconduct, a Respondent with whom a Complainant or Witness works loses funding for his/her research, the University will guarantee the salary, stipend or tuition of the Complainant or Witness, as follows:

- Officers of Instruction: salary in accordance with University statutory provisions;
- Officers of Research: salary or stipend until the later of (x) the last day of the Complainant's or Witness' then current appointment period and (y) the date that is six months after the last day on which the Complainant or Witness was paid from the terminated funding (the "Six-Month Date");
- Other Officers and members of the support staff: salary until the Six-Month Date; and
- Students enrolled in pursuit of a degree: stipend and tuition in accordance with the commitment made to the student by his/her School, subject to the student remaining in good academic standing; provided that any such guarantee will terminate when the Complainant or Witness receives funding from an alternate source or accepts an offer of other employment

8. Corrective Actions and Penalties.

- The purpose of the procedures described in this Policy is remedial. The corrective actions with respect to any finding of Research Misconduct shall be commensurate with the seriousness of the Research Misconduct, including, without limitation, the degree to which the Research Misconduct was knowing, intentional or reckless; was an isolated event or part of a pattern; or had significant impact on the Research Record, Research subjects, other researchers, the University, other institutions or the public.
- No penalty involving dismissal from the University or other serious sanction may become effective except in accordance with the provisions of the University's Code of Academic Freedom and Tenure.

Notification to Funding Agency and Others

1. In addition to the notices to any Funding Agency provided for in Sections H, I and J above, the EVPR shall, during the course of any phase of the administrative procedures provided for in this Policy with respect to an Allegation, notify the Funding Agency if any of the following events shall occur with respect to Research funded by such Funding Agency:
 - if public health or safety is at risk;
 - if the resources or interests of such Funding Agency are threatened;
 - if research activities should be suspended;
 - if there is reasonable indication of possible violations of civil or criminal law;
 - if federal action is requested to protect the interests of those involved in the investigation;
 - if the EVPR believes that the administrative processes may be made public prematurely, so that appropriate steps may be taken to safeguard evidence and protect the rights of those involved; or
 - if the research community or the public should be informed.
2. Upon the completion of the administrative procedures provided for in this Policy, if there has been a finding of Research Misconduct, notification of such will be given to journals and societies to which erroneous,

inaccurate or fraudulent papers or abstracts have been submitted, and to past and present collaborating investigators and other institutions and research agencies with which the Respondent is or was previously affiliated to the extent deemed appropriate by the Standing Committee.

Annex A

Terms Applicable to Research Funded by the Public Health Service of the U.S. Department of Health and Human Services.

This Annex sets forth additional provisions from the Public Health Service (“PHS”) Policies on Research Misconduct (the “PHS Policies”) of the Department of Health and Human Services applicable to Allegations of Research Misconduct involving PHS Research.

Definitions

For purposes of this Annex, the following terms have the meanings set forth below:

“*PHS Research*”: (i) Applications or proposals for PHS support for biomedical or behavioral extramural or intramural research, research training or activities related to that research or research training, such as the operation of tissue and data banks and the dissemination of research information; (ii) PHS supported biomedical or behavioral extramural or intramural research; (iii) PHS supported biomedical or behavioral extramural or intramural research training programs; (iv) PHS supported extramural or intramural activities that are related to biomedical or behavioral research or research training, such as the operation of tissue and data banks or the dissemination of research information; and (v) Plagiarism of research records produced in the course of PHS supported research, research training or activities related to that research or research training.

The Inquiry Phase

The Inquiry Report must include the following information:

- the name and position of the Respondent;
- a description of the Allegation;
- the PHS support, including grant numbers, grant applications, contracts and publications listing PHS support;
- the basis for recommending that the alleged actions warrant an Investigation; and
- any comments on the Inquiry Report by the Respondent or the Complainant.

The Investigation Phase

1. An Investigation must be initiated within 30 days after the Standing Committee’s determination that an Investigation is warranted.
2. The final Investigation Report must include the following information:
 - a description of the nature of the Allegations;
 - a description of the PHS support, including, for example, any grant numbers, grant application, contracts and publications listing PHS support;
 - a description of the specific Allegations of Research Misconduct for consideration in the Investigation;
 - if not already provided with the Inquiry Report, copies of this Policy;
 - a summary of the Research Record and evidence reviewed, and any evidence taken into custody but not reviewed; and

- for each separate Allegation identified during the Investigation, a finding as to whether Research Misconduct did or did not occur and if so:
 - a statement whether the Research Misconduct was Falsification, Fabrication or Plagiarism, and if it was intentional, knowing, or in reckless disregard;
 - a summary of the facts and the analysis which support the conclusion and the merits of any reasonable explanation by the Respondent;
 - a description of the specific PHS support;
 - an indication of whether any publications need correction or retraction;
 - a description of the person(s) responsible for the Research Misconduct;
 - a description of any current support or known applications or proposals for support that the Respondent has pending with non-PHS federal agencies; and
 - any comments made by the Respondent or the Complainant on the draft Investigation Report
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