

Florida Institute for Human and Machine Cognition
Research Integrity & Compliance

Research Misconduct Policy

Integrity in the conduct of research and scholarly activities is essential.

The Florida Institute for Human and Machine Cognition (IHMC) is committed to the highest quality research and scholarly activity as a means to enrich its learning environment and contribute to the research community and broader society. It is the policy of IHMC that all researchers shall adhere to the highest standards of intellectual honesty and ethical conduct throughout the planning, performance and reporting of their research and scholarly activities.

All IHMC employees are expected to adhere to ethical standards and also to report suspected violations of research misconduct to the Chief Executive Officer (CEO), to refrain from retaliation against those who report suspected misconduct, and to cooperate with any resulting research misconduct proceedings. All IHMC researchers, staff and leadership shall respond to allegations in a timely and expedient manner to resolve issues arising from any alleged research misconduct ([42 CFR 93.103](#)).

IHMC researchers, staff, administrators, consultants and affiliates will not engage in research misconduct in proposing, performing, or reviewing research or in reporting research results. All such persons engaged in IHMC research activity will fully comply with federal agency regulations, state ethical statutes, and Institute policies and procedures in conducting research and will report allegations of research misconduct to the CEO for review. IHMC researchers, staff members, and students responsible for the design, conduct, or reporting of research must meet federal and IHMC research misconduct training requirements.

IHMC will foster research integrity by offering research misconduct training to researchers, staff, and students engaged in research activity and informing them of IHMC's policies and procedures regarding responsible conduct in research.

All allegations of research misconduct shall be immediately reported to the CEO for review and appropriate action. The CEO may choose to personally conduct an investigation and make an appropriate decision; may dismiss the allegations as unwarranted; or may appoint and convene a research integrity committee with procedures to conduct an investigation and report back to the CEO who will make the final decision on the allegations.

For purposes of this policy, research misconduct is defined as the fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the academic community for proposing, conducting, or reviewing research

or in reporting research results. It does not include honest error or honest differences in interpretations or judgments of data.

This policy shall apply to any person paid by, under the control of, or affiliated with IHMC (such as, but not limited to, scientists, trainees, technicians, and other staff members, students, fellows, guest researchers, or collaborators) who are engaged in research conducted at IHMC, regardless of the funding source.

When a final decision on the case has been reached, the CEO will notify the researcher of the decision, in writing, and if the CEO determines that the alleged research misconduct is substantiated, the CEO will decide on the appropriate administrative actions to be taken. Such action will be taken in accordance with federal and state regulations and IHMC policies and may include:

- i. Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;
- ii. Removal of the responsible person from the project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction, demotion, or termination of employment; and/or
- iii. Restitution of funds as appropriate.
- iv. For Externally Funded Research and Requirements for Reporting to Agency Sponsors, the CEO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies. IHMC will also take interim administrative actions, as appropriate, to protect state or federal funds and ensure that the purposes of the funding can be carried out. In addition, the CEO will notify the agency sponsor immediately at any stage of the Inquiry or Investigation if: there is an immediate health hazard involved; there is an immediate need to protect Federal funds or equipment; there is an immediate need to protect the interests of the person(s) making the allegations or of the individual(s) who is the subject of the allegations as well as any co-investigators and associates, if any; where it is probable that the alleged incident is going to be reported publicly; where the allegation involves a public health sensitive issue or a clinic trial; or where there is a reasonable indication of possible criminal violation.

General Standards for Inquiries and Investigations. All IHMC employees will cooperate with the CEO and others in the review of allegations and the conduct of inquiries and Investigations. Employees have an obligation to provide relevant evidence to the CEO or other IHMC officials on research misconduct allegations. If the researcher under investigation for alleged research misconduct refuses to participate in the process, while employed or after resignation/termination, the CEO and any convened Committee will use

their best efforts to reach a conclusion concerning the allegations. Additionally, all reports should note the researcher's failure to cooperate and its effect on the final determination.

Cooperation with any external federal Office of Research Integrity. IHMC and its employees shall cooperate fully with any federal agency's Office of Research Integrity, during its oversight review and any subsequent administrative hearings or appeals, including providing all research records and evidence under IHMC's control, custody, or possession and access to all persons within its authority necessary to develop a complete record of relevant evidence.

Protection of Confidentiality. The CEO may establish reasonable conditions for the handling of allegations of research misconduct in order to protect the confidentiality of all involved parties to the greatest extent possible consistent with the laws of the State of Florida and federal law without compromising public health and safety and without impeding the inquiry or investigation. Disclosure of the identity of Researcher and Complainant will be limited to those who need to know in order to carry out a thorough, competent, objective, and fair proceeding. The Complainant will be advised that if the matter is referred to an Inquiry Committee and the Complainant's testimony is required, anonymity may not be guaranteed.

Records maintained for the purpose of an investigation of employee research misconduct shall be confidential to the extent permitted by Florida statutes. Disclosure of records or evidence from which research subjects might be identified shall be limited to those who need to know in order to conduct the inquiry, investigation, and proceeding.

Protection against Retaliation. Regardless of the final decision from the CEO, the CEO will undertake reasonable efforts to protect Complainants that made allegations of research misconduct in good faith and others who cooperate in good faith from acts of retaliation. Upon completion of an investigation, the CEO will determine, after consulting with the Complainant, what steps, if any, are needed to restore the position or reputation of the Complainant. If an allegation was not made in good faith, the CEO will determine whether any disciplinary action, up to and including termination, should be taken against the Complainant.

Restoration of the Researchers Reputation. If IHMC determines that no instance of research misconduct has occurred, the CEO will consult with the researcher and will undertake reasonable efforts to restore the researcher's reputation.

Records Retention. After completion of a case and all ensuing related actions, the CEO will prepare a complete file, including the records of any inquiry or investigation and copies of all documents and other materials furnished to the CEO or Committees hereunder. The CEO is also responsible for maintaining files of all documents and evidence and for the confidentiality and the security of the files to the extent required by individual sponsor

policy and Florida law. For externally funded research, the sponsor agency will be given access to the records upon request.

In addition to all requirements of the funding agency concerning allegations of research misconduct, IHMC will conduct its investigation and final decision and reporting in compliance with all applicable federal and state laws.