

39(3):824–835, 2012 (hereafter referred to as “Paper 2”).

- *Attention, Perception and Psychophysics* 74(5):891–910, 2012 (hereafter referred to as “Paper 3”).
- *Psychological Science* 24(6):929–38, 2013 (hereafter referred to as “Paper 4”).

ORI found that Respondent knowingly falsified data by removing outlier values or replacing outliers with mean values to produce results that conform to predictions. Specifically, these falsifications appear in:

1. Figures 4 and 8 in Paper 1.
2. Figures 3C, 3D, and 3E in Paper 2.
3. Figures 3B, 7C, 7D, and 8B in Paper 3.
4. Figures 3E and 3F in Paper 4.

Mr. Anderson has entered into a Voluntary Settlement Agreement and has voluntarily agreed for a period of three (3) years, beginning on June 23, 2015:

(1) To have his research supervised; Respondent agreed that prior to the submission of an application for U.S. Public Health Service (PHS) support for a research project on which his participation is proposed and prior to his participation in any capacity on PHS-supported research, Respondent shall ensure that a plan for supervision of his duties is submitted to ORI for approval; the supervision plan must be designed to ensure the scientific integrity of his research contribution; Respondent agreed that he shall not participate in any PHS-supported research until such a supervision plan is submitted to and approved by ORI; Respondent agreed to maintain responsibility for compliance with the agreed upon supervision plan;

(2) that any institution employing him shall submit in conjunction with each application for PHS funds, or report, manuscript, or abstract involving PHS-supported research in which Respondent is involved, a certification to ORI that the data provided by Respondent are based on actual experiments or are otherwise legitimately derived, and that the data, procedures, and methodology are accurately reported in the application, report, manuscript, or abstract;

(3) to exclude himself voluntarily from serving in any advisory capacity to PHS including, but not limited to, service on any PHS advisory committee, board, and/or peer review committee, or as a consultant; and

(4) to assist UOE in advising publishers of the need to retract or correct the following papers:

- *Journal of Neuroscience* 31(3):1128–38, 2011.
- *Journal of Experimental Psychology: Human Perception and Performance* 39(3):824–835, 2012.
- *Attention, Perception and Psychophysics* 74(5):891–910, 2012.
- *Psychological Science* 24(6):929–38, 2013.

**FOR FURTHER INFORMATION CONTACT:** Acting Director, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8200.

**Donald Wright,**  
*Acting Director, Office of Research Integrity.*  
[FR Doc. 2015–18794 Filed 7–30–15; 8:45 am]

**BILLING CODE 4150–31–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

**[Document Identifier: HHS–OS–0990–0407–60D]**

**Agency Information Collection Request**

**AGENCY:** Office of the Secretary, HHS.  
**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). A 60-day **Federal Register** Notice has been published for this system. This request is to approve a revision to a currently approved collection with OMB number 0990–0407, and is not a new request for approval.

**DATES:** Comments on the ICR must be received on or before September 29, 2015.

**ADDRESSES:** Submit your comments to *Information.CollectionClearance@hhs.gov* or by calling (202) 690–6162.

**FOR FURTHER INFORMATION CONTACT:** Information Collection Clearance staff, *Information.CollectionClearance@hhs.gov* or (202) 690–6162.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the document identifier HHS–OS–0990–0407–60D for reference.

*Information Collection Request Title:* Think Cultural Health (TCH) Web site Quality Improvement Effort—OMB No. 0990–0407 REVISION–HHS/OS/OMH

**Abstract:** The Office of Minority Health (OMH), Office of the Secretary (OS), Department of Health and Human Services (HHS) is requesting approval by OMB on a revised data collection. The Think Cultural Health (TCH) Web site is an initiative of the HHS OMH’s Center for Linguistic and Cultural Competence in Health Care (CLCCHC), and is a repository of the latest resources and tools to promote cultural and linguistic competency in health and health care. The TCH Web site is unlike other government Web sites in that its suite of e-learning programs affords health and health care professionals the ability to earn continuing education credits through training in cultural and linguistic competency. The revision to this information collection request includes the online Web site registration form, course/unit evaluations specific to the resource or e-learning program course/unit completed, follow up surveys, focus groups, and key informant interviews.

*Need and Proposed Use of the Information:* The data will be used to ensure that the offerings on the TCH Web site are relevant, useful, and appropriate to their target audiences. The findings from the data collection will be of interest to HHS OMH in supporting maintenance and revisions of the offerings on the TCH Web site.

**TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS**

Form name	Type of respondent	Number of respondents	Number responses per respondent	Average burden per response (hours)	Total burden (hours)
Registration Form .....	Health and Health Care Professionals.	9460	1.00	3/60	473
Course/unit Evaluation Form .....	Health and Health Care Professionals.	9460	1.00	5/60	788

## TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS—Continued

Form name	Type of respondent	Number of respondents	Number responses per respondent	Average burden per response (hours)	Total burden (hours)
Follow-Up Survey .....	Health and Health Care Professionals.	4208	1.00	10/60	701
Follow-Up Survey .....	Community Health Workers .....	6	2.00	10/60	2
Focus Groups .....	Health and Health Care Professionals.	15	1.00	120/60	29
Key Informant Interviews .....	Health and Health Care Professionals.	13	1.00	60/60	13
Key Informant Interviews .....	Community Health Workers .....	25	1.00	60/60	25
Total .....	.....	23187	.....	.....	2031

OS specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**Darius Taylor,**

*Paperwork Reduction Act Clearance Officer.*

[FR Doc. 2015-18810 Filed 7-30-15; 8:45 am]

**BILLING CODE 4150-29-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

### Findings of Research Misconduct

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** Notice is hereby given that the Office of Research Integrity (ORI) has taken final action in the following case:

*Julie Massè, Pennsylvania State University (PSU):* Based on an assessment conducted by the Pennsylvania State University College of Medicine (PSU-COM) and the Respondent's admission, ORI and PSU found that Ms. Julie Massè, former postdoctoral scholar, PSU-COM, engaged in research misconduct in research supported by National Cancer Institute (NCI), National Institutes of Health (NIH), grant 4 R00 CA138498.

ORI found that the Respondent knowingly engaged in research misconduct by falsifying and/or fabricating Western blot data and analyses that were including in the following manuscript:

- "Cellular invasion following p120-catenin loss is mediated by AP-1, ITGA2 and MMP11," submitted to *Molecular Cancer Research* (hereafter referred to as the "*Molecular Cancer Research* manuscript").

ORI found that the Respondent knowingly falsified and/or fabricated Western blot images, by manipulating the images to give the desired results, and quantitative PCR data and cell invasion and migration data, which were included in Figures 2, 3, S1, and S2 in the *Molecular Cancer Research* manuscript.

Specifically, ORI found that the Respondent included falsified and/or fabricated data and images in the following figures, and the corresponding text, in the *Molecular Cancer Research* manuscript:

1. Bands were cut and pasted from different Western blots for the following figures:

a. Figures 2A, lanes 2 and 3, for P-cJun (S73)

b. Figure 2D, lanes 4 and 6, bands identified as ITGA2

c. Figure 3B, bands identified as ITGA2 and MMP11

d. Figure 3D, bands identified as ITGA2 and MMP11 for lanes M2Neo- $\uparrow$ ITGA2 control and  $\downarrow$ MMP11

e. Figure 3E, bands identified as ITGA2 and MMP11 for lanes M2KO- $\downarrow$ ITGA2 control and M2KO- $\downarrow$ ITGA2- $\uparrow$ MMP11

f. Figure S1A, bands identified as P-cJun (S73)

g. Figure S2A, bands identified as P-cJun (S73)

h. Figure S2C, bands identified as P-cJun (S73)

i. Figure S2E, bands identified ITGA2 and MMP11

j. Figures S4B and C, identical bands were used for  $\beta$ -actin

2. Numbers were increased or decreased in cell invasion and migration assays to give the desired results in the following figures:

a. Figure 2B, for M2KO-DMSO cells and M2KO-SR11302 cells

b. Figure 3F, for M2Neo- $\uparrow$ ITGA2  $\downarrow$ MMP11

c. Figure 3G, for M2KO- $\downarrow$ ITGA2  $\uparrow$ MMP11

d. Figure S1B, for F2KO-cJun peptide

e. Figure S2B, for F2KO-cJun DMSO and F2KO-cJun SR11302

f. Figure S2D, for F2KO-cJun peptide

g. Figure S2F, for F2Tom- $\uparrow$ ITGA2 and F2KO- $\downarrow$ ITGA2 peptide

h. Figures S4A, B, C, and D, for the migration for M2KO and F2KO cells

3. qPCR numbers were altered in Figure 2C, for M2KO-DMSO-PcJun ChIP and for M2KO-SR11302-PcJun ChIP, to give the desired result of PcJun binding to ITGA2 promoter.

Ms. Massè has entered into a Voluntary Settlement Agreement and has voluntarily agreed for a period of two (2) years, beginning on July 6, 2015:

(1) To have her research supervised; Respondent agreed that prior to the submission of an application for U.S. Public Health Service (PHS) support for a research project on which her participation is proposed and prior to her participation in any capacity on PHS-supported research, Respondent shall ensure that a plan for supervision of her duties is submitted to ORI for approval; the supervision plan must be designed to ensure the scientific integrity of her research contribution; Respondent agreed that she will not participate in any PHS-supported research until such a supervision plan is submitted to and approved by ORI; Respondent agreed to maintain responsibility for compliance with the agreed upon supervision plan;

(2) that any institution employing her shall submit in conjunction with each application for PHS funds, or report, manuscript, or abstract involving PHS-supported research in which Respondent is involved, a certification to ORI that the data provided by Respondent are based on actual