University Policy and Procedures Concerning Research Misconduct

I. POLICY STATEMENT

A. Objectives. The University, in carrying out its research mission, expects and encourages members of the faculty to engage in research and to publish or otherwise disseminate the results of that research. This Policy and Procedures Concerning Research Misconduct (the “Policy”) has been promulgated by the University Research Committee in order to serve two equally important objectives. First, the University wishes to protect both the integrity and the reputation of research and scholarship produced by members of the University community. This Policy shall therefore apply to all research and scholarship conducted within the University community, irrespective of the funding source, if any, which supports the research or scholarship. In addition, the terms “research” and “scholarship” shall be broadly construed, including activities ranging from scientific experimentation to artistic expression to research and scholarship in the humanities. The second objective served by this Policy is to protect the integrity and reputation of the University and its scholars from false or unproven allegations of research misconduct. For this reason, the University assumes that a person accused of research misconduct is innocent of any allegations until the contrary has been established by a final decision reached under this Policy and the applicable disciplinary rules or procedures. The procedures undertaken pursuant to this policy are intended to be investigatory, not adversarial.

B. Jurisdiction. This policy shall apply to all University personnel who may be involved with research activities, including faculty members, staff, students, research associates and fellows, post-doctoral fellows, and other research trainees.

C. Duty to Cooperate. All persons to whom this Policy applies, including those accused of research misconduct, are obligated to cooperate with all proceedings under this policy as well as any subsequent investigations. Such cooperation shall include providing Research Records and other relevant information to the Vice President for Research or his or her designee. While a person accused of research misconduct shall have the duty to furnish Research Records and other relevant information in his or her possession, the accused person shall have no duty to provide oral or written testimony.
D. **Confidentiality.** To the maximum extent possible, within the law and the need to conduct a thorough inquiry, all participants in the process shall keep confidential all information regarding the allegations and any proceedings under this policy until the University process, including any disciplinary action, has concluded and all avenues of appeal under University rules (if pursued) have been exhausted. University officials shall not be required to delay the release of information related to proceedings that are external to the University until the conclusion of such proceedings (e.g., investigations undertaken by a funding entity), if such a release is deemed necessary. The goal of maintaining confidentiality shall not prohibit University officials from consulting, on a confidential basis and to the extent necessary, with persons outside the University community with relevant experience or expertise necessary to thoroughly investigate the allegations. The Vice President for Research shall be the University official responsible for determining when a release of information is necessary or appropriate. In any case in which release of information outside the University is deemed necessary, the person accused of research misconduct shall be so informed in advance of the release. Releases of information may be required by law, by the rules of or contract with the funding entity, by the need to inform the research community of the conclusions reached in order to protect the integrity of the research involved, or as part of a disciplinary sanction imposed. When the research involves patients or clients, it shall be permissible to share information with such patients or clients to the extent necessary to protect their legitimate interests. Disclosure may also be made at the request of the person accused of research misconduct. If documents concerning the alleged research misconduct are properly disclosed, University officials may briefly comment in connection with such disclosure. If confidentiality is breached improperly, University officials shall take reasonable steps to minimize the damage to reputations that may result from inaccurate or untimely reports.
II. ADMINISTRATION

A. Responsibility. The Vice President for Research shall be responsible for handling all allegations of research misconduct. The Vice President for Research shall keep the Executive Vice President for Academic Affairs and Provost fully informed during the progress of any investigation. The Office of the Vice President for Research shall make this Policy and other materials concerning research misconduct that Office may produce readily available to all University personnel who are involved with research activities.

B. The Coordinator. The Vice President for Research shall designate a Coordinator to assist in administering this policy. The person appointed as Coordinator shall not be University counsel acting in that capacity; the Coordinator shall, however, consult with University counsel to ensure that the requirements of law and University policy are being satisfied. The Coordinator, in addition to assisting generally in administering the process of the inquiry or any subsequent investigation, shall:

1. Advise members of the University community in response to requests for information or informal consultation concerning research misconduct;

2. Keep the Vice President for Research informed of any allegations filed and the progress of any inquiry or investigation undertaken;

3. Work with and advise the various University officials and committees involved in the inquiry and/or any subsequent investigation or disciplinary action. The Coordinator shall offer advice regarding University rules and policies governing the process;

4. Assist the appropriate officials and committees in carrying out the inquiry and/or any subsequent investigation, including assembling evidence and conducting interviews;

5. Attempt to achieve consistency and fairness in such inquiries and investigations;

6. Be responsible for communications with any person or organization outside the University having a legitimate interest in the case, including any funding agency;

7. Notify federal funding entities if he/she, along with the Vice President for Research, believes that any of the following conditions exist:
a. Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
b. Federal resources or interests, including funds or equipment, are threatened;
c. Research activities should be suspended;
d. There is indication of possible violations of civil or criminal law;
e. Federal action is required to protect the interests of those involved in the research misconduct proceeding;
f. The institution believes the research misconduct proceeding may be made public prematurely so that the federal oversight agency may take appropriate steps to safeguard evidence and protect the rights of those involved; or
g. The research community or public should be informed.

8. Refer the matter to the appropriate University authorities and cooperate with and assist in coordinating any related actions or inquiries when, in the course of an inquiry or subsequent investigation, other University policies are implicated, such as those involving the use of human subjects, the use and care of laboratory animals, the use and care of hazardous substances, conflicts of interest, and consulting;

9. Maintain objectivity regarding the veracity of the allegations throughout the proceedings. The Coordinator shall serve as a neutral facilitator, and shall not assume the role of a prosecutor or judge; and

10. File an annual report with the Office of Research Integrity (ORI), which contains information specified by ORI on institutional compliance with federal regulations on Research Misconduct.

C. Administrative Actions. The Vice President for Research may, during proceedings under this policy or any subsequent investigation, take whatever administrative actions that are in his or her judgment appropriate to protect research funds or equipment or the legitimate interests of patients or clients. Such administrative actions shall not be deemed disciplinary in nature, and may include “stop work” orders, termination of research agreements, locking university laboratories, or other appropriate measures, as needed to ensure the integrity of the investigation.
III. DEFINITIONS

A. Research Misconduct. “Research Misconduct” means Fabrication, Falsification or Plagiarism in proposing, performing, or reviewing research, or in reporting research results.

1. A finding of Research Misconduct requires:
   a. That there be a significant departure from accepted practices of the relevant research community; and
   b. The misconduct be committed intentionally, knowingly, or recklessly; and
   c. The allegation be proved by a Preponderance of the Evidence.

2. Research Misconduct does not include honest error or differences of opinion.

B. Frivolous Allegations. “Frivolous Allegations” are those allegations that are made in bad faith or with malice, are unsupported by credible evidence, and which are found to be without merit. Allegations of research misconduct are serious charges and should be supported by sufficient credible evidence. Filing frivolous allegations is an abuse of the procedures set forth in this Policy, and may result in disciplinary action under other University rules or procedures.

C. Complainant. “Complainant” shall refer to the person who in good faith makes an allegation of research misconduct, including those persons who make allegations through the University Anonymous Reporting Line.

D. Allegations. “Allegations” shall refer to an allegation of Research Misconduct received through any means of communication that triggers the procedures described by this policy.

E. Fabrication. “Fabrication” is making up data or results and recording or reporting them.

F. Falsification. “Falsification” is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

G. Plagiarism. “Plagiarism” is the appropriation of the ideas, processes, results, or words of another person, without giving appropriate credit.
H. *Preponderance of the Evidence.* “Preponderance of the Evidence” means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.

I. *Research Records.* “Research Records” means any data or results that embody the facts resulting from scholarly inquiry. A research record includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; correspondence; videos; photographs; X-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; consent forms; medical charts; and patient research files.

J. *Respondent.* “Respondent” shall refer to a person or persons accused of research misconduct.
IV. PROCEDURES

A. The Allegation. An allegation of research misconduct may be filed by anyone, whether associated with the University or not. Such allegations may be filed with the Dean of a College, with the Executive Vice President for Academic Affairs and Provost, with the Vice President for Research, or with the University Anonymous Reporting Line. Informal requests for information or consultation concerning research misconduct will not, in and of themselves, be construed as formal charges of misconduct. Individuals are encouraged to consult initially with a supervisor, department chair or dean or with The Office of Research before bringing research misconduct allegations. Accusations of research misconduct are serious allegations. A Complainant should file allegations only when he/she is confident that sufficient credible evidence supports the accusation. Anyone receiving allegations shall immediately refer them to the Office of the Vice President for Research for further action as provided in this Policy. If allegations are made against more than one individual, a separate decision shall be reached regarding each individual.

B. Preliminary Assessment. When allegations are filed with, or referred to, the Office of the Vice President for Research, the Dean of the College in which the Respondent is employed, together with the Coordinator, shall conduct a preliminary assessment to determine if the allegation fits within the definition of Research Misconduct in this Policy and if the allegation is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. A Preliminary Assessment will also be conducted by the Dean and the Coordinator if the federal Office of Research Integrity (ORI) or the Office of the Inspector General of the National Science Foundation (OIG), or other federal or state regulatory oversight agency forwards an allegation to the institution for that purpose.

1. The Assessment. The Dean and Coordinator shall investigate the information or circumstances giving rise to the alleged research misconduct. They shall consult, confidentially, with the chair of the department involved, unless the chair is implicated in the allegations; they may further consult, confidentially, with University counsel, the Respondent, and others in the university community with relevant experience or expertise. The Dean and Coordinator should normally complete the Preliminary Review within one week of receiving an allegation. If the Respondent is consulted during the Preliminary Review, he/she shall be given an opportunity to review the allegation and to consult
with legal counsel (not University counsel) or other advisors, if he/she desires, prior to discussing the allegation with the Dean and/or Coordinator.

2. **Protecting Data.** The Dean shall take immediate action to protect data or other materials relevant to the accusation. The Dean shall have authority to promptly locate and secure the originals of all Research Records and other relevant materials if he/she believes such may become relevant in the course of an inquiry or an investigation of alleged research misconduct. Supervised access to the Research Records and other materials shall be provided to the investigative bodies looking into the allegation, to the Respondent, and any other person who has a legitimate reason, which is related to the investigation, to have access.

3. **Allegations that Fail to Indicate Possible Misconduct.** If the Dean and Coordinator find that an allegation does not fit within the definition of Research Misconduct in this Policy, or the allegation is not sufficiently credible or specific so that potential evidence of Research Misconduct may be identified, the Dean shall dismiss the allegation in writing. The Dean shall notify in writing the Vice President for Research and the Complainant of such dismissal. The dismissal shall be a final determination of the allegation unless, within one week of receiving the dismissal, the Complainant appeals in writing to the Vice President for Research. The Vice President for Research should reach a decision on the appeal within one week of receipt whether to affirm the dismissal or to send the allegation to a Committee of Inquiry. The decision of the Vice President for Research shall be final. If an allegation has been dismissed but may constitute a valid complaint under other University rules, the Coordinator shall direct the Complainant to the appropriate University authority.

4. **Allegations Indicating Possible Misconduct.** If the Dean and Coordinator determine that the allegation fits within the definition of Research Misconduct in this Policy and is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified, the Coordinator shall reduce the allegation to writing. The Dean shall then notify the Respondent of the misconduct allegation, provide the Respondent with the written description of the allegation. The Dean and Coordinator shall meet with the Respondent to inform him/her of the following:
a. the allegation, in detail, and the procedures for handling such allegations detailed herein;

b. the obligation under this policy to cooperate with the investigation process and to provide documentary evidence requested; and

c. the serious nature of the allegations, the consequences that could result, and the possible desirability of consulting legal counsel or other appropriate advisors regarding the matter. The Respondent should be informed that University counsel serves as an advisor to the University and cannot render advice to the Respondent, but that the Respondent may obtain his or her own legal advisor at any time during the proceedings established by this Policy.

C. Initial Inquiry. If the Dean and Coordinator or the Vice President for Research determine under Section IV.B.3 or 4 of this Policy that the allegation indicates possible research misconduct, an Initial Inquiry shall be immediately initiated. The purpose of the Initial Inquiry is to conduct preliminary information-gathering and preliminary fact-finding to determine if an allegation or apparent instance of research misconduct has substance. If an allegation has substance, then an investigation is warranted under the disciplinary rules of the University.

1. The Committee of Initial Inquiry. The Vice President for Research shall form a Committee of Initial Inquiry. The size of the Committee shall depend upon the estimated complexity of the case. The Committee shall be composed of at least one member of the University Research Committee (to be chosen in consultation with the Chair of that Committee), one member to be chosen by the Dean of the College in which the Respondent is employed, and a member of the Senate Committee on Academic Freedom and Responsibility (to be chosen in consultation with the Chair of that Committee). In making appointments to the Committee, the Vice President for Research shall attempt to appoint persons able to provide relevant academic expertise. If The Vice President for Research determines that the complexity of the case requires that the Committee be larger than three voting members, additional members shall be chosen from the University Research Committee, in consultation with the Chair of that Committee. If the allegations of research misconduct implicate the interests of a graduate student, the Vice President for Research in consultation with the Dean of the Graduate School shall appoint a
representative of the Graduate School to the Committee. If the Vice President for Research decides that further special expertise would be appropriate to assist the Committee, one or more experts from disciplines appropriate to the particular case, from either within or outside the University, may be added to the Committee as non-voting consultants. The Vice President for Research shall appoint a chair of the Committee. The Coordinator shall serve as a neutral advisor to the Committee to assist in facilitating the Inquiry and advising the Committee as to issues of process and procedures; the Coordinator shall have no vote on the decisions reached by the Committee and shall not influence discussions concerning whether the case has substance. The Chair shall inform the Respondent in writing of the names of those appointed as Committee members and as consultants. The Respondent may, within one week of receiving the names of Committee members and consultants, file a written objection with the Chair. Such objection may be based on the grounds of a lack of the requisite expertise (in the case of a consultant) or a possible conflict of interest (of Committee members or consultants). The Chair shall promptly rule on such objections and, if they are found to have merit, the Committee shall be reconstituted to avoid the problem.

2. **The Inquiry.** The Committee shall collect and review preliminary evidence and interview individuals having relevant information, including the Respondent, which supports or refutes the allegations, with the objective of determining whether the allegation has substance. The Respondent shall be kept informed of the evidence and the substance of the interviews and shall be furnished with or have access to copies of all documentary evidence. However, the Respondent shall not have the right to be present when witnesses are interviewed or to question such witnesses at this stage of the proceeding. When the Respondent is interviewed, he or she may be accompanied by legal counsel or other advisor, but the role of such person in the process shall be limited to advising the Respondent. The Respondent may submit any relevant evidence for consideration by the Committee.

3. **Scope.** During the Initial Inquiry, additional information may emerge that justifies broadening the scope of the inquiry beyond the initial allegation. By majority vote of the Committee, the scope of the inquiry may be broadened when the additional evidence relates directly to the instance of research
misconduct currently being investigated. The Respondent must be promptly informed in writing of any such decision and of the nature of the broadened scope.

4. **Preliminary and Final Reports.** When the Committee has reached a conclusion on whether or not the allegations have substance, it shall prepare a preliminary report that sets forth the name and position of the Respondent, a description of the allegation, a description of any known federal research support, the names of Committee members and any non-voting consultants, a list of the documentary evidence reviewed, summaries of any interviews, and the basis for finding or not finding that the allegation has substance, as well as the determination by the Committee whether an investigation is warranted under the disciplinary rules of the University. If the Initial Inquiry took more than 60 days to be completed, the preliminary report must document the reasons for delay. The preliminary report shall be provided to the Respondent and Complainant. This preliminary report should ordinarily be made within four weeks of the constitution of the Committee. The Respondent may, within two weeks of receiving the preliminary report, file with the Committee a written response. If such a response is filed, the Committee shall reconsider its conclusion in light of the response and issue a final written decision, normally within ten days of receiving the response. That decision, along with copies of the preliminary report and the written response of the Respondent, shall constitute the final report and shall be forwarded to the Vice President for Research, Respondent, and Complainant.

5. **Allegations Having Insufficient Substance.** If the Committee determines in its preliminary report that the allegations do not have sufficient substance to warrant an investigation under the disciplinary rules of the University, the case shall be dismissed, unless, within one week of receiving the final decision, the Complainant appeals that determination in writing to the Vice President for Research. Within one week of receiving the appeal, the Vice President for Research shall rule on the appeal and provide written notice of his or her decision to the Committee, Respondent, and Complainant. If the Vice President for Research affirms the decision of the Committee, the case shall be dismissed. The Vice President may not reverse the decision of the Committee but may refer the matter back to the Committee for reconsideration. Such reconsideration shall normally be concluded within one
week of the decision of the Vice President. A written notice of the conclusion reached after reconsideration shall be provided to the Respondent and Complainant. If the Committee decides upon reconsideration that the case shall be dismissed, that decision shall be final.

6. **Allegations Having Sufficient Substance.** If the Committee determines in its final report that the allegations have sufficient substance to warrant an investigation under the disciplinary rules of the University, the Respondent may appeal this decision in writing to the Vice President for Research within one week of receiving notice of the decision. Within one week of receiving the appeal, the Vice President for Research shall rule on it and provide written notice of his or her decision to the Committee, Respondent, and Complainant. The Vice President may not reverse the decision of the Committee but may refer the matter back to the Committee for reconsideration. Such reconsideration shall normally be concluded within one week of the decision of the Vice President. A written notice of the conclusion reached after reconsideration shall be provided to the Respondent and Complainant. If the Committee decides upon reconsideration that the case shall be dismissed, that decision shall be final. If the Vice President for Research denies the appeal, the Committee Chair shall refer the case, the final report of the Committee, and all relevant supporting evidence to the appropriate disciplinary body.

D. **Report to Sponsor.** If the Committee has determined in its final report that an allegation has sufficient substance to warrant an investigation under the disciplinary rules of the University, the Coordinator shall inform any sponsoring entity of the allegations as required by contract or law and shall keep the entity informed as appropriate. If the allegation involves Public Health Service (PHS) or National Science Foundation (NSF) funded research, the Coordinator must provide written notice to the ORI (for PHS-funded research), to the OIG for NSF-funded research, or to any other applicable federal regulatory agency. Others affected by the allegations, such as co-authors or co-investigators, shall be informed of the proceedings.

E. **Investigations.** When a Committee of Inquiry determines that the allegation has substance so as to warrant further investigation, such investigation and any disciplinary sanctions, if necessary, will be handled under the appropriate university practice or policy: for faculty, under University Rule 3335-5-04; for graduate students, by the Graduate School under the Policy on the Investigation of Allegations
of Research Misconduct; for undergraduate students, by the Committee on Academic Misconduct under the Code of Student Conduct; and for staff, by the supervisor of the employing unit of the Respondent, in consultation with the Office of Human Resources department of Consulting Services.

F. Proceedings under University Rule 3335-5-04 shall begin with the College Investigation Committee referenced in Rule 3335-5-04E. All such investigations shall comply with University policy and practice, as well as with this policy, and shall include the elements set forth below.

1. **Role of Coordinator.** The Coordinator shall serve as an ex officio advisor in any investigation of the research misconduct to enable the fulfillment of his or her duties as set forth in this policy.

2. **Time Requirements.** The investigation shall commence within 30 days after completion of the inquiry. The investigation shall conclude within 120 days of its commencement or such time as required by federal law. If an investigation cannot be completed within this time period, the Coordinator shall submit a written request for an extension to the relevant oversight agency or funding entity, if required to do so by law or contract. The request shall explain the reasons for delay, and include an interim report on the progress of the investigation and an estimated completion date.

3. **Conduct of Investigation.** The investigation shall include an examination of all the documentation; and interviews, when possible, of the Respondent, the Complainant, and others who may have information concerning relevant aspects of the case. Investigation summaries shall be provided to those interviewed for comment, and shall be included in the investigation file. The individual or entity responsible for investigating the allegations shall secure any appropriate expertise such investigator(s) deems necessary to ensure a thorough evaluation of the evidence.

4. **Custody of Records.** To the extend that the institution has not already done so at the Preliminary Assessment or Inquiry stages, the Coordinator shall obtain custody of and sequester in a secure manner all research records that have become known and/or are relevant to the investigation.
5. *Investigation Reports.*

a. A Preliminary Investigation Report shall be prepared by the investigative committee and include the following: a description of the allegations of research misconduct; a description of any federal research support; the name of the Respondent, the names of the Investigative Committee and any consultants; a list of the documentary evidence reviewed and interview summaries; and a statement of the findings, the conclusions reached, and the recommended sanctions. The Preliminary Investigation Report shall be forwarded to the Respondent, the Complainant, and the Vice President for Research.

b. The Respondent shall be provided with a copy of the Preliminary Investigation report and concurrently a copy of, or supervised access to, the evidence on which the report is based. The Respondent shall have 30 days from the date he/she receives a copy of the Preliminary Investigation Report and a copy of, or access to the evidence, to provide written comments on the Preliminary Investigation Report.

c. A Final Investigation Report will be prepared and consist of the Preliminary Investigation Report, the comments of the Respondent and Complainant, if any, and any additional findings of the investigative committee. The Final Investigation Report shall be forwarded to the Respondent, the Complainant, and the Vice President for Research. The Vice President for Research shall forward the report to the relevant oversight agency or funding entity.

6. *Sanctions.* Appropriate sanctions shall be imposed by the University when a Final Investigation Report finds that research misconduct has occurred. Sanctions shall be commensurate with the severity of the research misconduct.
V. MISCELLANEOUS MATTERS

A. Alternative Resolution. At any stage of the proceedings under this policy, and acting consistently with any requirements of the relevant oversight agency or funding entity, the Coordinator may attempt to resolve the matter to the satisfaction of all involved parties. The Coordinator shall prepare a written report describing any such resolution, which shall be provided to the Vice President for Research, Respondent, Complainant, the Committee, and, if required by law or contract, to the relevant oversight agency or funding entity. Any such resolution must be approved by the Vice President for Research. If an Initial Inquiry or a subsequent investigation is terminated without full compliance with the regulations of any relevant oversight agency or funding entity, the Vice President for Research shall notify the entity and provide a report describing the reasons for such termination.

B. Coordination with other University Entities. In the course of an inquiry or subsequent investigation, information or evidence may implicate other University policies such as those dealing with the use of human subjects, the use and care of laboratory animals, the use and care of hazardous substances, conflicts of interest, and external professional activities. In such cases, the Coordinator shall refer the matter to the appropriate University authority for consideration under the applicable policy and shall work with such authorities to coordinate the handling of the matter.

C. Deadlines. Due to the sensitive nature of allegations of research misconduct, each case shall be resolved as expeditiously as possible. The nature of some cases may, however, render normal deadlines difficult to meet. If at any time an established deadline cannot be met, a report shall be filed with the Vice President for Research setting out the reasons why the deadline cannot be met and estimating when that stage of the process will be completed. A copy of this report shall be provided to the Respondent.

D. Conflicts of Interest. At each stage of handling an inquiry or subsequent investigation, all persons involved shall be vigilant to prevent any real or perceived conflict of interest, or personal conflicts or relationships between colleagues, from affecting the outcome of the proceedings and resolution of the allegations. Possible conflicts of interest may include co-authorship of work with the Respondent involved with the alleged research misconduct, or professional or personal relationship with the Respondent beyond that of mere friends or colleagues (e.g., current or former student or mentor, direct supervisory or subordinate job relationship, or
marital/partner relationship. The subordinate relationship of a Respondent to his/her Dean or Chair alone shall not constitute a perceived or actual conflict of interest under this Policy). If such relationships are present, the individual shall recuse himself or herself from any investigative or decisional role in the case. If any prospective Committee member or consultant at any point in the process presents or develops a conflict of interest, that Committee member or consultant shall be replaced by another appointee of the appointing authority. If the Dean or Coordinator has a conflict of interest, the Vice President for Research shall designate a different person to handle that case. If either of the Vice President for Research or the Executive Vice President for Academic Affairs and Provost has a conflict of interest, the President of the University shall designate a replacement. Conflicts of interest on the part of deans or department chairs shall be dealt with by the Vice President for Research. If it becomes necessary to appoint a replacement during the course of the process, the new appointee shall be fully informed regarding earlier procedures and evidence secured, but it shall not be required that any of the process commence anew.

E. The Record. The official University record of the case shall include all reports, electronic recordings, computer files, documentary evidence or other relevant matter collected and used by the Committee. In cases disposed of after a preliminary review or an initial inquiry, the official University record shall be kept in the files of the Vice President for Research; in cases that proceed to a subsequent investigation, the official University record shall be kept for faculty in the files of the Executive Vice President for Academic Affairs and Provost, for staff in the files of the Vice President for Human Resources, and for graduate students in the files of the Dean of the Graduate School, with a copy in the files of the Vice President for Research. All such records shall be kept confidential to the maximum extent permitted by law, by the need to conduct a thorough inquiry, and to protect the interest of the University in the integrity of its research. The official University record shall be kept for a minimum of ten years.

F. Termination of Employment. If a Respondent terminates employment at the University before the case is resolved, the proceedings under this policy shall continue, to the extent possible, until a final conclusion is reached.

G. Correction of Erroneous Research. If culpable research misconduct has been found under this Policy and erroneous research has been published, the Respondent shall have an obligation to work with the University and any other scholars or publishers
involved to correct the published record and to rectify the situation to the extent possible. If no culpable research misconduct has been found but seriously erroneous research has been published, the University, working with the scholars involved, shall seek to correct the published record and to rectify the situation to the extent possible.

H. *Evidence of Criminal Conduct.* If anyone involved in an inquiry or subsequent investigation becomes aware of a possible violation of criminal or civil law, he or she shall inform the Vice President for Research. If the Vice President for Research agrees that reasonable indications of possible criminal conduct exist, the Vice President shall, within 24 hours, inform the sponsoring agency (if required) and appropriate law enforcement officials.

I. *Time Limitations.* This policy applies only to research misconduct occurring within six years of the date the University or a federal sponsor or oversight agency receives an allegation of research misconduct. Exceptions to the six-year limitation include the following:

1. **Subsequent Use.** The Respondent continues or renews any incident of alleged research misconduct that occurred before the six-year limitation through the citation, republication or other use by the Respondent of the research record that is alleged to have been fabricated, falsified, or plagiarized.

2. **Health or safety of the public exception.** If the University, following consultation with federal sponsor or oversight agency, determines that the alleged research misconduct, if it occurred, would possibly have a substantial adverse effect on the health or safety of the public.

3. **“Grandfather” exception.** If the federal sponsor or oversight agency or the University received the allegation of research misconduct before the effective date of this part.

J. *Reopened Cases.* Any case that has been closed due to a finding that research misconduct did not occur may be reopened and a new inquiry commenced only if, in the opinion of the Vice President for Research, new and potentially significant information of research misconduct, not previously considered, has been presented.

K. *Rehabilitation.* In any case in which a Respondent is found not to have committed research misconduct, any reference to the case shall be removed from the files of the University including the personnel file of the Respondent, except that an official file shall be kept by either the Executive Vice President for Academic Affairs and Provost or by the Vice President for Research, as provided for in E above. The Vice
President for Research or Coordinator shall be responsible for exercising reasonable efforts to accomplish such removal. The University shall also work with the Respondent to rectify any injury done to the reputation of Respondent, including, with the permission of the Respondent, release of a press announcement of the results of the investigation. The steps to be taken to accomplish rehabilitation of the Respondent, including any requested economic rehabilitation, shall be at the discretion of the Vice President for Research.

L. *Retaliation.* University officials shall diligently attempt to protect the positions and reputations of good faith Complainants, witnesses, and committee members and protect them from retaliation by the Respondent and others. Documented retaliation by the Respondent or other University employee against good faith Complainants, witnesses or committee members shall result in disciplinary action under appropriate University rules or procedures.