Webster University Policy on Research Misconduct

Policy Information
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Responsible Unit: Office of Academic Affairs, Office of Research and Sponsored Programs
Related Procedures: Procedures for Preliminary Assessment of Allegations and Conducting the Research Misconduct Inquiry; IRB Non-Compliance Policy, Procedures to be Followed in Cases Where Administration has Brought Charges which May Result in Suspension, Loss of Pay or Dismissal of a Faculty Member procedures; Academic Honesty Policies; Staff Termination Policies
Appendices: Protocol for Handling Physical Evidence in Research Misconduct Cases

Reasons for Policy
This policy and the associated procedures are intended to apply to research, defined here as focused academic inquiries that employ rigorous investigation and/or experimentation to increase scholarly understanding of the involved discipline, in order to:

- foster a research environment that promotes the responsible conduct of research;
- discourage research misconduct;
- respond promptly and appropriately to allegations and evidence of research misconduct in relation to externally sponsored research;
- carry out this institution’s responsibilities under Public Health Service (PHS) regulations promulgated at 42 C.F.R. § 93 and National Science Foundation (45 C.F.R. § 689);
- ensure that allegations of research misconduct are addressed in a thorough, competent, objective, and fair manner.

Policy Statement
Webster University expects academic integrity from its employees and students at all times and in all circumstances. University employees may not engage in actions that constitute research misconduct in research or other scholarly activity.
Employees and students who are involved in research and scholarly activity under the aegis of the University must adhere to Webster University Academic Honesty Policies:
http://www.webster.edu/faculty/faculty_resource_guide/policies/academic_honesty_policies.html
http://www.webster.edu/student-handbook/conduct.html#Honesty

Employees and students must also cooperate with the assessment and review of any allegation related to this policy.

If an allegation of research misconduct is made in relation to externally sponsored research, the Research Integrity Officer for the University pursuant to federal regulations will coordinate the review in the following stages:

1. an allegation assessment to determine if the policy applies and if the allegation is sufficiently specific to warrant review;
2. if appropriate, an inquiry to determine whether the allegation or related issues warrant further investigation;
3. when warranted, an investigation to thoroughly examine evidence; and
4. a finding and appropriate personnel action. If the investigation results in a finding of misconduct and a personnel action against the respondent, the respondent may request a formal hearing by following other University employment policies and procedures, as applicable.

Retaliation

No one will retaliate against individuals who acted in good faith in reporting or providing information about suspected or alleged misconduct. When a complaint has been brought in good faith, even if mistakenly, the University will provide appropriate support to the reporting employee. Individuals who provide information to assist in resolving of a complaint are also protected. Individuals engaging in acts of retaliation are disciplined according to the appropriate University policies.

Students

Scholastic dishonesty by a student in the performance of academic work is a violation of the Academic Honesty Policy found in the Undergraduate and Graduate Student Catalogues. Complaints of alleged academic dishonesty will be resolved in accordance with those policies. In cases where a student is accused of misconduct while working on externally sponsored University research, the question of whether research misconduct occurred will be determined according to this policy and the sponsor’s regulations. Decisions, discipline, or other determinations of misconduct may be made regarding students in accordance with any of the established policies, if applicable.

Notification and Reporting Requirements

Many sponsors, including the National Science Foundation (45 C.F.R. § 689) and the Public Health Service (42 C.F.R. § 93) have published regulations regarding the inquiry and investigation of allegations of misconduct involving activities they are considering for funding or have already funded. These regulations contain requirements to report to these sponsors under certain conditions and at specified stages in the process. The Research Integrity Officer (RIO) for the University prepares and submits any
required notifications or reports and for Public Health Service proposals and awards, the RIO will also work with the Public Health Service Office of Research Integrity to assure compliance. If there is a reasonable indication of possible criminal violations, the RIO, in consultation with the Deciding Officer, notifies the appropriate office of the sponsoring agency and the appropriate law enforcement officials.

**Interim Administrative Action**

As provided by federal regulations (42 C.F.R., part 93 and 45 C.F.R., part 689), at any stage in the process of inquiry, investigation, formal finding, and disposition, the University may take interim administrative action to protect federal funds.

**Confidentiality**

Research misconduct cases are confidential proceedings and information about them is released only to those individuals with a need to know in order to perform their job duties. Further, all participants in any stage in the process of inquiry, investigation, formal finding, and disposition must maintain the confidentiality of any records or evidence from which research subjects might be identified, disclosing such information only to those who have a need to know to carry out any of these proceedings.

**Responsibility to Report Misconduct**

All employees or individuals associated with Webster University should report observed, suspected, or apparent misconduct in science to the Research Integrity Officer. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may contact the RIO at researchintegrity@webster.edu to discuss the suspected misconduct informally.

**Restoration of Reputations**

Webster University will make diligent efforts, as appropriate, to restore the institutional reputations of individuals alleged to have engaged in misconduct when such allegations are not sustained in such a way that is consistent with all provisions of this policy.

**Maintenance and Custody of Research Records and Evidence**

The University will strive to maintain adequate records of all proceedings relating to allegations of research misconduct and take steps to collect and preserve evidence utilized for such proceedings. (See Protocol for Handling Physical Evidence in Research Misconduct Cases). Unless later deemed irrelevant, the records that the University secures for proceedings under these policies and procedures will be retained for at least 7 Years.

**Definitions**

**Allegation**: Any written or oral statement or other indication of possible research misconduct made to an institutional official, including department chairs, deans, the Vice Provost and the Provost.
Complainant: Individual(s) who submits an allegation of research misconduct.

Deciding Officer: (Provost) The individual responsible for invoking any sanctions or disciplinary actions imposed as a result of the investigation committee’s findings. The Deciding Officer is also involved with the Research Integrity Officer and relevant deans in receiving allegations of research misconduct and receiving the results of research misconduct investigations. The Deciding Officer makes all determinations related to any appeals of the findings of research misconduct investigations.

Good Faith: As applied to a complainant or witness, means having a belief in the truth of one’s allegation or testimony that a reasonable person in the complainant’s or witness’s position could have based on the information known to the complainant or witness at the time. An allegation 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.

Inquiry: Preliminary fact-finding to determine whether there is sufficient evidence to warrant an investigation.

Investigation: The process to analyze all relevant information regarding the allegation and then determine whether sufficient evidence exists to find that research misconduct occurred.

ORI: The Office of Research Integrity, the office within the Department of Health and Human Services (DHHS) that is responsible for the addressing research integrity and misconduct issues related to PHS supported activities.

PHS means the U.S. Public Health Service, an operating component of the DHHS.

Preponderance of the evidence means proof by information that, compared with that evidence opposing it, leads to the conclusion that the fact at issue is more probably true than not.

Sponsor means any external entity, including, but not limited to, a company, agencies of the U.S. federal and state governments, foundations, industry association, and others, that supports the scholarly research upon which the allegation is based.

Research: Focused academic inquiries that employ rigorous investigation and/or experimentation to increase scholarly understanding of the involved discipline.

Research Integrity Officer (RIO) means the institutional official who is responsible for assessing allegations of research misconduct, determining when such allegations warrant inquiries, ensuring appropriate communication with research sponsors, overseeing inquiries and investigations, and accepting or rejecting the recommendations of the Inquiry/Investigation committee. The Vice Provost is the RIO for Webster University.

Research Misconduct: Fabrication, falsification, or plagiarism, in proposing, performing, reviewing research, or reporting research results. Research misconduct also includes other practices that seriously deviate from those that are commonly accepted within the scientific community including abuse of confidentiality or other fraudulent actions in proposing, performing, reviewing, or reporting the results
of research or other scholarly activity. It does not include honest error or honest differences in interpretations or judgments of data.

- Fabrication is making up data or results and recording or reporting them.
- 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.
- Plagiarism is the appropriation of another person’s ideas, processes, results or words without giving appropriate credit.

**Respondent** means the person against whom an allegation of research misconduct is directed or the person whose actions are the subject of a research misconduct proceeding.

**Roles and Responsibilities**

**Deciding Officer**
Evaluates record of proceedings below and makes final determination of all appeals.

**Research Integrity Officer**
Assesses allegations. Initiates and oversees inquiries and investigations. Notifies respondent. Sequester physical evidence. Keeps DO and others with a need to know apprised of progress of case. Ensures notification and submission of necessary reports to research sponsors. Accepts, approves, or rejects recommendations of the committee in consultation with relevant dean(s) and supervisors. Secures records.

**Complainant**
Rights: To testify before the inquiry and investigation committees, to review portions of the inquiry and investigation reports pertinent to his/her allegations or testimony, to be informed of the results, and to be protected from retaliation.
Responsibilities: Make allegations in good faith, maintain confidentiality, and cooperate with inquiry or investigation.

**Respondent**
Rights: To be informed of the allegations when an inquiry is opened, have the opportunity to be interviewed and present evidence, to review and provide written comment on the draft inquiry and investigation reports, to be notified in writing of the final results. At their own expense, Respondents may bring a supportive person, including legal counsel, to interviews. Supportive persons/legal counsel may serve in an advisory capacity only and may not participate actively in the proceedings.
Responsibilities: Maintain confidentiality, cooperate fully with inquiry or investigation, avoiding any type of retaliation toward the complainant, witnesses or committee members.
Procedures for Preliminary Assessment of Allegations and Conducting the Research Misconduct Inquiry

1. Preliminary Assessment of Allegations

Upon receiving an allegation of research misconduct, the RIO will assess it to determine whether:

- it is sufficiently credible and specific so that potential evidence of misconduct may be identified,
- whether federal regulations are applicable, and
- whether the misconduct falls within the definition of research misconduct or should be resolved by other deliberative or mediation procedures, or by other specialized committees, such as the Institutional Review Board or the Academic Honesty Board. This review should be brief and will be handled with confidentiality.

2. Conducting the Inquiry

In the inquiry stage, factual information is gathered and expeditiously reviewed to determine if an investigation of the charge is warranted. An inquiry is not a formal hearing or an in-depth analysis of the allegation; it is a process to determine whether there is enough evidence of misconduct to have an investigation. As soon as sufficient information is obtained that indicates an investigation is warranted, the inquiry process terminates, and an inquiry report is prepared.

a. Initiation of the Inquiry

Following the preliminary assessment, if the RIO determines that the allegation provides sufficient information to allow specific follow-up, he or she will initiate the inquiry process. The RIO will meet with appropriate institutional officials to formulate a plan for sequestering the evidence and notifying the respondent in manner that protects the privacy of the respondent while assuring the integrity of the physical evidence.
When allegations of misconduct involve activities being considered for funding or activities funded by an external source, the RIO reviews all sponsor requirements before initiating an inquiry and conducts the inquiry and investigation process to comply with all sponsor and University requirements.

*SEE PROTOCOL FOR HANDLING PHYSICAL EVIDENCE IN RESEARCH MISCONDUCT CASES appended to this procedure.*

The University will strive to complete the inquiry within 60 calendar days of its initiation. If the University determines that a longer period of time is necessary, the inquiry record will include documentation of the reasons for exceeding the 60-day period.

**b. Appointment of the Inquiry Committee**

The RIO, in consultation with other Institutional Officers as appropriate, will appoint an inquiry committee and committee chair within 10 calendar days of the initiation of the inquiry. The inquiry committee should consist of individuals who do not have real or apparent conflicts of interest, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the allegation, interview the principals and key witnesses, and conduct the inquiry. These individuals may be scientists, subject matter experts, administrators or other qualified persons, and they may be from inside or outside the University.

The RIO will notify the respondent and complainant of the proposed committee membership in 10 calendar days. If the respondent submits a written objection to any appointed member of the inquiry committee or expert based on bias or conflict of interest within 7 calendar days, the RIO will make the final determination whether to replace the challenged member or expert with a qualified substitute.

**c. Charge to the Committee and the First Meeting**

The RIO will prepare a charge for the inquiry committee that describes the allegations and any related issues and states that the purpose of the inquiry is to make a preliminary evaluation of the evidence and testimony of the respondent, complainant, and key witnesses to determine whether there is sufficient evidence of possible research misconduct to warrant an investigation. The purpose is not to determine whether research misconduct definitely occurred or who was responsible.
At the committee's first meeting, the RIO will review the charge with the committee, discuss the allegations and the appropriate procedures for conducting the inquiry. The RIO and, if appropriate, institutional counsel will be present or available throughout the inquiry to advise the committee as needed.

**d. Inquiry Process**

The inquiry committee will perform preliminary interviews of the complainant, the respondent, and key witnesses; examine of relevant research records and materials and then evaluate the evidence and testimony. After consultation with the RIO, the committee members will decide whether there is sufficient evidence of possible research misconduct to recommend further investigation.

**e. Inquiry Report**

Upon completion of the inquiry, the committee prepares a written report stating the name and title of the committee members; the allegations; whether any PHS or other external sponsor support is involved; a summary of the inquiry process used; a list of the research records reviewed; summaries of any interviews; a description of the evidence in sufficient detail to demonstrate whether an investigation is warranted or not; and the committee's determination as to whether an investigation is recommended and whether any other actions should be taken if an investigation is not recommended.

If there is PHS funding and the committee determines an investigation is warranted, the findings of the inquiry will be provided to the Public Health Service Office of Research Integrity with the written findings of the committee, to include the following information: 1) Name and position of respondent; 2) a description of the research misconducted obligations; 3) the PHS support involved (e.g., grant numbers, grant applications, contracts and publications listing PHS support); 4) the basis for recommending an investigation; and 5) any comments on the report provided by the complainant or respondent. If the University determines that an investigation is not warranted, detailed documentation of this decision will be kept confidentially for at least 7 years along with the related documents.
The RIO will provide the respondent (in all circumstances) and complainant (absent special circumstances justifying keeping the results of the inquiry confidential from the complainant) with a copy of the draft inquiry report for comment. Respondent comments must be received within 10 working days. Any comments by the respondent will become part of the final inquiry report and record. Based on the comments, the inquiry committee may revise the report as appropriate.

The committee then sends the report, with the respondent’s (and potentially complainant’s statements), to the RIO. The Research Integrity Officer will review the final inquiry report and will make the determination of whether findings from the inquiry provide sufficient evidence of possible research misconduct to justify conducting an investigation. The inquiry is completed when this determination is made.

The RIO then notifies the complainant and respondent, in writing, as to whether the complainant’s allegations will be subject to further investigation. The notice will include a copy of the inquiry report and, if applicable, provide the respondent with information about the PHS regulations promulgated at 42 C.F.R. § 93 and these policies and procedures. The RIO maintains the records of the inquiry in a secure manner for at least seven years.

f. Closing the case

If the committee decides that no investigation is warranted, no further formal action will be taken other than informing, in writing, all parties involved. The procedures will preserve privacy consistent with law for all parties to these procedures and take reasonable steps to protect the positions and reputations of those, who in good faith, make allegations of research misconduct. As appropriate, the RIO will take reasonable steps to minimize the damage to reputations that may result from inaccurate reports.
Procedures for Conducting the Research Misconduct Investigation

The purpose of the investigation is to thoroughly review the allegations, examine all relevant evidence, and conclude whether research misconduct was committed.

Interim Administrative Actions.
The University reserves the right to take interim administrative actions to protect:

1. the health and safety of research subjects and patients; and
2. the interests of students and colleagues;

Faculty and Staff
In cases of faculty or staff research misconduct allegations such actions may range from slight restrictions to reassignment of the activities of the respondent. In extreme circumstances, the respondent may be suspended temporarily. Any actions will be in accordance with the procedures specified in the University Handbook *Procedures to be Followed When Administration has Brought Charges which May Result in Suspension, loss of pay or Dismissal of a Faculty Member*, in the case of faculty research misconduct allegations, or other applicable employee policies in the case of staff research misconduct allegations. Interim administrative actions will be taken in full awareness of how they might affect the respondent and the ongoing research projects of the University.

Students
In cases of student research misconduct allegations, the appropriate administrators will determine the interim action as outlined in the Undergraduate and Graduate Student Catalogues. Interim administrative actions will be taken in full awareness of how they might affect the respondent and the ongoing research projects of the University.

Investigation Process:

1. Convening an Investigation Committee.

   The investigation may be carried out by the inquiry committee as a continuance of its work. If additional expertise is deemed desirable, the RIO and committee will work together to identify potential new members. The RIO identifies one member as chair. The RIO informs the respondent and complainant of the proposed new members for the committee and allows them 5 working days to object to any of the members on grounds of conflict of interest.
If the RIO determines that a new committee is appropriate, then the RIO appoints one as described in the procedure for appointing an inquiry committee.

2. Providing a Charge to the Committee.

The RIO will provide the committee with an explicit charge for the investigation. The RIO notifies the complainant and respondent when the investigation phase of this procedure commences. The respondent may seek the assistance of an advisor (legal counsel or another individual) at this point, if assistance has not already been sought. All parties involved will cooperate with the proceedings in providing information relating to the case. The respondent will be provided a written notice of the allegations within 10 working days of convening the Investigation Committee, and this notice will be provided before the investigation begins.

3. Examination of the evidence.

The committee examines the appropriate material to determine whether research misconduct has occurred.

If an individual is interviewed, transcripts are prepared and submitted to the interviewed person and the committee for comment or revision.

Respondent’s Response. The committee provides all necessary information to the respondent in a timely manner to facilitate the preparation of a response. The respondent has the opportunity to address the charges and evidence in detail at the inception and close of the committee’s activities.

Respondent’s Defense. If the respondent wishes to have an advisor present during the interview with the committee, notice of the advisor’s attendance should be submitted to the committee at least 48 hours prior to the interview. The respondent will have the opportunity to provide evidence, request expert witnesses, identify witnesses directly involved in the case, and be directly interviewed.

Fair and Timely Investigation. The committee conducts the investigation as expeditiously as possible and generally completes it within 120 days. However, the nature of some cases may render that schedule difficult to meet. If the committee determines that the deadline cannot be met, it requests an extension, which the RIO grants or denies. If necessary, the Deciding Officer (DO) submits an extension request to the sponsoring agency regarding this action. At all times, the investigation will be conducted in a fair, impartial, and unbiased manner, and the RIO may take any steps necessary to ensure the fairness of the investigation.

4. Preparation of the report.
**Final Investigation Report.** When the committee reaches a conclusion regarding whether or not misconduct has occurred, it notifies the complainant. The Final Investigation Report reviews all the information considered and explains the committee's conclusion. The report will contain the nature of the allegations; the PHS grants, contracts, applications, or publications involved; the policies and procedures under which the investigation was conducted; and identifies all evidence collected and reviewed (and identifies any evidence taken into custody but not reviewed). The report details the explicit evidence that supports or refutes each allegation included in the committee's charge. The report then specifies the committee's conclusion as to whether any of the proven allegations represent research misconduct. The respondent is allowed 30 days to prepare written comments, which the committee will consider before the preliminary report is finalized. The committee then submits the completed report along with the respondent's comments on the preliminary report to the RIO. When there is more than one respondent, each will receive all parts of the report that are pertinent to her or his role.

**Investigation Committee Charge for Final Investigation Report.** The committee's charge is to generate a report that compiles all the information it considers and makes findings regarding whether research misconduct has occurred. This report is the basis of any subsequent hearing. During an investigation, additional information may emerge that justifies broadening the scope of the investigation beyond the initial allegations. The RIO will inform the respondent if new and different allegations are discovered during the course of the investigation.

**Findings.** There are two possible findings:

1. that no research misconduct was found; or
2. that research misconduct was committed.

A finding of research misconduct requires that:

1. there be a significant departure from accepted practices of the relevant academic community; and
2. the misconduct be committed intentionally, knowingly, or recklessly; and
3. the allegation be proven by a preponderance of the evidence.

Any findings of research misconduct will specify whether the research misconduct was falsification, fabrication, or plagiarism, and if the misconduct was committed intentionally, knowingly, or recklessly. The findings will also state the specific PHS grant, contract, application, or publication impacted and identify whether any publications need correction or retraction.
5. **Reviewing the report and consideration of the committee’s findings**

*Review the report.* The Final Investigation Report is sent to the RIO who has 5 working days to review it and decide to accept all or part of the committee’s findings. If appropriate, the RIO then requests that the committee recommend Disciplinary Action.

6. **Determining Disciplinary Action**

In cases where the respondent is a student, any disciplinary sanctions will be chosen from among those laid out in the Academic Honesty policies found in the Undergraduate and Graduate Student Catalogues. The investigation committee makes recommendations regarding sanctions.

For those non-student cases that result in a misconduct finding, the investigation committee will be guided by Webster University Procedures To Be Followed in Case in Which the Administration Has Brought Charges Which May result in Suspension, Loss of Pay or Dismissal of a Faculty Member when charges involve faculty and University Policy on Termination in the case of staff. Examples may include:

- oral reprimand with no permanent record;
- letter of reprimand that becomes part of the respondent’s permanent record;
- special monitoring of future work;
- removal from a particular project;
- probation;
- suspension;
- salary reduction;
- rank reduction; or
- termination of employment.

7. The RIO makes the decision to accept committee recommendations in part or whole with the concurrence of the appropriate dean or supervisor of respondent’s unit within a 15 day review period.

8. **Notifying the respondent (within 15 working days of receiving the report).**

   a) **Finding of No Misconduct.**

   If the committee determines that there was no research misconduct, the process is considered completed. The RIO will notify the respondent and complainant and take the appropriate steps to clear the respondent’s record. The RIO will ensure that all material related to the case are
removed from the respondent's personnel files and address any concerns relating to clearing
the respondent's record. No disciplinary action will be taken although new evidence may be an
appropriate basis to initiate a new inquiry/investigation.

b) Finding of Misconduct.
Disciplinary action. The RIO notifies the respondent and complainant in writing of the
determinations on the case and the reasons for them. The respondent, who may be
accompanied by an advisor, meets with the RIO to discuss the disciplinary action.

Response to Disciplinary Action. The respondent may accept the disciplinary action or request
an appeal as specified for his or her status or employment classification.

9. Notifying the complainant.

The RIO notifies the complainant and other concerned parties, in writing, about the disposition
of the investigation. The RIO also discusses with the respondent the appropriateness and
desirability of notifying other individuals or agencies about the outcome of the investigation.


The DO promptly notifies or initiates notification to the sponsoring agency initially informed of
the investigation of the outcome of the investigative and any subsequent hearing.

11. Securing records.

All records related to the case are maintained privately and securely under the supervision of
the RIO for at least seven years. The records include all documentation reviewed by the
inquiry/investigation committee, summaries of witness interviews, and the findings of the
committee. Even when no culpable misconduct was found but serious erroneous information
was published, the RIO considers the means to correct the published record affected by the
alleged misconduct.

12. Appeal of findings or sanctions.

APPEAL of a determination and/or sanctions reached during the Research Misconduct
Investigations Process for Students

Either party may file a written appeal with the Deciding Official within 10 calendar days of receipt of the
determination from the RIO.

Grounds for filing an appeal are limited to:
• Procedural error(s)
• New evidence unavailable to the investigation committee.
• Excessive or too lenient sanctions
• The decision was arbitrary, capricious, and against the manifest weight of the evidence.

Upon receipt of a written appeal from either party:

1. The Deciding Officer will make the final determination in the case of all appeals on the part of a student.

2. The Research Integrity Officer will transmit the case file to the Deciding Officer and notify the sponsoring agency of the appeal. The Deciding Officer will review all evidence and the complete record for any deficiencies identified under the categories set forth above.

3. The Deciding Officer will make any reversals or modifications of the report that are consistent with the evidence.

4. All appeals and decisions of the Deciding Officer will be rendered and completed within 120 days of the filing of the appeal.

5. At the conclusion of the appeal process the Deciding Officer will provide a written determination recommending any changes, modifications, or reversals (if any) to the investigation report to the Research Integrity Officer, the investigation committee, and the respondent. The Research Integrity Officer will promptly notify the sponsoring agency of the result of the appeal.

   The decision(s) rendered through this appeal procedure are final.

APPEAL of a determination and/or sanctions reached during the Research Misconduct Investigation if the party is an employee

Either party may file a written appeal with the Deciding Official within 10 calendar days of receipt of the written determination from the RIO. Grounds for filing an appeal are limited to:

• Procedural error(s)
• New evidence
• Excessive or too lenient sanctions
• The decision was arbitrary, capricious, and against the manifest weight of the evidence.

Upon receipt of a written appeal from either party:

1. The Deciding Officer will make the final determination in the case of an appeal on the part of an employee.

2. The Research Integrity Officer will transmit the case file to the Deciding Officer and notify the sponsoring agency of the appeal. The Deciding Officer will review all evidence and the complete record for any deficiencies identified under the categories set forth above.
3. The Deciding Officer may make any reversals or modifications of the report that are consistent with the evidence.

4. All appeals and decisions of the Deciding Officer will be rendered and completed within 120 days of the filing of the appeal.

5. At the conclusion of the appeal process, the Deciding Officer will provide a written determination recommending any changes, modifications, or reversals (if any) to the investigation report to the Research Integrity Officer, the investigation committee, and respondent. The Research Integrity Officer will promptly notify the sponsoring agency of the result of the appeal.

*The decision(s) rendered through this appeal procedure are final.*
APPENDIX TO RESEARCH MISCONDUCT POLICY

Protocol for Handling Physical Evidence in Research Misconduct Cases

Related Policy: Research Misconduct

When data and other evidence will be secured:

- Evidence will be secured after the Research Integrity Officer (RIO) has conducted the assessment and determined an inquiry is necessary.
- The RIO secures the data concurrently with notifying the respondent about the allegation.

How physical evidence will be secured:

- The RIO confidentially arranges with the respondent’s supervisor for contact with the respondent and for access to the data and related evidence. The focus will be on the best circumstances to protect the integrity of the evidence while providing for discreet, confidential, timely, and efficient data sequestration.
- The team that is involved with this process may include:
  - official who is authorized to sequester the materials (usually the RIO)
  - respondent’s supervisor
  - expert who understands the nature of the research and the types of sources of evidence
  - representative of the dean’s office
  - Institutional legal counsel
  - IT expert
  - security as needed

Definition of Physical Evidence

Any pertinent scientific or scholarly data the RIO deems necessary. For example:

- Research proposals
- Lab records and notebooks
- Collateral information such as centrifuge logs, order forms, telephone notes, examples of comparison information, relevant correspondence with others
- Computer files – hard drive; email files
- Copies of grants and progress reports
Note: the RIO may need to secure physical evidence off-campus as well.

**Handling physical evidence**
The RIO inventories the sequestered materials, labels them clearly, and provides receipts to the respondents.

Once the physical materials are in a secure location, the office of the Research Integrity Officer will provide copies for the respondents and other affected parties if requested so that research can continue. Copies will also be made for use by the committees.

Supervised access will be allowed to original sequestered materials.

**Rights and responsibilities regarding physical evidence**

- **Privacy:** From the time the allegation is received, all activity related to the case will be carefully documented. All individuals who are contacted will be assured that, as much as possible, the privacy of their comments will be maintained. In turn, all individuals involved with the case are expected to sustain the privacy of the case.

- **Compliance:** If the allegations involve sponsored research, the University will comply with the sponsor’s regulations and the terms and conditions of the award.

- **Removal of Data:** The RIO has the authority to remove data and other evidence related to the inquiry in order to fulfill its obligations under federal regulations and University policy to thoroughly review and resolve allegations of research misconduct.

- **Identifiable chain of custody:** The University will maintain an identifiable chain of custody: inventory physical evidence, provide receipts, log supervised access to the evidence, and document when physical evidence is released and to whom.