



Research Misconduct # 2370.070

INITIAL EFFECTIVE DATE:	LAST REVISION DATE:	RESPONSIBLE UNIVERSITY DIVISION/DEPARTMENT
January 27, 2006	January 3, 2023	Office of Research and Economic Development

POLICY STATEMENT

It is the policy of the University that all persons involved in University research, including without limitation, University faculty, staff, and students and non-University personnel collaborating on University research, maintain high ethical standards in the conduct and reporting of their research. Allegations of research misconduct are to be reported to, and shall be investigated and, if the allegations are substantiated, sanctioned by, the University as set forth in this policy. This policy applies to students and all individuals who are employed by or are agents of, the University, or who are affiliated with the University by contract or agreement and who are engaged in any University research project whether or not the research is supported by external funding.

SCOPE

All persons involved in University research.

REASON FOR POLICY

The University bears the primary responsibility for prevention and detection of research misconduct and for the inquiry, investigation, and adjudication of alleged research misconduct. The University must take action necessary to ensure the integrity of research, the rights and interests of research subjects and the public, the protection of sponsor funds from misuse by ensuring the integrity of the research work, the observance of legal requirements or responsibilities and to provide appropriate safeguards for subjects of allegations, as well as complainants.

This policy sets forth procedures for addressing allegations of research misconduct in compliance with applicable laws and regulations and in a manner which is thorough, competent, objective and fair. This policy seeks to:

- a) Foster a research environment that promotes the responsible conduct of research, research training, and activities related to that research or research training,

- discourages research misconduct, and deals promptly with allegations or evidence of possible research misconduct;
- b) Set forth reasonable and practical steps to protect the positions and reputations of good faith complainants, witnesses and committee members and protect them from retaliation by respondents and other University members;
 - c) Provide confidentiality to the extent required by applicable laws and regulations to all respondents, complainants, and research subjects identifiable from Research Records or evidence;
 - d) Take reasonable and practical steps to ensure the cooperation of respondents and other University members with research misconduct proceedings, including, but not limited to, their providing information, Research Records, and evidence;
 - e) Set forth the manner in which the University will cooperate with federal agencies during any research misconduct proceeding or compliance review;
 - f) Assist in administering and enforcing any federal agency administrative actions imposed on the University.

DEFINITIONS	
TERM	DEFINITIONS
Allegation	A disclosure of possible research misconduct through any means of communication. The disclosure may be by written or verbal statement or other communication.
Complainant	A person who in good faith makes an allegation of research misconduct.
Conflict of Interest	When a person’s professional judgment or adherence to widely recognized professional norms may be, or may appear to be, compromised by the person’s or a Related Person’s interests, commitments, obligations or loyalties outside the University. A conflict of interest may exist by virtue of financial or other personal considerations that have the potential to compromise or bias professional judgment and objectivity. Conflict of interest includes, but is not limited to, the provisions of federal regulations which provide that a conflict of interest exists if an individual has a significant financial interest that could affect the design, conduct or reporting of the research or educational activities funded or proposed for funding.
Days	Refers to business days unless otherwise stated.
Evidence	Any document, tangible item, or testimony offered or obtained during a research misconduct proceeding that tends to prove or disprove the existence of an alleged fact.
Fabrication	Making up data or results and recording or reporting them.



Falsification	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.
Good Faith	<p>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 witness's testimony.</p> <p>As applied to a committee member, means cooperating with the research misconduct proceeding by carrying out the duties assigned impartially for the purpose of helping an institution meet its responsibilities under this part. A committee member does not act in good faith if his/her acts or omissions on the committee are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.</p>
Inquiry	Preliminary information-gathering and preliminary fact-finding.
Investigation	The formal development of a factual record and the examination of that record leading to a decision not to make a finding of research misconduct or to a recommendation for a finding of research misconduct which may include a recommendation for other appropriate actions.
Notice	A written communication served in person, sent by mail or its equivalent to the last known street address, facsimile number or e-mail address of the addressee.
Plagiarism	The appropriation of another person's ideas, processes, results, or words without giving appropriate credit.
Preponderance of the Evidence	Proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.
Records of Research Misconduct Proceedings	The records that the University secures for research misconduct proceeding pursuant to applicable federal regulations, except to the extent the institution subsequently determines and documents that those records are not relevant to the proceeding or that the records duplicate other records that are being retained. These documents include the inquiry report and final documents (not drafts) produced in the course of preparing that report, including



	the documentation of any decision not to investigate; the investigation report and all records (other than drafts of the report) in support of that report, including the recordings or transcriptions of each interview conducted.
Related Persons	For purposes of this policy, means the employee, the employee’s spouse and dependent children.
Research	All basic research (systematic experiment, study, evaluation, demonstration or survey designed to develop or contribute to general knowledge), applied research (specific knowledge) and demonstration research in all fields of science, engineering, and mathematics. This includes but is not limited to research in economics, education, linguistics, medicine, psychology, social sciences, statistics, and research involving human subjects or animals regardless of the funding mechanism used to support it.
Research Misconduct	Fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error or differences of opinion.
Research Records	The record of data or results that embody the facts resulting from scientific inquiry, including but not limited to, research proposals, data, notes, journals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided to a University official by a respondent in the course of the research misconduct proceeding.
Respondent	The person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.
Retaliation	An adverse action taken against a complainant, witness, or committee member by the University or one of its employees or representatives in response to - (a) a good faith allegation of research misconduct; or (b) good faith cooperation with a research misconduct proceeding.
Significant Financial Interests	Anything of monetary value, including, but not limited to, salary or other payments for services (e.g., consulting fees or honoraria); equity interest (e.g., stocks, stock options or other ownership interests); and intellectual property rights (e.g., patents, copyrights and royalties from such rights). However, the term does not include: <ul style="list-style-type: none"> 1. salary, royalties or other remuneration from the University;



	<ol style="list-style-type: none"> 2. income from seminars, lectures, or teaching engagements sponsored by public or non-profit entities; 3. income from service on advisory committees or review panels for public or nonprofit entities; 4. an equity interest that, when aggregated for the investigator and the investigator’s spouse and dependent children, meets both of the following tests: does not exceed \$5,000 in value as determined through reference to public prices or other reasonable measures of fair market value, and does not represent more than a 5% ownership interest in any single entity; or 5. salary, royalties or other payments that, when aggregated for the investigator and the investigator’s spouse and dependent children, are not expected to exceed \$5,000 during the twelve-month period.
University	Florida International University
VPR	Vice President for Research

ROLES AND RESPONSIBILITIES

The University community is responsible for following the requirements of this policy and the associated procedures.

RELATED RESOURCES

[42 CFR Part 93 Public Health Service, “Public health service policies on research misconduct.”](#)

[45 CFR Part 689 National Science Foundation, “Research Misconduct.”](#)

Office of Research Integrity, Office of Science and Technology Policy responses to questions regarding the Federal Research Misconduct policy found at <https://ori.hhs.gov/federal-research-misconduct-policy>, which includes the following:

“Section II: Findings of Research Misconduct Issue: Several comments stressed the need for greater precision in the phrase “significant departure from accepted practices of the scientific community.”

Response: This phrase is intended to make it clear that behavior alleged to involve research misconduct should be assessed in the context of community practices, meaning practices that



are generally understood by the community but that may not be in a written form. For clarification purposes and in order to be more comprehensive, the term “scientific community” has been modified to read “relevant research community.” The policy is not intended to ratify those “accepted practices” but rather to indicate that these may vary among different communities.

[Office of Economic Development and Commercialization policy #2370.005 – Conflict of Interest in Research](#)

[University-Wide Governance and Guidance policy #140.110 – Fraud Prevention and Mitigation Policy](#)

CONTACTS

Office of Research Integrity
Modesto A. Maidique Campus, MARC 430
11200 S.W. Eighth Street
Miami, Florida 33199
Telephone: (305) 348-2494

HISTORY

Initial Effective Date: January 27, 2006

Review Dates (*review performed, no updates*): January 18, 2024

Revision Dates (*updates made to document*): June 10, 2011, June 15, 2018, June 17, 2019, November 24, 2020, January 3, 2023; January 30, 2023 (procedure only).



Research Misconduct # 2370.070a

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PROCEDURE STATEMENT

I. Research Misconduct Finding

A finding of research misconduct requires that with respect to the research misconduct alleged (i.e., the fabrication, falsification or plagiarism): a) there is a significant departure from accepted practices of the relevant research community (i.e., the behavior is to be viewed in the context of community research practices); b) the misconduct be committed intentionally, knowingly, or recklessly; and c) the allegation be proven by a preponderance of the evidence. Any allegation of misconduct must be resolved promptly and equitably using procedures that safeguard the rights of all administrators, faculty, staff, and students and other concerned parties. The University has the responsibility of conducting all inquiry and investigations in a manner that will ensure fair treatment and confidentiality of the Respondent, the Complainant and others involved in the process.

Findings pursuant to this policy must be made using the following evidentiary standards:

- a) Standard of proof. The University finding of research misconduct must be proved by a preponderance of the evidence.
- b) Burden of proof. The University has the burden of proof for making a finding of research misconduct. The destruction, absence of, or Respondent's failure to provide Research Records adequately documenting the questioned research is evidence of research misconduct where the University establishes by a preponderance of the evidence that the Respondent intentionally, knowingly, or recklessly had Research Records and destroyed them, had the opportunity to maintain the records but did not do so, or maintained the records and failed to produce them in a timely manner and that the Respondent's conduct constitutes a significant departure from accepted practices of the relevant research community.
- c) The Respondent has the burden of going forward with and the burden of proving, by a preponderance of the evidence, any and all affirmative defenses he/she raises. In determining whether the University has carried the burden of proof imposed by this part, the finder of fact shall give due consideration to admissible, credible evidence of honest error or difference of opinion presented by the Respondent.

- d) The Respondent has the burden of going forward with and proving by a preponderance of the evidence any mitigating factors that are relevant to a decision to impose administrative actions following a research misconduct proceeding.

II. The Allegation

A. Reporting Allegation of Research Misconduct

Allegations of research misconduct must be made directly to the Vice President for Research (VPR) or via the University's Compliance Hotline called the Ethical Panther Line. You may access information regarding the Ethical Panther Line at <https://compliance.fiu.edu/hotline/>. Reporting concerns of research misconduct in good faith is a service to the University and to the larger academic community, and will not jeopardize anyone's employment. An allegation of research misconduct may be made orally or in writing. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may meet with or contact the VPR to discuss the suspected research misconduct informally, which may include discussing it anonymously and/or hypothetically. Individuals should report research misconduct allegations via the above process as soon as they have a good faith basis to believe that the research misconduct may have occurred. Individuals and University units should not endeavor to investigate the possible research misconduct prior to reporting it to the Vice President for Research or reporting it via the University's Compliance Hotline as noted above. The process set forth in this policy comprises the process for the review, inquiry and investigation of all allegations of research misconduct and no other review or investigation should be attempted by any other University unit in regards to research misconduct.

B. VPR Review of Research Misconduct Allegation; When Inquiry is Warranted

Promptly after receipt of the allegation of research misconduct, the VPR shall determine if an inquiry is warranted. The period to make such a determination should be brief, preferably no more than ten days from receipt of the allegation, but a longer period of time may be required in extenuating circumstances. An inquiry is warranted if the allegation falls within the definition of research misconduct and is sufficiently credible and specific so that potential evidence of research misconduct may be identified.

If the VPR determines that an inquiry is not warranted, the VPR may refer the individual making the allegation to other University offices or officials, as appropriate, with responsibility for resolving the problem raised. The VPR shall document, in writing, his/her decision not to conduct an inquiry.

If the VPR determines that an inquiry is warranted, the VPR shall document the allegation of research misconduct in writing and shall notify the Provost by forwarding a copy of the

same, along with a copy of the Complainant's written allegation, if there was one. The formal research misconduct allegation shall include:

- Name of Respondent(s)
- Name of Complainant(s), if available
- Name of any potential witness(es) of which the Complainant is aware
- Description of alleged misconduct
- When alleged misconduct occurred
- Where alleged misconduct occurred
- Any supporting documentation
- Grant number or title (if applicable)
- Funding source (if applicable)
- Statement that an inquiry into the allegation shall be commenced pursuant to this policy.

III. The Inquiry

A. Purpose of Inquiry

The purpose of an inquiry is to conduct an initial review of the evidence to determine whether an investigation is warranted. An inquiry does not require a full review of all the evidence related to the allegation.

B. Appointment of Inquiry Committee

The VPR will promptly appoint an inquiry committee and committee chair if a determination is made that an inquiry is warranted and shall provide the inquiry committee with the formal written allegation of research misconduct as described in section II.B above. The appointment of the inquiry committee and chair shall preferably be made no more than ten days from the date that the VPR determines that an inquiry is warranted. The inquiry committee shall consist of at least 3 individuals who have sufficient expertise to evaluate the allegations and conduct the inquiry. The University may use the services of a consortium or person(s) that the University reasonably determines to be qualified by practice and experience to conduct the research misconduct inquiry. A consortium may be a group of institutions, professional organizations or mixed groups which will conduct research misconduct proceedings for other institutions. A consortium or person acting on behalf of the University must follow the requirements of this policy in conducting the research misconduct proceedings.

C. Notice to Respondent of Commencement of Inquiry

At the time of, or before beginning an inquiry, the VPR shall make a good faith effort to notify the Respondent in writing of the allegation and that an inquiry will be conducted.

Within 10 days of the appointment of the inquiry committee, the VPR will notify the Respondent in writing of the proposed membership of the inquiry committee. If the Respondent objects to the proposed membership, the Respondent must submit a written objection to the VPR within 5 days of the date of the VPR's notice to the Respondent of the composition of the committee. The VPR will then determine whether to replace the challenged member(s) of the inquiry committee.

If the inquiry subsequently identifies additional respondents, the VPR shall notify them and provide the same notifications and rights to the additional respondents as to the original Respondent described above.

D. Inquiry Committee First Meeting

The VPR shall convene the first meeting of the inquiry committee no later than fifteen (15) days from the appointment of the inquiry committee. At the inquiry committee's first meeting, the VPR will give a copy to the inquiry committee of the formal written allegation given to the Provost. The VPR will review with the inquiry committee the allegations and the appropriate procedures as stated in this policy, assist the committee with organizing plans for the inquiry, and answer any questions raised by the committee for conducting the inquiry.

E. Inquiry Process and Draft Inquiry Report

The inquiry committee will interview the Respondent, Complainant (if the Complainant's identity is known), and key witnesses and prepare a summary of those interviews. They will examine relevant Research Records and evaluate the evidence and testimony obtained during the inquiry. The inquiry committee will then consult with the VPR and other University officials to determine whether there is sufficient evidence of misconduct to recommend further investigation. The inquiry committee shall prepare a draft inquiry report in the format of the final inquiry report described below and provide a copy of that draft report to the Respondent for comment. The Inquiry Committee may, but is not obligated to, provide a copy of the draft inquiry report, or relevant portions of that report, to the Complainant for comment (if the Complainant's identity is known). The Respondent and/or the Complainant, as applicable, shall have 10 days from the receipt of the draft report to respond to the inquiry committee with any comments on the draft inquiry report.

F. Final Inquiry Report

The inquiry committee shall prepare the final inquiry report which shall include:

- a) The name and position of the Respondent;
- b) A description of the allegations of research misconduct;
- c) Information regarding externally sponsored research project, including, for example, grant numbers, grant applications, contracts, and publications;

- d) The basis for recommending or not recommending that the alleged actions warrant an investigation. An investigation is warranted if there is--(1) A reasonable basis for concluding that the allegation falls within the definition of research misconduct under this policy; and (2) Preliminary information-gathering and preliminary fact-finding from the inquiry indicates that the allegation may have substance.
- e) Comments received from the Respondent and/or the Complainant, as applicable, in response to the draft report. If no comments were received, a statement that a copy of the draft inquiry report was provided to the Respondent and the Complainant, if applicable, and that either or both did not provide any comments to the inquiry committee in response to that draft report.
- f) Sufficient detail to permit a later assessment of the determination of whether or not a full investigation is warranted.
- g) A description of the information reviewed.
- h) A list of the interviews conducted.
- i) Statements of conclusions reached and the findings and facts supporting them.
- j) A recommendation to the VPR whether an investigation is warranted.

G. Notice of Results of the Inquiry

The VPR shall notify the Respondent whether the inquiry found that an investigation is warranted. The notice shall include a copy of the final inquiry report and include a copy of or refer to this part and the policy.

H. Time Limit for the Inquiry

The VPR 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 once the VPR makes this determination. The inquiry must be completed within 60 calendar days of the initiation of the inquiry, which shall be deemed to be the date of the first meeting of the inquiry committee, unless circumstances clearly warrant a longer period. If the inquiry requires longer than 60 calendar days to complete, the inquiry record must include documentation of the reasons for exceeding the 60 calendar day period.

IV. The Investigation

A. Purpose of Investigation

The purpose of an investigation is to examine in-depth the evidence presented and determine whether research misconduct has occurred, by whom, and to what extent and the consequences to be imposed for such misconduct. The investigation shall be commenced within 30 calendar days after the VPR determines that an investigation is warranted after the inquiry.

B. Appointment of Investigation Committee

The Investigation Committee, appointed by the VPR, should be constituted within 10 days after the Respondent has been notified that an investigation is planned. The committee should consist of at least 3 individuals, who have sufficient expertise to evaluate the evidence related to the allegations. The University may use the services of a consortium or person(s) that the University reasonably determines to be qualified by practice and experience to conduct the research misconduct investigation. A consortium or person acting on behalf of the University must follow the requirements of this policy in conducting the research misconduct proceedings.

C. Notice to Respondent of Commencement of Investigation

The VPR shall notify the Respondent in writing of the allegations within a reasonable amount of time after determining that an investigation is warranted, but before the investigation begins. The VPR should notify the Respondent of the proposed committee within 5 days of appointing the Investigation Committee. If the Respondent objects to any of the proposed committee members; the Respondent must submit a written objection to the VPR within 5 days, who will determine whether to replace the challenged member. The VPR shall give the Respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of investigation.

D. Investigation Committee First Meeting

The VPR shall convene the first meeting of the Investigation Committee no later than 30 calendar days after completion of the inquiry. At the first meeting, the VPR shall provide the Investigation Committee with the allegation of research misconduct and a copy of the final inquiry report. The VPR will review with the committee the appropriate procedures as stated in this policy, assist the committee with organizing plans for the investigation and answer any questions raised by the committee for conducting the investigation.

E. Investigation Process and Draft Investigation Report

The investigation process includes examination of all documents, including but not necessarily limited to, Research Records, computer files, proposals, manuscripts, publications, correspondence, memoranda and notes of telephone calls. The Investigation Committee shall interview each Respondent, Complainant (if the Complainant's identity is known), and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the Respondent, and record or transcribe each interview if the allegation relates to a PHS-funded project, or as required by law, or if deemed necessary by the University, provide the recording or transcript to the interviewee for correction, and

include the recording or transcript in the record of the investigation. The Investigation Committee shall pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of additional instances of possible research misconduct, and continue the investigation to completion. All significant issues should be pursued until the Investigation Committee is reasonably certain that the necessary and available information has been amassed.

The Investigation Committee shall prepare a draft investigation report in the format of the final investigation report described below. The Respondent shall be given a copy of the draft investigation report and, concurrently, a copy of, or supervised access to, the evidence on which the report is based. The Investigation Committee may, but is not obligated to, provide a copy of the draft investigation report, or relevant portions of that report, to the Complainant for comment (if the Complainant's identity is known). The comments of the Respondent, and the Complainant if applicable, on the draft report, if any, must be submitted in writing to the Investigation Committee within 30 calendar days of the date on which the Respondent, or the Complainant, as applicable, received the draft investigation report. The Investigation Committee shall consider and address the Respondent's and Complainant's comments, as applicable, before issuing the final report. If there is more than one Respondent, and the Respondents' involvement differs, separate draft reports shall be prepared for the respondents, in order to preserve confidentiality.

F. Final Investigation Report

The Investigation Committee shall prepare the final investigation report which shall include:

- a) Description of the nature of the allegations of research misconduct.
- b) Description and documentation of the sponsor support for the project, including, for example, any grant numbers, grant applications, contracts, and publications.
- c) Description of the specific allegations of research misconduct for consideration in the investigation.
- d) The policies and procedures under which the investigation was conducted.
- e) Identification and summary of the Research Records and evidence reviewed, and identification of any evidence taken into custody but not reviewed.
- f) For each separate allegation of research misconduct identified during the investigation, provide a finding as to whether research misconduct did or did not occur. A finding of research misconduct requires that with respect to the research misconduct alleged (i.e., the fabrication, falsification or plagiarism): (1) there is a significant departure from accepted practices of the relevant research community (i.e., the behavior is to be viewed in the context of community research practices); and (2) the research misconduct was committed intentionally, or knowingly, or recklessly; and (3) the allegation is proven by a preponderance of evidence. For each separate finding of research misconduct include the following:

- i. Identify whether the research misconduct was falsification, fabrication, or plagiarism, and if it was intentional, knowing, or in reckless disregard;
 - ii. Summarize the facts and the analysis which support the conclusion and consider the merits of any reasonable explanation by the Respondent;
 - iii. Identify the specific sponsor support;
 - iv. Identify whether any publications need correction or retraction;
 - v. Identify the person(s) responsible for the misconduct; and
 - vi. List any current support or known applications or proposals for support that the Respondent has pending.
- g) Include and consider any comments made by the Respondent and Complainant, as applicable, on the draft investigation report. If no comments were received, a statement that a copy of the draft inquiry report was provided to the Respondent and the Complainant, if applicable, and that either or both did not provide any comments to the inquiry committee in response to that draft report.

The Investigation Committee shall transmit the final investigation report with attachments, including the Respondent's and Complainant's comments, to the VPR.

G. University Review and Decision

The VPR will make the final determination whether to accept the investigation report. The VPR will consult with the Provost regarding appropriate actions. Once a final decision on the case has been reached, the VPR has the obligation of notifying the Respondent and Complainant in writing. The VPR's decision will be the final agency action of the University.

H. Time Limit for Investigation

An investigation must be completed within 120 calendar days of beginning it, including conducting the investigation, preparing the report of findings, providing the draft report for comment in accordance with this policy, preparing the final report and providing the final report to any Federal agency as noted in Section V.B below.

V. University Interim and Administrative Action and Notification to Sponsoring Agencies

A. Interim Administrative Action

University officials will take interim administrative actions, as appropriate, to protect public health or safety, Federal funds and equipment, the integrity of the federally supported research process and ensure that the purposes of the Federal financial assistance are carried out.

The type of action depends on the seriousness of the misconduct, the impact of the misconduct, and whether the misconduct demonstrates a pattern of behavior.

B. Notification to Sponsoring Agency

If an allegation of research misconduct relates to a sponsored research project, the VPR shall provide notifications to the sponsoring agency as required by the sponsor's regulations, guidelines and/or the sponsor award document for the project.

(a) PHS Funded Projects

Research allegations related to any sponsored project that has support from the Public Health Service (PHS) require that the University inform the PHS Office of Research Integrity (ORI) as follows:

- (i) Within thirty (30) calendar days of finding that an investigation is warranted, and no later than on the date the investigation begins, the VPR must notify the ORI Director of the decision to begin an investigation and provide the inquiry report as noted below.
- (ii) Provide ORI with the written finding and a copy of the inquiry report which includes the information:
 - a. The name and position of the Respondent;
 - b. A description of the allegations of research misconduct;
 - c. The PHS support, including for example, grant numbers, grant applications, contracts, and publications listing PHS support;
 - d. The basis for recommending that the alleged actions warrant an investigation; and
 - e. Any comments on the report, by the Respondent or the Complainant.
- (iii) The University must notify ORI in advance if the University plans to close a case at the inquiry or investigation stage on the basis that the Respondent has admitted guilt, a settlement with the Respondent has been reached or for any other reasons, except the closing of a case at the inquiry stage on the basis that an investigation is not warranted or a finding of no misconduct at the investigation stage, which must be reported to ORI per subsection V.(B)(a)(iv) below.
- (iv) The University provide to ORI the following:
 - a. Investigation report, including all attachments;
 - b. Final University action, stating whether the University found research misconduct and if so, who committed the misconduct.
 - c. Findings, stating whether the University accepts the investigation's findings;
 - d. Institutional administrative actions, describing any pending or completed administrative actions against the Respondent.

- (v) The University must provide the following information to ORI on request:
 - a. The University policies and procedures under which the inquiry was conducted;
 - b. The research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents; and
 - c. The charges for the investigation to consider.

- (vi) At any time during a research misconduct proceeding, the University must notify ORI immediately if it has reason to believe that any of the following conditions exist, including any facts that may be relevant to protect public health, Federal funds and equipment, and the integrity of the PHS supported research process:
 - a. Health and safety of the public is at risk, including an immediate need to protect human or animal subjects;
 - b. Resources or interests of the U.S. Department of Health and Human Service (HHS) are threatened;
 - c. Research activities should be suspended;
 - d. There is reasonable 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 University believes the research misconduct proceeding may be made public prematurely so that HHS may take appropriate steps to safeguard evidence and protect the rights of those involved;
 - g. The research community or public should be informed. The University shall also notify the National Institutes of Health (NIH) at any time during the research misconduct proceeding as required by applicable NIH policy or regulations.

(b) NSF Funded Projects

Research allegations related to any sponsored project that has support from the National Science Foundation (NSF) require that the University inform the NSF Office of Inspector General (OIG) as follows:

- (i) If the completion of the inquiry is delayed beyond 90 calendar days, but the University wishes NSF to defer the research misconduct inquiry or investigation to the University, NSF may require submission of period status reports;
- (ii) Immediately if an initial inquiry supports an investigation;
- (iii) Keep NSF informed during the investigation;

- (iv) If the completion of the investigation is delayed beyond 180 calendar days, but the University wishes NSF to defer the research misconduct investigation to the University, NSF may require submission of period status reports;
- (v) Provide OIG with the final report from the investigation;
- (vi) Promptly notify the OIG if the University becomes aware during the inquiry or investigation that:
 - a. Public health or safety is at risk;
 - b. NSF's resources, reputation, or other interests need protecting;
 - c. There is reasonable indication of possible violations of civil or criminal law;
 - d. Research activities should be suspended;
 - e. Federal action may be needed to protect the interests of a subject of the investigation or of others potentially affected; or
 - f. The scientific community or the public should be informed.

VI. Confidentiality

Disclosure of the identity of Respondents and Complainants in research misconduct proceedings and of any records or evidence related thereto shall be limited, to the extent possible, to those who need to know, consistent with a thorough, competent, objective and fair research misconduct proceeding, and as allowed by law. Although reasonable efforts to maintain confidentiality will be made, anonymity cannot be guaranteed. As pertains to public records requests under Florida law, while a research misconduct matter is ongoing, whether at the allegation, inquiry or investigation stage, all information obtained pursuant to the research misconduct matter by the University are exempt from disclosure as public records. However, once the research misconduct matter is concluded, the records are subject to disclosure pursuant to a Florida public records request unless the records requested are otherwise exempt from disclosure pursuant to applicable law.

VII. Other Considerations

- *Termination of Institutional Employment or Resignation Prior to Completing Inquiry or Investigation:* In accordance with federal regulations, termination of the Respondent's University employment, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the misconduct procedures.
- *Restoration of Reputation:* The University shall undertake reasonable and practical efforts, if requested and as appropriate, to protect or restore the reputation of persons alleged to have engaged in research misconduct but against whom no finding of research misconduct is made, and of any Complainant, witness, or committee member and to counter potential or actual retaliation against these Complainants, witnesses, and committee members. Accordingly, if misconduct is not found, the VPR must consult with the Respondent, Complainant, witness or committee member, as applicable, and find alternatives to restore the affected person's reputation. Any

University actions to restore the person's reputation must be done in consultation with the Provost and shall be determined by the Provost in consultation with the VPR.

- *University Employees not Acting in Good Faith, Including Allegations Not Made in Good Faith:* Any University employee engaging in research misconduct proceedings in a manner other than in good faith, including but not limited to, making an allegation of research misconduct not in good faith or participating as a witness or committee member not in good faith, may be subject to disciplinary action in accordance with applicable University regulations and policies.

VIII. Conflict of Interest

Individuals responsible for carrying out any part of the research misconduct proceedings, whether at the inquiry or investigation stage, may not have any undisclosed or unresolved personal, professional, or financial conflicts of interest with the University, Complainant, Respondent, any witnesses or the project sponsor, if any. Any such potential conflict of interest must be disclosed pursuant to the Conflict of Interest in Research policy and resolved or managed prior to involvement of the affected University employee in the research misconduct proceedings. If the conflict of interest is such that it cannot be resolved or managed, then the affected University employee may not take part in the research misconduct proceedings.

IX. Record Compilation and Retention

If the VPR determines that an inquiry shall be undertaken, the VPR shall, on or before the date on which the Respondent is notified of the allegation or at the time that the inquiry begins, whichever is earlier, promptly take all reasonable and practical steps to obtain custody of all the Research Records and evidence needed to conduct the research misconduct proceeding. The VPR shall inventory the records and evidence, and sequester them in a secure manner. The VPR shall undertake all reasonable and practical efforts to take custody of additional Research Records or evidence that is/are discovered during the course of the research misconduct proceeding. Research Records involving raw data shall include the devices or instruments on which they reside. However, if deemed appropriate by the VPR, research data or records that reside on or in instruments or devices may be copied and removed from those instruments or devices as long as the copies are complete, accurate, and have substantially equivalent evidentiary value as the data or records have when the data or records reside on the instruments or devices. Such copies of data or records shall be made by a disinterested, qualified technician and not by the subject of the original allegation or other interested parties. When the relevant data or records have been removed from the devices or instruments, the instruments or devices need not be maintained as evidence.



The VPR shall maintain the Research Records and evidence of research misconduct proceedings in a secure manner for 7 years after completion of the research misconduct proceeding.

X. Legal Representation

Respondent may have his/her attorney attend all proceedings in which Respondent is present. During proceedings in which the Respondent is present, the attorney may advise the Respondent privately and may observe, but not otherwise participate in, the proceedings. Conduct by the attorney that disrupts a proceeding is grounds for the attorney being required to leave. In such an event, the proceeding will continue without the attorney being present. Respondent must provide the University with written notice at least three (3) days before any interview that the Respondent wishes to have his/her attorney present.