Research Misconduct
ACA-30

About This Policy

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Responsible University Administrator:
University Faculty Council President, Indiana University

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Scope

A. This Policy applies to:
   a. All individuals who hold University appointments and all graduate students who are engaged in the design, conduct, or reporting of research, whether or not the research is funded; and to
   b. Anyone engaged in the design, conduct, or reporting or research through a Sponsored Program at Indiana University, to the extent of that research.

B. Except for research misconduct in the context of a Sponsored Program, allegations of research misconduct by undergraduate students shall be dealt with through the Code of Student Rights, Responsibilities, and Conduct.

C. The Deciding Officer (DO) may, in consultation with the Dean of the Graduate School, determine that an allegation of research misconduct on the part of a graduate student is more appropriately referred to the disciplinary channels provided in the Code of Student Rights, Responsibilities, and Conduct or such other disciplinary process duly established by a campus or academic unit.

D. All members of the University community have a duty to guard against and to report research misconduct; to cooperate with the Inquiry and Investigation Committees and the Research Integrity Officer (RIO); and to provide relevant evidence to the committees and the RIO in the course of research misconduct proceedings.

Policy Statement

General Policy on Research Misconduct

A. Responsibilities of All Members of the University Community
   a. All members of the University community have a responsibility to guard against research misconduct by themselves, their colleagues and collaborators, and the people they teach or supervise.
   b. All members of the University community shall report research misconduct to the RIO. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may consult the RIO informally. The RIO will advise on whether the circumstances described by the individual appear to meet the definition of research misconduct. The RIO may refer the individual or allegation to other offices or officials if appropriate.
c. All members of the University community shall cooperate with a research misconduct preliminary assessment, inquiry, or investigation, and shall provide relevant evidence in the course of research misconduct proceedings.

B. Protecting Parties
a. All parties to research misconduct proceedings, including respondents, complainants, witnesses, committee members, the RIO, and staff, are entitled to be treated with respect.

b. As requested, the RIO and other institutional officials shall make all reasonable and practical efforts 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.

c. No person may retaliate in any way against complainants, witnesses, committee members, or the RIO and his or her staff. The RIO shall investigate reports of alleged or apparent retaliation and recommend appropriate actions to the DO.

C. Confidentiality
a. All research misconduct investigations shall protect the confidentiality of all parties to the greatest extent possible. The RIO shall:
   a. Limit disclosure of the identity of respondents, complainants, and witnesses to those who need to know in order to carry out a thorough, competent, objective, and fair research misconduct proceeding; and
   b. Except as otherwise prescribed by law, limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding.

b. The RIO shall use written confidentiality agreements or other mechanisms when appropriate to ensure that the recipient does not make any further disclosure of identifying information. If the complainant requests anonymity, the University will strive to honor the request within the limits set by applicable policy and law.

c. The DO may communicate about research misconduct allegations and proceedings with other persons as required by law or as necessary to protect public health or safety, the integrity of research, fundamental fairness to the respondent or other parties, or an overriding interest of the University.

D. Conflict of Interest
a. At all stages of research misconduct proceedings, all persons involved shall identify and disclose to the RIO, DO, or President, as appropriate, any real or perceived conflict of interest.

b. If such conflicts are present, the individual shall recuse himself or herself from any investigative or decisional role in the case.
   a. If any prospective committee member at any point in the process presents a conflict of interest, that committee member shall be replaced by the DO.
   b. If the RIO has a conflict of interest, the DO shall name a replacement to carry out the functions of the RIO under this Policy for the particular matter.
   c. If the DO has a conflict of interest, the President shall name a replacement to carry out the functions of the DO under this Policy for the particular matter.
   d. Conflicts of interest on the part of deans or department chairs shall be dealt with by the DO.

c. If it becomes necessary to appoint any replacement during the course of the process, the new appointee shall be fully informed regarding earlier procedures and evidence secured, but the process shall not commence anew.

d. The DO is responsible for resolving disagreements over what constitutes a conflict of interest, except in the case of alleged conflicts involving the DO, in which case the President is responsible.

E. Standard of Review
a. A finding of research misconduct requires that:
   a. There be a significant departure from accepted practices of the relevant research community; and
b. The respondent committed the research misconduct intentionally, knowingly, or recklessly.

b. Allegations of research misconduct must be proven by a preponderance of the evidence.

c. The destruction, absence of, or respondent’s failure to provide research records adequately documenting the questioned research is evidence of research misconduct when the University establishes by a preponderance of the evidence that:

a. The respondent:
   a. Had research records and intentionally, knowingly, or recklessly destroyed them;
   b. Had the opportunity to maintain the records but did not do so; or
   c. Maintained the records and failed to produce them in a timely manner; and that

b. The respondent’s conduct constitutes a significant departure from accepted practices of the relevant research community.

F. The Standing Committee

a. There shall be a Standing Committee that:

   a. Serves as the pool from which members of Inquiry Committees are drawn; and
   b. Upon request:

      a. Assists the RIO in evaluating allegations of Research Misconduct;
      b. Advises the RIO on appropriate members for Investigation Committees; and
      c. Advises the DO and the RIO on the implementation and revision of this Policy and Procedures.

b. The Standing Committee shall consist of no fewer than six (6) members, all of whom shall be tenured members of the faculty, chosen to reflect disciplinary diversity, and including at least one member from each of the Bloomington and Indianapolis campuses and the Medical School.

c. The DO shall appoint the Standing Committee following consultation with the Executive Committees of the Bloomington and Indianapolis Faculty Councils.

G. Factual Findings are Conclusive. The factual findings of the Investigation Committee shall be conclusive and binding on any later University proceeding convened for other purposes (e.g., grievances to the Faculty Board of Review relating to sanctions imposed).

H. Limitation of Actions. Allegations must be raised within six (6) years of the date on which the alleged research misconduct occurred unless:

   a. The respondent continues or renews any incident of alleged research misconduct that occurred before the 6-year limitation through the citation, republication, or other use for the potential benefit of the respondent of the research record that is alleged to have been fabricated, falsified, or plagiarized; or
   b. The DO, following consultation with ORI, determines that the alleged misconduct could reasonably have a substantial adverse effect on the health or safety of the public.

Reason For Policy

Research rests on a foundation of intellectual honesty. Scholars must be able to trust their peers, students must be able to trust their teachers, and both sponsors and the public must be able to trust the integrity of the results of research performed in institutions of higher education. The integrity of research is the subject of widely shared professional norms and legal requirements that place specific obligations on the University and all members of the University community.

This document sets forth Indiana University’s policy and procedures concerning research misconduct. It is intended to ensure impartial and accurate adjudication of allegations of research misconduct that respects the legitimate interests of all parties, enhances professional and public trust, and ensures compliance with professional norms and applicable legal requirements.

Procedure
I. The Research Misconduct Resolution Process

a. Preliminary Assessment of Allegations. Any person, whether associated with the University or not, may bring an allegation of research misconduct. Such allegations should be made to the RIO. On receipt of an allegation of research misconduct, the RIO shall determine whether the allegation is frivolous, does not raise questions of research misconduct, or does not otherwise warrant further action. In such a case, the RIO may dismiss the allegation, seek to handle the matter informally, or refer it to the appropriate person or process. If the RIO determines that the allegation does not raise questions of research misconduct, does not warrant further action, or is determined to be frivolous, he or she shall take reasonable steps to inform the complainant and anyone else known to be aware of the allegation.

b. The Inquiry Process. If the RIO determines that the criteria for an inquiry are met, he or she will immediately initiate the inquiry process. The purpose of the inquiry is to determine whether there is sufficient credible evidence of possible research misconduct to warrant conducting an investigation. An inquiry does not require a full review of all the evidence related to the allegation.

1. Sequestration of Research Records. As soon as practicable upon the initiation of an inquiry, the RIO shall take all reasonable and practical steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence and sequester them in a secure manner. Wherever possible, custody will be limited to copies of the data or evidence, so long as those copies have substantially equivalent evidentiary value as the originals. Where appropriate, the RIO shall give the respondent copies of, or reasonable, supervised access to the research records.

2. Notice

a. Upon initiation of the inquiry, the RIO shall provide the respondent with written notice of the allegation(s) and a copy of this Policy. The RIO shall also offer to meet with the respondent to review the contents of the allegations and related issues, describe the process that will be followed, and advise the respondent of his or her rights under the Research Misconduct Policy. If the inquiry subsequently identifies additional respondents, they shall receive the same written notice and offer to meet.

b. The RIO shall notify the DO; the dean of the School in which the respondent holds primary appointment; the Chancellor, Provost, or other senior official of the campus on which the respondent holds primary appointment; and the University General Counsel of the initiation of any inquiry.

3. The Inquiry Committee. The DO shall appoint at least two members of the Standing Committee to serve with the RIO as an Inquiry Committee. The members of the Inquiry Committee shall have no conflicts of interest with the respondent or with the case in question and shall possess sufficient expertise to enable the committee to conduct the inquiry and to evaluate the evidence and issues related to the allegation(s). To the extent practicable, the members of the Inquiry Committee shall be from the same campus as the respondent. If necessary to obtain appropriate expertise or avoid conflicts of interest the DO may appoint other faculty to serve on an Inquiry Committee.

4. Inquiry Process

a. At the committee's first meeting, the RIO will review the allegation with the committee; discuss the allegations, any related issues, and the appropriate procedures for conducting the inquiry; and work with the other members of the Inquiry Committee to organize its work.

b. The Inquiry Committee will make a good faith effort to interview the complainant, the respondent, and key witnesses as well as examine relevant research records and materials. The Inquiry Committee will evaluate the evidence, including the testimony obtained during the inquiry. The committee will decide whether an investigation is warranted based on the criteria in this policy.

c. The Inquiry Committee is not expected to determine whether misconduct occurred or the role of the respondent in any misconduct. However, if research misconduct is admitted by the respondent and there are no disputed factual issues, misconduct may be determined at the inquiry stage.
5. The Inquiry Report. At the conclusion of the inquiry, the RIO shall prepare a written inquiry report that describes:
   a. The allegations of research misconduct;
   b. Any federal support for research involved in the allegation;
   c. The committee’s recommendation as to whether an investigation is warranted;
   d. The basis for the committee’s recommendation; and
   e. Any comments on the draft report by the respondent.

6. Notification to the Respondent and Opportunity to Comment. The RIO shall provide the respondent with a draft copy of the Inquiry Committee report, together with a written notice that the respondent may submit written comments within ten (10) calendar days. The DO may extend this time for good cause. Any comments that are submitted by the respondent will be attached to the final inquiry report. Based on the comments, the Inquiry Committee may revise the draft report as appropriate before preparing it in final form.

7. Institutional Decision and Notification
   a. Decision by Deciding Official. The RIO will transmit the final inquiry report and any comments to the DO, who within ten (10) calendar days will determine in writing whether an investigation is warranted. In the event the DO disagrees with any of the Inquiry Committee’s recommendations, he or she will document the basis for his or her decision in writing. The inquiry is completed when the DO makes this determination.

   b. Notification and Documentation of Decision
      i. The RIO (or, in the case of federal agencies required to be notified, the DO), shall notify the respondent; the complainant; the relevant dean(s); the Chancellor, Provost, or other senior official of the campus on which the respondent holds primary appointment; the University General Counsel; the members of the Inquiry Committee; and any government officials required to be notified of the DO’s decision.

      ii. If the DO decides that an investigation is not warranted, the RIO shall also take reasonable steps to inform anyone else known to have knowledge of the inquiry.

      iii. If the DO determines that an investigation is not warranted, the RIO shall secure and maintain for seven (7) years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment of the reasons why an investigation was not conducted. These documents shall be provided to ORI or other authorized government personnel upon request.

8. Time for Completion. The inquiry, including preparation of the final inquiry report and the decision of the DO on whether an investigation is warranted, must be completed within 60 calendar days of initiation of the inquiry, unless the DO approves an extension. The inquiry record must include documentation of the reasons for exceeding the 60-day period.

   c. The Investigation Process
      1. Initiation and Purpose of the Investigation. Within fifteen (15) calendar days of any determination by the DO that an investigation is warranted, the DO shall appoint an Investigation Committee. The DO may extend this time for good cause. The purpose of the investigation is to develop a factual record by exploring the allegations in detail and examining the evidence in depth, leading to recommended findings on whether research misconduct has been committed, by whom, and to what extent, and steps to be taken to correct the research record. The investigation will also determine whether there are additional instances of possible research misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where the alleged research misconduct involves clinical trials or potential harm to human subjects or the general public or if it affects research that forms the basis for public policy, clinical practice, or public health practice.
2. Sequestration of Research Records. As soon as practicable upon the initiation of an investigation, the RIO shall take all reasonable and practical steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, that were not previously sequestered during the inquiry. The need for additional sequestration of records for the investigation may occur for any number of reasons, including the institution's decision to investigate additional allegations not considered during the inquiry stage or the identification of records during the inquiry process that had not been previously secured. Wherever possible, custody will be limited to copies of the data or evidence, so long as those copies have substantially equivalent evidentiary value as the originals. Where appropriate, the RIO shall give the respondent copies of, or reasonable, supervised access to the research records.

3. Role of Counsel. The respondent may be accompanied by counsel or a non-lawyer personal adviser (who is not otherwise involved in the case) when interviewed in the course of an investigation. Respondent’s counsel or adviser may provide the respondent advice, but may not participate in the proceedings.

4. Notice. Upon initiation of the investigation, the RIO shall provide the respondent with written notice of the allegations to be investigated, including any new allegations of research misconduct, and of the respondent’s right to have counsel present when interviewed as soon as practicable after the decision to pursue allegations not addressed during the inquiry or in the initial notice of the investigation.

5. Appointment of the Investigation Committee. The investigation shall be conducted by an Investigation Committee of no fewer than three persons appointed by the DO. Members of the Investigation Committee shall have no conflicts of interest with the respondent or other parties to the case in question, and shall, together possess the necessary expertise to enable them to evaluate authoritatively the relevant evidence of the alleged research misconduct and to conduct an investigation. To the extent practicable, a majority of the members of the Investigation Committee shall be from the same campus as the respondent. The DO shall designate a chair of the committee, who shall be a tenured member of the University faculty. Where the respondent is a member of the faculty, all appointees to the Investigation Committee shall be tenured faculty.

6. Notification of Appointment of Investigation Committee
   a. The RIO shall notify the respondent of the committee membership and shall be given an opportunity to object to the committee membership on the grounds that one or more members do not meet the above-stated criteria. Objections shall be made in writing to the RIO within ten (10) calendar days of notification of the committee’s membership. The DO may extend this time for good cause.
   b. The DO shall consider the objection, and if it is reasonable, the DO shall replace the person with one who meets the stated criteria. The DO’s decision as to whether the challenge is reasonable shall be final.

7. Charge to the Investigation Committee
   a. The RIO shall provide a written charge to the Investigation Committee that:
      i. Describes the allegations and related issues identified during the inquiry;
      ii. Identifies the respondent;
      iii. Informs the committee that it must conduct the investigation as prescribed in this policy;
      iv. Defines research misconduct;
      v. Informs the committee that it must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, research misconduct occurred and, if so, the type and extent of it and who was responsible;
      vi. Informs the committee that if it determines that the respondent committed research misconduct it must do so according to the standard of review set forth in the Research Misconduct Policy; and
vii. Informs the committee that it must prepare or direct the preparation of a written investigation report that meets the requirements of this policy.

8. Investigation Process. The Investigation Committee, assisted by the RIO, shall use diligent efforts to ensure that the investigation is thorough, impartial, fair, and appropriately documented. This includes making diligent efforts to:
   a. Examine all research records and other relevant evidence relevant to reaching a decision on the merits of each allegation;
   b. Interview each respondent, complainant, 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;
   c. Record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of the investigation; and
   d. Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continue the investigation to completion.

9. The Investigation Report. The Investigation Committee, with the assistance of the RIO, is responsible for preparing a written report of the investigation that:
   a. Describes the nature of the allegation of research misconduct, including identification of the respondent;
   b. Describes and documents the federal support, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing federal support;
   c. Describes the specific allegations of research misconduct considered in the investigation;
   d. Identifies and summarizes the research records and evidence reviewed and identifies any evidence taken into custody but not reviewed;
   e. Includes a statement of findings for each allegation of research misconduct identified during the investigation. Each statement of findings must:
      i. Identify whether the research misconduct was falsification, fabrication, or plagiarism, and whether it was committed intentionally, knowingly, or recklessly;
      ii. Summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the respondent, including any effort by respondent to establish that he or she did not engage in Research Misconduct because of honest error or a difference of opinion;
      iii. Identify the specific federal 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 with all federal agencies; and
   f. Recommends appropriate corrective actions and/or sanctions if research misconduct is found.

10. Notification to the Respondent, Access to Evidence, and Opportunity to Comment
   a. The RIO shall give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to, the evidence on which the report is based. The respondent will be allowed thirty (30) calendar days from the date he/she received the draft report to submit comments to the RIO. Any comments that are submitted by the respondent will be attached to the final investigation report. Based on the comments, the Investigation Committee may revise the draft report as appropriate before preparing it in final form.
   b. In distributing the draft report, or portions thereof, to the respondent, the RIO will inform the recipient of the confidentiality under which the draft report is made available and may establish
reasonable conditions to ensure such confidentiality. For example, the RIO may require that the recipient sign a confidentiality agreement.

11. Institutional Decision and Notification

a. Decision by Deciding Official. The RIO will transmit the final inquiry report and any comments to the DO, who within ten (10) calendar days will determine in writing (1) whether the institution accepts the investigation report, its findings, and the recommended institutional actions; and, if so, (2) the appropriate institutional actions in response to the accepted findings of research misconduct. In the event the DO disagrees with any of the Investigation Committee's recommendations, he or she will document the basis for his or her decision in writing. Alternatively, the DO may return the report to the investigation Committee with a request for further fact-finding or analysis.

b. Notification of Decision

i. When a final decision on the case has been reached, the RIO (or, in the case of federal agencies required to be notified, the DO), shall notify the respondent; the complainant; the relevant dean(s); the Chancellor, Provost, or other senior official of the campus on which the respondent holds primary appointment; the University General Counsel; the members of the Investigation Committee; and any government officials required to be notified of the DO's decision.

ii. The DO will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the respondent in the work, or other relevant parties should be notified of the outcome of the case.

iii. If the DO decides that there was no research misconduct, the RIO shall take reasonable steps to inform anyone else known to have knowledge of the investigation. Depending on the particular circumstances and the views of the respondent, the RIO shall also advise the DO concerning other measures to restore the reputation of the respondent, including publicizing the final outcome in any forum in which the allegation of research misconduct was previously publicized.

12. Time for Completion

a. The investigation, including preparing the report of findings, providing the draft report for comment, and the decision of the DO, must be completed within 120 calendar days of initiation of the inquiry, unless the DO approves an extension. The investigation record must include documentation of the reasons for exceeding the 120-day period.

b. If the DO approves an extension, if applicable, the RIO will submit to ORI a written request for an extension, setting forth the reasons for the delay. The RIO will ensure that periodic progress reports are filed with ORI, if ORI grants the request for an extension and directs the filing of such reports.

d. Institutional Administrative Actions. If the DO determines that research misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken, after consultation with the RIO. The administrative actions may include:

1. Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;

2. Removal of the responsible person from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction or termination of employment;

3. Restitution of funds to the grantor agency as appropriate; and

4. Other action appropriate to the research misconduct.

e. Appeals

1. Through the process provided in this section, the respondent may appeal a research misconduct determination or sanction. Appeals may be taken to the review body available to persons in the respondent's appointment classification for the purpose of hearing employment grievances [e.g., the
Faculty Board of review (in the case of academic appointees), the appropriate Graduate School body (where applicable in the case of graduate students), or the processes established by the University personnel policies relating to employee conduct (in the case of staff employees). The procedures described in this Policy constitute the exclusive internal process for appealing DO decisions concerning allegations of research misconduct.

2. Appeals must be in writing and must be submitted to the appropriate body within fifteen (15) calendar days of receipt of notice of the DO’s decision. The respondent shall submit a copy of the appeal to the DO.

3. Appeals shall be limited to:
   a. Claims that there were one or more specific procedural errors, which must be specified, that create a significant risk that the outcome was erroneous; or
   b. Grievances of sanctions imposed as a result of a finding of research misconduct.

4. The factual record established during the investigation shall constitute the factual record for the purposes of the Appeal. The Appeal body may not review the factual finding of misconduct.

5. Appeals involving research funded by the federal government must be completed within 120 calendar days, unless an extension is received from ORI.

f. Allegations Against Complainants
   1. If at any point during a research misconduct proceeding there is an allegation or a reasonable basis for believing that a complainant may bear any responsibility for the alleged research misconduct, the RIO shall:
      a. Notify the complainant promptly of that allegation or reasonable basis; and
      b. Accord the complainant all protections provided for respondents.
   2. Upon the request of any complainant receiving such notification, the DO may approve a reasonable delay in any proceeding necessary to protect the complainant’s interests, but the process shall not commence anew.

h. Admissions of Research Misconduct. If, at any stage of a research misconduct proceeding, a respondent, having been informed of his or her rights under the Research Misconduct Policy, admits to research misconduct, the DO may elect to proceed directly to the determination of appropriate administrative actions.

II. Maintaining Records

a. After completion of the case and all ensuing related actions, the RIO shall prepare a complete file, including the original records of all proceeding conducted by the inquiry and Investigation Committees and copies of all documents and other materials furnished to the RIO or to the Inquiry or Investigation Committee. The RIO shall seal the file and retain it for seven (7) years after completion of the proceeding or the completion of any subsequent government proceeding involving the alleged research misconduct.

b. Access to the materials in the file shall be available only upon authorization of the DO for good cause.

c. The RIO shall return all original documents and materials to the persons who furnished them.

d. After seven (7) years from the completion of the investigation and all ensuing related actions, if any, the RIO will destroy the file unless the RIO makes a written finding that there is reason to retain it. The finding will state explicitly the reasons why and the period during which the file is to be maintained, and will be entered in the file. The RIO shall provide to the respondent either a notice that the file has been destroyed or a copy of the written finding that the file will be retained.

III. Interim Administrative Actions
a. The DO shall, at any time during a research misconduct proceeding, take appropriate interim actions as required by law or as necessary to protect public health or safety, the integrity of research, fundamental fairness to the respondent or other parties, or an overriding interest of the University.

b. If the research involves federal funding, the DO shall notify ORI immediately if he or she has reason to believe that any of the following conditions exist:

1. Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
2. Federal government resources or interests are threatened;
3. There is a reasonable indication of possible violations of civil or criminal law;
4. Federal action is required to protect the interests of those involved in the research misconduct proceeding;
5. The research misconduct proceeding may be made public prematurely and federal action may be necessary to safeguard evidence and protect the rights of those involved; or
6. The research community or public should otherwise be informed.

c. Interim actions include, but are not limited to, a temporary suspension of research, additional monitoring of the research process and the handling of federal funds and equipment, reassignment of personnel or of the responsibility for the handling of federal funds and equipment, additional review of research data and results, delaying publication, or informing the research community or the public.

IV. Reporting to Federal Agencies

a. Premature Termination. The DO shall notify ORI in advance if there are plans to close a case at the inquiry, investigation, or appeal stage on the basis that respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except:

1. Closing of a case at the inquiry stage on the basis that an investigation is not warranted; or
2. Finding of no misconduct at the investigation stage, which must be reported to the federal agency, as prescribed in this policy.

b. Notice to ORI of Institutional Findings and Actions. Unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation, or the 120-day period for completion of any appeal, submit the following to ORI:

1. A copy of the final investigation report with all attachments and any appeal;
2. A statement of whether the institution accepts the findings of the investigation report or the outcome of the appeal;
3. A statement of whether the institution found misconduct and, if so, who committed the misconduct; and
4. A description of any pending or completed administrative actions against the respondent.

V. Termination or Resignation Prior to Completing Inquiry or Investigation. The termination of the respondent's institutional employment, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the research misconduct proceeding or otherwise limit any of the institution’s responsibilities. If the respondent refuses to participate in the process after resignation, the RIO and any inquiry or investigation Committee will use their best efforts to reach a conclusion concerning the allegations, noting in the report the respondent's failure to cooperate and its effect on the evidence.

VI. Protection of the Complainant, Witnesses and Committee Members. During the research misconduct proceeding and upon its completion, regardless of whether the institution or ORI determines that research misconduct occurred, the RIO must undertake all reasonable and practical efforts to protect the position and reputation of, or to counter potential or actual retaliation against, any complainant who made allegations of research misconduct in good faith and of any witnesses and committee members who cooperate in good faith with the research misconduct proceeding. The DO will determine, after consulting with the RIO, and with the complainant, witnesses, or committee members, respectively, what steps, if any, are needed to restore their respective
positions or reputations or to counter potential or actual retaliation against them. The RIO is responsible for implementing any steps the DO approves.

VII. Allegations Not Made in Good Faith. If the DO determines that the complainant’s allegation of research misconduct was made with knowledge that the allegation was false, or with reckless disregard for or willful ignorance of facts that would disprove the allegation, or that any member of the University community acted in violation of this Policy, the DO will determine whether any administrative action should be taken against such person.

VIII. Departure from Procedures. The DO may approve departures from these procedures as required by law or as necessary to protect public health or safety, the integrity of research, fundamental fairness to the respondent or other parties, or an overriding interest of the University. The DO shall document any significant departures in writing and shall provide written notice to the Research Affairs Committees of the Bloomington and Indianapolis Faculty Councils of any systematically recurring departures from these procedures.

Definitions

Allegation: A written disclosure of possible research misconduct to the RIO or DO that triggers the procedures described by this Policy. An allegation must be more than a conclusory statement, and should provide sufficient specificity to allow a determination as to whether the conduct alleged, if true, falls within this Policy.

Complainant: A person who submits an allegation of research misconduct.

Conflict of Interest: A professional or personal relationship or activity with the respondent or other parties, beyond that of a mere acquaintance or colleague, that might affect, or reasonably appear to affect, the individual’s ability to be impartial.

Deciding Official (DO): The University official appointed by the President to implement and oversee this policy consistent with applicable laws.

Inquiry: The process under the Policy for information gathering and preliminary fact-finding to determine if an allegation or apparent instance of research misconduct has substance and therefore warrants an investigation.

Investigation: The process under the Policy for the formal examination and evaluation of all relevant facts to determine whether research misconduct has occurred, and, if so, the responsible person and the seriousness of the misconduct.

ORI: The federal Office of Research Integrity.

Reckless:

1. The researcher, in proposing, performing, or reviewing research, or in reporting research results, was or should have been aware that an act or omission:
   a. was a significant departure from accepted standards of the relevant research community; and b. posed a substantial risk that such conduct could result in falsification, fabrication, or plagiarism; and
   b. The researcher, either by action or inaction, failed to do what a researcher adhering to the standards of research practice and oversight in the relevant research community would have done under these circumstances to prevent the falsification, fabrication, or plagiarism.

Research: A systematic investigation designed to develop or contribute to generalizable knowledge. The term encompasses basic and applied research, as well as research training activities.

Research Integrity Officer (RIO): A person identified by the DO to have primary responsibility for assuring adherence to these procedures.

Research Misconduct: The fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.

1. Fabrication is making up data or results and recording or reporting them.
2. 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.

3. Plagiarism is the appropriation of another person’s ideas, processes, results, or words without giving appropriate credit.

4. Research misconduct does not include disputes regarding honest error or good faith differences in interpretations or judgments of data, and is not intended to resolve good faith scientific or scholarly disagreement. Research misconduct is also not intended to include “authorship” disputes such as complaints about appropriate ranking of co-authors in publications, presentations, or other work, unless the dispute constitutes plagiarism.

**Research Record:** Any data, document, computer file, digital medium, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of an allegation of research misconduct. 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; printed or electronic correspondence; memoranda of telephone calls; 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.

**Respondent:** The person against whom an allegation of research misconduct is directed, or the person whose actions are the subject of an inquiry or investigation.

**Sponsored Programs:** Research, training, and instructional projects involving funds, materials, gifts, or other compensation from external entities (including any individual and government agencies) under agreements with the University.

**History**

(By Action of the University Faculty Council: February 10, 1998; By Action of the University Faculty Council: April 24, 2007; Adapted from Policy On Research Integrity And Guidelines For Establishing Procedures For Responding To Allegations Of Research Misconduct, By Action of the University Faculty Council: November 24, 2009 By Action of the University Faculty Council: March 27, 2012)

Revisions to policy approved by UFC and University President, April 18, 2017

**Previous Version:**

Effective Dates: 3/27/2012 through 4/18/2017