THE
UNIVERSITY
OF RHODE ISLAND

Policy on Research Misconduct

Policy Title	**Policy on Research Misconduct**
Policy #	05.103.2
Policy Owner	Associate Vice President for Research Administration
Contact Information	Questions regarding this policy should be directed to the Associate Vice President of Research Administration at (401) 874-2636
Approved By	Administrative Policy Committee
Effective Date	October 11, 2022
Next Review Date	No later than December 31, 2027
Who Needs to Know About this Policy	All faculty, staff, and students of the University as well as University Affiliates
Definitions	**Complainant**. A person who in good faith makes an allegation of Research Misconduct. **Deciding Official**. The University of Rhode Island official who makes final determinations on allegations of Research Misconduct as well as any responsive University actions. The Vice President for Research and Economic Development is the Deciding Official at the University of Rhode Island. **Covered Individual**. Any individual paid by, under the control of, or affiliated with the University of Rhode Island, such as faculty (including part-time faculty), staff, students, trainees, technicians, guest researchers, collaborators and consultants at the University of Rhode Island. **Inquiry**. Preliminary information-gathering and preliminary fact-finding that meet the criteria and follow the procedures set forth in Section III of this policy and applicable federal regulations and external sponsor requirements. **Inquiry Committee**. The panel charged with the assessment of allegations of Research Misconduct, including the development of an Inquiry report relative to these allegations. **Investigation**. The formal development and examination of a factual record leading to (1) a decision not to make a finding of Research Misconduct or (2) a recommendation for a finding of Research Misconduct, which may include a recommendation for internal administrative or other appropriate action. **Investigation Committee**. The panel that conducts the Investigation of allegations of Research Misconduct, including the development of an Investigation report that includes the panel's statement of findings relative to these allegations.

	Research Integrity Officer ("RIO"). The University of Rhode Island official who is responsible for assessing allegations of Research Misconduct and determining when such allegations warrant inquiries, and for overseeing inquiries and Investigations. The Deciding Official appoints the RIO. The Director of Research Integrity serves as the RIO at the University of Rhode Island. **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. a. *Fabrication* is making up data or results and recording or reporting them. b. *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. c. *Plagiarism* is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit. **Research Misconduct Proceeding**. Any action related to alleged Research Misconduct, including but not limited to, allegation assessments, Inquiries, and Investigations. **Research Record**. The record of data or results that embody the facts resulting from the Research Misconduct Proceedings, including but not limited to research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided by or collected from a Respondent in the course of the Research Misconduct Proceeding. **Respondent**. The person(s) against whom an allegation of Research Misconduct is directed or who is the subject of a Research Misconduct Proceeding. **University Affiliate.** Any individual who is not a faculty member, staff, or student who otherwise has a formal relationship with the University, including but not limited to visiting scholars, visiting students, research fellows, professional program participants, club sports coaches, and volunteers as well as employees and associates of the URI Foundation and Alumni Engagement, URI Research Foundation, and members of the University of Rhode Island Board of Trustees. Vendors and contractors are not considered University Affiliates, except for those with an ongoing presence on the University campus as regular operations support staff.
Statutes, Regulations, and Policies Governing or Necessitating This Policy	Public Health Service (PHS), U.S. Department of Health and Human Services; 42 CFR Part 93, (PHS) Policies on Research Misconduct National Science Foundation; 45 CFR 689, Research Misconduct U.S. Department of Defense; Instruction 3210.7, Research Integrity and Misconduct U.S. Department of Agriculture; 2 CFR Part 422, Research Institutions Conducting USDA-Funded Extramural Research; Research Misconduct

Reason for Policy/Purpose	This policy is intended to meet the requirements of federal agency regulations. Any Covered Individual having reason to believe that someone has engaged in Research Misconduct related to University of Rhode Island research has an obligation to report the concerns to their department chair (or equivalent unit head) or directly to the RIO.
Forms Related to this Policy	None

Policy Statement

Public trust in the integrity and ethical behavior of scholars must be maintained if research is to continue to play its proper role at the University of Rhode Island and in society at large. It is the policy of the University of Rhode Island (also, "University") that its research be carried out with the highest standards of integrity and ethical behavior. It is further the policy of the University to fully inform all affected parties where misconduct has occurred in research sponsored by, or under the administrative supervision of, the University of Rhode Island. While the primary responsibility for maintaining integrity in research rests with those who conduct it, the University has established standards to ensure a healthy environment for research and compliance with law. Such standards include this policy and its attendant procedures.

For the purposes of this policy, research is defined as a systematic investigation, including development, testing, and evaluation of ideas, designed to develop or contribute to general knowledge. Research includes all basic, applied, clinical, translational, and demonstration activities in all academic and scholarly fields, including, but not limited to the arts, the sciences, liberal arts, applied sciences, social sciences, and the professions, including research activities involving human subjects and animals.

Each member of the University community has a personal responsibility for implementing this policy in relation to any scholarly work with which they are associated and for helping their associates in continuing efforts to avoid any activity that might be considered in violation of this policy. Failure to comply with this policy shall be dealt with according to the procedures specified herein and is considered to be a violation of the trust placed in each member of the University community.

To conform to federal regulations, this policy shall include attendant procedures or other process-oriented guidance and requirements.

I. SCOPE

The following policy and procedures apply to all research conducted under the auspices of the University, regardless of the source of financial support, and is limited to addressing Research Misconduct as defined in Section II below, not other types of misconduct. When the allegation of Research Misconduct relates to activities funded by the U.S. Public Health Service ("PHS"), the policy is intended to meet the requirements of the PHS regulations at 42 CFR Part 93. For allegations of Research Misconduct related to research funded by the National Science Foundation ("NSF"), this policy is intended to meet the requirements of the NSF regulations at 45 CFR 689.

This policy shall apply to University of Rhode Island research personnel, including faculty (including part-time faculty), staff, students, trainees, technicians, guest researchers, collaborators, consultants, and any other individuals identified as University Affiliates, i.e., Covered Individuals). In addition, University subawardees and subcontractors are expected to inquire into and, if necessary, investigate and resolve promptly and fairly, all instances of alleged Research Misconduct related to the subaward or subcontract, such review to comply with applicable federal regulations.

This policy will be followed when an allegation of Research Misconduct related to research activities conducted at the University is received (through any means of communication). In those instances where it is determined by the University that a deviation from the policy is necessary to more appropriately handle the allegation, such deviation

must be fair to all parties involved and approved by the University's Vice President for Research and Economic Development.

II. GENERAL POLICIES AND PRINCIPLES

A. Responsibility to Report Research Misconduct

Any Covered Individual having reason to believe that someone has engaged in Research Misconduct related to University research has an obligation to report their concerns to their own department chair (or equivalent unit head) or directly to the Research Integrity Officer (RIO). The department chair (or equivalent) shall immediately notify the RIO, who will inform the Deciding Official. If the circumstances described do not meet the definition of Research Misconduct, as set forth above, the RIO may refer the individual or allegation to other offices or officials with responsibility for resolving the issue.

If an allegation of Research Misconduct creates a real or apparent conflict of interest for the RIO, the Deciding Official shall appoint a substitute official to act in that capacity, relative only to the specific allegation creating the conflict. Should the allegation of Research Misconduct create a real or apparent conflict of interest for the Deciding Official, the President of the University of Rhode Island shall act as Deciding Official relative only to the specific allegation creating the conflict.

B. Ethics Hotline

If the reporting individual desires anonymity, they may report to the Ethics Hotline (https://web.uri.edu/enterprise-compliance/ethics-hotline) since anonymous reports can be accepted via this resource. The Ethics Hotline is designed to receive reports regarding compliance and ethical issues, as well as other concerns related to accounting and financial controls, athletics, human resources, information technologies, research, and risk and safety matters. Examples of reportable issues include fraud, misuse of University resources or information, violation of safety rules and environmental laws, conflicts of interest, NCAA violations, and Research Misconduct. Reports should contain sufficient information to substantiate the concern and allow an appropriate investigation to begin promptly. Facts will be made available only to those who need to know in order to address the issues reported. While the Ethics Hotline allows a reporting individual to submit reports anonymously, the University encourages individuals who use the Ethics Hotline to self-identify since there may be difficulty in addressing an anonymous report.

C. Cooperation with Research Misconduct Proceedings

Covered Individuals are responsible for cooperating with the RIO and other University officials in the review of allegations of Research Misconduct and in conducting inquiries and Investigations. Covered Individuals, including Respondents, have an obligation to provide evidence relevant to Research Misconduct Proceedings to the RIO or other appropriate University officials.

D. Confidentiality

Research Misconduct reviews are confidential personnel matters. The RIO is responsible for informing individuals involved in the Research Misconduct Proceeding of the need to maintain confidentiality. In addition, the RIO shall endeavor to protect the confidentiality of individuals identifiable from Research Records or evidence by limiting disclosure to those with a need to know in order to carry out a thorough, competent, objective, and fair Research Misconduct Proceeding or as required by law.

E. Interim Administrative Actions and Notifying External Sponsors of Special Circumstances

Throughout the Research Misconduct Proceeding, the RIO will review the situation to determine if there is any threat of harm to public health, sponsored funds and equipment, the integrity of the externally supported research process, or University resources, personnel, students, or trainees. In the event of such a threat, the RIO will, in consultation with other University officials and appropriate external sponsors, take or recommend appropriate interim action to protect against any such threat. Interim action may include: additional monitoring of the research process and the handling of external funds and equipment, reassignment of personnel or of

responsibility for handling external funds and equipment, additional review of research data and results, or delaying publication.

The RIO shall, at any time during a Research Misconduct Proceeding, notify appropriate federal officials if during the course of the Research Misconduct Proceedings they have reason to believe that any of the following conditions exist:

1. Health or safety of the public is at risk, which may include an immediate need to protect human or animal subjects;
2. Federal resources or interests are threatened;
3. Research activities should be suspended;
4. There is a reasonable indication of possible violations of civil or criminal law;
5. Federal action is required to protect the interests of those involved in the Research Misconduct Proceeding;
6. The University believes that the Research Misconduct Proceeding may be made public prematurely (so that the agency may take appropriate steps to safeguard evidence and protect the rights of those involved); or
7. The research community or public should be informed.

III. THE INQUIRY

A. Assessment of Allegations

As soon as practicable after receiving an allegation of Research Misconduct, the RIO will assess the allegation to determine whether it (1) falls within the definition of Research Misconduct in this policy and applicable federal regulations, including, as applicable 42 CFR § 93.103 and other federal agency guidance, and (2) is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. An Inquiry will be conducted if both of these criteria are met.

In conducting the assessment, the RIO need not interview the Complainant, Respondent, or other witnesses, or gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. The RIO shall consult with the Deciding Official throughout the course of the assessment.

B. Sequestration of the Research Records

If the RIO determines that an Inquiry is warranted, on or before the date on which the Respondent is notified per Section IV.A below, or the Inquiry begins, whichever is earlier, 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 Research Records and evidence, and sequester them in a secure manner. Where the Research Records or evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies have evidentiary value substantially equivalent to that of the instruments themselves.

C. Notification of Inquiry

At the time of or before beginning an Inquiry, the RIO shall make a good faith effort to notify the Respondent in writing regarding the initiation of an Inquiry. If the Inquiry subsequently identifies additional Respondents, they shall also be notified in writing.

The RIO will also notify the dean of the school or college where the Respondent is assigned (to the extent the individual has not already been notified), as well as the appropriate department chair. The provost shall also be informed by the RIO of all Research Misconduct matters that have progressed to the Inquiry stage.

D. Appointment of the Inquiry Committee

The RIO, in consultation with other University officials, as appropriate, is responsible for appointing an Inquiry Committee to conduct the Inquiry. The committee will typically consist of at least two (2) individuals, with appropriate background to assess the allegations. The members of the Inquiry Committee shall consist of individuals who do not have a conflict of interest, whether personal, professional, or financial in relation to the Inquiry. As necessary, the RIO may select Inquiry Committee members from outside the University, such as in cases of the need for expertise or to avoid a conflict of interest. The Inquiry Committee may consult with outside experts, as necessary to appropriately perform the Inquiry. Such experts, if utilized, shall be strictly advisory to the Inquiry Committee and promptly informed of the requirement to maintain strict confidentiality regarding the Research Misconduct Proceedings.

E. Initial Meeting with the Inquiry Committee

The RIO will hold an initial meeting with the Inquiry Committee during which the Inquiry Committee will be informed of the following:

- The allegations and any related issues identified during the allegation assessment;
- The purpose of the Inquiry;
- The criteria for determining whether an Investigation is warranted;
- The responsibility of the Inquiry Committee to prepare a written report of the Inquiry that meets the requirements of Section IV.H of this policy;
- The requirement to keep all matters related to the Research Misconduct Proceeding confidential; and
- The timeline for completion of the Inquiry.

F. Inquiry Process

The purpose of the Inquiry is to conduct an initial review of the available evidence to determine whether an Investigation is warranted. An Investigation is warranted if: (1) there is a reasonable basis for concluding that the allegation falls within the definition of Research Misconduct in this policy and (2) preliminary information-gathering and preliminary fact-finding from the Inquiry indicate that the allegation may have substance. As part of the Inquiry, the Inquiry Committee, as it deems necessary, may interview the Respondent and/or the Complainant. The Respondent shall have the right to counsel during the Inquiry, but counsel is not permitted to address substantive matters before the Inquiry Committee or question the Respondent, Complainant or other witnesses unless permitted by the Inquiry Committee chair. If the Respondent is a member of a bargaining unit at the University of Rhode Island, they shall have a right to union representation if they so choose, subject to the terms of the applicable bargaining agreement. After evaluation of the evidence, the Inquiry Committee will prepare an Inquiry report with its recommendation to the Deciding Official regarding whether an Investigation is warranted.

If a legally sufficient admission of Research Misconduct is made by the Respondent, Research Misconduct may be determined at or before the Inquiry stage if all relevant issues are resolved. In these instances, the Inquiry Committee shall consult with the RIO, who may consult with other University officials and sponsoring officials, as necessary, to determine the next steps that should be taken.

G. Time for Completion

The Inquiry should normally be concluded within sixty (60) days. Exceptions to this sixty (60)-day limit require approval of the Deciding Official. Any extension granted for more than sixty (60) days shall include documentation of the reasons for the extension. Notification of extensions will be provided to sponsors as required by law or the terms of the award.

H. The Inquiry Report

A written Inquiry report shall be prepared by the Inquiry Committee that includes the following information: (1) the name and position of the Respondent; (2) a description of the allegations of Research Misconduct; (3) the external support, as applicable, including, for example, award numbers, applications, contracts, and publications listing such support; (4) the basis for recommending or not recommending that the allegations

warrant an Investigation; and (5) any written comments on the draft report by the Respondent, as addressed in Section IV.I below.

The Inquiry report should also include: the names and titles of the Inquiry Committee members and experts who conducted the Inquiry; a summary of the Inquiry process used; a list of the Research Records reviewed; and whether any other actions should be taken if an Investigation is not recommended.

I. Comments to the Inquiry Report

A copy of the Inquiry report shall be provided to the Respondent for comment. The Respondent shall be given ten (10) days to review and provide written comments on the Inquiry report. Based on the comments, the Inquiry Committee may revise the Inquiry report. The Respondent's comments shall be attached to the final Inquiry report, which shall be delivered by the RIO to the Deciding Official, within ten (10) days of receiving the Respondent's comments.

J. University Decision and Notification

i. Decision by the Deciding Official

The RIO will transmit the final Inquiry report and any written comments to the Deciding Official, who will make the final determination, in writing, as to whether an Investigation is warranted. The Inquiry is complete when the Deciding Official makes this determination.

ii. Notifications

The RIO shall notify the Respondent whether the Inquiry found that an Investigation is warranted. The notice shall include a copy of the Inquiry report, along with a copy of this policy and any applicable sponsor's Research Misconduct policy.

The University shall provide sponsors, as required by the terms of award, with the Deciding Official's written decision and a copy of the Inquiry report. Such notification shall occur no later than thirty (30) days after the Deciding Official's decision that an Investigation is warranted, or such shorter period as may be required by the terms of award.

The RIO will also notify the dean of the school or college where the Respondent is assigned (in those cases where the dean is not the Deciding Official), as well as the appropriate department chair. The provost shall also be informed by the RIO of the determination of the Inquiry Committee. Other University officials will be informed on a need-to-know basis.

iii. Documentation of Decision Not to Investigate

If the Deciding Official determines that an Investigation is not warranted, the RIO shall secure, and require to be maintained for seven (7) years after the termination of the Inquiry, sufficiently detailed documentation of the Inquiry to permit a later assessment by supporting external sponsors, as warranted, of the reasons why an Investigation was not conducted. These documents shall be provided to sponsors as required by law or the terms of the award.

In addition, when the Deciding Official determines that an Investigation is not warranted, any reference to the allegation in the personnel file of the Respondent shall be removed promptly.

IV. THE INVESTIGATION

A. Initiation and Notification

If it is determined by the Deciding Official that an allegation warrants an Investigation, such Investigation shall begin within thirty (30) days of the determination. The Deciding Official may suspend the Respondent from further participation in the research project at issue or other institutional responsibilities, but only if the Deciding Official determines that there could be serious harm to the Respondent or others through the Respondent's continuance of their duties. Any such suspension shall not alone be grounds to interrupt payment of salary.

On or before the date on which the Investigation begins, but no more than thirty (30) days after the Deciding Official determines that an Investigation is warranted, the RIO shall notify external sponsors, as required under applicable federal regulations or award terms, of the decision to begin the Investigation and, if required, provide such officials with a copy of the Inquiry report. Within a reasonable time after determining that an Investigation is warranted, but before the Investigation begins, the RIO shall notify the Respondent in writing of the allegations to be investigated.

Additional allegations of Research Misconduct related to the Respondent that are raised during the Investigation may be addressed by the Investigation Committee without having to go through the Inquiry process outlined in Section III of this policy. In such instances, Respondent shall be provided with timely notice of such additional allegations.

B. Sequestration of Research Records

To the extent not already sequestered, before or at the time the Respondent is notified of the Investigation, the RIO shall take all reasonable and practical steps to obtain custody of and secure all Research Records and evidence needed to conduct the Investigation. Such sequestration shall be consistent with the process set forth in Section IV.B of this policy. If additional items become known or relevant during the Investigation, the RIO shall take custody of those Research Records if possible.

C. Appointment of the Investigation Committee

The RIO, in consultation with other University officials, as appropriate, will appoint an Investigation Committee, along with a committee chair, to conduct the Investigation. The Investigation Committee shall consist of at least three (3) persons, including a committee chair. At least one University faculty member shall be appointed to each such committee. No Investigation Committee members shall have conflicts of interest in relation to the Investigation. Investigation Committee members should have appropriate scientific or scholarly expertise to assess the allegations. External scholars or persons with expertise in other areas may be included on the Investigation Committee, where warranted by the nature of the field or the allegations.

D. Charge to the Investigation Committee

The RIO will hold an initial meeting with the Investigation Committee during which the RIO will inform the Investigation Committee of the following:

1. The allegations and any related issues identified during the Inquiry; the Investigation Committee will be provided a copy of the Inquiry Report;
2. Its obligations to conduct the Investigation as prescribed in this policy;
3. The definition of Research Misconduct;
4. The standard for making a finding of Research Misconduct, including the preponderance of the evidence standard;
5. Its obligations to evaluate the evidence and testimony in making its determination of Research Misconduct;
6. The requirement to prepare a written report of the Investigation that meets the requirements of Section V.H of this policy;
7. The requirement to maintain confidentiality throughout the course of the Investigation; and
8. A timeline for completion of the Investigation.

E. Investigation Process

The Investigation Committee and the RIO shall:

1. Use diligent efforts to ensure that the Investigation is thorough and sufficiently documented and includes examination of all Research Records and evidence relevant to reaching a decision on the merits of each allegation;
2. Take reasonable steps to ensure an impartial and unbiased Investigation to the maximum extent practical;
3. 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 that were not part of the original allegation but have come to the attention of the Investigation Committee during the course of the Investigation, and continue the Investigation to completion; and
4. Hold a hearing during which 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, will be questioned by the Investigation Committee. Individuals questioned by the Investigation Committee will be asked to testify under oath, although they cannot be compelled to do so. The hearing shall be recorded, transcribed, or summarized and each individual questioned by the Investigation Committee shall be provided with a copy of their testimony and the opportunity to submit comments or revisions. The hearing will be closed to the public unless the Respondent and the Investigation Committee chair agree that it may be open. The Respondent shall have the right to counsel, but counsel is not permitted to address substantive matters before the Investigation Committee or question the Respondent, Complainant, or other witnesses unless permitted by the Investigation Committee chair. If the Respondent is a member of a bargaining unit at the University of Rhode Island, they shall have a right to union representation if they so choose, subject to the terms of the applicable bargaining agreement. The Respondent shall also have the opportunity to provide an opening and closing statement (both limited to fifteen [15] minutes), present the testimony of witnesses and other evidence, the opportunity to confront and cross-examine witnesses, and the opportunity to examine all documents and other evidence. Individuals shall make themselves available according to the schedule established by the Investigation Committee chair. If a party chooses not to make themselves available, the Investigation Committee may proceed in their absence.

F. Time of Completion

The Investigation shall ordinarily be completed within one hundred and twenty (120) days of its initiation, including the Deciding Official's decision and submission of the final report to external sponsors, as applicable. If the Investigation Committee determines that the Investigation will not be completed within the one hundred and twenty (120)-day period, it shall request an extension, which is subject to approval by the Deciding Official. In instances where the allegation of Research Misconduct relates to an externally supported project, the RIO shall submit a written extension request to the sponsor as required by applicable law or the terms of the award.

G. Standard for Making a Finding of Research Misconduct

A finding of Research Misconduct requires:

1. The misconduct alleged meets the definition of Research Misconduct as set forth in this policy or applicable federal agency policy;
2. The alleged misconduct is a significant departure from accepted practices of the relevant research community; and
3. The misconduct was committed intentionally, knowingly, or recklessly.

A finding of Research Misconduct must be proven by a preponderance of the evidence. If the Respondent presents any affirmative defenses to an allegation of Research Misconduct, the Respondent has the burden of going forward with and the burden of proving, by a preponderance of the evidence, such affirmative defenses.

H. Elements of the Investigation Report

The Investigation Committee is responsible for preparing a written Investigation report which shall:

1. Describe the nature of the allegation of Research Misconduct, including identification of the Respondent;
2. Describe and document any applicable external funding, including, for example, any grant numbers, grant applications, contracts, and publications listing any such support;
3. Describe the specific allegations of Research Misconduct considered in the Investigation;
4. Identify and summarize the Research Records and evidence reviewed and identify any evidence taken into custody but not reviewed;
5. Provide a statement of findings for each separate allegation of Research Misconduct identified during the Investigation; and
6. Include a copy of this policy.

The statement of findings specific to each allegation (set forth in (5) immediately above), must provide a decision as to whether Research Misconduct did or did not occur, and if so:

1. Identify whether the Research Misconduct was: (a) falsification, fabrication, or plagiarism, (b) a significant departure from accepted practices of the relevant research community, and (c) committed intentionally, knowingly, or recklessly;
2. 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 the Respondent to establish by a preponderance of the evidence that they did not engage in Research Misconduct because of honest error or a difference of opinion;
3. Identify specifically any external funding;
4. Identify whether any publication, known at the time of preparation of the Investigation report, needs correction or retraction;
5. Identify the person(s) responsible for the misconduct; and
6. List any current support or known applications or proposals for support that the Respondent has pending with any federal or other external entities.

I. Comments on the Initial Investigation Report and Access to Evidence

The RIO shall provide the Respondent with a copy of the preliminary initial Investigation report for comment and rebuttal, and shall provide the Respondent, concurrently, with a copy of, or supervised access to, the evidence on which the report is based. Comments must be submitted, in writing, within thirty (30) days of the Respondent's receipt of this initial Investigation report and will be taken into consideration by the Investigation Committee when preparing the final Investigation report and shall be attached to the final report. The final Investigation report must be submitted by the RIO to the Deciding Official within ten (10) days of receipt of the Respondent's comments.

In distributing the draft report, or portions thereof, to the Respondent, the RIO will inform the Respondent 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 Respondent sign a confidentiality agreement.

J. Decision by the Deciding Official

If a majority of the Investigation Committee makes a finding of Research Misconduct, the Investigation Committee shall include in the Investigation report a recommended course of action to the Deciding Official. The Investigation Committee's recommendations may include appropriate sanctions.

The Deciding Official will review the Investigation report and determine in writing: (1) whether they accept the Investigation's findings; and (2) the appropriate internal actions taken in response to the accepted findings of Research Misconduct. If the Deciding Official's determination varies from the findings of the Investigation Committee, the Deciding Official will, as part of their written determination, explain in detail the basis for rendering a decision different from the findings of the Investigation Committee. Alternatively, the

Deciding Official may return the report to the Investigation Committee with a request for further fact-finding or analysis.

The RIO is responsible for ensuring compliance with all notification requirements of sponsors. The RIO will, in consultation with other appropriate University officials, 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.

The RIO will also notify the dean of the school or college where the Respondent is assigned, as well as the appropriate department chair. The RIO shall report to the provost on the full account of the Research Misconduct Proceedings.

K. Notice of University Findings and Actions to External Sponsors

The RIO shall notify external sponsors, as applicable, regarding the results of the Investigation. Such notification shall be consistent with law and the terms of the award. For example, for Research Misconduct allegations related to PHS funded awards, such notification shall include:

1. A copy of the final Investigation report with all attachments;
2. A statement of whether the University accepts the findings of the Investigation report;
3. A statement of whether the University found Research Misconduct and, if so, who committed the Research Misconduct; and
4. A description of any pending or completed administrative actions against the Respondent.

L. Maintaining Records for Review by External Sponsors

The University shall maintain, and upon request, provide to sponsors, if required by law or the terms of award, records of the Research Misconduct Proceedings, which include:

1. Records secured by the University for the Inquiry and Investigation; (2) documentation of the determination of irrelevant or duplicate records; (3) the Inquiry report and final documents produced in the course of preparing that report, including the documentation of any decision not to investigate; and (4) the Investigation report and all records in support of that report, including the recordings and transcriptions of each interview conducted pursuant to this policy.

Records shall be maintained in a secure manner for seven (7) years after completion of the Research Misconduct Proceeding or for such longer period as required by law or term of award.

The RIO is also responsible for providing any information, documentation, Research Records, evidence, or clarification requested by an external sponsor to carry out its review of an allegation of Research Misconduct or of the University's handling of such an allegation.

V. COMPLETION OF CASES AND REPORTING PREMATURE CLOSURES TO EXTERNAL SPONSORS

Generally, all inquiries and Investigations will be carried through to completion and all significant issues will be pursued diligently. As required by law or the terms of award, the RIO shall notify external sponsors in advance if there are plans to close a case at the Inquiry or Investigation stage on the basis that the Respondent has admitted guilt or a settlement with the Respondent has been reached.

VI. ADMINISTRATIVE AND DISCIPLINARY ACTION

If the Deciding Official determines that the Respondent has engaged in Research Misconduct, the University may impose administrative or disciplinary action(s), which may include, but are not limited to:

1. Appropriate steps to correct the Research Record;
2. The imposition of special certification or assurance requirements to ensure compliance with applicable regulations or terms of award;
3. Removal of Respondent from the research project in question;
4. Termination or suspension of an active award;
5. Letter of reprimand;
6. Special monitoring of future work;
7. Salary reduction (consistent with applicable University policies, procedures, or applicable contacts or agreements); or
8. Disciplinary action allowed under applicable personnel or student policies and applicable contracts or agreements, including suspension or termination of employment.

None of the foregoing sanctions limits the authority of a funding sponsor to impose its own sanctions.

If the University believes that criminal or civil fraud violations may have occurred, the University shall promptly refer the matter to the appropriate investigative body.

VII. OTHER CONSIDERATIONS

A. Termination or Resignation Prior to Completing the Inquiry or Investigation

The termination of the Respondent's 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.

If the Respondent, without admitting to the Research Misconduct, elects to resign their position after the University receives an allegation of Research Misconduct, the assessment of the allegation will proceed, as well as the Inquiry and Investigation, as appropriate, based on the outcome of the preceding steps. If the Respondent refuses to participate in the process after resignation or termination, the University will use its best efforts to reach a conclusion concerning the allegations, noting in the report the Respondent's failure to cooperate and its effect on the Research Misconduct Proceeding.

B. Protection of Individuals Involved in Research Misconduct Proceedings

Throughout the Research Misconduct Proceedings and after its conclusion, the University 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, as well as any Complainant, witness, and Inquiry or Investigation committee member who cooperate in good faith with the Research Misconduct Proceedings.

Any use of this policy to bring malicious allegations or allegations not otherwise in good faith against any individual shall be a violation of this policy. Any act of retaliation or reprisal against an individual for reporting in good faith a charge of Research Misconduct in research, or against individual involved in a Research Misconduct Proceeding, shall be a violation of this policy. Such violations shall be dealt with through regular administrative processes for violations of University policies.

C. Whistleblower Protection

Certain classes of individuals, including at will employees, contract employees, applicants, prospective employees, and independent contractors, have protection under the Rhode Island Whistleblowers' Protection Act (RIGL § 28-50). If an individual entitled to such protection makes a report of a violation of a federal or state law or regulation that the individual knows or reasonably believes has occurred or is about to occur, the reporting individual is protected under RIGL § 28-50 and may not be discharged, threatened, or otherwise discriminated against because of such report. Nothing in this policy is intended to limit or otherwise affect the rights of individuals protected by the Rhode Island Whistleblowers' Protection Act and individuals should refer to RIGL § 28-50 for the full scope of activities protected under that law.

Exceptions

None

Policy Review and Revisions

(Versions earlier than the first policy number may be paper only)

Policy #	Effective Date	Reason for Change	Changes to Policy
No #. Title: Research Misconduct Policy: Responding to Allegations of Research Misconduct	November 7, 2018	n/a	n/a
01.103.1	October 11, 2022	New template; align with other misconduct policies	Addition of Ethics Hotline and Whistleblower Protection sections