

## Policy on Research Misconduct

|  |   |
|--|---|
| <b>Policy Title</b>                        | <b>Policy on Research Misconduct</b>  |
| <b>Policy #</b>                            | 05.103.2  |
| <b>Policy Owner</b>                        | Associate Vice President for Research Administration  |
| <b>Contact Information</b>                 | Questions regarding this policy can be directed to the Director of Research Integrity at (401) 874-4813.  |
| <b>Approved By</b>                         | President of the University of Rhode Island   |
| <b>Effective Date</b>                      | September 24, 2025  |
| <b>Next Review Date</b>                    | No later than September 30, 2030  |
| <b>Who Needs to Know About this Policy</b> | All faculty, staff, and students of the University; University Affiliates; and all Covered Individuals as defined below.  |
| <b>Definitions</b>                         | <p><b>Assessment.</b> A review of readily accessible information and the subsequent consideration of whether an allegation of Research Misconduct appears to fall within the definition of Research Misconduct, is subject to applicable federal regulations, and is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified.</p> <p><b>Complainant.</b> A person who makes an allegation of Research Misconduct.</p> <p><b>Covered Individual.</b> For the purposes of this policy, any individual conducting, assisting, advising, administering, facilitating, supervising, observing, having knowledge of, or in any manner participating in Research at, or under the auspices of, the University of Rhode Island. Covered Individuals may include, but are not limited to, faculty (including part-time faculty), staff, students, trainees, technicians, guest researchers, collaborators, consultants, and University Affiliates.</p> <p><b>Deciding Official.</b> 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.</p> <p><b>Good Faith.</b> As applied to a Complainant or witness, having a reasonable belief in the truth of one's allegation or testimony, 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 knowledge of or reckless disregard for information that would negate the allegation or testimony.</p> <p>As applied to an institutional or committee member, cooperating with the Research Misconduct Proceeding by impartially carrying out the duties assigned for the purpose of helping an institution meet its responsibilities</p> |

under this part. An institutional or committee member does not act in Good Faith if their acts or omissions during the Research Misconduct Proceedings are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the Research Misconduct Proceeding.

**Intentionally.** To act with the aim of carrying out the act.

**Inquiry.** Preliminary information-gathering and fact-finding that meets the criteria and follows the accompanying procedures and applicable federal regulations and external sponsor requirements.

**Inquiry Committee.** The panel that conducts the Inquiry into allegations of Research Misconduct, including the development of an Inquiry report relative to these allegations.

**Investigation.** The formal development of a factual record and the examination of that record that meets the criteria and follows the procedures accompanying this policy and applicable federal regulations and external sponsor requirements.

**Investigation Committee.** The panel that conducts the Investigation of allegations of Research Misconduct, including the development of an Investigation report relative to these allegations.

**Knowingly.** To act with awareness of the act.

**Preponderance of the Evidence.** Proof by evidence that, compared with evidence opposing it, leads to the conclusion that the fact at issue is more likely true than not.

**Recklessly.** For the purposes of this policy, to propose, perform, or review Research, or report Research results, with indifference to a known risk of fabrication, falsification, or plagiarism.

**Research.** 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, demonstration and creative activities in all academic and scholarly fields, including, but not limited to the arts, sciences, liberal arts, applied sciences, social sciences, and professions, including Research activities involving human subjects and animals.

**Research Integrity Officer ("RIO").** The University of Rhode Island official who is responsible for the Assessment of 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.

a. *Fabrication* is making up data or results and recording or reporting them.

|   |  |
|---|--|
|   | <p>b. <i>Falsification</i> 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.</p> <p>c. <i>Plagiarism</i> is the appropriation of another person's ideas, processes, results, or words, without giving appropriate credit. Plagiarism does not include self-plagiarism, authorship disputes, nor the limited use of identical or nearly identical phrases that describe a commonly used methodology.</p> <p>Research Misconduct does not include honest error nor differences of opinion.</p> <p><b>Research Misconduct Proceeding.</b> Any action related to alleged Research Misconduct, including but not limited to, allegations, Assessments, Inquiries, and Investigations.</p> <p><b>Research Record.</b> The record of data or results that embody the facts resulting from scientific inquiry, in both physical and electronic form. Examples of items, materials, or information that may be considered part of the Research Record include, but are not limited to, Research proposals, raw data, processed data, clinical Research records, laboratory records, study records, laboratory notebooks, progress reports, manuscripts, abstracts, theses, records of oral presentations, online content, lab meeting reports, and journal articles.</p> <p><b>Respondent.</b> The person(s) against whom an allegation of Research Misconduct is directed or who is the subject of a Research Misconduct Proceeding.</p> <p><b>University Affiliate.</b> 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.</p> |
| <b>Statutes, Regulations, and Policies Governing or Necessitating This Policy</b> | <p>Public Health Service (PHS), U.S. Department of Health and Human Services; 42 CFR Part 93, PHS Policies on Research Misconduct</p> <p>National Science Foundation; 45 CFR Part 689, Research Misconduct</p> <p>U.S. Department of Defense; Instruction 3210.7, Research Integrity and Misconduct</p> <p>U.S. Department of Agriculture; 2 CFR Part 422, Research Institutions Conducting USDA-Funded Extramural Research; Research Misconduct</p>   |
| <b>Reason for Policy/Purpose</b>  | <p>This policy is intended to protect the integrity of Research conducted at, or under the auspices of, the University and to meet the requirements of federal regulations.</p>  |

**Forms Related to  
this Policy**

None

## Policy Statement

To advance the enduring value of scholarly Research benefiting the State of Rhode Island and humanity at large, and to safeguard the University's reputation for excellence in Research, this policy and its accompanying procedures seek to preserve public trust in ethical Research practices and ensure compliance with all relevant federal regulations. The University of Rhode Island ("University") is committed to upholding the highest standards of integrity and ethical conduct in all Research activities, and to addressing any allegations of Research Misconduct with acumen, transparency, and accountability.

All Covered Individuals are required to have knowledge of and abide by the University's standards for ethical conduct and Research integrity, and are prohibited from committing or facilitating Research Misconduct as defined above and by federal regulations.

All Covered Individuals with reason to believe Research Misconduct may have occurred are required to report the incident(s) (see sections II.A. and II.C.) and are required to cooperate with Research Misconduct Proceedings (see section II.D.).

Failure to comply with this policy may result in administrative and/or disciplinary actions as referenced in section VIII.

### I. APPLICABILITY

This policy and its attendant procedures apply to all Research conducted under the auspices of the University, regardless of the existence or source of financial support, and is limited to addressing Research Misconduct as defined above, not other types of misconduct. Nothing in this policy limits the University's ability to investigate and/or take appropriate action on any matter of concern relating to the conduct of research that does not meet the definition of Research Misconduct as set forth in this policy.

When an allegation of Research Misconduct relates to activities funded by a federal agency, this policy is intended to meet the requirements of that agency, including the Public Health Service ("PHS") Policies on Research Misconduct (42 CFR Part 93) and the National Science Foundation ("NSF") regulations (45 CFR Part 689), as applicable. In the event anything in this policy conflicts with applicable federal regulations, the regulations will prevail.

This policy applies to all Covered Individuals. In addition, the policy requires Research subawardees and subcontractors to inquire into and, if necessary, investigate and resolve promptly and fairly, all instances of alleged Research Misconduct related to the subaward or subcontract in compliance with applicable federal regulations.

This policy applies regardless of whether an allegation of Research Misconduct is received from a Complainant or is otherwise discovered during the course of regular business practices. If the *PHS Policies on Research Misconduct* apply, the alleged Research Misconduct, or the subsequent use, publication, or citation of the allegedly fabricated, falsified, or plagiarized Research Record for the benefit of the Respondent, must have occurred within the period of six years prior to receipt of the allegation.

### II. GENERAL POLICIES AND PRINCIPLES

**A. Duty to Report Research Misconduct:** Any Covered Individual having reason to believe that someone has engaged in Research Misconduct related to University Research is required to report their concerns to

their own department chair (or equivalent unit head) or directly to the RIO. The department chair (or equivalent) shall notify the RIO within 1 business day, and the RIO will inform the Deciding Official. The preferred method of reporting is the report form included in the Procedures accompanying this policy. If an alternate method of reporting is used, the RIO or the department chair (or equivalent) may request the reporter complete a written submission using the preferred form. The reporting method(s) utilized will in no way impact the outcome nor alter any obligations to proceed.

- B. Conflicts of Interest:** 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 appoint a substitute official to act in that capacity relative only to the specific allegation creating the conflict. All members and potential members of any Inquiry or Investigation Committee must disclose any potential conflicts of interest according to the attendant procedures.
- C. Ethics Hotline:** If the reporting individual desires anonymity, they may submit an anonymous online report through the University's Ethics Hotline (<https://web.uri.edu/enterprise-compliance/ethics-hotline>). Reports must contain sufficient information to substantiate the concern and allow an appropriate Assessment to begin promptly. Facts will be made available only to those who need to know 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.
- D. Cooperation with Research Misconduct Proceedings:** Covered Individuals are required to cooperate with the RIO and other University officials in the review of allegations of Research Misconduct and in conducting Assessments, 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.
- E. Confidentiality:** To the maximum extent possible, within the law and the need to conduct a thorough Inquiry or Investigation, all participants in Research Misconduct Proceedings must keep confidential all information regarding the allegations and any proceeding under this policy, including the identity of Complainants, Respondents, and witnesses.

The RIO is responsible for informing individuals involved in Research Misconduct Proceedings of the need to maintain confidentiality, and for determining when a release of information is necessary or appropriate. 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.

- F. 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 ASSESSMENT

As soon as practicable after receiving an allegation of Research Misconduct or discovering activities that may constitute Research Misconduct, the RIO will assess the allegation to determine whether it (1) falls within the definition of Research Misconduct in this policy, (2) is subject to applicable federal regulations, including 42 CFR § 93.102 and other federal agency guidance, and (3) is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. An Inquiry will be conducted if 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 document the Assessment and consult with the Deciding Official throughout the course of the Assessment.

If the circumstances of the alleged conduct do not meet the definition of Research Misconduct as set forth in this policy, the RIO will dismiss the complaint and take no further action on the matter but may refer the individual or allegation to other offices or officials with responsibility for resolving the issue.

### IV. THE INQUIRY

**A. Inquiry Process:** If the RIO determines that an Inquiry is warranted as described in Section III of this policy, the RIO will initiate an Inquiry to determine whether an Investigation is warranted, following the procedures set forth in the procedures accompanying this policy. The Inquiry process shall include, as applicable:

- sequestration of the Research Record;
- notification regarding the Inquiry;
- appointment of the Inquiry Committee;
- information-gathering and fact-finding;
- creation of (and opportunity to comment on) an Inquiry Report;
- determination on the necessity of a subsequent Investigation by the Deciding Official;
- communication of the results of the Inquiry; and
- documentation of all aspects of the process.

**B. Time to Completion:** The Inquiry for federally-funded Research shall ordinarily be concluded within the time limit set by the relevant federal funding agency. If no time limit is specified by the relevant federal funding agency, the time limit specified below for non-federally-funded Research shall apply. Exceptions to those time limits require approval of the Deciding Official and, if relevant, the federal funding agency. Any granted extension shall include documentation of the reasons for the extension, and notification of extensions will be provided to Research sponsors as required by law or the terms of the award.



The Inquiry for non-federally-funded Research shall ordinarily be concluded within 120 days from inception. The RIO may extend the Inquiry period with notification to the parties involved.

## V. THE INVESTIGATION

**A. Investigation Process:** If the Deciding Official determines that an Investigation is warranted as described in Section IV of this policy, the RIO will initiate said Investigation, following the procedures set forth in the procedures accompanying this policy. The Investigation will commence within the time limit set by the relevant federal funding agency. The Investigation process shall include, as applicable:

- sequestration of the Research Record;
- notification regarding the Investigation;
- appointment of the Investigation Committee;
- development and examination of factual record;
- creation of (and opportunity to comment on) an Investigation Report;
- determination of findings of Research Misconduct by the Deciding Official;
- communication of the results of the Investigation; and
- documentation of all aspects of the process.

**B. Time to Completion:** The Investigation for federally-funded Research (including the Deciding Official's decision and submission of the final report to external sponsors as applicable) shall ordinarily be completed within the time limit set by the relevant federal funding agency. If no time limit is specified by the relevant federal funding agency, the time limit specified below for non-federally-funded Research shall apply. If the Investigation Committee determines that the Investigation will not be completed within the regulatory time limit, 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.

The Investigation for non-federally-funded Research shall ordinarily be concluded within 240 days from inception. The RIO may extend the Investigation period with notification to the parties involved.

**C. Standard for Making a Finding of Research Misconduct:** A finding of Research Misconduct requires:

1. The alleged misconduct meets the definition of Research Misconduct as set forth in this policy or applicable federal agency policy;
2. The alleged misconduct is not an honest error nor difference of opinion;
3. The alleged misconduct is a significant departure from accepted practices of the relevant Research community; and
4. The alleged 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.

## VI. MAINTENANCE AND PROVISION OF RECORDS

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 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 Assessment, 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.

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.

## **VII. 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.

## **VIII. 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), consistent with applicable University policies, procedures, contracts, or agreements, 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; or
8. Disciplinary action, including but not limited to suspension or termination of employment.

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

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

## **IX. 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 or possible Research Misconduct has been discovered 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, or discovers possible 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 cooperates in Good Faith with the Research Misconduct Proceedings.

Any act of retaliation or reprisal against an individual for reporting a charge of Research Misconduct, or against an individual involved in a Research Misconduct Proceeding, shall be addressed in accordance with the Policy on Nondiscrimination.

- 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.
- D. Allegations Not in Good Faith:** Any allegation of Research Misconduct determined to have been reported with malicious intent or otherwise not in Good Faith shall be referred to the Office of Human Resources and/or the appropriate dean. Individuals making malicious or knowingly false accusations may face disciplinary action by the University.
- E. Approved Deviations:** In any instance where it is determined by the University that a deviation from the policy is necessary to more appropriately address an allegation, such deviation must be fair to all parties involved and be approved by the Deciding Official.

## 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  |
| 05.103.1  | October 11, 2022 | New template; align with other misconduct policies | Addition of Ethics Hotline and Whistleblower Protection sections |

|          |                    |   |   |
|----------|--------------------|---|---|
| 05.103.2 | September 24, 2025 | Updates to the Public Health Service <i>Policies on Research Misconduct</i> | Procedural content moved to Procedures; Assessment stage added. |
|----------|--------------------|---|---|