



Policy Number, III - 1.10(A)

Title, UMB Policy and Procedures Concerning Research Misconduct

I. INTRODUCTION

- A. Integrity in research is the responsibility of the entire academic community. All members of the university community—students, staff, faculty, and administrators—share responsibility for developing and maintaining standards to assure honesty, accuracy and objectivity in science and other scholarly work and detection of abuse of these standards. Misconduct in carrying out academic activities undermines the integrity of the educational system and the scientific enterprise and erodes the public trust in the university community to conduct research and communicate results using the highest standards and ethical practices. The responsibility to prevent and detect misconduct, however, must be assumed without creating an atmosphere that discourages the openness and creativity which are vital to scholarship and the research enterprise.
- B. Institutions that apply for or receive federal funds for research are required by law to share responsibility for the integrity of the research process (e.g., Public Health Service Policies on Research Misconduct, 42 CFR Part 93). The University of Maryland, Baltimore (UMB) voluntarily applies the common federal standards for integrity in research to all UMB research regardless of funding. Both UMB and its personnel have a duty to ensure the integrity of research and research training by assuming primary responsibility for responding to allegations of Research Misconduct.

II. APPLICABILITY

This policy applies to research activity, research training, applications and proposals, and related activity containing a research component, performed at UMB by any person, including faculty, staff, students, visitors and others; or performed with the use of UMB resources; or performed elsewhere, by a person acting under the auspices of UMB.

This policy does not supersede policies and procedures addressing issues specifically governed by individual Schools, such as honor code violations, or other UMB policies such as authorship disputes, allegations of fiscal impropriety, conflict of interest, and unethical conduct of research involving human or animal subjects. If an allegation of research misconduct involves only a student and the research is not sponsored, the Dean of the affected School will decide whether the School's procedures or this policy will be used. All

other instances of research misconduct, whether the research is sponsored or not, will follow these policies and procedures.

Federal regulations governing Research Misconduct in Public Health Service Funded Research only apply to allegations of Research Misconduct that occurred within six years of the date the university or federal funding agency received the allegations. This time limitation is subject to exceptions set forth in the regulation (42 CFR § 93.104). In addition to the exceptions set forth in the regulation, the six-year time limitation also does not apply if the DO determines that it is in the University's interest to investigate the alleged Research Misconduct. This Policy does not prohibit the DO from informing journal editors and other publication representatives of any Research Misconduct allegations received by the University.

Allegations about misconduct in research which do not fall within the definitions and scope of this policy will be forwarded to appropriate offices for review and consideration.

III. DEFINITIONS

- A. Research - a systematic experiment, study, evaluation, demonstration, or survey designed to develop or contribute to general knowledge (basic research) or specific knowledge (applied research). (42 CFR § 93.232)
- B. Research Misconduct
 - 1. Research Misconduct - fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. (42 CFR § 93.234)
 - (a) Fabrication - making up data or results and recording or reporting them. (42 CFR § 93.211)
 - (b) Falsification - manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record. (42 CFR § 93.212)
 - (c) Plagiarism - the appropriation of another person's ideas, processes, results, or words without giving appropriate credit. (42 CFR § 93.227)
 - 2. Research Misconduct does not include honest error or differences of opinion. (42 CFR § 93.234)
 - 3. Requirements for making a finding of Research Misconduct: (42 CFR § 93.103)
 - (a) There be a significant departure from accepted practices of the relevant research community; and

- (b) The misconduct be committed intentionally, knowingly, or recklessly; and
- (c) The allegation be proven by a preponderance of the evidence.

C. Other Definitions

1. Allegation – a disclosure of possible Research Misconduct through any means of communication and brought directly to the attention of an institutional or HHS official. (42 CFR § 93.203) The disclosure may be by written or oral statement or other communication to an institutional official.
2. Complainant – an individual who in good faith makes an allegation of Research Misconduct. (42 CFR § 93.206)
3. Respondent – an individual against whom an allegation of Research Misconduct is directed or who is the subject of a Research Misconduct proceeding. (42 CFR § 93.237)
4. Good faith – as applied to a complainant or witness means 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. (42 CFR § 93.214)
5. Preponderance of the evidence - standard of proof in which a proposition is more likely than not to be true. The standard is satisfied if fact-finders conclude there is more than 50 percent likelihood that a proposition is true.
6. Deciding Official (DO) - The academic administrator designated by the President to assume responsibility for implementing this policy. The DO normally will be the Provost/Executive Vice President or their designee.
7. Dean - The Dean of a UMB professional School.

IV. POLICY

It is the policy of UMB:

- A. To maintain high standards of honesty, accuracy and objectivity in science and other scholarly work, to prevent Research Misconduct where possible, and to evaluate and to resolve promptly and fairly instances of alleged or apparent Research Misconduct.
- B. To take appropriate remedial and disciplinary action in response to findings of Research Misconduct, which may include termination of enrollment or employment of an individual found responsible for Research Misconduct.
- C. To award no degree if Research Misconduct in science or other scholarly work contributed to that degree, and, when warranted, to revoke such a degree if Research Misconduct is discovered after its award.

V. PRINCIPLES GOVERNING THE PROCESS FOR ALLEGATIONS OF RESEARCH MISCONDUCT

- A. UMB must undertake examination of any allegation of Research Misconduct according to this Policy.
- B. The Respondent will be granted due process during all stages. Specifically, the Respondent:
 - 1. Will be notified in writing of the specific allegation being considered under the procedures set forth in this Policy;
 - 2. Will be informed of the persons appointed to perform an Inquiry or Investigation, and will have a reasonable opportunity to object based on conflict of interest;
 - 3. Will be given reasonable time to respond to the allegations at the Inquiry stage and to prepare a defense to the allegations at the Investigation stage;
 - 4. Will be permitted an opportunity to participate in the Inquiry and Investigation proceedings as outlined herein;
 - 5. Will be given access to copies of transcripts and documents reviewed upon which the Investigation into allegations of Research Misconduct is based;
 - 6. May consult with personal advisors and legal counsel at the Respondent's own expense;
 - 7. Will receive a decision based exclusively on the evidence presented; and
 - 8. Will receive a written statement of the decision and of the reasons for the decision, including the evidence relied upon for the decision.
- C. If, at any stage of the procedures, there is cause to believe that there is an immediate health or safety threat, there is a need to protect federal funds, equipment, or individuals affected by the inquiry, or there is reasonable indication of possible criminal violations, interim administrative action may be taken by the Provost/Executive Vice President. In the case of federal funding, UMB will notify the U.S. Health and Human Services (HHS) Office of Research Integrity (ORI) within 24 hours of taking interim action.
- D. All persons involved in the Research Misconduct proceedings under this policy shall keep confidential, to the extent reasonably feasible, the identities of Complainants, Respondents, Witnesses, and Committee Members, limiting any disclosures to those who need to know, as determined by UMB, consistent with a thorough, objective, and fair proceeding, and as allowed by applicable law, including the Respondent's right to consult with personal and legal advisors. No person shall communicate with others about the Research Misconduct proceeding in a way that unduly interferes with or compromises the integrity of the proceedings. Except as may otherwise be prescribed by applicable law, confidentiality must be maintained for any records or evidence from which research subjects might be identified. UMB must notify ORI as required by federal regulations.

- E. Conflict of interest and the appearance of conflict of interest will be avoided.
- F. Neither the DO, the Dean of an affected School, or other campus or School leadership may advocate for the Complainant or the Respondent or take any action that may have the appearance of involvement or influence in the matter under examination, outside of the procedures set forth in this Policy.
- G. Neither the Complainant, Respondent, or Witnesses should communicate with any committee members assigned to their cases outside of the procedures set forth in this Policy. The committee members shall not communicate with the Complainant, Respondent, or Witnesses outside of the procedures set forth in this Policy.
- H. Relevant facts ascertained at each stage of these procedures will be documented in detail, and any material evidence gathered will be retained as part of the Inquiry or Investigation record. It is a violation of this Policy for any person to destroy, remove from UMB, or suppress any information in any format that is or may be relevant to the subject of allegations of Research Misconduct.
- I. Allegations will be pursued within the scope of this Policy without regard to related civil or criminal proceedings to the extent feasible.
- J. If a Respondent leaves or has left UMB before the examination of the allegations is concluded, the examination will be pursued to its conclusion.

VI. REPORTING MISCONDUCT

- A. Allegations should be reported to the DO or the Research Integrity Officer (RIO). If the Complainant believes that the DO has a conflict of interest, the allegations may be reported to the President.
- B. Frivolous, mischievous or malicious misrepresentation in alleging Research Misconduct to UMB or other persons or entities violates this policy and will be subject to disciplinary actions, up to and including termination of enrollment or employment.
- C. Anonymous allegations are not encouraged and may impede UMB's ability to examine and resolve the allegations. Confidentiality will be provided to the extent feasible, but anonymity of a Complainant or any person participating in Research Misconduct procedures should not ordinarily be expected.
- D. If a Complainant provides contact information, the Complainant will receive acknowledgement of the allegation(s) and a copy of, or URL link to, this Policy. The Complainant is not a party.

- E. If allegations under this Policy involve Respondents or Complainants associated with other campuses, Centers, or Institutes in the University System of Maryland (USM), the DO will meet with a corresponding official of the other unit and agree upon a division of responsibility for administering Research Misconduct procedures.
- F. If more than one Complainant has brought allegations relating to the same subject matter or similar underlying facts and circumstances, the DO may decide that the allegations will be the subject of a combined examination.
- G. A prospective Complainant who is unsure if a suspected incident falls within the definition of Research Misconduct should contact the DO or RIO to discuss the matter informally. If the circumstances described do not fall within the scope of this Policy, the individual will receive appropriate direction.
- H. UMB prohibits retaliation against anyone who files a complaint of Research Misconduct (a Complainant), anyone who is accused of Research Misconduct (a Respondent), anyone to whom a complaint of Research Misconduct is filed, or anyone who participates in Research Misconduct procedures.

VII. ASSESSMENT

A. Purpose.

The purpose of the Assessment is to determine if the allegation meets the requirements for an Inquiry under this policy.

B. Assessment Process

1. The DO or the RIO will review the allegation.
2. The DO should make the determination to proceed to an Inquiry or close out the allegation within thirty (30) calendar days after receiving the allegation.
3. The DO or the RIO and the Complainant, if known, will meet to review this Policy and the allegation. The Complainant will be advised of the seriousness of the proceedings and the possible consequences for inappropriate allegations.
4. The DO or the RIO will determine whether the allegation meets the requirements for an Inquiry under this Policy by considering:
 - i. whether the allegation, if true, would meet the definition of Research Misconduct; and
 - ii. whether the allegation is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified.

5. The DO or RIO may consult in confidence with any person who can provide relevant information and may interview the Respondent (if identified in the allegation).
6. If the DO determines that: (i) the allegation, if true, meets the definition of Research Misconduct; and (ii) the allegation was made in good faith, the examination of the allegation will proceed to an Inquiry.
7. If the DO determines that: (i) the allegation is not subject to this Policy; (ii) the allegation was not made in good faith; (iii) the allegation is duplicative of other allegation(s) already examined; or (iv) there is another reason not to proceed under this policy, the DO will document the determination and the reasons, close out the allegation, and inform the Respondent (if appropriate).

VIII. INQUIRY

A. Purpose

The purpose of the Inquiry is solely to review the allegation and gather information as necessary to decide if the allegation warrants an Investigation. An Inquiry does not require full review of all the evidence. The decision to proceed from an Inquiry to an Investigation is not a determination of wrongdoing and establishes no presumption of fault.

B. Sequestration of Evidence

Upon the DO's determination to proceed with an Inquiry, the DO or RIO will gather and sequester all original data and other original records relevant to the issues before the Respondent is notified of the proceedings. It is the responsibility of the Complainant, the Respondent, and others holding relevant materials to provide them upon request. Upon request, the Respondent will be provided copies of, or reasonable supervised access to, the sequestered materials. Original materials will be maintained by the DO in accordance with this Policy.

C. Notice to Respondent

Upon sequestration of all data and records, the DO will issue a written notice to the Respondent that includes:

1. A brief statement of the allegation(s), and that an Inquiry will be conducted to decide whether to proceed with an Investigation;
2. A copy of, or URL link to, this Policy, calling attention to the Respondent's due process rights under this Policy;

3. The composition of the Inquiry Committee appointed by the DO, with the deadline for the Respondent to object to any Inquiry Committee member on the basis of conflict of interest (see VIII.D.4, below);
4. A statement that the decision to proceed with an Inquiry is not a determination of wrongdoing and establishes no presumption of fault; and
5. A notice regarding obligations of confidentiality, duty to cooperate, and restrictions on communications, and a warning regarding retaliation.
6. A notice that upon request, the Respondent will be provided reasonable supervised access to the sequestered material.

D. Inquiry Committee

1. In lieu of an Inquiry Committee, the RIO alone may conduct the Inquiry and may utilize subject matter experts for assistance.
2. Unless the Inquiry is conducted by the RIO alone, the DO will appoint the Inquiry Committee within thirty (30) calendar days after the DO's determination to proceed with an Inquiry. The Inquiry Committee will consist of three (3) faculty members or faculty emeritus, with one appointed by the DO as chair. At the discretion of the DO, non-UMB faculty may be appointed to the Inquiry Committee. Members of the Inquiry Committee will not hold any appointment in the department of either the Complainant, if known, or the Respondent. Inquiry Committee members should have appropriate expertise for evaluating the information relevant to the case.
3. Inquiry Committee members should have no material conflict of interest or appearance of conflict of interest. The Respondent will be informed of the proposed membership of the Inquiry Committee for the purpose of identifying in advance any conflict of interest issues.
4. The deadline for the Respondent to object to any Inquiry Committee member on the basis of conflict of interest is seven (7) calendar days from the Respondent's receipt of the Inquiry notice, or notification of the proposed composition of the Inquiry Committee if not yet determined in the notice.

E. Inquiry Committee Process

1. The Inquiry Committee (or the RIO if the RIO alone conducts the Inquiry) will conduct a preliminary review of the evidence to determine whether an Investigation is warranted. An Investigation is warranted if: (a) there is a reasonable basis for concluding that the allegation falls within the definition of Research Misconduct; and (b) preliminary information-gathering and fact-finding from the Inquiry indicates that the allegation may be supported. The Inquiry Committee will not determine or make recommendations about whether Research Misconduct occurred, nor assess whether

the alleged misconduct was intentional, knowing, or reckless; such recommendations are not made until the Investigation stage.

2. The Inquiry Committee must complete its work within ninety (90) calendar days after being charged by the DO, unless circumstances clearly warrant a longer period. If this deadline cannot be met, the reasons for an extension must be well-documented and filed with the DO.
3. The Inquiry Committee may elect to interview the Complainant, if known, and the Respondent separately. Cooperation of the Respondent (beyond production of relevant materials and data) is voluntary. The Inquiry Committee's interview with the Respondent will be recorded and transcribed.
4. The Inquiry Committee has authority to collect and review all relevant information. When information, expert opinions, records, and other pertinent data are needed, the Inquiry Committee will obtain this evidence from or through the DO or RIO. The Inquiry Committee may also call meetings with individuals whom they believe are able to provide information relevant to the allegation(s). Any person participating in the Research Misconduct process is free to consult a personal advisor or legal counsel, at the individual's own expense. Advisors and legal counsel do not participate in meetings or interviews with the Inquiry Committee.
5. The Respondent will have timely access to all relevant documents reviewed by the Inquiry Committee. Research records, including copies of all documents and related communications, will be considered confidential and shall be kept secure by the DO. These records will be shared only with those who need to know.
6. Inquiry Report - the conclusions of the Inquiry Committee will be conveyed to the DO in a written Inquiry Report containing:
 - a. the name and position of the Respondent;
 - b. a description of the allegation(s), evidence reviewed, and relevant interviews;
 - c. any PHS support (*e.g.*, grant numbers, grant applications, contracts, and publications listing PHS support); and
 - d. the Inquiry Committee's conclusion and/or recommendations as to whether an Investigation is warranted, and the basis for that conclusion and any related recommendations.
7. The DO will send the Inquiry Report to the Respondent. The Respondent may submit written comments on the Inquiry Report to the DO within fifteen (15) calendar days after the DO sends the Inquiry Report. Such comments will become part of the Inquiry record.
8. Within fifteen (15) calendar days after receiving the Respondent's comments on the Inquiry Report, or within thirty (30) calendar days after sending the Inquiry Report to the Respondent if no comments are submitted by the Respondent, the DO consults with the applicable Dean, and the DO determines whether to proceed with an

Investigation. The DO's determination whether to proceed with an Investigation will be based upon all of the available information, including the Inquiry Committee's conclusion and/or recommendations and the Respondent's comments.

9. If the Inquiry Committee concludes that an Investigation is not warranted:
 - a. The Inquiry Report may include other appropriate comments concerning the disposition of the case.
 - b. The DO should determine whether the allegation(s) appear to have been made in good faith and, if not, if it appears that investigation of the Complainant is warranted.
 - c. If necessary, UMB will undertake diligent efforts as appropriate to restore the reputations of persons harmed or prejudiced by an allegation not made in good faith.
 - d. UMB will undertake diligent efforts to protect the positions and reputations of those persons who, in good faith, make allegations of Research Misconduct.
10. The Inquiry Committee comments may include recommendations for alternative action(s), or if the DO determines alternative actions are advisable, such actions may be taken or directed by the DO.
11. If the DO plans to terminate the Inquiry without completing all relevant requirements, the DO will document in a report the reasons for such termination. If the research at issue involves PHS funding, the DO's report will be sent to ORI.
12. If the DO determines to proceed with an Investigation:
 - a. Such determination to proceed to an Investigation is not a determination of fault and establishes no presumptions of fault.
 - b. UMB must provide ORI with the written determination by the DO and a copy of the Inquiry Report within thirty (30) days of the determination.
13. At the close of an Inquiry, all records of the Inquiry Committee and all materials provided to it by the DO and other parties will be delivered to the DO for safekeeping and disposition in accordance with this Policy.

IX. INVESTIGATION

A. Purpose

The purpose of the Investigation is to explore the allegations further, to evaluate whether the evidence supports the allegations, and to investigate the extent of any Research Misconduct. In addition to evaluating the allegations, the Investigation Committee will make recommendations to the DO regarding findings of Research Misconduct and appropriate remedial action and sanctions. The DO will make the final determinations on Research Misconduct and any institutional actions.

B. Mandatory Reporting

When the DO determines that an Investigation is warranted, the DO initiates an Investigation and notifies the appropriate state and federal government agencies as required by law. If PHS funding is involved, the DO will send the DO's determination to proceed with an Investigation and a copy of the Inquiry Report to ORI within thirty (30) calendar days after the DO's determination to proceed.

C. Notice to Respondent

The DO will issue a written notice of Investigation to the Respondent that includes:

1. A brief statement of the allegation(s), and that an Investigation will be conducted according to this Policy;
2. A copy of, or URL link to, this Policy, calling attention to the Respondent's due process rights under this Policy;
3. A statement that the decision to proceed with an Investigation is not a determination of wrongdoing and establishes no presumption of fault;
4. The composition of the Investigation Committee appointed by the DO, with the deadline for the Respondent to object to any Inquiry Committee member on the basis of conflict of interest (see IX.D.3, below);
5. A notice regarding obligations of confidentiality, duty to cooperate, and restrictions on communications, and a warning regarding retaliation; and
6. A notice that at any time during the Research Misconduct proceedings, upon request, the Respondent will be provided reasonable supervised access to the sequestered material.

D. Investigation Committee

1. The DO will appoint an Investigation Committee within thirty (30) calendar days after the DO's determination to proceed with an Investigation. The Investigation Committee will consist of three (3) faculty members or faculty emeritus, with one appointed by the DO as chair. At the discretion of the DO, non-UMB faculty may be appointed to the Investigation Committee. Members of the Investigation Committee will not have any appointment in the department of either the Complainant, if known, or the Respondent. Investigation Committee members should have appropriate expertise for evaluating the information relevant to the case.
2. Investigation Committee members should have no material conflict of interest or appearance of conflict of interest. The Respondent and Complainant, if known, will be

informed of the proposed membership of the Investigation Committee for the purpose of identifying in advance any conflict of interest issues.

3. The deadline for the Respondent to object to any Investigation Committee member on the basis of conflict of interest is seven (7) calendar days from the Respondent's receipt of the Investigation notice, or notification of the proposed composition of the Investigation Committee if not yet determined in the notice.

E. Investigation Committee Process

1. Investigation Committee meetings and interviews are confidential and are closed. The Investigation Committee's interviews will be recorded and transcribed. Before the Respondent meets with the Investigation Committee, the Respondent will receive the same detailed forensic analysis that the Investigation Committee has received and reviewed.
2. An Investigation will be completed within one hundred eighty (180) calendar days after the charge to the Investigation Committee.
 - a. The DO may consider extending the deadline of 180 calendar days if a request is received from the Investigation Committee. The Investigation Committee must indicate to the DO why an extension is necessary and an estimated date to complete the Investigation Report and other requirements. An extension request will also be submitted to ORI, if PHS funding is involved. Such a request to ORI will include an explanation for the delay and an estimated date of completion.
 - b. Any consideration of a request for an extension must balance the need for a thorough and rigorous examination of the facts and the interests that the subject(s) of the Investigation, UMB, and research sponsors have in reaching a timely resolution of the matter. Extensions should only be granted for good cause and should not be granted for unreasonable lengths of time. If a request for extension is granted by ORI, the DO must document in writing the reasons for the extension and include the new deadline.
3. The DO will provide to the Investigation Committee all information gathered during the Inquiry. The Investigation normally will include examination of all documentation including, but not necessarily limited to, relevant research data and proposals, publications, and correspondence. The Investigation Committee has the authority to conduct interviews and to collect and consider all of the evidence relevant to the allegations.
4. Copies of transcripts and documents considered or relied upon by the Investigation Committee will be made available to the Respondent as Enclosures within the Draft Investigation Report (see IX.F, below).

5. In the course of an Investigation, additional information may emerge that may justify broadening the scope of the Investigation beyond the initial allegations. Should this occur, the individuals affected will be informed in writing of significant new directions in the Investigation.
 - a. Additional allegations may be added to the case if uncovered during the Investigation process, provided the allegations, if true, would meet the definition of Research Misconduct. The Respondent will be afforded notice and an opportunity to respond to additional allegations.
 - b. Additional Respondents may be added during the Investigation phase provided the allegation, if true, would meet the definition of Research Misconduct; a separate Inquiry for new Respondents is not required, but written notice of the Investigation, due process rights, and the opportunity to respond to the allegations will be given.
6. All members of the UMB community must cooperate in a timely fashion by producing any additional data requested for the Investigation. Original materials obtained by the Investigation Committee will be stored securely along with other materials collected by the DO.
7. During the Respondent's interview with the Investigation Committee, the Respondent will have the opportunity to address the allegations in detail. The Respondent will have an additional opportunity to address or challenge allegations and any evidence considered by the Investigation Committee during the thirty (30) day comment period after the DO sends the Draft Investigation Report.
8. The Respondent is free to seek the assistance of legal counsel at the Respondent's own expense. Legal counsel may accompany the Respondent when meeting with or being interviewed by the DO or the Investigation Committee. Legal counsel may not speak for the Respondent and attends solely as an observer.
9. After the Investigation Committee has received all evidence, completed all interviews, and ensured the Respondent has had the opportunity to review and respond in their interview with the Investigation Committee to the same detailed forensic analysis that the Investigation Committee has received, the Investigation Committee will meet in closed sessions to deliberate and prepare its Draft Investigation Report. In its deliberations, the Investigation Committee will apply the preponderance of evidence standard to the evidence it considers.
10. If the DO plans to terminate the Investigation without completing all relevant requirements, the DO will document in a report the reasons for such planned termination. If the research at issue involves PHS funding, the DO's report will be sent to ORI.

F. Investigation Report

1. Upon completion of the Investigation, the Investigation Committee will submit to the DO a draft report which details the Investigation Committee's recommendations for Research Misconduct findings and institutional actions and/or sanctions (Draft Investigation Report).
2. The Draft Investigation Report will contain each item set forth in 42 CFR § 93.313, including:
 - a. Recommendations regarding Research Misconduct findings
 - i. A description of each allegation and whether or not a finding of Research Misconduct is recommended based on a preponderance of the evidence; and
 - ii. The category of Research Misconduct allegations (i.e., fabrication, falsification, plagiarism); and
 - iii. A description of the evidence that supports the Investigation Committee's recommendation of a finding of Research Misconduct, or another statement (e.g., the evidence was inconclusive, insufficient, or exonerating); and
 - b. Recommendations for institutional actions/sanctions
 - i. Recommendations shall specify institutional actions and/or sanctions appropriate for the seriousness of the allegations. These recommendations will identify specific retractions, disclaimers and announcements necessary to clarify the record and may also address actions to restore damaged reputations, if necessary;
 - ii. If a finding of Research Misconduct is not recommended by the Investigation Committee, the Draft Investigation Report will indicate whether or not the allegations appear to have been made in good faith, and if not, whether the act of making the allegation(s) appears to be misconduct warranting sanction or disciplinary action by UMB.
 - c. Enclosures containing copies of transcripts and documents considered or relied upon by the Investigation Committee.
3. The DO will send the Draft Investigation Report to the Respondent. The Respondent may submit written comments on the Draft Investigation Report to the DO within thirty (30) calendar days after the DO sends the Draft Investigation Report. This comment period is the Respondent's opportunity to address or challenge the Investigation Committee's drafted recommendations and any other information contained in the Draft Investigation Report. Such comments will become part of the Investigation record.

4. The DO reviews any comments from the Respondent and returns the Draft Investigation Report and comments to the Investigation Committee. The DO may request that the Investigation Committee address any concerns prior to the Draft Investigation Report becoming the Final Investigation Report.
5. The Investigation Committee will consider the Respondent's comments, if any, and prepare a Final Investigation Report, including an enclosure stating whether the Final Investigation Report contains changes from the Draft Investigation Report based on any comments from the Respondent, and will issue the Final Investigation Report to the Respondent and the DO:
 - a. within thirty (30) calendar days after receipt of the Respondent's comments on the Draft Investigation Report; or
 - b. if no comments are submitted by the Respondent, within sixty (60) calendar days after the Draft Investigation Report was sent to the Respondent.
6. The DO consults with the applicable Dean, and the DO makes the final determination regarding findings, sanctions, and remedial actions based upon the Final Investigation Report. The DO may consult in confidence with legal counsel and others as appropriate. The DO or the RIO may extend this deadline for good cause for an additional thirty (30) calendar days.
7. At the conclusion of the Investigation Committee's work, all materials and records of the Inquiry Committee and the Investigation Committee will be delivered to the DO for safekeeping and disposition in accordance with this Policy.

X. THE FINAL DETERMINATION BY THE DECIDING OFFICIAL

A. Final Determination Letter by the DO

1. The Final Determination Letter prepared by the DO will contain:
 - a. a description of the policies and procedures under which the Investigation was conducted;
 - b. a description of how and from whom information relevant to the Investigation was obtained;
 - c. a statement of the Investigation Committee's recommendations and the DO's determination, along with the basis for the findings; and
 - d. the actual text or a summary of the input of any individual(s) found to have engaged in misconduct;
 - e. a description of any sanctions or remedial actions to be imposed;
 - f. If there is a finding of Research Misconduct, a statement setting forth the Appeal process, as described in Section XI of this Policy.

2. The DO will transmit the Final Investigation Report and the Final Determination Letter to the Respondent. Any findings of Research Misconduct are considered fully adjudicated and final in the Final Determination Letter by the DO, unless an appeal is made in accordance with this Policy.
3. If the underlying research involved PHS funding, the Final Investigation Report and the Final Determination Letter will be submitted to ORI. If there is an appeal, this step is delayed until the appeal is final.
4. If the sanctions and remedial actions involve a recommendation for termination of employment or enrollment, revocation of degree, or other remedial actions for students, such actions will proceed in accordance with the applicable policies and procedures of USM, UMB, and the affected School.

B. No Finding of Research Misconduct

When there is a final finding of no Research Misconduct, all research sponsors and others initially informed by the DO of the Investigation should be informed in writing by the DO that allegations of Research Misconduct were not supported.

Following a final finding of no Research Misconduct and at the request of the Respondent, consideration will be given as to what actions may be needed to restore the reputations of Respondents against whom no finding of Research Misconduct was made. The DO will consider notifying individuals aware of or involved in the Investigation of the final outcome. The DO, in consultation with the Dean of the affected School, will be guided by whether public announcements will be harmful or beneficial in restoring any reputation(s) that may have been damaged. Usually, such a decision will rest with the person who was wrongly accused.

During the Research Misconduct proceeding and upon the completion of the case, the DO will make reasonable and practical efforts to protect the reputations of, or to counter potential or actual retaliation against, the Complainant, witnesses, and committee members involved in the case who cooperated in good faith. The DO, in consultation with the Dean of the affected School, and the Complainant, witnesses, or committee members will determine what steps are needed to restore reputations or to counter retaliation. If the DO deems that unsubstantiated allegations were made in good faith, no disciplinary measures will be taken against the Complainant.

If the DO deems that allegations were not made in good faith and bringing the allegations appears to be misconduct warranting sanction by the Institution, the DO, in consultation with the Dean of the affected School, will decide on appropriate procedures for disciplinary actions. Making an allegation of Research Misconduct in bad faith may constitute an allegation of Research Misconduct against the Complainant.

C. Finding of Research Misconduct

1. When there is a finding of Research Misconduct, the DO consults with the Dean of the affected School, and the DO determines the sanctions and remedial actions appropriate for the seriousness of the finding. Disciplinary and remedial actions will be taken in accordance with applicable USM, UMB, and School policies. The applicable Dean, in consultation with the DO, shall implement those sanctions and remedial actions, which may include but are not limited to:
 - Removal from a particular project or projects;
 - Special monitoring of future work;
 - Letter of reprimand;
 - Probation for a specified period of time with noted conditions to be met;
 - Suspension of rights and responsibilities for a specified period of time;
 - Financial restitution;
 - Termination of employment or other actions affecting employment or faculty appointment; if formal termination proceedings are instituted, such proceedings must be in accordance with USM and UMB termination policies and procedures;
 - Termination of enrollment, awarding no degree, revocation of degree, or other remedial actions for students will proceed in accordance with the applicable policies and procedures of USM, UMB, and the affected School; and
 - Any other disciplinary and remedial actions as appropriate.

2. In addition to imposing appropriate sanctions and remedial actions, the RIO, in consultation with the appropriate administrative offices at UMB, shall take steps to ensure the scientific record is corrected by appropriate means, which may include:
 - Formal notification of sponsoring agencies, funding sources, co-authors, coinvestigators, collaborators, department(s);
 - Requests to publishers for retractions and corrections of published papers; and
 - Formal withdrawal of pending applications for research support.

D. Whether or not there is a finding of Research Misconduct, it is a priority of UMB to correct the scientific record through means of corrections or retractions of publications, if data are available, as a remedial action.

XI. APPEAL

The Respondent may appeal to the President the findings of Research Misconduct, sanctions, and institutional actions determined by the DO. A written statement of appeal must be submitted to the President within fifteen (15) calendar days following the date of the DO's Final Determination Letter. The Respondent may only appeal on the basis of:

- 1) procedural error;

2) availability of new evidence which could not reasonably have been presented during the original Investigation; or

3) appropriateness of sanctions.

The statement of appeal should identify the decision being challenged, the basis for the appeal, and a clear description of why the findings, sanctions, or institutional actions should be overturned.

In consideration of the appeal, the President will afford deference to the DO's Final Determination and the Investigation Committee's recommendations and analysis, which are based upon the Investigation Committee members' scientific and academic subject matter expertise and rigorous examination under the procedures set forth in this Policy.

The President may confidentially consult with the Deans, Vice Presidents, and others in considering the appeal and will issue a final determination or other appropriate action. The President's decision will be reported to the DO and the Respondent in a timely fashion and should be completed in sixty (60) calendar days of the President's receipt of the appeal.

The President's determination on any findings, sanctions, and remedial actions is final and may not be appealed further.

For allegations that are subject to PHS UMB must notify ORI when an appeal is initiated and provide ORI with the complete institutional record (including documentation related to the appeal) once the appeal is concluded.

XII. RECORDS OF PROCEEDINGS

Records relating to proceedings under this policy shall be maintained in a secure manner for seven (7) years after the final conclusion of proceedings. Upon request, records may be provided to authorized federal agencies as permitted by law. Records of proceedings under this Policy will be maintained by the Office of the Provost and kept confidential to the extent permitted by applicable law. Upon conclusion of the record retention period, and with approval of the Provost/Executive Vice President, original research data may be returned to the investigator(s) from whom materials were obtained.

Approved by the President:

Bruce E Jarrell

(Bruce Jarrell, MD)

Approval Date:

March 10, 2026

Keywords:

Fabrication, Falsification, Plagiarism, Misconduct, Research, Integrity, Honesty, Accuracy, Objectivity, Inquiry, Investigation, Committee