

**Grand Valley State University**

**Procedures for Responding  
to Allegations of  
Research Misconduct**

**Version: 3.0**

**Revision Date: February 01, 2022**

## Table of Contents

<b>I. Introduction</b>	<b>4</b>
<b>II. GVSU Policy on Research Integrity</b>	<b>4</b>
<b>III. Applicability of Policy and Procedures</b>	<b>5</b>
<b>IV. Allegations of Research Misconduct: Preliminary Assessment</b>	<b>6</b>
<b>A. Making an Allegation</b>	<b>6</b>
<b>B. Circumstances Requiring Immediate Action</b>	<b>8</b>
<b>C. An Overview of the Three-Phase Process</b>	<b>9</b>
<b>V. Phase One: Inquiries into Research Misconduct</b>	<b>10</b>
<b>A. Overview</b>	<b>10</b>
<b>B. Conducting an Inquiry</b>	<b>10</b>
<b>C. The Inquiry Report</b>	<b>11</b>
<b>VI. Phase Two: Investigation of Research Misconduct</b>	<b>12</b>
<b>A. Overview</b>	<b>12</b>
<b>B. Notifications</b>	<b>12</b>
<b>C. Appointment of an Investigative Committee</b>	<b>13</b>
<b>D. Charge of the Investigative Committee</b>	<b>13</b>
<b>E. First Meeting of the Investigative Committee</b>	<b>14</b>
<b>F. Developing an Investigative Plan</b>	<b>14</b>
<b>G. The Investigation</b>	<b>15</b>
<b>H. Conducting Interviews</b>	<b>15</b>
<b>I. The Investigative Report</b>	<b>16</b>
<b>J. Research Misconduct Findings</b>	<b>17</b>
<b>K. Report Comment Period</b>	<b>17</b>
<b>L. Documentation and Records Retention</b>	<b>18</b>
<b>VII. Phase Three: Adjudication</b>	<b>18</b>
<b>A. Overview</b>	<b>18</b>
<b>B. Provost Non/concurrence</b>	<b>19</b>
<b>C. Provost and President Review of the Investigative Report</b>	<b>19</b>
<b>VIII. Institutional Administrative Actions</b>	<b>20</b>
<b>IX. Documentation and Records Retention</b>	<b>20</b>
<b>X. Safeguards</b>	<b>21</b>

<b>A. Confidentiality</b>	<b>21</b>
<b>B. Conflicts of Interest</b>	<b>21</b>
<b>C. Challenges to Investigative Committee Members</b>	<b>21</b>
<b>D. Safeguards for a Complainant</b>	<b>22</b>
<b>XI. Appendices</b>	<b>22</b>
<b>A. Responding to an Allegation of Research Misconduct: Roles &amp; Responsibilities</b>	<b>23</b>
<b>1. President</b>	<b>23</b>
<b>2. Provost</b>	<b>23</b>
<b>3. Research Integrity Officer</b>	<b>24</b>
<b>4. Standing Committee on Research Integrity</b>	<b>26</b>
<b>5. Investigative Committee</b>	<b>26</b>
<b>6. Complainant</b>	<b>27</b>
<b>7. Respondent</b>	<b>27</b>
<b>8. Members of the University Community</b>	<b>27</b>
<b>B. Procedural Checklist</b>	<b>28</b>
<b>C. Definitions</b>	<b>31</b>
<b>D. Model Confidentiality Agreement</b>	<b>34</b>
<b>E. Inquiry Report Checklist</b>	<b>35</b>
<b>F. Investigation Report Checklist</b>	<b>38</b>

## I. Introduction

To implement the institution's responsibilities under the Public Health Service (PHS) Policies on Research Misconduct, 42 CFR Part 93, Grand Valley State University (GVSU), in seeking PHS funds, is required to establish and abide by uniform policies and procedures for investigations and reporting instances of alleged or apparent misconduct involving research, training, or related research activities.

**Research misconduct is defined in GVSU policies and is understood as the fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results, and/or engaging in ordering, advising or suggesting that subordinates engage in misconduct in research, scholarship or creative activities. Research misconduct does not include honest error or differences of opinion. This policy does not cover authorship disputes unless they involve plagiarism.**

*For research and research training activities that applied for or received PHS support, research misconduct means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error, differences of opinion, or authorship or collaboration disputes.*

These GVSU policies and procedures are based on "Model Procedures for Responding to Allegations of Scientific Misconduct" developed by the U. S. Department of Health and Human Services, Office of Research Integrity (ORI). The ORI model procedures were created for academic and other institutions to use in developing policies for handling allegations of research misconduct. These procedures also incorporate some of the language and best practices utilized by GVSU peer institutions in addressing allegations of research misconduct and comply with Federal Regulation [42 CFR Part 93]. For further guidance see: <https://ori.hhs.gov/>.

The procedures describe the steps for responding to an allegation of misconduct in research, scholarship, or creative activities. An allegation of misconduct may come from within or outside the University community. The procedures provide a framework for assessing an allegation, conducting an inquiry, investigating an allegation that has merit, and reviewing and evaluating the findings and recommendations of an investigation committee.

While the task is not theirs alone, GVSU identifies unit heads as being responsible for informing faculty, students, and staff of the policies and procedures contained in this document, of the importance of complying with the policies and procedures, and of the University's overall expectation of maintenance of the highest standards of scientific integrity.

## II. GVSU Policy on Research Integrity

The following is the GVSU policy on research integrity.

The policy is located within [BOT Policy 4.1.10](#): General Personnel Policies for Faculty and Staff – Obligations of Appointees.

## **Research Integrity**

Research, scholarship and creative activities are central to fulfilling the mission of the University. BOT Policy 4.1.10 states that all employees, students, partners and affiliates must always perform their roles related to research, scholarship and creative activity with ethical integrity. This requirement reflects a culture publicly committed to developing and fostering the highest standards of professional ethics. Research integrity is demonstrated in the decisions and actions that exemplify our core ethical values.

## **Core Ethical Values:**

The core ethical values in research related activities, including scholarship and creative performance, include:

- A. Truthfulness and honesty: intellectual and creative activities require thoroughgoing truthfulness and honesty in proposing, conducting and reporting research related activities, scholarship and artistic performance.
- B. Nonmaleficence and beneficence: endeavors involving human or animal subjects require balancing nonmaleficence with beneficence in minimizing burdens to research subjects in relation to the potential benefits to those subjects and others.
- C. Trustworthiness, reliability, confidentiality, respect, and collegiality: research integrity requires trustworthiness and reliability in recognizing and building on the prior work of others, confidentiality in peer review and assessment, and respect and collegiality in interactions with colleagues and students.
- D. Accountability: the broader community's welfare depends upon explicit researcher accountability for all research, scholarship and creative performance-related activities, and for reporting misconduct about which one has direct knowledge.

## **III. Applicability of Policy and Procedures**

GVSU offers training in responsible conduct of research for all researchers and scholars because the GVSU policy on research integrity and these procedures apply to all members of the GVSU community. This includes employees, students, partners and affiliates involved in research and/or proposals for research at the University and all research, scholarship, and creative activities conducted by such individuals, regardless of funding source.

Student research undertaken in fulfillment of a course requirement (unless there is an expectation of publication or dissemination of the results outside the University) is *not* addressed by this procedure. In such instances, please refer to [STU Policy 5.0: Student/University-Affiliated Student Organizations Expectations under "Academic Misconduct."](#)

Allegations of research misconduct must be reported regardless of when the alleged misconduct occurred, and these institutional policies and procedures will be followed.

Additionally, certain procedures must be followed when the research or research training activities in question applied for or received PHS support, as outlined in 42 CFR 93. For such activities, the application of 42 CFR 93 applies only to allegations of research misconduct that occurred within six years of the date GVSU or the Department of Health and Human Services (DHHS) received the allegation, subject to the subsequent use and health or safety of the public exceptions at 42 CFR 93.105(b). In this document, procedures specific to 42 CFR 93 are *italicized*.

Appendix A outlines the roles and responsibilities of the individuals involved with responding to misconduct allegations. Appendix B outlines the response process timeline. Appendix C contains a glossary of terms.

#### **IV. Allegations of Research Misconduct: Preliminary Assessment**

##### **A. Making an Allegation**

Any person knowledgeable of possible misconduct in research, scholarship, or creative activities conducted by persons associated with or functioning under the auspices of GVSU or one of its affiliates is responsible for immediately communicating the allegation in good faith.

1. In university procedures, the person bringing an allegation of research misconduct is known as the “complainant,” and the person against whom the allegation is made is called the “respondent.” Allegations of research misconduct can be made by the complainant either to an institutional representative such as a dean, unit head, director or staff in the Office of Research Compliance and Integrity (ORCI), or to the University Research Integrity Officer (RIO).
2. The RIO or institutional representative will discuss the complainant’s allegation of research misconduct against the respondent in light of university policy and help the complainant clarify relevant matters of fact pertaining to alleged research misconduct. The complainant shall be made aware that, before there can be a formal inquiry and an investigative process, the complainant must submit a written and signed allegation against the respondent to the University RIO.
3. An institutional representative receiving an allegation of research misconduct shall direct the complainant to further discuss the allegation with the RIO, and/or immediately forward the complainant's written and signed allegation to the RIO. If the initial complainant wishes to not participate in the procedures, the institutional representative who receives the complaint may elect to become the direct complainant based on information received, and to submit a written allegation to the RIO. The identity of the initial complainant would thereby be made anonymous to all subsequent parties involved.

If the complainant brings an allegation of research misconduct directly to the RIO but does not wish to participate in the procedures, and if the RIO determines based on information received that the allegation has substance and should be pursued, the RIO may elect to conduct a preliminary assessment of the allegation.

*For research or research training activities that applied for or received PHS support, the complainant cannot be anonymous. The complainant should be interviewed at the institutional inquiry stage and is required to be interviewed during the institutional investigation, if it is determined that an investigation is warranted. In addition, GVSU is required to disclose the name of the complainant in the report to ORI.*

4. The RIO shall obtain the necessary and relevant research records and related materials to conduct an assessment of an allegation. All relevant materials shall be immediately located, obtained, inventoried, sequestered and secured in order to prevent loss, alteration, or the creation of fraudulent records. 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 are substantially equivalent to the evidentiary value of the instruments. The RIO will lock all records and materials in a secure place. Sequestration must begin on or before notification of the respondent. Return of the materials to the respondent shall be made when appropriate, following completion of the response to allegation procedures, *and upon written directive from ORI if applicable*. Duplication of materials may be allowed during the inquiry or investigative procedures if needed.
5. A determination shall be made by the RIO within 15 calendar days of receiving the allegation as to whether the allegation credibly involves research misconduct as defined by GVSU policy, and whether there is sufficient information to proceed with a Standing Committee on Research Integrity (SCRI) inquiry. The RIO will make all reasonable efforts to resolve issues of alleged misconduct before pursuing a formal inquiry process. The RIO has the authority, at any point during the proceedings, to seek the consultation or assistance of other applicable GVSU offices, including the Office of General Counsel and the ORCI.
6. If the RIO determines the allegation does not credibly involve research misconduct as defined by GVSU policy, but does fit one of the following situations, the RIO will take the appropriate action specified below:
  - i. The allegation clearly does not fit the GVSU policy of research misconduct. In that case, a written report shall be prepared in sufficient detail to permit a later assessment by ORI or another agency of the reasons that the institution decided not to conduct an investigation. A copy of the explanation shall be provided to the complainant and respondent.
  - ii. The allegation of research misconduct does not fit the GVSU policy of research misconduct, is not supported by fact, and may have been filed maliciously or in bad faith by the complainant. In that case, the RIO shall prepare a written

report, issue it to the Provost, and discuss with the Provost what further measures may be appropriate.

- iii. The allegation of research misconduct does not fit the GVSU policy of research misconduct, but that a case of misconduct may have occurred. In that case, the RIO shall refer the matter to the appropriate University or federal office. A notice of this decision is sent to both the respondent and complainant.
7. If the RIO determines that the allegation **does** fit the GVSU policy of research misconduct, and there is sufficient information to warrant an inquiry, the RIO will notify the following individuals of this decision in writing: the respondent, the complainant, Provost, General Counsel, and Appointing Official of the respondent. The three-phase process described below in Section IV.C will then be initiated. All reasonable steps shall be taken to treat the respondent with fairness, respect, and a presumption of innocence pending final resolution of the inquiry. This includes ensuring confidentiality of information regarding the complainant, the respondent, and others involved in the inquiry and investigative process. Careful documentation of all procedures is integral to every procedural step.
8. All reasonable steps will be taken by all those involved to protect the position and reputation of both the complainant and the respondent. Disclosure of the identity of the complainant and respondent in misconduct proceedings shall be limited, to the extent possible, to those who need to know. Any alleged or apparent retaliation against such individual(s) should be immediately reported to the RIO.
9. If at any point in the process (initial assessment, inquiry, or investigation) the respondent **admits** to research misconduct, the RIO must notify University officials of the nature of the initial allegation and the subsequent admission of misconduct, before making a decision as to whether or not to close the case. *When the research in question applied for or received PHS support, ORI must also be notified.*

#### **B. Circumstances Requiring Immediate Action**

The RIO shall immediately consult with the Office of General Counsel and take appropriate action if for any reason during the assessment, inquiry, investigative, or adjudication processes, the RIO obtains reasonable, credible evidence of any of the following:

1. A possible criminal violation
2. An immediate health hazard or other imminent risk of danger to public health or safety to human or animal research subjects or investigators
3. The need to protect the funds or equipment of any governmental or other sponsor of research, or to assure compliance with the terms of a sponsored agreement or contract
4. The need to protect the reputations of any persons involved in the proceeding



5. The need to prevent the loss, destruction, or alteration of any evidence relevant to the University's review of an allegation of misconduct
6. The need to prevent or stop an imminent or continuing violation of an applicable law, regulation, or other governmental requirement or a University rule, policy or procedure
7. The probable public disclosure of an allegation of misconduct or of any proceeding.

In the event of any of the above situations, the RIO shall immediately notify the University President, Provost, Appointing Official of the respondent, and the pertinent government official or sponsor. In consultation with the University Office of General Counsel, the RIO shall promptly make recommendations to the President and Provost, regarding appropriate responsive action.

### **C. An Overview of the Three-Phase Process of Responding to an Allegation**

If the RIO determines during the preliminary assessment there is sufficient information to warrant an inquiry, the RIO shall initiate the three-phase process to respond to an allegation. The three phases are presented here in summary form first and then in more detail in Sections V.-VII. below.

- 1. Phase One, Inquiry.** During an inquiry the RIO works with a 3-member inquiry panel drawn from the membership of the SCRI to gather preliminary information and facts to assess whether the allegation has substance and merits a formal investigation. The purpose of the inquiry is not to reach a final conclusion, but to issue an Inquiry Report based on a preliminary evaluation of the available evidence to determine whether a formal investigation into research misconduct is warranted. The SCRI panel's Inquiry Report is transmitted to the Provost and serves as the basis for the Provost to determine whether closure or continuance is most appropriate.
- 2. Phase Two, Investigation.** If, based on the SCRI panel's Inquiry Report, the Provost determines that a formal investigation into research misconduct is warranted, a new committee of subject matter experts, called the Investigative Committee is appointed. The Investigative Committee reviews the Inquiry Report and explores in detail the allegation of research misconduct by examining the evidence in depth and developing a factual record with respect to the allegation. Their findings and recommendations are issued in a formal Investigative Report that is advisory to the Provost.
- 3. Phase Three, Adjudication.** Adjudication is the third and final phase during which the Provost evaluates the findings and recommendations in the Investigative Report. The Provost transmits a copy of the Investigative Report and the Provost's own written decision to the President who issues final directives for actions and reporting as required by law or contractual arrangement. The President's decisions and directives are final, binding, and not subject to appeal.

## V. Phase One: Inquiries into Research Misconduct

**A. Overview:** Following the acceptance of a credible allegation of research misconduct, the RIO selects a panel from the SCRI to conduct a preliminary review of the allegation and determine whether the allegation has sufficient credibility to warrant a formal investigation.

### B. Conducting an Inquiry

1. **SCRI Inquiry Panel.** Within 10 calendar days of accepting an allegation, the RIO is responsible for selecting, notifying and convening 3 members of the SCRI to serve as an Inquiry Panel and for naming one of the 3 to serve as its chair. The RIO oversees the inquiry process and ensures that the SCRI Inquiry Panel completes its work and submits its final report to the Provost within 53 calendar days following the RIO accepting the allegation.
2. **Conflict of Interest.** The RIO, in consultation with the Provost, will take steps to ensure that none of the SCRI Inquiry Panel members has a bias or personal or professional conflict of interest with the complainant, respondent, witness, or the case in question.
3. **Confidentiality.** All SCRI Inquiry Panel members and other individuals involved with the inquiry shall sign and be bound by a written confidentiality agreement to keep confidential all proceedings and information or documents that are part of the inquiry. The inquiry may not be discussed outside the official proceedings of the panel meetings.
4. **Inquiry Charge.** The RIO will prepare a written inquiry charge for the SCRI Inquiry Panel describing the allegations and any related issues identified during the initial allegation assessment. The charge shall reiterate the purpose of the inquiry is to make a preliminary evaluation of the evidence and interviews to determine if there is sufficient evidence of possible research misconduct to warrant a formal investigation. This charge shall be provided to the SCRI Inquiry Panel no later than at the first convened meeting of the panel.
5. **Inquiry Process.** The SCRI Inquiry Panel shall review the RIO's inquiry charge and the evidence and conduct interviews to assess whether an allegation has sufficient substance to merit proceeding with a formal investigation. Interviews must be recorded, and those involving the respondent must further be transcribed.
6. **Expert Consultants.** The RIO, in consultation with the SCRI Inquiry Panel, will determine the need to consult with content experts for purposes of fulfilling the inquiry charge.
7. **Inquiry Panel Advisors.** The RIO and University General Counsel (or their designee) will be available to advise the SCRI Inquiry Panel as requested.

### C. The Inquiry Report

1. Within 30 calendar days following the RIO's acceptance of the misconduct allegation, the SCRI Inquiry Panel shall complete its inquiry, and the SCRI Inquiry Panel Chairperson shall provide the RIO with a draft Inquiry Report. The Inquiry Report will include the relevant elements found in Appendix E: Inquiry Report Checklist.
2. The Inquiry Report will provide the findings and recommendations as to whether or not sufficient evidence exists to warrant a formal investigation. If the report affirms that an investigation is warranted it shall include a formal description of the subject matter to be investigated.
3. The RIO shall provide the respondent with the draft Inquiry Report. The RIO shall also provide the complainant with those portions of the draft Inquiry Report that are relevant to the complainant.
4. Both the complainant and respondent shall be allowed 5 calendar days to provide written comments to the RIO on the draft Inquiry Report. The RIO shall provide the comments, if any, to the SCRI Inquiry Panel for review and evaluation no later than 41 calendar days following the RIO's acceptance of the allegation.
5. The SCRI Inquiry Panel shall incorporate written evaluation of the comments in its final report. The final report shall be sent to the RIO and the Provost.

*When the research activity in question has applied for or received PHS support, any comments submitted by the respondent must be attached to the final Inquiry Report. Comments submitted by the complainant should be, but are not required to be, attached to the final Inquiry Report.*

6. The final Inquiry Report normally should be completed within 55 calendar days following the RIO's acceptance of the allegation. However, the RIO may grant the SCRI Inquiry Panel a specified extension for cause to complete the inquiry if the circumstances clearly warrant a longer period. Both the complainant and respondent will be notified of such an extension.
7. No later than 60 days following the RIO's acceptance of the allegation (in the absence of any extension allowed by the RIO to the SCRI), the Provost shall determine whether a formal investigation of research misconduct is warranted. If the Provost determines an investigation is not warranted, the case is closed. If the Provost determines that an investigation is warranted, the RIO shall be notified in writing to begin an investigation phase.

*If the research activity in question applied for or received PHS support and the Provost determined an investigation is not warranted, the RIO shall secure and*

*maintain for 7 years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment by ORI of the reasons why an investigation was not conducted. These documents must be provided to ORI or other authorized DHHS personnel upon request.*

8. If the Provost's decision to terminate the inquiry process is in conflict with the recommendation of the SCRI Inquiry Panel, the Provost shall provide a written justification of that variance to the SCRI Inquiry Panel and the RIO.
9. *For research activity that applied for or received PHS support, within 30 calendar days of the Provost's decision that an investigation is warranted, the RIO will provide ORI with the Provost's written decision and a copy of the Inquiry Report. The RIO will also notify those institutional officials who need to know of the Provost's decision.*

*The RIO will provide the following information to ORI upon request:*

- a. *The institutional policies and procedures under which the inquiry was conducted;*
- b. *The research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents; and,*
- c. *The charges to be considered in the investigation.*

## **VI. Phase Two: Investigation of Research Misconduct**

**A. Overview:** The investigation of the allegation proceeds under the direction of a new three-member committee appointed by the RIO and reviewed and approved by the Provost. The investigation explores in detail the allegation of research misconduct, examines the available evidence in depth, and develops a factual record with respect to the allegation. The factual record is evaluated to determine whether the allegation should be dismissed or a formal finding of research misconduct and recommendations for appropriate university action should be made. The findings of the investigation are issued in a formal Investigative Report.

### **B. Notifications:**

Within 10 calendar days following the determination by the Provost that an investigation will occur, the RIO will notify the respondent in writing that an investigation will take place. The notification includes:

1. A copy of the SCRI Inquiry Final Report
2. The specific allegation(s) to be investigated
3. The sponsor (if any)

4. The definition of research misconduct
5. The procedures to be followed in the investigation including the appointment of the Investigative Committee and consulting experts, if appointed
6. The opportunity of the respondent to be interviewed, to provide information, to be assisted by counsel, to be assisted by the GVSU Employee Ombuds/Student Ombuds and a description of the Ombuds' role, to challenge the membership of the committee and experts based on bias or conflict of interest, and to comment on the SCRI Inquiry Final Report.

*On or before the date on which the investigation begins, the RIO will notify the ORI Director of the decision to begin the investigation and provide a copy of the Inquiry Report. This notification applies only to research activities that applied for or received PHS support. The RIO shall immediately secure any additional research records or materials relevant to the investigation identified in the SCRI panel Inquiry Final Report that were not previously secured.*

#### **C. Appointment of an Investigative Committee**

Within 10 calendar days following the determination by the Provost that an investigation will occur, the RIO, with the review and approval of the Provost, shall appoint three individuals to serve on the Investigative Committee.

1. The chair of the SCRI Inquiry Panel shall also serve in an ex-officio advisory capacity on the Investigative Committee, and will not count as one of the 3 members.
2. Appointees to the Investigative Committee must have the discipline specific knowledge, skills and expertise to identify, collect and evaluate relevant evidence and issues related to an allegation, conduct interviews, and draw conclusions. They may be scientists, content experts, administrators, lawyers, other qualified individuals or peers from GVSU or other organizations or entities.
3. The RIO will take steps to ensure that Investigative Committee appointees or consulting experts lack bias or personal or professional conflict of interest with the complainant, respondent, witness, or case in question. If the respondent wishes to file a challenge to the membership of the Investigative Committee it must be submitted in writing to the RIO within 5 calendar days of being notified by the RIO that an investigation will occur.
4. The RIO and the Office of University Counsel (or designee) will be available to advise and assist the Investigative Committee in its proceedings.
5. The three-member Investigative Committee shall select one of its members as Chair.

#### **D. Charge of the Investigative Committee**

The RIO will define the subject matter of the investigation in a written charge that describes the allegations and issues identified during the inquiry. The charge should define the allegation of specific misconduct and identify the name of the respondent. It should also state that the Investigative Committee is to evaluate the testimony given by the complainant, respondent, key witnesses, as well as other evidence it may have or discover, to determine whether, based on a preponderance of the evidence, research misconduct occurred as defined by GVSU policy. If the Investigative Committee determines that research misconduct occurred, they must also determine the identity of the responsible party(ies), the extent of the misconduct, and the degree of seriousness of the misconduct.

An investigation shall commence within 30 calendar days of the completion of the inquiry. The investigation and subsequent adjudication (Section VII.) shall be completed within 120 calendar days of the investigation initiation. If the investigation requires more than the prescribed 120 days, and is being conducted on a project associated with a federal grant, contract, or cooperative agreement, the RIO is required to request an extension in writing from the federal sponsor of the project.

During the investigation, if additional information becomes available that substantially changes the subject matter of the investigation or would suggest additional respondents, the Investigative Committee will notify the RIO. The RIO will determine whether it is necessary to notify any respondents of the new subject matter or other relevant material charges.

#### **E. First Meeting of the Investigative Committee**

The RIO shall appoint the members of the Investigative Committee and convene the first meeting within 20 calendar days of the determination by the Provost that an investigation shall occur. The University General Counsel will assist the RIO with the first meeting of the Investigative Committee. After Investigative Committee members have signed a written confidentiality agreement pertaining to the investigation, the RIO will review the charge, the Inquiry Report, and the procedures for conducting the investigation. The three-member Investigative Committee shall select one of its members as Chair and begin to develop an Investigative Plan.

#### **F. Developing an Investigative Plan**

At its initial meeting, the Investigative Committee should begin development of an Investigative Plan. The Investigative Plan should include:

1. An inventory of all previously secured evidence and testimony
2. Determination of whether and what additional evidence needs to be secured
3. Witnesses to be interviewed (including the complainant, respondent, and other witnesses with knowledge of the research or events in question)
4. A proposed schedule of meetings, briefings of experts, and interviews

5. Anticipated analyses of evidence (scientific, forensic, or other)
6. A plan for writing and submitting the Investigative Report.

#### **G. The Investigation**

The Investigative Committee shall conduct its proceedings in accordance with the principles of due process and orderly procedures to ensure the impartial examination of all pertinent facts.

1. The Investigative Committee shall use diligent efforts to ensure that the investigation is thorough and sufficiently documented and includes the examination of all research records and evidence relevant to reaching a decision on the merits of an allegation.
2. All reasonable steps shall be taken to ensure an impartial and unbiased investigation.
3. Interviews shall be conducted with the complainant, the respondent, and any other person identified as having information relevant to the investigation.
4. All significant issues and leads shall be pursued diligently.
5. Evidence must be competent, relevant, and sufficient to support the findings, conclusions, and recommendations of the Investigative Committee.

#### **H. Conducting Interviews**

In conducting interviews, the Investigative Committee shall follow the guidelines and standard practices accepted and established by ORI. They are as follows:

1. **Conducting Interviews:** Interviews should be in-depth and all significant witnesses should be interviewed. Subject to the need to take reasonable steps to maintain the confidentiality of the testimony of the respondent and other witnesses, each witness should have the opportunity to respond to inconsistencies between his or her testimony and the evidence or other testimony.
2. **Preparation:** The Investigative Committee will prepare carefully for each interview. All relevant documents and research data should be reviewed in advance and specific questions or issues that the committee wants to cover during the interview should be identified. The Investigative Committee should appoint one individual to lead each interview, and all members must be present for each interview. If significant questions or issues arise during an interview that requires deliberation, the Investigative Committee should recess to discuss the issues. Investigative Committee deliberations should never be held in the presence of the interviewee.
3. **Objectivity:** The Investigative Committee will conduct all interviews in a professional and objective manner, without implying guilt or innocence on the part of any individual.

4. **Transcribing Interviews:** Any interview with the respondent will be recorded and transcribed. Interviews with other parties will be recorded and then may be summarized or transcribed. An interview summary or transcript will be provided to each witness for review and correction of errors. Witnesses may add comments or additional information, but changes are limited to correcting factual errors.
5. **Recording Admissions:** If the respondent admits to research-related misconduct, a statement attesting to the occurrence and extent of the misconduct should be prepared for signature, acknowledging that the statement is voluntary and is made after the respondent has been advised of the right to seek advice of legal counsel. The Investigative Committee should consult with the University General Counsel on the specific form and procedure for obtaining this statement.

The RIO must notify university officials of the nature of the initial allegation and the subsequent admission of misconduct, before a decision as to whether or not to close the case is made. *When the research in question applied for or received PHS support, ORI must be consulted.* The Provost may also request that the RIO consult with the research study sponsor (if any) when deciding whether an admission of misconduct has adequately addressed all the relevant issues such that the investigation can be considered completed. The respondent's admission of specific misconduct activity may be used as a basis for closing the investigation as a whole at the discretion of the Provost and under advisement by the RIO; however, the investigation should not be closed at this point unless and until the draft Investigative Report has been written and the respondent has been given an opportunity to comment on it.

When the Investigative Committee has completed its work, the Investigative Report should be forwarded to the Provost with recommendations for appropriate institutional actions and then to the study sponsor (if any) for review. Whereas the Investigative Report may include recommendations for disciplinary actions in addition to preventive actions, sponsor recommendations should be limited to preventing future research misconduct and shall not concern disciplinary action against the respondent.

## I. The Investigative Report

The outline for the draft Investigative Report is as follows. Refer to Appendix F: Investigation Report Checklist, for additional guidance.

1. Background
  - a. Chronology of events
  - b. Issues
  - c. Allegations



2. Inquiry Process & Recommendations
  - a. Committee composition
  - b. Interviewees
  - c. Evidence sequestered and reviewed
3. Investigative Process
  - a. Committee composition
  - b. Interviewees
  - c. Evidence sequestered & reviewed
4. Investigation
  - a. Analysis for each allegation
  - b. Background
  - c. Analysis of all relevant evidence & specific identification of evidence supporting the finding
5. Conclusion
  - a. Finding of misconduct or no misconduct
  - b. Effect of misconduct (e.g. potential harm to research subjects, reliability of data, publications to be withdrawn, corrected, redacted, etc.)
6. Recommended institutional actions
  - a. Finding of facts and conclusions pertaining to the respondent's commission of research misconduct under the three-point evidentiary standards as defined below in Section VI.J.
  - b. Statement assessing the significance and seriousness of the misconduct
  - c. Recommendations for procedural measures to be taken by the University to prevent future occurrences of similar research misconduct, and outline of possible disciplinary actions as appropriate for the seriousness of the misconduct, or reputation restorative actions as appropriate if no misconduct if determined
7. Attachments

**J. Research Misconduct Findings**

A finding of research misconduct requires all three of the following evidentiary standards be met:

1. A significant departure from accepted practices of the relevant research community occurred;
2. The departure was committed intentionally, knowingly or recklessly; and
3. The validity of the allegation of research misconduct is determined by a preponderance of evidence.

#### **K. Report Comment Period**

The Investigative Committee shall complete its work and submit a draft Investigative Report to the RIO within 55 calendar days of entering the Investigation Phase. Within 58 calendar days of entering the Investigation Phase, the RIO will provide the respondent with a copy of the draft Investigative Report for comment, and concurrently, a copy of, or supervised access to, the evidence on which the report is based, and the RIO will provide the complainant with those portions of the draft Investigative Report that are relevant to the complainant in the investigation.

The respondent and complainant each will be allowed 7 calendar days to review and comment on the draft report. The RIO will provide the comments to the Investigative Committee within 68 days of entering the Investigation Phase, and the Investigative Committee will have at least 11 calendar days to review the respondent's and complainant's comments and provide the RIO with the final Investigative Report. The respondent and complainant comments will be attached to the final Investigative Report. At the discretion of the Investigative Committee, the Investigative Report may be revised in light of the respondent's and/or complainant's comments. Within 82 calendar days of entering the Investigation Phase, the RIO shall provide the Office of University Counsel (or designee) with a copy of the Investigative Committee's final Investigative Report. The University General Counsel will be given at least 5 calendar days to review the report's legal sufficiency and provide comments to the RIO who will then determine if the comments will be incorporated into the final Investigative Report, as appropriate. The RIO will incorporate those comments into the final Investigative Report as appropriate, and send the report to the Provost no later than 90 days after entering the Investigation Phase.

The RIO may require any recipient of the final Investigative Report or portions thereof to enter into a written confidentiality agreement prior to receiving the report.

#### **L. Documentation and Records Retention**

An investigative file shall be maintained and include an index of all evidence secured or examined in conducting the investigation, including any evidence that may support or contradict the Investigative Report's conclusions. Evidence includes but is not limited to: research records; transcripts or recordings of interviews; committee correspondence; administrative records; grant applications and awards; manuscripts; publications; and expert analyses.

After completion of the investigation and all ensuing related actions, the RIO will prepare the complete file, including the records of the inquiry or investigation and copies of all documents and other materials furnished to the RIO, Inquiry Panel, or Investigative Committee. The RIO will keep the file for a minimum of seven years after completion of the case.

### **VII. Phase Three: Adjudication**

**A. Overview:** Adjudication is a formal procedure for reviewing and evaluating the evidentiary record and Investigative Report. Adjudication is conducted by the Provost and President.

**B. Provost Non/concurrence with Recommendations**

Within 5 calendar days of receipt of the final Investigative Report, the Provost shall make a determination to accept, reject or require further clarifications in the final report, and shall notify the RIO and chair of the Investigative Committee of that determination in writing.

If the Provost does not concur with the Investigative Committee findings of fact or recommendation in whole or in part, the Provost shall provide the Investigative Committee and RIO with a response explaining in detail the procedural or substantive basis for their nonconcurrence. The Investigative Committee normally shall have at least 7 calendar days to address the concerns raised, but may request extensions as may be reasonably necessary. The Investigative Committee shall provide the Provost and RIO with a revised final Investigative Report within 12 days of entering the Adjudication Phase, and the RIO shall provide a copy of the final Investigative Report to the respondent and complainant within 15 days of entering the Adjudication Phase.

**C. Provost and President Review of the Investigative Report**

Within 19 calendar days of entering the Adjudication Phase (in the absence of any extension allowed by the RIO to the Investigative Committee) receipt of the Investigative Committee's final (revised if necessary) Investigative Report, and based upon a preponderance of the evidence, the Provost will make a written recommendation to the President of the University for action concerning its findings and its recommended institutional actions. This recommendation shall include:

1. Corrective and/or preventive procedural measures by the University to prevent future occurrences of research misconduct,
2. Disciplinary actions against the respondent, if any, or
3. Reputation restorative actions if no misconduct is found to have occurred.

If the Provost's recommendation for corrective and/or preventive procedural measures varies from the recommendation made by the Investigative Committee in its Final Investigative Report, the Provost will explain the basis for that variance in the written recommendation for actions to the University President and in reporting letters to the study sponsor (if any). The Provost's explanation should be consistent with the definition of research misconduct, GVSU policies and procedures, and the evidence reviewed and analyzed by the Investigative Committee.

The President will have at least 8 calendar days to review the Provost's recommendation and to make the final decision regarding the disposition of the investigation into the

allegation of research misconduct, determine appropriate institutional responses (see section VIII. below), and notify the RIO and Provost of these decisions. The President's conclusions and instructions for actions will be binding on any later proceeding convened for other purposes. The RIO shall notify the respondent in writing of the President's conclusions for disciplinary action against the respondent, and that determination shall be conclusive and binding on any later proceeding convened for other purposes. Other persons with a need to know (e.g. Vice Provost for Research Administration, ORCI, respondent's Authorizing Official, external funding agencies, sponsors, government officials, etc. as appropriate) of the President's conclusions related to the recommendations of the Investigative Committee's Final Report will be notified in a manner appropriate to their need to know and as required by law.

Where the President determines that the respondent did not engage in research misconduct, the President or designee shall take any other action which they deem necessary to restore the respondent's reputation, if appropriate.

Collectively, the Investigation Phase and the Adjudication Phase cannot exceed 120 calendar days, unless the RIO grants an extension. *If the activity falls under PHS oversight, the RIO must inform the ORI of such an extension.*

#### **VIII. Institutional Administrative Actions**

When an allegation of misconduct has been substantiated, appropriate administrative actions will be taken. They may include but are not limited to:

- A. Withdrawal or correction of all pending or published abstracts, papers, technical reports, government reports, and popular works resulting from the research where misconduct was found;
- B. Removal of the responsible person from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction or termination of employment;
- C. Restitution of funds as appropriate.

The termination of the respondent's employment, by resignation or otherwise, before or after the allegation has been reported, may or may not terminate the misconduct investigation proceedings. If the respondent, without admitting misconduct, elects to resign prior to or during the inquiry or investigation phases, the inquiry or investigation may still proceed.

If the respondent refuses to participate in the proceedings, the committee will use its best efforts to reach a conclusion concerning the allegation, noting the respondent's refusal to cooperate and its effect on the committee's review of all the evidence.

#### **IX. Documentation and Records Retention**

An investigative file shall be maintained and include an index of all evidence secured or examined in conducting the investigation, including any evidence that may support or

contradict the Investigative Report's conclusions. Evidence includes but is not limited to: research records; transcripts or recordings of interviews; committee correspondence; administrative records; grant applications and awards; manuscripts; publications; reports, and expert analyses.

After completion of the investigation and all ensuing related actions, the RIO will prepare the complete file, including the records of the inquiry or investigation and copies of all documents and other materials furnished to the RIO, Inquiry Panel, or Investigative Committee. The RIO will keep the file for a minimum of seven years after completion of the case and in compliance with the University's data retention policy.

## **X. Safeguards**

### **A. Confidentiality:**

To the extent possible consistent with a fair and thorough investigation and as allowed by law, knowledge about the identity of a complainant, respondent, and any witness shall be limited to those persons identified in this procedure and others who need to know. All written materials and information with respect to any of these proceedings shall be kept confidential. Written confidentiality agreements may be required for some or all individuals involved in these procedures (See model confidentiality agreement in Appendix D).

### **B. Conflicts of Interest:**

The RIO shall take all reasonable steps to ensure that all individuals responsible for carrying out any part of the administrative procedures described in this process do not have unresolved personal, professional, or financial conflicts of interest with the complainant, respondent, or witness. In making this determination, the RIO will consider whether the individual (or any members of his or her immediate family):

1. Has any financial involvement with respondent, complainant, or witness
2. Has been a co-author on a publication with respondent, complainant, or witness
3. Has been a collaborator or co-investigator with respondent, complainant, or witness
4. Has been a part to a research controversy with respondent, complainant, or witness
5. Has a supervisory, mentor, or professorial relationship with respondent, complainant, or witness
6. Has a special relationship, such as a close personal friendship, kinship, or a professional/client relationship with respondent, complainant, or witness
7. Has any other circumstances that might appear to compromise the individual's objectivity in reviewing the allegation.

### **C. Challenges to Investigative Committee Members**

Any principal participant in the investigative process may challenge any Investigative Committee member or expert on the basis of conflict of interest. The RIO will notify the complainant and respondent of the proposed Investigative Committee membership within 10 calendar days of the Provost's determination that the inquiry will proceed to the investigative phase. If the respondent or complainant submits a written objection to any member of the Investigative Committee or consulting expert based on bias or conflict of interests within 5 calendar days, the RIO will immediately determine, in consultation with the Provost, whether to replace the challenged member or expert with a qualified substitute. If a challenge is made of the suitability of the RIO directly, the Provost may appoint a new RIO for some or all of the procedures. If a challenge is made of the suitability of the Provost, the President may perform the duties of the Provost. If a challenge is made of the suitability of the President, the Provost may perform the duties of the President.

### **D. Safeguards for a Complainant:**

In addition to procedural safeguards provided for as described above, the University shall ensure:

1. Fair and reasonable treatment of the complainant
2. All reasonable and practical efforts to protect the complainant from retaliation
3. Use of fair and objective procedures
4. Diligent effort to protect or restore the position and reputation of the complainant

## **XI. Appendices**

### **A. Summary of Roles and Responsibilities**

1. President
2. Provost
3. Research Integrity Officer
4. Standing Committee on Research Integrity
5. Investigative Committee
6. Complainant
7. Respondent
8. Members of the University Community

### **B. Procedural Checklist**

### **C. Definitions**

### **D. Model Confidentiality Agreement**

### **E. Inquiry Report Checklist**

### **F. Investigation Report Checklist**

## **Appendix A: Responding to an Allegation of Research Misconduct: Roles & Responsibilities**

### **1. Responsibilities of the President**

Ultimate responsibility to resolve misconduct allegations found to have merit through these procedures is held by the President of the University, informed by the recommendation of the Provost.

- Informs external funding agencies, sponsors, or appropriate governmental office that an investigation is or is not warranted if external funding agencies, sponsors, or governmental office requested the inquiry
- Final responsibility for determination of corrective/preventive procedural measures
- Final responsibility for determination of administrative action concerning respondent
- Final responsibility for reporting and explaining outcome of university processes and actions to sponsors or government entities as required by law.

### **2. Responsibilities of the Provost**

The Provost is responsible for the implementation and oversight of these procedures and retains decision making authority over all actions related to these procedures.

- The Provost will appoint the RIO for GVSU with primary responsibility for assuring adherence to these procedures.
- The Provost (or his/her designee) will appoint a total of 10 members to staggered 3-year terms on the Standing Committee on Research Integrity Inquiry (SCRI), making new appointments as necessary to replace members who leave the committee. The SCRI will be comprised of 10 members as follows:
  - College of Health Professions (one member)
  - Kirkhof College of Nursing (one member)
  - Seidman College of Business (one member)
  - Padnos College of Engineering & Computing (one member)
  - College of Education and Community Innovation (two members)
  - College of Liberal Arts and Sciences (two members)
  - College of Interdisciplinary Studies and Library (one member)
  - At-Large Representative (one member)
- Ensures no apparent bias or conflict of interest exists for members of SCRI and RIO
- Determines whether an investigation is warranted
- Determines whether to accept recommendations of Investigative Report
- Determines GVSU administrative actions against “bad faith” complaints
- Recommends administrative corrective/preventive and disciplinary actions to the President

The Provost will take reasonable steps to ensure that the RIO does not have any real or apparent unresolved personal, professional, or financial conflicts of interest with a complainant, respondent, witness, or other members of the SCRI. In the event the RIO

has a conflict of interest and requests to be recused from the proceedings, the Provost shall appoint on a case-by-case basis an individual to act on behalf of the RIO.

### **3. Responsibilities of the Research Integrity Officer (RIO)**

The RIO plays a central role in allegations of misconduct. The responsibilities and duties of the RIO for GVSU reside within the Office of the Provost. The RIO is responsible for initially assessing allegations of research misconduct, determining when an allegation warrants an inquiry, overseeing such inquiries and investigations, and effectively communicating with all external funding agencies, sponsors, and government offices regarding their reporting requirements throughout the procedures.

- The RIO may seek the assistance or consultation of the University General Counsel or designee at any point in the proceedings.
- The RIO will convene a 3-person panel drawn from the SCRI and oversee the panel in conducting an inquiry.
- Should the Inquiry Panel determine an allegation warrants a formal investigation, the RIO, with the review and approval of the Provost, shall select and appoint members to serve on a formal Investigative Committee.
- The RIO will assist members of the University community in complying with these procedures as well as with other relevant standards imposed by the government or other external entities.
- The RIO will ensure that all internal and external reporting requirements are met. The RIO is also responsible for maintaining the confidentiality of all files, documents and evidence in a safe and secure environment. A list summarizing the responsibilities of the RIO follows:

#### **Receipt of Allegations**

- Receives allegations of research misconduct
- Receives allegations of retaliation
- Receives reports of “bad faith” allegations
- Receives reports of violations of federal regulations

#### **Assessment of Allegations**

- Conduct preliminary assessment of allegations
- Determines whether an inquiry is warranted
- Refers non-research misconduct issues to the appropriate institutional or federal office

#### **Inquiry Process**

- Initiates inquiry process by selecting and convening a 3-member Inquiry Panel of the SCRI and appoints one member as chair
- Determines whether to replace challenged SCRI Inquiry Panel members
- Notifies appropriate institutional officials, the respondent, external funding agencies, sponsors, and appropriate governmental offices as appropriate that an inquiry is in process



- Sequesters research records
- Establishes conditions of confidentiality and secures written confidentiality agreements as appropriate
- Protects processes against bias or conflict-of-interest by principal members
- Develops the charge to the SCRI Inquiry Panel and advises them on procedures
- Meets sponsor/funding agency/ORI reporting requirements directly or through notification of University reporting officials
- Takes appropriate interim administrative actions
- Seeks advice from external funding agencies, sponsors, and governmental offices as appropriate when an admission of misconduct occurs
- Determines whether a time extension shall be allowed for SCRI Inquiry Panel reporting
- Provides a draft SCRI Inquiry Panel report to the respondent
- Provides appropriate portions of the draft SCRI Inquiry Panel report to the complainant
- Transmits the final SCRI Inquiry Panel report and comments to the Provost
- Communicates the decision of the Provost to the appropriate parties
- Notifies external funding agencies, sponsors, and governmental offices as appropriate if an investigation will be undertaken
- Provides the final SCRI Inquiry Panel report to funding agencies, sponsors, and governmental offices, as required
- Secures and retains all inquiry records
- Reports “bad faith” allegations to the Provost
- Undertakes reasonable efforts to protect “good faith” complainants and others who cooperated with the inquiry

### **Investigative Process**

- Notifies respondent that an investigation shall be conducted
- Sequesters additional research material or records, as appropriate
- With review and approval of Provost, appoints and convenes the Investigative Committee
- Determines, in consultation with the Provost, whether to replace challenged Investigative Committee members
- Determines if additional expert consultation is needed
- Establishes conditions of confidentiality and secures written agreements as appropriate
- Protects against bias or conflict-of-interest among the principals
- Develops the charge of investigation and advises the Investigative Committee on appropriate procedures
- Meets all external funding agencies, sponsors, and governmental reporting requirements
- Takes appropriate interim administrative actions
- Notifies external funding agencies, sponsors, and governmental agencies, as necessary, if an admission of misconduct occurs

- Requests extension of Investigative Committee report deadlines from Provost as needed, and submits progress reports
- Submits plan to terminate an investigation
- Provides a draft report to the respondent and appropriate portions of the draft report to the complainant
- Transmits the final Investigative Committee report to the Provost
- Notifies the respondent and complainant of the Provost's findings and actions
- Retains all records of investigation
- Reports “bad faith” allegations to the Provost
- Undertakes reasonable efforts to restore the reputation of cleared respondents as directed by the Provost
- Undertakes reasonable efforts to protect “good faith” complainants and others who cooperated with the investigation

#### **Adjudication Process**

- Responds to requests from external funding agencies, sponsors, and governmental offices for additional information or assistance
- Responds to governmental office requests for additional information or assistance during a federal government Appeals Board appeal
- Assures proper disposition and/or retention of all investigative materials as appropriate

#### **4. Responsibilities of the Standing Committee on Research Integrity (SCRI)**

This standing committee serves as the resource pool to support the RIO in conducting an inquiry into research misconduct. The SCRI, appointed by the Provost (or his/her designee), consists of 10 persons comprised of representatives as follows:

- College of Health Professions (one member)
- Kirkhof College of Nursing (one member)
- Siedman College of Business (one member)
- Padnos College of Engineering & Computing (one member)
- College of Education and Community Innovation (two members)
- College of Liberal Arts and Sciences (two members)
- Brooks College of Interdisciplinary Studies and GVSU Libraries (one member)
- At-Large Representative (one member)

The 3-member Inquiry Panel of the SCRI selected by the RIO to conduct an inquiry is responsible for overseeing the administrative procedures relating to an inquiry into any allegation of research misconduct. The chair of the panel is appointed by the RIO. The work of the panel normally must be completed within 60 calendar days of its initiation, but the Chair may formally request of the RIO an extension for cause. When the RIO determines that an allegation warrants an inquiry procedure, the RIO will select 3 members of the SCRI to comprise an inquiry panel to conduct the inquiry.

#### **5. Responsibilities of the Investigative Committee**

If an inquiry by the SCRI into an allegation of research misconduct results in a

recommendation to conduct a formal investigation, a 3-member Investigative Committee is appointed by the RIO in consultation with the Provost and charged to conduct the investigation. Investigative Committee membership shall require skills and expertise within one or more specific research disciplines or fields, to gather and evaluate evidence related to the allegation of misconduct, and to complete a thorough investigation including interviews of key individuals at GVSU and elsewhere, as appropriate. The Investigative Committee will issue a report that describes its investigative procedures, conclusions pertaining to the commission of research misconduct, an evaluation of the severity of the research misconduct, and include recommendations for both preventive actions and disciplinary actions. The report is advisory to the Provost.

**6. Responsibilities of the Complainant**

The complainant is responsible for making an allegation in good faith, maintaining confidentiality, and cooperating with any inquiry or investigation conducted as the result of an allegation.

**7. Responsibilities of the Respondent**

The respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry or investigation. The respondent shall refrain from retaliating against a complainant who raises an allegation in good faith, or against others who cooperate in an inquiry or investigation.

**8. Responsibilities of Members of the University Community**

All members of the University community shall cooperate with the Inquiry Panel and Investigative Committee and provide relevant evidence in the course of research misconduct proceedings.

## Appendix B: Procedural Checklist

This checklist is provided to ensure all required actions are completed within the allowable timeframe. Dates listed in blue (phase start dates, deadlines, and completion dates) are determined as the investigation progresses and are to be entered into the table below by the RIO. Days are measured in calendar days. Day counts are specific to each phase and reset upon entry into each new phase.

### I. Preliminary Phase: Allegation (maximum 15 days)

Start Date (Day 0): **XX/XX/XX** (Date allegation is received)

Procedural Activity	Responsible Party	Deadline to Complete Action	Deadline	Completion Date
1. Determine if allegation meets GVSU Policy definition	RIO	Day 5	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
2. Sequester research-related materials	RIO	Day 10	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
3. Determine if inquiry needed and notify respondent, Provost, General Counsel, and Appointing Officer of respondent	RIO	Day 15	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>

If Inquiry needed, proceed to next phase.

### II. Phase One: Inquiry (maximum 60 days)

Start Date (Day 0): **XX/XX/XX** (Date RIO determines inquiry needed, equal to completion date of Step 3 above)

Procedural Activity	Responsible Party	Deadline to Complete Action	Deadline	Completion Date
4. Selection and initial convening of SCRI Inquiry Panel	RIO	Day 10	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
5. Draft Inquiry Report provided to RIO	SCRI Inquiry Panel	Day 30	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
6. Provide respondent and complainant with draft Inquiry Report	RIO	Day 33	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
7. Provide RIO any comments on the draft report	Complainant/ Respondent	Day 38	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
8. Provide SCRI Inquiry Panel with complainant/respondent comments	RIO	Day 41	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
9. Draft Final Inquiry Report and provide to Provost and RIO	SCRI Inquiry Panel	Day 55	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
10. Provost determination of closure or continuance	Provost	Day 60	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>

If Investigation needed, proceed to next phase. At this time, the RIO shall also secure any additional research records or materials relevant to the investigation identified in the Inquiry Final Report that were not previously secured. *Additionally, if the activity was part of a PHS application or award, the RIO must notify the ORI within 30 calendar days of the Provost’s decision. The RIO must also supply a copy of the Inquiry Report to the ORI Director; this must occur on or before the investigation begins.*

**III. Phase Two: Investigation (maximum 90 days)**

Start Date (Day 0): **XX/XX/XX** (Date Provost determines investigation is needed, equal to completion date of Step 10 above)

<b>Procedural Activity</b>	<b>Responsible Party</b>	<b>Deadline to Complete Action</b>	<b>Deadline</b>	<b>Completion Date</b>
11. Notification of investigation to respondent and selection of Investigative Committee	RIO	Day 10	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
12. Respondent challenge to Investigative Committee membership, if desired	Respondent	Day 15	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
13. Convene initial Investigative Committee meeting	RIO	Day 20	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
14. Draft Investigative Report provided to RIO	Investigative Committee	Day 55	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
15. Provide respondent and complainant with draft Investigative Report	RIO	Day 58	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
16. Provide RIO any comments on the draft Investigative Report	Complainant/ Respondent	Day 65	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
17. Provide Investigative Committee complainant/ respondent comments	RIO	Day 68	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
18. Provide final Investigative Report to RIO	Investigative Committee	Day 79	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
18. Provide final Investigative Report to General Counsel	RIO	Day 82	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
19. Provide RIO any comments regarding the final report	General Counsel	Day 87	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>
20. Incorporate General Counsel comments into final report, as appropriate, and send to Provost	RIO	Day 90	<b>XX/XX/XX</b>	<b>XX/XX/XX</b>

**III. Phase Three: Adjudication (maximum 30 days)**

Start Date (Day 0): **XX/XX/XX** (Date Provost sent final Investigative Report, equal to completion date of Step 20 above)

<b>Procedural Activity</b>	<b>Responsible Party</b>	<b>Deadline to Complete Action</b>	<b>Deadline</b>	<b>Completion Date</b>
21. Provost concurrence or nonconcurrence with final Investigative Report	Provost	Day 5	XX/XX/XX	XX/XX/XX
22. Response to Provost review and issuance of revised final report to Provost and RIO, if necessary	Investigative Committee	Day 12	XX/XX/XX	XX/XX/XX
23. Provide respondent and complainant with a copy of the final Investigative Report	RIO	Day 15	XX/XX/XX	XX/XX/XX
24. Make written recommendation to President	Provost	Day 19	XX/XX/XX	XX/XX/XX
25. Final decision regarding disposition of misconduct, determination of institutional responses, and notification to RIO and Provost of decisions	President	Day 27	XX/XX/XX	XX/XX/XX
26. Notification of final decision to respondent and others with a need to know, including ORI if the activity falls under PHS oversight	RIO	Day 30	XX/XX/XX	XX/XX/XX

## Appendix C: Definitions

**Adjudication:** Adjudication is the formal procedure for reviewing and evaluating the Investigative Report and the accompanying evidentiary record and for determining whether to accept the recommended findings and any recommendations to impose administrative actions or other appropriate actions resulting from the investigation.

**Allegation:** An allegation is any written or oral statement or other indication of possible research misconduct made to an institutional official.

**Appointing Official:** The GVSU institutional official who authorized the respondent's current employment contract. If the respondent is not a GVSU employee, it is the GVSU institutional official who is the administrative supervisor of record for the respondent.

**Complainant:** A complainant is a person who makes, in good faith, an allegation of research misconduct. A complainant need not be a member of the University community.

**Conflict of Interest:** Any, or the appearance of, financial, personal, professional, scholarly or social interest, commitment or relationship that would, in the judgment of the Research Integrity Officer, impair the ability to make a fair and impartial judgment about an allegation of misconduct.

**Day:** For the purposes of this procedure a day shall mean a calendar day.

**Deciding Official:** The institutional official who makes the final and binding determinations on procedures pertaining to the inquiry, investigation, and adjudication of allegations of research misconduct. The Deciding Official at GVSU is the University President as advised by the Provost.

**Employee:** An employee means, for the purpose of this procedure only, any person paid by, under the control of, or affiliated with GVSU, including but not limited to:

- Professors
- Management
- Administrative
- Support staff
- Scientists
- Physicians
- Trainees
- Students
- Fellows
- Technicians
- Nurses
- Guest researchers
- Consultants

**Evidence:** Any document or tangible item or testimony offered or obtained during research misconduct proceedings that tends to prove or disprove the existence of an alleged fact.

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

**Falsification:** Falsification is manipulating research materials, equipment, or processes, or changing or omitting data or results such that research is not accurately represented in the research record.

**Good Faith Allegation:** A good faith allegation is an allegation made with the honest belief that research misconduct may have occurred. An allegation is not in good faith if it is made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

**Inquiry:** An inquiry is information gathering and initial fact-finding to determine whether an allegation or an apparent instance of research misconduct warrants an investigation

**Institutional Official:** Any Dean, Chair, Unit Head, Director, or other individual with defined supervisory oversight duties and responsibilities of another person.

**Investigation:** An investigation is the formal development of a factual record and the examination of that record leading to a decision not to make a finding of research misconduct or a recommendation for a finding of research misconduct which may include a recommendation for other appropriate or corrective actions.

**Investigative Committee:** A committee of three individuals appointed and charged by the RIO to conduct a formal investigation as the result of an inquiry into an allegation of research misconduct.

**Need to Know:** Persons including all of the following: allegation respondent, Unit Head of respondent, allegation complainant, Standing Committee on Research Integrity, and any external sponsors or government regulatory oversight offices or officials as required by law.

**Plagiarism:** Plagiarism is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

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

**Research:** All basic, applied and demonstrated research in all fields of knowledge. Research includes scholarship and creative activities performed as part of one's professional role or in affiliation with the University.

**Research Integrity Officer:** The Research Integrity Officer is the institutional official responsible for assessing allegations of research misconduct and determining when such allegations warrant inquiries and for overseeing any inquiries and investigations.

**Research Institution:** A research institution is defined to include all organizations using public or private funds for research, including colleges and universities, intramural research laboratories, federally funded research and development centers or laboratories, national user facilities, industrial laboratories, or other research institutes. Independent researchers and small research institutions are covered by this policy. Research conducted by GVSU employees,



affiliates or contractors under contractual instruments, agreements, and similar instruments are covered by this policy.

**Research Misconduct:** Research misconduct is defined in GVSU policies and is understood as the fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results, and/or engaging in ordering, advising or suggesting that subordinates engage in misconduct in research, scholarship or creative activities. Research misconduct does not include honest error or differences of opinion. This policy does not cover authorship disputes unless they involve plagiarism.

**Research Record:** The research record is any data, document, computer file, computer diskette, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or expected research that constitutes the subject of an allegation of research misconduct. Includes but is not limited to the following:

- Research proposals
- Laboratory/notebook/procurement records
- Forms
- Progress reports
- Abstracts
- Theses
- Notes
- Oral presentations
- Internal reports
- Journal articles
- Videos
- Correspondence
- Photos
- Use logs
- Time sheets
- Animal facility records
- Human/animal protocols
- Medical charts
- PT research files
- X-ray film
- Biological materials
- Manuscripts/publications
- Equipment
- Computer files/printouts
- Grant/contract applications/progress notes and other reports

**Respondent:** The individual who is the subject of an allegation of research misconduct or is the subject of an inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

**Retaliation:** Retaliation is any adverse action taken against a complainant, witness, or committee member by an institution or an employee because the individual has, in good faith, made an allegation of research misconduct or has cooperated in good faith with an investigation of such allegation.

**Standing Committee on Research Integrity:** The committee responsible for overseeing the administrative procedures relating to an inquiry into any allegation of research misconduct.

**Witness:** Any individual who testifies or provides information with regard to an allegation or whose research record is used as evidence during the course of research misconduct proceedings.

## Appendix D: Model Confidentiality Agreement

### CONFIDENTIALITY AGREEMENT FOR INQUIRY OR INVESTIGATIONS OF ALLEGATIONS OF RESEARCH MISCONDUCT

In consideration and as a condition of my participation (either on an Inquiry Panel or an Investigative Committee) and other matters (collectively, the "Participant Matters") engaged in pursuant to, or in connection with, that certain (as modified, amended, restated, replaced, and extended, the "Agreement"), I agree as follows.

1. Confidentiality. I agree to safeguard and not to disclose confidential information of Grand Valley State University ("GVSU") or any other party to the Agreement including: (a) patient information; (b) student information; (c) personnel information; (d) matters of a technical nature; (e) matters of a business nature; and (f) other information of a similar nature which is not generally disclosed by GVSU or such other party to the public, referred collectively hereafter as "Confidential Information". I further agree that I will not use Confidential Information except as may be necessary to perform my duties for GVSU in connection with Participant Matters. Upon termination of my participation in Participant Matters, or otherwise as requested, I will deliver promptly to GVSU all Confidential Information, in whatever form, that may be in my possession or under my control.
2. Continuation of Obligations. My obligations and the restrictions under this Agreement shall continue indefinitely after termination of my participation in Participant Matters.
3. Entire Agreement; Amendment. This is the entire Agreement with GVSU with respect to its subject matter. This Agreement may be modified, amended or terminated only by an agreement in writing executed by GVSU and me.

ACCEPTED AND AGREED:

Signature

Date

Printed name

## Appendix E: Inquiry Report Checklist

This checklist is provided by the ORI, Division of Investigative Oversight, to provide clarity to the public regarding existing requirements under the law or agency policies. For research and research training activities that applied for or received PHS support, this checklist must be used to ensure all required elements are included in the Inquiry Report. For all other activities, this checklist is provided as guidance for drafting the Inquiry Report.

1. Summary or background information
2. Name, position, and contact information of respondent(s) and complainant(s) and contact information of respondent's attorney, if applicable.
3. Allegations received and examined by the institution, including the complainant's comments and the date the institution received the allegations
  - a. Description of the allegation(s) of research misconduct – each allegation should be framed with:
    - i. Respondent's name, if known
    - ii. Where the falsified/fabricated/plagiarized (f/f/p) data/information were included (paper, grant application, etc.)
    - iii. Which specific figure, text, and/or data were f/f/p
    - iv. What the alleged f/f/p was and what the actual experimental results were, if known
  - b. Any additional research misconduct allegation(s) that arose during the inquiry, including:
    - i. Other papers or manuscripts submitted but not accepted for publication
    - ii. Other PHS grant application submitted for funding or awarded
    - iii. Progress reports, presentations, posters, or other research records
  - c. Any additional respondents identified during the inquiry
4. PHS support/ORI jurisdiction
  - a. Grant, grant application, or contract number(s), designated Principal Investigator(s) (PI[s]), and date(s) of application submission or award (with project dates)
  - b. List of paper(s), abstract(s), poster(s), or presentation(s) affected and the PHS support for each
  - c. List of any grants or contracts that were withdrawn or publications that were corrected or retracted

- d. If the alleged research misconduct occurred more than six years before the date the institution received the initial allegation of research misconduct, identification of the respondent's subsequent use, if any, that meets the requirements of 42 CFR 93.105(b)(1).
5. Composition of the Inquiry Panel (names, degrees, departmental affiliation, and expertise) and the charge to the committee
6. Notice to the respondent of the inquiry, with allegation(s) identified
  - a. Respondent's response to the notice
  - b. If relevant, admission statement from the respondent
7. Attachments/Exhibits of evidence and other relevant documents sequestered during the inquiry
  - a. Annotated inventory of sequestered records/evidence and chain of custody document(s)
  - b. Description of how sequestration was conducted
8. Transcripts or recordings of interviews of the respondent(s), complainant(s), and witness(es) with their names, degrees, and departmental affiliation
9. Institutional policies and procedures
10. Timeline, process, and procedural history
11. Inquiry Panel's analysis
  - a. Assessment of all relevant information
  - b. Conclusions or recommended findings and institutional actions
12. Description of any factors that may have affected the inquiry (non-responsive or cooperative respondent, complainant, or witnesses; difficulty in sequestering or examining evidence; institutional procedural issues, etc.)
  - a. Any institutional action(s) administered during or as a result of the inquiry
13. Respondent's (and if applicable, complainant's) response to draft Inquiry Report
  - a. Inquiry Panel's response to the comments

14. Written decision from the responsible institutional official with the determination to initiate (or not initiate) an investigation
15. Notice to the respondent (and if applicable, the complainant) of the institutional decision

## Appendix F: Investigation Report Checklist

This checklist is provided by the ORI, Division of Investigative Oversight, to provide clarity to the public regarding existing requirements under the law or agency policies. For research and research training activities that applied for or received PHS support, this checklist must be used to ensure all required elements are included in the Investigation Report. For all other activities, this checklist is provided as guidance for drafting the Investigation Report.

1. Summary of Inquiry Report and background information
2. Name, position, and contact information of respondent(s) and complainant(s) and contact information of respondent's attorney, if applicable.
3. Allegations received and examined by the institution, including the complainant's comments and the date the institution received the allegations
  - a. Description of the allegation(s) of research misconduct – each allegation should be framed with:
    - i. Respondent's name, if known
    - ii. Where the falsified/fabricated/plagiarized (f/f/p) data/information were included (paper, grant application, etc.)
    - iii. Which specific figure, text, and/or data were f/f/p
    - iv. What the alleged f/f/p was and what the actual experimental results were, if known
  - b. Any additional research misconduct allegation(s) that arose during the inquiry, including:
    - i. Other papers or manuscripts submitted but not accepted for publication
    - ii. Other PHS grant application submitted for funding or awarded
    - iii. Progress reports, presentations, posters, or other research records
  - c. Any additional respondents identified during the inquiry
4. PHS support/ORI jurisdiction
  - a. Grant, grant application, or contract number(s), designated Principal Investigator(s) (PI[s]), and date(s) of application submission or award (with project dates)
  - b. List of paper(s), abstract(s), poster(s), or presentation(s) affected and the PHS support for each
  - c. List of any grants or contracts that were withdrawn or publications that were corrected or retracted

- d. If the alleged research misconduct occurred more than six years before the date the institution received the initial allegation of research misconduct, identification of the respondent's subsequent use, if any, that meets the requirements of 42 CFR 93.105(b)(1).
5. Composition of the Investigative Committee (names, degrees, departmental affiliation, and expertise) and the charge to the committee
6. Notice to the respondent of the investigation and of any new allegations that arose during the investigation
  - a. Respondent's response(s) to the notice(s)
  - b. If relevant, admission statement from the respondent
7. Attachments/Exhibits of evidence and other relevant documents sequestered during the investigation
  - a. Annotated inventory of sequestered records/evidence and chain of custody document(s)
  - b. Description of how sequestration was conducted
  - c. Identification of any sequestered records/evidence that were not reviewed by the Investigative Committee, if applicable
8. Transcripts or recordings of interviews of the respondent(s), complainant(s), and witness(es) with their names, degrees, and department affiliation
9. Institutional policies and procedures
10. Timeline, process, and procedural history
11. Investigative Committee's analysis
  - a. Assessment of all relevant information
  - b. Findings and conclusions for each allegation
  - c. For each finding of research misconduct:
    - i. Identify whether the research misconduct was falsification, fabrication, or plagiarism, and if it was intentional, knowing, or in reckless disregard;
    - ii. Summarize the facts and the analysis which support the conclusion and consider the merits of any reasonable explanation by the respondent;
    - iii. Identify the specific PHS support;

- iv. Identify whether any publications need correction or retraction;
- v. Identify the person(s) responsible for the misconduct; and,
- vi. List any current support or known applications or proposals for support that the respondent has pending with non-PHS federal agencies

d. Conclusion or recommended findings and institutional actions

12. Description of any factors that may have affected the investigation

13. Respondent's (and if applicable, the complainant's) response to the draft Investigation Report

a. Investigative Committee's response to the comments

14. Written decision from the responsible institutional official with institutional findings (or no findings) of research misconduct and administrative actions pending or completed

15. Notice to the respondent (and if applicable, the complainant) of the institutional decision