Responding to Allegations of Research ~~or Scholarly~~ Misconduct

Academic Affairs – Research

CWU Policy 502-05

Effective: ~~June 13, 2018~~

Policy Review Date: YEAR

Policy Executive: Chief of Staff

Responsible Office/Unit: Provost Office

Policy Statement:

This document outlines the policy and procedure by which CWU will respond to and investigate allegation(s) of research misconduct. Research misconduct includes fabrication, falsification, or plagiarism, whether committed by an individual directly or through the use or assistance of other persons, entities, or tools, including artificial intelligence (AI)-based tools, in proposing, performing, or reviewing research, or in reporting research results. It violates ethical standards and undermines the integrity of the ~~scientific~~ record. All research at Central Washington University (CWU) must be conducted honestly, transparently, and responsibly to ensure trust and credibility in scholarly work.

Applicability:

An individual (or individuals) who is employed by, is an agent of, or is affiliated by contract or agreement with CWU.

Content:

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(1) Policy

A. Central Washington University (CWU) is committed to upholding the highest standards of ~~scientific~~ rigor in research. CWU is committed to fostering an environment that promotes research integrity and the responsible conduct of research, discourages research misconduct, and deals promptly with allegation(s) or evidence of possible research misconduct.

B. All institutional members are expected to conduct research with honesty, rigor, and transparency. Each institutional member is responsible for contributing to an organizational culture that establishes, maintains, and promotes research integrity and the responsible conduct of research, regardless of the funding source (e.g., federally funded, privately funded, or unfunded).

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1. For research supported by Public Health Service (PHS) or other federal sponsors, CWU will comply with the Office of Research Integrity (ORI) requirements under 42 CFR Part 93.

2. For other research, equivalent internal procedures will apply.

C. CWU strives to reduce the risk of research misconduct, support all good-faith efforts to report suspected misconduct, promptly and thoroughly address allegation(s) of research misconduct, and seek to rectify the ~~scientific~~ record and/or restore researchers' reputations, as appropriate.

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D. Research misconduct is contrary to the interests of CWU, the health and safety of the public, the integrity of research, and the conservation of public funds. Both CWU and its institutional members have an affirmative duty to protect those funds from misuse by ensuring the integrity of all research conducted on behalf of CWU.

E. CWU is responsible for ensuring that this policy and procedure for addressing allegation(s) of research misconduct meet the requirements of the PHS Policies on Research Misconduct (42 CFR Part 93, "the PHS regulation"), as well as corresponding policies regarding research misconduct from other federal funding agencies. CWU will establish and maintain this policy and procedure, inform all institutional members about this policy and procedure, and make this policy and procedure publicly available**.** CWU is committed to following this policy and procedure when responding to allegation(s) of research misconduct, regardless of the funding source (federally funded, privately funded, or unfunded).

F. Allegation(s) of research misconduct outside the scope of this policy will be managed as follows:

1. In cases where students are alleged to have committed research misconduct outside the scope of this policy, the Research Integrity Officer (RIO) and the Vice President of Student Engagement & Success will decide which process will be followed to be consistent with the Student Conduct Code and related policies.

2. In cases where classified, exempt, or temporary staff are alleged to have committed research misconduct outside the scope of this policy, the RIO and the staff member's supervisor will decide which process will be followed to preserve staff rights.

3. In cases where faculty have alleged to have committed research misconduct outside the scope of this policy, the RIO and the faculty member's department chair and/or college dean will decide which process will be followed to preserve faculty rights.

G. This policy does not apply to authorship or collaboration disputes.

(2) Scope and Applicability

A. This policy and procedure applies to allegation(s) of research misconduct involving:

1. Any individual employed by, affiliated with, or acting on behalf of CWU. See 'Institutional Member' in the definitions section of this policy.

2. Any research conducted at CWU, under CWU's auspices, or using CWU's facilities, resources, or administrative support.

3. Any research supported by external sponsors, including but not limited to funding from the Public Health Service (PHS), federal agencies, private foundations, and industry partnerships.

4. Any research record created, generated, stored, or maintained under CWU responsibility, regardless of the location of the researcher or the research activities.

B. This policy and procedure applies only to research misconduct occurring within six years of the date HHS (or other federal sponsor) or CWU receives allegation(s) of research misconduct, subject to the following exceptions:

1. The six-year time limitation does not apply if the respondent(s) continues or renews any incident of alleged research misconduct that occurred before the six-year period through the use of, republication of, or citation to the portion(s) of the research record alleged to have been fabricated, falsified, or plagiarized, for the potential benefit of the respondent(s) ("subsequent use exception"). For alleged research misconduct that appears subject to this subsequent use exception, but CWU determines is not subject to the exception, the RIO will document its determination that the subsequent use exception does not apply and will retain this documentation for the later of seven years after completion of the proceeding or the completion of any HHS (or other federal sponsor) proceeding.

2. The six-year time limitation also does not apply if ORI or CWU, following consultation with ORI (when federally funded) determines that the alleged research misconduct, if it occurred, would possibly have a substantial adverse effect on the health or safety of the public.

C. This policy and procedure does not supersede or establish an alternative to the PHS regulation or any existing regulations for handling research misconduct involving non-PHS supported research. They do not replace the PHS regulation, and in case of any conflict between this document and 42 CFR Part 93, the PHS regulation will prevail. They are intended to enable CWU to comply with the requirements of the PHS regulation.

(3) Definitions

A. ***Accepted practices of the relevant research community.*** This term means those practices established by 42 CFR Part 93 and by PHS funding components, as well as commonly accepted professional codes or norms within the overarching community of researchers and institutions that apply for and receive PHS awards.

B. Administrative record. The administrative record comprises: the institutional record (maintained by Research and Sponsored Programs); any information provided by the respondent to ORI (when federally funded), including but not limited to the transcript of any virtual or in-person meetings under § 93.403(b) between the respondent and ORI (when federally funded), and correspondence between the respondent and ORI (when federally funded); any additional information provided to ORI (when federally funded) while the case is pending before ORI; and any analysis or additional information generated or obtained by ORI. Any analysis or additional information generated or obtained by ORI (when federally funded) will also be made available to the respondent. Additionally, the administrative record is the official record used during the federal level oversight, administrative action, and/or appeals process. Federal level entities include the Office of Research Integrity (ORI), the Department of Health and Human Services (HHS), or an Administrative Law Judge.

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C. ***Allegation.*** This term is a disclosure of possible research misconduct through any means of communication and brought directly to the attention of an institutional or HHS (or other federal sponsor) official.

D. ***Assessment.*** Assessment means a consideration of whether allegation(s) of research misconduct appears to fall within the definition of research misconduct; appears to involve PHS and non-PHS-funded research; and is sufficiently credible and specific so that potential evidence of research misconduct may be identified. The assessment only involves the review of readily accessible information relevant to the allegation(s).

E. ***Complainant.*** Complainant means an individual who in good faith makes an allegation of research misconduct.

F. ***Conflict of interest.*** A conflict of interest (COI) during a research misconduct assessment, inquiry, or investigation is any situation in which a person involved in handling, reviewing, or handling the case has personal, professional, or financial interests that could compromise—or appear to compromise—their objectivity, fairness, or impartiality.

G. ***Designee –*** An institutional official who is delegated the RIO's responsibilities due to the RIO having potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved. The IDO is responsible for assigning a designee if it is determined the RIO has a conflict. The President is responsible for assigning a designee if it is determined the IDO has a potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved.

H. ***Evidence.*** Evidence means anything offered or obtained during a research misconduct proceeding that tends to prove or disprove the existence of an alleged fact. Evidence includes documents, whether in hard copy or electronic form, information, tangible items, and testimony.

I. ***Fabrication.*** Fabrication means making up data or results and recording or reporting them.

J. ***Falsification.*** Falsification means 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.

K. ***Good faith.*** (a) Good faith as applied to a complainant or witness means having a reasonable belief in the truth of one's allegation(s) or testimony, based on the information known to the complainant or witness at the time. An allegation(s) 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(s) or testimony. (b) Good faith as applied to an institutional or committee member means cooperating with the research misconduct proceeding by impartially carrying out the duties assigned for the purpose of helping an institution meet its responsibilities under 42 CFR Part 93 (when federally funded). An institutional or committee member does not act in good faith if their acts or omissions during the research misconduct proceedings are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.

L. ***Inquiry.*** Inquiry means preliminary information-gathering and preliminary fact-finding that meets the criteria and follows the procedures of § 93.307 through § 93.309.

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M. ***Institution.*** An entity (CWU) including all of its colleges, departments, divisions, centers, and affiliated components, is responsible for the design, conduct, reporting, or review of research. This includes any entity (CWU) that applies for or receives research funding or support, is accountable for ensuring compliance with applicable research misconduct regulations and policies.

N. ***Institutional Deciding Official.*** Institutional Deciding Official (IDO) means the institutional official who makes final determinations on allegation(s) of research misconduct and any institutional actions. The same individual cannot serve as the Institutional Deciding Official and the Research Integrity Officer. The Provost and Executive Vice President for Academic Affairs serves as the IDO unless it is determined the IDO has a potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved. In this circumstance, the President is responsible for assigning an IDO designee.

O. ***Institutional member.*** Institutional member and members means an individual (or individuals) who is employed by, is an agent of, or is affiliated by contract or agreement with an institution. Institutional members may include, but are not limited to, officials, tenured and untenured faculty, teaching and support staff, researchers, research coordinators, technicians, postdoctoral and other fellows, students (graduate and undergraduate), volunteers, subject matter experts, consultants, or attorneys, or employees or agents of contractors, subcontractors, or sub-awardees.

P. ***Institutional record.*** The institutional record, maintained by Research and Sponsored Programs, comprises: (a) The records that the RIO compiled or generated during the research misconduct proceeding, except records the RIO did not consider or rely on. These records include but are not limited to (1) documentation of the assessment as required by § 93.306(c); (2) if an inquiry is conducted, the inquiry report and all records (other than drafts of the report) considered or relied on during the inquiry, including, but not limited to, research records and the transcripts of any transcribed interviews conducted during the inquiry, information the respondent(s) provided to the RIO, and the documentation of any decision not to investigate as required by § 93.309(c); (3) if an investigation is conducted, the investigation report and all records (other than drafts of the report) considered or relied on during the investigation, including, but not limited to, research records, the transcripts of each interview conducted pursuant to § 93.310(g), and information the respondent(s) provided to the RIO; (4) decision(s) by the Institutional Deciding Official (IDO), such as the written decision from the Institutional Deciding Official under § 93.314; (5) the complete record of any institutional appeal consistent with § 93.315; (b) a single index listing all the research records and evidence that the RIO compiled during the research misconduct proceeding, except records the RIO did not consider or rely on; and (c) a general description of the records that were sequestered but not considered or relied on. Additionally, the institutional record is the materials used during the institutional level assessment, inquiry, investigation, and institutional decision-making processes. This record is not to be confused with the official administrative record which is utilized during the federal level administrative review.

Q. ***Intentionally.*** To act intentionally means to act with the aim of carrying out the act.

R. ***Investigation.*** Investigation means the formal development of a factual record and the examination of that record that meets the criteria and follows the procedures of §§ 93.310 through 93.317.

S. ***Knowingly.*** To act knowingly means to act with awareness of the act.

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T. ***Office of Research Integrity (ORI).*** ORI is a U.S. government agency within the Department of Health and Human Services (HHS) that oversees and directs Public Health Service (PHS) research integrity activities.

U. ***Plagiarism.*** Plagiarism means the appropriation of another person's ideas, processes, results, or words, without giving appropriate credit. (a) Plagiarism includes the unattributed verbatim or nearly verbatim copying of sentences and paragraphs from another's work that materially misleads the reader regarding the contributions of the author. It does not include the limited use of identical or nearly identical phrases that describe a commonly used methodology. (b) Plagiarism does not include self-plagiarism or authorship or credit disputes, including disputes among former collaborators who participated jointly in the development or conduct of a research project. Self-plagiarism and authorship disputes do not meet the definition of research misconduct.

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

W. ***PHS support.*** PHS support means Public Health Service (PHS) funding (e.g., NIH, CDC, FDA, HRSA, etc.), or applications or proposals for PHS funding.

X. ***Recklessly.*** To act recklessly means to propose, perform, or review research, or report research results, with indifference to a known risk of fabrication, falsification, or plagiarism.

Y. Research. For the purposes of this policy, research includes scholarship, creative activity, and creative expression across all academic disciplines, including the sciences, social sciences, humanities, arts, and professional fields.

Z. ***Research Integrity Officer.*** The Research Integrity Officer (RIO) refers to the institutional official responsible for administering CWU's written policy and procedure for addressing allegation(s) of research misconduct in compliance with 42 CFR Part 93. The Dean of Graduate Studies and Research serves as the RIO unless it is determined the RIO has a potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved. In this circumstance, the IDO is responsible for assigning an RIO designee.

AA. ***Research misconduct.*** Research misconduct means fabrication, falsification, or plagiarism, whether committed by an individual directly or through the use or assistance of other persons, entities, or tools, including artificial intelligence (AI)-based tools, in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error or differences of opinion.

BB. ***Research misconduct proceeding.*** Research misconduct proceeding means any actions related to alleged research misconduct taken under 42 CFR Part 93, including allegation(s) assessments, inquiries, investigations, ORI (when federally funded) oversight reviews, and appeals under subpart E of 42 CFR Part 93.

CC. ***Research record.*** Research record means the record of data or results that embody the facts resulting from ~~scientific~~ inquiry. Data or results may be in physical or electronic form. Examples of items, materials, or information that may be considered part of the research record include, but are not limited to, research proposals, raw data, processed data, clinical research records,

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laboratory records, study records, laboratory notebooks, progress reports, manuscripts, abstracts, theses, records of oral presentations, online content, lab meeting reports, and journal articles.

DD. ***Respondent.*** Respondent means the individual against whom allegation(s) of research misconduct is directed or who is the subject of a research misconduct proceeding.

EE. ***Retaliation.*** Retaliation means an adverse action taken against a complainant, witness, or committee member by an institution or one of its members in response to (a) a good faith allegation(s) of research misconduct or (b) good faith cooperation with a research misconduct proceeding.

(4) Roles, Rights, and Responsibilities

A. Responsibilities of CWU in Research Misconduct Investigations

1. General Responsibilities

   a. To the extent possible, the RIO will limit disclosure of the identity of respondent(s), complainant(s), and witness(es) while conducting the research misconduct proceedings to those who need to know, inform all institutional members about this policy and procedure, and make this policy and procedure publicly available. This limitation on disclosure no longer applies once the IDO has made a final determination of research misconduct findings.

   b. The RIO will respond to each allegation of research misconduct under 42 CFR Part 93 in a thorough, competent, objective, and fair manner. The RIO will take all reasonable and practical steps to ensure the cooperation of respondent(s) and other institutional members with research misconduct proceedings, including, but not limited to, their providing information, research records, and other evidence.

   c. The RIO agrees to cooperate with ORI (when federally funded) during any research misconduct proceeding or compliance review, including addressing deficiencies or additional allegations in the institutional record if directed by ORI and to assist in administering and enforcing any sponsor-specific (when federally funded) administrative actions imposed on institutional members.

   d. CWU may also take steps to manage published data or acknowledge that data may be unreliable.

2. Responsibilities During and After a Research Misconduct Proceeding

   a. Except as may otherwise be prescribed by applicable law, CWU will maintain confidentiality for any records or evidence from which research subjects might be identified and will limit disclosure to those who need to know to carry out a research misconduct proceeding.

   b. Before or at the time of notifying the respondent(s) of the allegation(s) and whenever additional items become known or relevant, the RIO will promptly take all reasonable and practical steps to obtain all research records and other evidence and sequester them securely.

c. The RIO will ensure that the institutional record contains all required elements, i.e., research records that were compiled and considered during the proceedings, assessment documentation, and inquiry and/or investigation reports.

d. Upon completion of the inquiry, the RIO will provide ORI (when federally funded) with the complete inquiry report and add it to the institutional record.

e. Research and Sponsored Programs will maintain the institutional record and all sequestered research records and other evidence in a secure manner for seven years after completion of the institutional and/or HHS (or other federal sponsor) proceeding.

f. The RIO will provide information related to the alleged research misconduct and proceedings to ORI (when federally funded) upon request and transfer custody or provide copies of the institutional record or any component of it and any sequestered evidence to HHS (or other federal sponsor), regardless of whether the evidence is included in the institutional record.

g. Additionally, the RIO will promptly notify ORI (when federally funded) of any special circumstances that may arise.

h. Disclosure of the identity of respondent(s), complainant(s), and witness(es) while CWU is conducting the research misconduct proceedings is limited to those who need to know, which the RIO will determine consistent with a thorough, competent, objective, and fair research misconduct proceeding, and as allowed by law. Those who need to know may include CWU's human subject review council (HSRC), CWU's institutional animal care and use committee (IACUC), CWU's internal audit office, journals, editors, publishers, co-authors, and collaborating institutions.

3. Responsibilities to the Complainant(s)

a. The RIO will provide confidentiality consistent with 42 CFR Part 93 for all complainants in a research misconduct proceeding.

b. The RIO, in collaboration with Internal Audit (who manages CWU's COI/FCOI disclosures), will take precautions to ensure that individuals responsible for carrying out any part of the research misconduct proceeding do not have potential, perceived, or actual personal, professional, or financial conflicts of interest with the complainant(s).

c. The RIO agrees to take all reasonable and practical steps to protect the positions and reputations of the complainant(s) and to protect these individuals from retaliation by respondent(s) and/or other institutional members.

d. If CWU chooses to notify one complainant of the inquiry results in a case, all complainants will be notified by the RIO, to the extent possible.

4. Responsibilities to the Respondent(s)

a. The RIO will provide confidentiality consistent with 42 CFR Part 93 to all respondents in a research misconduct proceeding.

b. The RIO will make a good-faith effort to notify the respondent(s) in writing of the allegation(s) being made against them.

c. The RIO, in collaboration with Internal Audit (who manages CWU's COI/FCOI disclosures, will take precautions to ensure that individuals responsible for carrying out any part of the research misconduct proceeding do not have potential, perceived, or actual personal, professional, or financial conflicts of interest with the respondent(s).

d. The RIO is responsible for giving the respondent(s) copies of or supervised access to the sequestered research records.

e. The RIO will notify the respondent(s) whether the inquiry found that an investigation is warranted, provide the respondent(s) an opportunity to review and comment on the inquiry report, and attach their comments to the inquiry report. If an investigation is commenced, the RIO must notify the respondent(s), give written notice of any additional allegations raised against them not previously addressed by the inquiry report, and allow the respondent(s) an opportunity to review the witness(es) transcripts.

f. The RIO will give the respondent(s) an opportunity to read and comment on the draft investigation report and any information or allegations added to the institutional record.

g. The RIO will give due consideration to admissible, credible evidence of honest error or difference of opinion presented by the respondent(s).

h. The RIO will bear the burden of proof, by a preponderance of the evidence, for making a finding of research misconduct.

i. The RIO will make all reasonable, practical efforts, if requested and as appropriate, to protect or restore the reputation of respondent(s) against whom no finding of research misconduct is made.

5. Responsibilities to Committee Members

a. The RIO will ensure that a committee, consortium, or person acting on CWU's behalf conducts research misconduct proceedings in compliance with the PHS regulation (or other federal sponsor).

b. The RIO will take all reasonable and practical steps to protect the positions and reputations of good-faith committee members and to protect these individuals from retaliation.

6. Responsibilities to the Witness(es)

a. The RIO will provide confidentiality consistent with 42 CFR Part 93 for all witnesses.

b. The RIO, in collaboration with Internal Audit (who manages CWU's COI/FCOI disclosures), will take precautions to ensure that individuals responsible for carrying

out any part of the proceedings do not have potential, perceived, or actual personal, professional, or financial conflicts of interest with the witness(es).

c. The RIO will also take all reasonable and practical steps to protect the positions and reputations of witness(es) and to protect these individuals from retaliation.

B. Research Integrity Officer

1. The Dean of Graduate Studies and Research serves as the Research Integrity Officer (RIO).

2. The RIO is the institutional official responsible for administering CWU's written policy and procedure for addressing allegation(s) of research misconduct in compliance with the PHS (or other federal sponsor) regulation.

3. The same individual will not serve as both the Institutional Deciding Official (IDO) and the RIO.

4. The RIO can conduct the inquiry in lieu of a committee, and, if needed, this individual may utilize one or more subject matter experts to assist them in the inquiry.

   i. In lieu of a committee can only be exercised during the inquiry phase (committee is required during investigation phase). If the RIO has a potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved, the IDO is responsible for assigning a designee.

5. Upon receiving allegation(s) of research misconduct, the RIO will promptly assess the allegation(s) to determine whether the allegation(s):

   a. is within the definition of research misconduct under the PHS (or other federal sponsor) regulation,

   b. is within the applicability criteria of the regulation at § 93.102, and

   c. is sufficiently credible and specific so that potential evidence of research misconduct may be identified.

6. If the RIO determines that the requirements for an inquiry are met, they shall document the assessment, promptly sequester all research records and other evidence per the PHS regulation, and promptly initiate the inquiry.

7. If the RIO determines that requirements for an inquiry are not met, they will keep sufficiently detailed documentation of the assessment to permit a later review by ORI (when federally funded) of the reasons why CWU did not conduct an inquiry.

8. Research and Sponsored Programs will keep this documentation and related records in a secure manner for seven years and the RIO will provide them to ORI (when federally funded) upon request.

C. **Complainant**

1. The complainant is the person who in good faith makes allegation(s) of research misconduct. The complainant brings research misconduct allegation(s) directly to the attention of the RIO or HHS (or other federal sponsor) official through any means of communication.

2. The complainant will make allegation(s) in good faith, as it is defined in the PHS regulation, as having a reasonable belief in the truth of one's allegation(s) or testimony, based on the information known to the complainant at the time.

D. **Respondent**

1. The respondent is the individual against whom allegation(s) of research misconduct is directed or who is the subject of a research misconduct proceeding.

2. The respondent has the burden of going forward with and proving, by a preponderance of evidence, affirmative defenses raised.

3. The respondent's destruction of research records documenting the questioned research is evidence of research misconduct where a preponderance of evidence establishes that the respondent intentionally or knowingly destroyed records after being informed of the research misconduct allegation(s).

4. The respondent's failure to provide research records documenting the questioned research is evidence of research misconduct where the respondent claims to possess the records but refuses to provide them upon request.

5. The respondent will not be present during the witness(es)' interviews but will be provided a transcript of the interview after it takes place. The respondent will have opportunities to

   a. view and comment on the inquiry report,

   b. view and comment on the investigation report, and

   c. submit any comments on the draft investigation report to the RIO within 30 calendar days of receiving it.

6. If admitting to research misconduct, the respondent will sign a written statement specifying the affected research records and confirming the misconduct was falsification, fabrication, and/or plagiarism; committed intentionally, knowingly, or recklessly; and a significant departure from accepted practices of the relevant research community.

E. Committee and Consortium Members

1. Committee members (and consortium members where applicable), appointed by the RIO, are experts who act in good faith to cooperate with the research misconduct proceedings by impartially carrying out their assigned duties for the purpose of helping CWU meet its responsibilities under 42 CFR Part 93.

2. Committee and consortium members will have relevant ~~scientific~~ expertise and will not have potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the involved parties.

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3. The RIO will work in collaboration with Internal Audit (who manages CWU's COI/FCOI disclosures) to ensure there are no conflicts of interest.

4. Committee or consortium members or anyone acting on behalf of CWU will conduct research misconduct proceedings consistent with the PHS (or other federal agency) regulation.

5. They will determine whether an investigation is warranted, documenting the decision in an inquiry report.

6. During an investigation, committee or consortium members participate in recorded interviews of each respondent(s), complainant(s), and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent(s).

7. They will also determine whether or not the respondent(s) engaged in research misconduct and document the decision in the investigation report.

8. They consider respondent(s) and/or complainant(s) comments on the inquiry/investigation report(s) and document that consideration in the investigation report.

9. An investigation into multiple respondents may convene with the same committee or consortium members or anyone acting on behalf of CWU, but there will be separate investigation reports and separate research misconduct determinations for each respondent.

10. Committee or consortium members may serve for more than one investigation, in cases with multiple respondents.

11. Committee members may also serve for both the inquiry and the investigation.

F. **Witness(es)**

1. Witnesses are people whom CWU has reasonably identified as having information regarding any relevant aspects of the investigation.

2. Witnesses provide information for review during research misconduct proceedings.

3. Witnesses will cooperate with the research misconduct proceedings in good faith and have a reasonable belief in the truth of their testimony, based on the information known to them at the time.

G. **Institutional Deciding Official**

1. The Provost and Executive Vice President for Academic Affairs serves as the Institutional Deciding Official (IDO).

2. If the IDO has a potential, perceived, or actual personal, professional, or financial conflicts of interest with any of the parties involved, the President is responsible for assigning an IDO designee.

3. The IDO makes the final determination of research misconduct findings.

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4. The IDO cannot serve as the RIO.

5. The IDO documents their determination in a written decision that includes whether research misconduct occurred, and if so, what kind and who committed it, and a description of the relevant actions CWU has taken or will take.

6. The IDO's written decision becomes part of the institutional record, maintained by Research and Sponsored Programs.

History:

Responsibility: President's Office; Authority: Cabinet/UPAC; Reviewed/Endorsed by: Cabinet/UPAC; Review/Effective Date: 06/07/2017; 06/13/18; Approved by: James L. Gaudino, President 06/07/2017; 06/13/18 Reformatted and Assigned new Policy Number - Previous Policy CWUP 2-40-250, June 2025

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(1) Mission.

A. Misconduct in research/scholarship runs contrary to Central Washington University's mission as an institution of higher education, undermines the public trust placed in the research enterprise of our nation's colleges and universities, and wastes valuable public and private resources. Therefore, it is the policy of Central Washington University to neither condone nor tolerate research/scholarly misconduct by any member of its community.

(2) Scope.

A. This policy is intended to carry out CWU's responsibilities under the Public Health Service (PHS) Policies on Research Misconduct, as well the corresponding policies on research/scholarly misconduct of a variety of federal funding agencies.

B. This policy applies to allegations of research/scholarly misconduct (fabrication, falsification, or plagiarism) in proposing, performing, or reviewing research, or in reporting research results involving a person who, at the time of the alleged research/scholarly misconduct, was employed by, was an agent of, was under the authority of, or was affiliated by contract or agreement with CWU. This policy applies to all members of the university community, including faculty, staff, and graduate and undergraduate students.

C. Research/scholarly misconduct (as defined in this policy) is a specific instance of impropriety within the broader domain of personal and professional conduct. Allegations of misconduct outside the scope of this policy should be directed to the appropriate department chair, dean, director, vice president, Faculty Senate, or other University official. In cases where students are alleged to have committed plagiarism, falsification, or fabrication in scholarship/research, the Research Integrity Officer (RIO) and Dean of Student Success will decide which process will be followed to be consistent with the WACs for student conduct. In cases where classified, exempt, or temporary staff are alleged to have committed plagiarism, falsification, or fabrication in scholarship/research, the RIO and the staff member's supervisor and/or Principal Budget Authority will decide which process will be followed to preserve staff rights. This policy does not distinguish between funded and unfunded research/scholarly activities, except where it refers to specific agency requirements, and does not apply to authorship or collaboration disputes.

(3) Definitions.

A. ***Deciding Official/DO:*** The DO is provost and vice president for academic and student life, or his/her designee as assigned by the president. The Deciding Official (DO) is the institutional official who makes final determinations on allegations of research/scholarly misconduct and any institutional administrative actions. The DO will not be the same individual as the Research Integrity Officer (RIO) and should have no direct prior involvement in the institution's inquiry, investigation, or allegation assessment. A DO's appointment of an individual to assess allegations of research/scholarly misconduct, or to serve on an inquiry or investigation committee, is not considered to be direct prior involvement.

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

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

D. ***Inquiry:*** Inquiry means gathering information and initial fact-finding to determine whether an allegation or suspected research/scholarly misconduct warrants an investigation.

E. ***Investigation:*** Investigation means the formal development of a factual record and the examination of that record leading to:

1. A decision not to make a finding of research/scholarly misconduct, or

2. A recommendation for a finding of research/scholarly misconduct which may include a recommendation for other appropriate actions, including administrative actions.

F. ***ORI:*** ORI is the Office of Research Integrity of the Public Health Service (PHS), a federal office promoting integrity in biomedical and behavioral research supported by the PHS by monitoring institutional investigations of scientific misconduct and facilitating the responsible conduct of research.

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

H. ***Research Integrity Officer:*** The RIO is the Dean of the School of Graduate Studies and Research (SGSR) or his/her designee assigned by the president .Research Integrity Officer (RIO) means the institutional official responsible for:

1. Assessing allegations of research/scholarly misconduct to determine if they fall within the definition of research/scholarly misconduct and warrant an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research/scholarly misconduct may be identified;

2. Overseeing inquires and investigations; and

3. Other responsibilities as described in this policy.

I. ***Research/scholarly misconduct:*** Research/scholarly misconduct means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. It does not include honest error or differences of opinion. A finding of research/scholarly misconduct requires that there be a significant departure from accepted practices of the relevant research community; that the misconduct be committed intentionally, knowingly, or recklessly; and that the allegation be proven by a preponderance of the evidence.

J. ***Respondent:*** Respondent means the person against whom an allegation of research/scholarly misconduct is directed or the person whose actions are the subject of the inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

(4) Responsibility to report misconduct.

A. All institutional members have an explicit duty to report observed, suspected, or apparent research/scholarly misconduct to the RIO. An allegation of misconduct in research/scholarship, defined as a disclosure of possible research/scholarly misconduct through any means of communication, should be made to the Dean of the School of Graduate Studies and Research, who is the university's RIO. Promptly after receiving a disclosure of possible research/scholarly misconduct through any means of communication, the RIO shall assess the allegation to determine if an inquiry will be conducted. An inquiry is warranted if:

1. It meets the definition of research/scholarly misconduct;

2. It involves either the research, applications for research support, or research records; and,

3. The allegation is sufficiently credible and specific so that potential evidence of research/scholarly misconduct may be identified.

(5) Inquiry.

A. Appointing the inquirer.

1. The RIO shall appoint an inquirer who shall complete the inquiry within 60 calendar days of its initiation, unless circumstances warrant a longer period. The inquirer shall conduct the review, prepare the inquiry report, solicit comments on the report from the respondent, consider the respondent's comments, and issue the final inquiry report within the 60 day period. If the inquiry takes longer than 60 days to complete, the inquirer shall include documentation of the reasons for the delay in the inquiry record.

2. The purpose of the inquiry is to determine whether there is reasonable cause to believe misconduct occurred and whether a formal investigation is recommended.

3. Upon appointment, the inquirer will receive a briefing from the RIO and the University Legal Counsel on the relevant misconduct guidelines, federal regulations, and the legal parameters of the inquiry.

B. The inquiry report.

1. The inquiry report shall contain the following information:

a. The name and position of the respondent(s);

b. A description of the allegations of research/scholarly misconduct;

c. The federal or sponsor support involved, including, for example, grant numbers, grant applications, contracts, and publications listing support;

d. The basis for recommending that the alleged actions warrant an investigation; and

e. Any comments on the report by the respondent or the complainant.

C. The inquiry determination.

1. The RIO will transmit the final inquiry report and any comments to the DO, who will determine in writing whether an investigation is warranted. The inquiry is completed when the DO makes this determination. In making his or her determination, the DO may take into account the information provided by the inquirer and any oral or written statements made by the person accused of misconduct. The DO may choose not to proceed with an investigation if there is no reason to believe the misconduct occurred or if the person accused of misconduct admits the misconduct occurred and it is determined that an investigation will not likely uncover further information necessary to reach a final conclusion regarding the allegation. The inquiry determination period should be brief, preferably concluded within a

week.

2. The RIO shall notify the person who reported the alleged misconduct and the person accused of misconduct of the DO's determination and recommendations in writing. If an investigation is to be conducted, the notification shall include a clear statement of the allegations to be investigated. If a decision not to investigate is rendered, the complainant may appeal the decision of the DO to the President who will render the final decision of the University. The complainant must file a written appeal within 30 days of the committee's completion of the investigation report.

3. The RIO will notify granting agencies supporting the research/creative activity under investigation as may be required by the granting agency, state or federal law or regulations.

(6) Investigation.

A. Appointment of Investigators.

1. If the inquiry results in a determination that an investigation is warranted, the RIO shall appoint investigators to conduct the investigation. The investigator may be either:

a. A group of institutions, professional organizations, or mixed groups which will conduct research/scholarly misconduct proceedings for other institutions, or

b. Other persons that the RIO reasonably determines to be qualified by practice or experience to conduct research/scholarly misconduct proceedings.

B. Investigation Timelines

1. The appointed investigator(s) shall begin the investigation within 30 calendar days of the RIO's written determination. On or before the date on which the investigation begins, the RIO will send the inquiry report and the written determination to the Office of Research Integrity [ORI], or other federal agency, if required under federal regulations.

2. The investigation is to be completed within 120 days of its initiation, including conducting the investigation, preparing the report of findings, providing the draft report for comment and sending the final report to ORI (for PHS-funded activities) or other pertinent agencies as required by regulation. However, if the RIO determines that the investigation will not be completed within this 120-day period, he/she will submit to ORI (or other pertinent agency as required by regulation) a written request for an extension, setting forth the reasons for the delay. The RIO will ensure that periodic progress reports are filed with ORI (or other pertinent agency as required by regulation), if ORI/other pertinent agency grants the request for an extension and directs the filing of such reports. This time period does not apply to separate personnel actions which may be undertaken as a result of the investigation.

C. Conduct of the investigation.

1. In conducting all investigations, CWU shall:

a. Use diligent efforts to ensure that the investigation is thorough and sufficiently documented and includes examination of all reasonably available research records and evidence relevant to reaching a decision on the merits of the allegations;

b. Interview each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent and record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of investigation;

c. Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation by the investigator(s), including any evidence of additional instances of possible research/scholarly misconduct, and continue the investigation to completion; and

d. Otherwise comply with the requirements for conducting an investigation in the federal regulations that may apply based upon the funding source for the research/scholarship.

D. Requirements for findings of research/scholarly misconduct.

1. A finding of research/scholarly misconduct under this policy requires that:

a. There is a significant departure from accepted practices of the relevant research community; and

b. The misconduct was committed intentionally, knowingly, or recklessly; and

c. The allegation of misconduct is proven by a preponderance of the evidence.

E. Investigation report.

1. The Investigator(s) shall prepare the draft and final institutional investigation reports in writing and provide the draft report for comment by respondent in a manner consistent with applicable federal regulations. The final investigation report shall:

a. Describe the nature of the allegations of research/scholarly misconduct;

b. Describe and document the federal, state or private financial support, including, any grant numbers, grant applications, contracts, and publications listing federal, state or sponsor support;

c. Describe the specific allegations of research/scholarly misconduct considered in the investigation;

d. Include the institutional policies and procedures under which the investigation was conducted;

e. Identify and summarize the research records and evidence reviewed, and identify any evidence taken into custody, but not reviewed. The report should also describe any relevant records and evidence not taken into custody and explain why.

f. Provide a finding as to whether research/scholarly misconduct did or did not occur for each separate allegation of research/scholarly misconduct identified during the investigation, and if misconduct was found,

i. Identify it as falsification, fabrication, or plagiarism and whether it was intentional, knowing, or in reckless disregard,

ii. Summarize the facts and the analysis supporting the conclusion and consider

the merits of any reasonable explanation by the respondent and any evidence that rebuts the respondent's explanations,

iii. Identify the specific federal, state or other grant support for the research/scholarship;

iv. Identify any publications that 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(s) has pending with federal, state or private agencies; and

vii. Include and consider any comments made by the respondent and complainant on the draft investigation report.

g. Upon receipt of the report, the DO shall determine whether the institution accepts the findings in the report. If any finding is not accepted, the finding and the reasons why it is not accepted shall be identified and included in a written report by the DO.

h. CWU shall maintain and provide to ORI upon request all relevant research records and records of our research/scholarly misconduct proceeding, including results of all interviews and the transcripts or recordings of such interviews.

(7) Confidentiality and protection of reputations.

A. The RIO shall make all reasonable and practical efforts to maintain confidentiality, consistent with federal regulations and institutional policy, and to:

1. Limit disclosure of the identity of respondents and complainants to those who need to know in order to carry out a thorough, competent, objective and fair research/scholarly misconduct proceeding; and

2. Except as otherwise prescribed by law, limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research/scholarly misconduct proceeding. The RIO should use written confidentiality agreements or other mechanisms to ensure that the recipient does not make any further disclosure of identifying information.

3. Following a final finding of no research/scholarly misconduct, including ORI or other pertinent agency concurrence, the RIO must, at the request of the respondent, undertake all reasonable and practical efforts to restore the respondent's reputation. Depending on the particular circumstances and the views of the respondent, the RIO should consider notifying those individuals aware of or involved in the investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of research/scholarly misconduct was previously publicized, and expunging all reference to the research/scholarly misconduct allegation from the respondent's personnel file. Any institutional actions to restore the respondent's reputation should first be approved by the DO.

(8) Appointment of impartial inquirer or investigator.

A. CWU shall take all reasonable steps to ensure an impartial and unbiased research/scholarly misconduct proceeding to the maximum extent practicable. CWU shall select those conducting the inquiry or investigation on the basis of subject expertise that is pertinent to the matter and, prior to selection, the RIO or designee shall screen them for any unresolved personal, professional, or financial conflicts of interest with the respondent, complainant, potential witnesses, or others involved in the matter. Any such conflict which a reasonable person would consider to demonstrate potential bias, shall disqualify the individual from selection.

B. A respondent may request disqualification of an inquirer or investigator upon filing of a timely and sufficient affidavit of personal bias, lack of independence, or other basis for disqualification. The affidavit must state the facts and the reasons for the belief that the inquirer or investigator should be disqualified and must be filed not less than 5 days from the date the respondent receives notice of appointment of the inquirer or investigator. The RIO shall determine the matter and submit a written decision on the request for disqualification.

(9) Notice to respondent.

A. During the research/scholarly misconduct proceeding, CWU will provide the following notifications to all identified respondents:

1. Initiation of inquiry.

a. Prior to or at the beginning of the inquiry, the RIO shall provide the respondent(s) with written notification of the inquiry and contemporaneously sequester all research records and other evidence needed to conduct the research/scholarly misconduct proceeding. If the inquiry subsequently identifies additional respondents, they shall be promptly notified in writing.

2. Comment on inquiry report.

a. The inquirer shall provide the respondent(s) an opportunity to comment on the inquiry report in a timely fashion so that any comments can be attached to the report.

3. Results of the inquiry.

a. The inquirer shall notify the respondent(s) of the results of the inquiry and attach to the notification copies of the inquiry report and these institutional policies and procedures for the handling of research/scholarly misconduct allegations.

4. Initiation of investigation.

a. Within a reasonable time after the DO's determination that an investigation is warranted, but not later than 30 calendar days after that determination, the DO or designee shall notify the respondent(s) in writing of the allegations to be investigated. The DO or designee shall give respondent(s) written notice of any new allegations within a reasonable time after determining to pursue allegations not addressed in the inquiry or in the initial notice of the investigation.

5. Scheduling of interview.

a. The investigator(s) will notify the respondent sufficiently in advance of the scheduling of his/her interview in the investigation so that the respondent may

prepare for the interview and arrange for the attendance of legal counsel, if the respondent wishes.

6. Comment on draft investigation report.

a. The investigator(s) shall give the respondent(s) a copy of the draft investigation report, and concurrently, a copy of, or supervised access to, the evidence on which the report is based and notify the respondent(s) that any comments must be submitted within 30 days of the date on which he/she received the draft report. The Investigator(s) shall ensure that these comments are included and considered in the final investigation report.

7. Appeal.

a. Respondent shall be advised of his/her right to appeal the findings of the investigative report. The respondent may appeal the findings of the Investigative Report to the DO by filing a written appeal with the DO within 30 days of receipt of the report. The grounds for appeal would be that the report is not supported by the evidence, the policies were misapplied to the evidence or that new evidence that was not available to the Investigator should be considered in reaching a final decision. The respondent shall be given timely notification of the appeal process. Any appeal process must be completed within 120 days unless the institution has requested and received an extension from ORI. This 120 day deadline does not apply to institutional termination hearings that are conducted separately from the appeal process.

(10) Notice to ORI or other pertinent agencies of institutional findings and actions.

A. Unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation (or the 120-day period for completion of any appeal), submit the following to ORI (in the case of PHS-supported activities) or other pertinent agencies as required by regulation:

1. A copy of the final investigation report with all attachments (and any appeal);

2. A statement of whether the institution accepts the findings of the investigation report (or the outcome of the appeal);

3. A statement of whether the institution found misconduct and, if so, who committed the misconduct; and

4. A description of any pending or completed administrative actions against the respondent.

(11) Maintaining records for review by ORI or other pertinent agencies.

A. The RIO must maintain and provide to ORI (or other pertinent agencies as required by regulation) upon request records of research/scholarly misconduct proceedings. Unless custody has been transferred to HHS or ORI (or another pertinent agency) has advised in writing that the records no longer need to be retained, records of research misconduct proceedings must be maintained in a secure manner for seven years after completion of the proceeding. The RIO is also responsible for providing any information, documentation, research records, evidence or clarification requested

by ORI or other pertinent agency to carry out its review of an allegation of research/scholarly misconduct or of the institution's handling of such an allegation.

(12) Completion of cases; reporting premature closures to ORI or other pertinent agencies.

A. Generally, all inquiries and investigations will be carried through to completion and all significant issues will be pursued diligently. The RIO shall notify ORI (or the pertinent agency as required by regulation) in advance if there are plans to close a case at the inquiry, investigation, or appeal stage on the basis that respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except:

1. Closure of a case at the inquiry stage on the basis that an investigation is not warranted; or

2. A finding of no misconduct at the investigation stage, which must be reported to ORI (or the pertinent federal agency), as described in this policy.

(13) Institutional administrative actions.

A. If the DO determines that research/scholarly misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken, after consultation with the RIO and other institutional officials, including the appropriate collective bargaining unit leadership. The administrative actions may include:

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

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

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

4. Other actions appropriate to the research/scholarly misconduct (in consultation with existing internal policies/procedures that may apply to the situation).

(14) Other considerations.

A. Allegations not made in good faith:

1. If relevant, the DO will determine whether the complainant's allegations of research/scholarly misconduct were made in good faith, or whether a witness or committee member acted in good faith. If the DO determines that there was an absence of good faith he/she will determine, in consultation with other institutional officials, including the appropriate collective bargaining unit leadership, whether any administrative action should be taken against the person who failed to act in good faith.

B. Eventual disposition/maintenance of inquiry and investigation reports:

1. The RIO will maintain copies of all the reports for at least the period required to fulfill

~~reporting obligations to outside agencies. The DO and President may also have and maintain copies of reports. The inquiry and investigation reports will NOT become part of the respondent's personnel file maintained by Human Resources.~~

~~**History:**~~

~~*Responsibility: President's Office; Authority: Cabinet/UPAC; Reviewed/Endorsed by: Cabinet/UPAC; Review/Effective Date: 06/07/2017; 06/13/18; Approved by: James L. Gaudino, President 06/07/2017; 06/13/18 Reformatted and Assigned new Policy Number - Previous Policy CWUP 2-40-250, June 2025*~~

Appendix A - Research Misconduct Procedure

(1) Assessment Stage

A. An assessment's purpose is to determine whether allegation(s) warrants an inquiry. An assessment is intended to be a review of readily accessible information relevant to the allegation(s).

B. Upon receiving allegation(s) of research misconduct, the RIO will promptly determine whether the allegation(s):

1. Falls within the definition of research misconduct,

2. Is within the applicability criteria of 42 CFR Part 93 § 93.102, and

3. Is credible and specific enough to identify and sequester potential evidence.

C. If the RIO determines that the allegation(s) meets these three criteria, they will promptly:

1. Document the assessment and

2. Initiate an inquiry and sequester all research records and other evidence.

D. The RIO must document the assessment and retain the assessment documentation securely for seven years after completion of the misconduct proceedings.

E. If the RIO determines that the alleged misconduct does not meet the criteria to proceed to an inquiry, they will write sufficiently detailed documentation to permit a later review by ORI (when federally funded) of why CWU did not proceed to an inquiry and securely retain this documentation for seven years.

(2) Inquiry Stage

A. An inquiry is warranted if the allegation(s):

1. Falls within the definition of research misconduct under 42 CFR Part 93,

2. Is within the applicability criteria of § 93.102, and

3. Is sufficiently credible and specific so that potential evidence of research misconduct may be identified.

B. An inquiry's purpose is to conduct an initial review of the evidence to determine whether allegation(s) warrants an investigation. An inquiry does not require a full review of all related evidence. CWU will complete the inquiry within 90 calendar days of initiating it unless circumstances warrant a longer period, in which it will sufficiently document the reasons for exceeding the time limit in the inquiry report.

C. **Sequestering Evidence and Notifying the Respondent(s)**

1. Before or at the time of notifying the respondent(s), the RIO will obtain the original or substantially equivalent copies of all research records and other evidence that are pertinent to the proceeding, inventory these materials, sequester the materials in a secure manner, and retain them for seven years. The RIO has a duty to obtain, inventory, and securely sequester evidence that extends to whenever additional items become known or relevant to the inquiry or investigation.

2. At the time of or before beginning the inquiry, the RIO will make a good-faith effort to notify the presumed respondent(s), in writing, that an allegation(s) of research misconduct has been raised against them, the relevant research records have been sequestered, and an inquiry will be conducted to decide whether to proceed with an investigation. If additional allegations are raised, the RIO will notify the respondent(s) in writing. When appropriate, the RIO will give the respondent(s) copies of, or reasonable supervised access to, the sequestered materials.

3. If additional respondents are identified, the RIO will provide written notification to the new respondents. All additional respondents will be given the same rights and opportunities as the initial respondent. Only allegations specific to a particular respondent will be included in the notification to that respondent.

D. **Convening the Committee**

1. The RIO will ensure that all committee members understand their commission, keep the identities of respondent(s), complainant(s), and witness(es) confidential, and conduct the research misconduct proceedings in compliance with the PHS (or other federal sponsor) regulation.

2. In lieu of a committee, the RIO can conduct the inquiry, provided this person utilizes subject matter experts as needed to assist in the inquiry. In lieu of a committee, can only be exercised during the inquiry phase (committee is required during investigation phase).

E. **Determining Whether an Investigation Is Warranted**

1. The committee or RIO will conduct a preliminary review of the evidence. During this fact-finding stage, the committee may interview the respondent(s) and any relevant witness(es).

2. An investigation is warranted ~~when~~if:

a. ~~The allegation(s), if true, would meet~~ There is a reasonable basis for concluding that the allegation falls within the ~~CWU's~~ definition of research misconduct (42 CFR Part 93) consistent with applicable federal and sponsor requirements; and

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b. Preliminary fact-finding indicates that the allegation(s) may have substance.

3. The committee will not determine if research misconduct occurred, nor assess whether the alleged misconduct was intentional, knowing, or reckless; such a determination is not made until the case proceeds to an investigation.

F. **Documenting the Inquiry**

1. At the conclusion of the inquiry, regardless of whether an investigation is warranted, the committee or RIO will prepare a written inquiry report. The contents of a complete inquiry report will include:

   a. The names, professional aliases, and positions of the respondent(s) and complainant(s).

   b. A description of the allegation(s) of research misconduct.

   c. Details of any external funding supporting the research in question, including any grant numbers, grant applications, contracts, and publications listing federal or sponsor support.

   d. The composition of the committee, if used, including name(s), position(s), and subject matter expertise.

   e. An inventory of sequestered research records and other evidence and description of how sequestration was conducted.

   f. Transcripts of interviews, if transcribed.

   g. Inquiry timeline and procedural history.

   h. Any scientific or forensic analyses conducted.

   i. The basis for recommending that the allegation(s) warrant an investigation.

   j. The basis on which any allegation(s) do not merit further investigation.

   k. Any comments on the inquiry report by the respondent(s) or the complainant(s).

   l. Any institutional actions implemented, including internal communications or external communications with journals or funding agencies.

   m. Documentation of potential evidence of honest error or difference of opinion.

G. **Completing the Inquiry**

1. The RIO will give the respondent(s) a copy of the draft inquiry report for review and comment. The RIO may, but is not required to, provide relevant portions of the report to a complainant(s) for comment.

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2. The RIO will notify the respondent(s) of the inquiry's final outcome and provide the respondent(s) with copies of the final inquiry report, the PHS (or other federal sponsor) regulation, and this policy and procedure.

3. The RIO may, but is not required to, notify a complainant(s) whether the inquiry found that an investigation is warranted.

4. If the RIO provides notice to one complainant(s) in a case, it must provide notice, to the extent possible, to all complainants in the case.

H. **If an Investigation Is Not Warranted:**

1. If the committee or RIO determines that an investigation is not warranted, CWU will keep sufficiently detailed documentation to permit a later review by ORI (when federally funded) of why CWU did not proceed to an investigation.

2. Research and Sponsored Programs will store these records in a secure manner for at least seven years after the termination of the inquiry.

3. The RIO will provide the records to ORI (when federally funded) upon request.

I. **If an Investigation is Warranted:**

1. If the committee or RIO determines that an investigation is warranted, the RIO must:

   a. within a reasonable amount of time after this decision, provide written notice to the respondent(s) of the decision to conduct an investigation of the alleged misconduct, including allegation(s) of research misconduct not addressed during the inquiry; and

   b. within 30 calendar days of determining that an investigation is warranted, provide ORI (when federally funded) with a copy of the inquiry report.

2. On a case-by-case basis, the RIO may choose to notify the complainant(s) that there will be an investigation of the alleged misconduct but is required to take the same notification action for all complainants in cases where there is more than one complainant.

(3) Investigation Stage

A. **General Purpose**

1. The purpose of an investigation is to formally develop a factual record, pursue leads, examine the record, and recommend finding(s) to the IDO, who will make the final decision, based on a preponderance of evidence, on each allegation and any institutional actions.

2. As part of its investigation, the RIO will pursue diligently all significant issues and relevant leads, including any evidence of additional instances of possible research misconduct, and continue the investigation to completion.

3. Within 30 calendar days after deciding an investigation is warranted, the RIO will notify ORI (when federally funded) of the decision to investigate and begin the investigation.

B. **Notifying the Respondent(s) and Sequestering Evidence**

1. The RIO will notify the respondent(s) of the allegation(s) within 30 calendar days of determining that an investigation is warranted and before the investigation begins.

2. If any additional respondent(s) are identified during the investigation, the RIO will notify them of the allegation(s) and provide them an opportunity to respond consistent with the PHS (or other federal sponsor) regulation.

3. If the RIO identifies additional respondents during the investigation, the RIO may choose to either conduct a separate inquiry or add the new respondent(s) to the ongoing investigation.

4. The RIO will obtain the original or substantially equivalent copies of all research records and other evidence, inventory these materials and sequester them in a secure manner.

5. Research and Sponsored Programs will retain the records for seven years after its proceeding or any HHS (or other federal sponsor) proceeding, whichever is later.

C. **Convening a Committee**

1. After the RIO, in collaboration with Internal Audit (who manages CWU's COI/FCOI disclosures), vets the committee members for appropriate ~~scientific~~ expertise and confirms the members do not have potential, perceived, or actual personal, professional, or financial conflicts of interest with any involved parties, the RIO convenes the committee and ensures that the members understand their responsibility to conduct the research misconduct proceedings in compliance with the PHS (or other federal agency) regulation.

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2. The committee will conduct interviews, pursue leads, and examine all research records and other evidence relevant to reaching a decision on the merits of the allegation(s).

3. The RIO will use diligent efforts to ensure that the investigation is thorough, sufficiently documented, and impartial and unbiased to the maximum extent practicable.

4. The RIO will notify the respondent(s) in writing of any additional allegations raised against them during the investigation.

D. **Conducting Interviews**

1. The committee will interview each respondent(s), complainant(s), and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent(s).

2. The RIO or committee member will number all relevant exhibits and refer to any exhibits shown to the interviewee during the interview by that number.

3. The RIO or committee member will record and transcribe interviews during the investigation and make the transcripts available to the interviewee for correction.

4. The RIO will include the transcript(s) with any corrections and exhibits in the institutional record, maintained by Research and Sponsored Programs, of the investigation.

5. The respondent(s) will not be present during the witness(es) interviews, but the RIO will provide the respondent(s) with a transcript of each interview, with redactions as appropriate to maintain confidentiality.

E. Documenting the Investigation

1. The RIO will complete all aspects of the investigation within 180 calendar days.

2. The RIO will conduct the investigation, prepare the draft investigation report for each respondent(s), and provide the opportunity for respondent(s) to comment.

3. The RIO will document the IDO's final decision and transmit the institutional record, maintained by Research and Sponsored Programs, (including the final investigation report and IDO's decision) to ORI (when federally funded).

4. If the investigation takes more than 180 calendar days to complete, the RIO will ask ORI (when federally funded) in writing for an extension and document the reasons for exceeding the 180 calendar day period in the investigation report.

5. The investigation report for each respondent(s) will include:

   a. Description of the nature of the allegation(s) of research misconduct, including any additional allegation(s) addressed during the research misconduct proceeding.

   b. Description and documentation of any external funding in support of the research in question, including any grant numbers, grant applications, contracts, and publications listing federal or sponsor support. This documentation includes known applications or proposals for support that the respondent(s) has pending with PHS and other funding agencies.

   c. Description of the specific allegation(s) of research misconduct for consideration in the investigation of the respondent(s).

   d. Composition of committee, including name(s), position(s), and subject matter expertise.

   e. Inventory of sequestered research records and other evidence, except records CWU did not consider or rely on. This inventory will include manuscripts and funding proposals that were considered or relied on during the investigation. The inventory will also include a description of how any sequestration was conducted during the investigation.

   f. Transcripts of all interviews conducted.

   g. Identification of the specific published papers, manuscripts submitted but not accepted for publication (including online publication), PHS and non-PHS funding applications, progress reports, presentations, posters, or other research records that contain the allegedly falsified, fabricated, or plagiarized material.

   h. Any scientific or forensic analyses conducted.

   i. A copy of this policy and procedure.

j. Any comments made by the respondent(s) and complainant(s) on the draft investigation report and the committee's consideration of those comments.

k. A statement for each separate allegation of whether the committee recommends a finding of research misconduct.

6. If the committee recommends a finding of research misconduct for allegation(s), the investigation report will present a finding for each allegation. These findings will

a. Identify the individual(s) who committed the research misconduct.

b. Indicate whether the misconduct was falsification, fabrication, and/or plagiarism.

c. Indicate whether the misconduct was committed intentionally, knowingly, or recklessly.

d. Identify any significant departure from the accepted practices of the relevant research community and that the allegation(s) was proven by a preponderance of the evidence.

e. Summarize the facts and analysis supporting the conclusion and consider the merits of any explanation by the respondent(s).

f. Identify the specific PHS and non-PHS support.

g. State whether any publications need correction or retraction.

7. If the committee does *not* recommend a finding of research misconduct for allegation(s), the investigation report will provide a detailed rationale for its conclusion.

8. The committee should also provide a list of any current support or known applications or proposals for support that the respondent(s) has pending with PHS and other funding agencies.

F. Completing the Investigation

1. The RIO will give the respondent(s) a copy of the draft investigation report and, concurrently, a copy of, or supervised access to, the research records and other evidence that the committee considered or relied on.

2. The respondent(s) will submit any comments on the draft report to the RIO within 30 calendar days of receiving the draft investigation report.

3. If the RIO chooses to share a copy of the draft investigation report or relevant portions of it with the complainant(s) for comment, the complainant's comments will be submitted within 30 calendar days of the date on which they received the report.

4. The RIO will add any comments received to the investigation report.

G. IDO Review of the Investigation Report

1. The IDO will review the investigation report and make a final written determination, after consultation with the RIO , of whether CWU found research misconduct and, if so, who

committed the misconduct. In this statement, the IDO will include a description of relevant institutional actions taken or to be taken.

2. The institutional actions may include:

   a. Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research/scholarly 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 to the grantor agency as appropriate; and

   d. Other actions appropriate to the research misconduct (in consultation with existing internal policies/procedures that may apply to the situation).

H. **Creating and Transmitting the Institutional Record**

1. After the IDO has made a final determination of research misconduct findings, Research and Sponsored Programs will add the IDO's written decision to the investigation report and organize the institutional record in a logical manner.

2. The institutional record, maintained by Research and Sponsored Programs, consists of the records that were compiled or generated during the research misconduct proceeding, except records the RIO did not rely on. These records include documentation of the assessment, a single index listing all research records and evidence, the inquiry report and investigation report, and all records considered or relied on during the investigation. The institutional record also includes the IDO's final decision and any information the respondent(s) provided to RIO.

3. The institutional record must also include a general description of the records that were sequestered but not considered or relied on.

4. If the respondent(s) filed an appeal, the complete record of any institutional appeal also becomes part of the institutional record.

   a. The RIO will wait until the appeal is concluded to transmit the institutional record to ORI (when federally funded).

5. After the IDO has made a final written determination, and any institutional appeal is complete, the RIO must transmit the institutional record to ORI (when federally funded).

(4) Appeal

A. Right

1. A respondent(s) who has received federal funds for the research connected to the misconduct may have the right, under federal funding source regulations, to appeal the

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finding of research misconduct by the IDO as part of an investigation to that federal funding source.

2. In addition, all respondents who are found to have committed research misconduct have the right to an internal appeal.

3. During appellate proceedings no sanction will be imposed and no disciplinary proceeding will be commenced as a consequence of the research misconduct finding.

B. External Appeal Record

1. If the respondent(s) appeals a finding of research misconduct by the IDO as part of an investigation to a federal funding source, the RIO must attain copies of all documents filed in that appeal for inclusion in the institutional record.

C. Internal Appeal Procedure

1. Internal Appeal - The respondent(s) may appeal a finding of research misconduct to the RIO within 14 days of the IDO's investigation report. The appeal must be in writing and must set forth the reasons (whether substantive or procedural) the respondent(s) believes the finding of research misconduct is wrong. The RIO will submit the appeal to the President for decision.

2. Review and Recommendation - The President may appoint a faculty member or administrator who does not have a conflict of interest and who has not previously been involved in the review of the research misconduct allegation, under this policy, to review the research misconduct proceedings and the appeal and make recommendations to the President.

3. Request for Additional Information - The President, or the President's designee, may request further information in writing to the RIO about the research misconduct proceedings. A copy of such information shall be provided to the respondent(s).

4. Basis for Decision - The President's decision on the appeal shall be based on the research misconduct proceedings, as clarified or supplemented by the RIO in response to any request for further information about the research misconduct proceedings, and the respondent(s) appeal.

D. New Evidence

1. If the RIO learns of previously unavailable evidence relevant to the finding of research misconduct during the appeal, the RIO shall inform the President and the respondent(s) of the new evidence.

2. If the President concurs that the new evidence could materially affect the finding of research misconduct, the President shall remand the finding of research misconduct to the IDO for consideration of the new evidence.

3. The IDO may consult as necessary the investigation committee members.

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4. The IDO shall notify the President within 14 days that the new evidence is immaterial to prior findings or that the matter should be reopened.

5. The President may extend this period for good cause by notice to the respondent(s) and the RIO.

E. Decision

1. The President shall issue a decision and rationale affirming or reversing the finding of research misconduct within 30 days after the submission of the appeal to the RIO.

2. The President may extend this period for good cause by notice to the respondent(s) and the RIO.

(5) Other Procedures and Special Circumstances

A. Multiple Institutions and Multiple Respondents

1. If the alleged research misconduct involves multiple institutions, the RIO may work closely with the other affected institutions to determine whether a joint research misconduct proceeding will be conducted.

   a. If so, the cooperating institutions will choose an institution to serve as the lead institution.

   b. In a joint research misconduct proceeding, the lead institution will obtain research records and other evidence pertinent to the proceeding, including witness(es) testimony, from the other relevant institutions.

   c. By mutual agreement, the joint research misconduct proceeding may include committee members from the institutions involved.

   d. The determination of whether further inquiry and/or investigation is warranted, whether research misconduct occurred, and the institutional actions to be taken may be made by the institutions jointly or tasked to the lead institution.

2. If the alleged research misconduct involves multiple respondents, the RIO may either conduct a separate inquiry for each new respondent or add them to the ongoing proceedings. The RIO must give additional respondent(s) notice of and an opportunity to respond to the allegation(s).

B. Respondent(s) Admissions

1. The RIO will promptly notify ORI (when federally funded) in advance if at any point during the proceedings (including the assessment, inquiry, investigation, or appeal stage) it plans to close a research misconduct case because the respondent(s) has admitted to committing research misconduct or a settlement with the respondent(s) has been reached.

2. If the respondent(s) admits to research misconduct, the RIO will not close the case until providing ORI (when federally funded) with the respondent's signed, written admission.

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a. The admission must state the specific fabrication, falsification, or plagiarism that occurred, which research records were affected, and that it constituted a significant departure from accepted practices of the relevant research community.

b. The RIO must not close the case until giving ORI (when federally funded) a written statement confirming the respondent's culpability and explaining how the RIO determined that the respondent's admission fully addresses the scope of the misconduct.

3. If not federally funded, same procedures apply but will not be reported to ORI. Written admission from the respondent(s) and CWU's determination of the admission fully addresses the scope of misconduct will be saved in the institutional record, maintained by Research and Sponsored Programs.

C. Other Special Circumstances

1. At any time during the misconduct proceedings, the RIO will immediately notify ORI (when federally funded) if any of the following circumstances arise:

a. Health or safety of the public is at risk, including an immediate need to protect human or animal subjects.

b. HHS (or other federal agency) resources or interests are threatened.

c. Research activities should be suspended.

d. There is reasonable indication of possible violations of civil or criminal law.

e. Federal action is required to protect the interests of those involved in the research misconduct proceeding.

f. HHS (or other federal agency) may need to take appropriate steps to safeguard evidence and protect the rights of those involved.

(6) Records Retention

A. Research and Sponsored Programs will maintain the institutional record and all sequestered evidence, including physical objects (regardless of whether the evidence is part of the institutional record), in a secure manner for seven years after the completion of the proceeding or the completion of any HHS (or other federal sponsor) proceeding, whichever is later, unless custody has been transferred to HHS (or other federal sponsor).

~~Appendix B – Research Misconduct Process Flowchart~~

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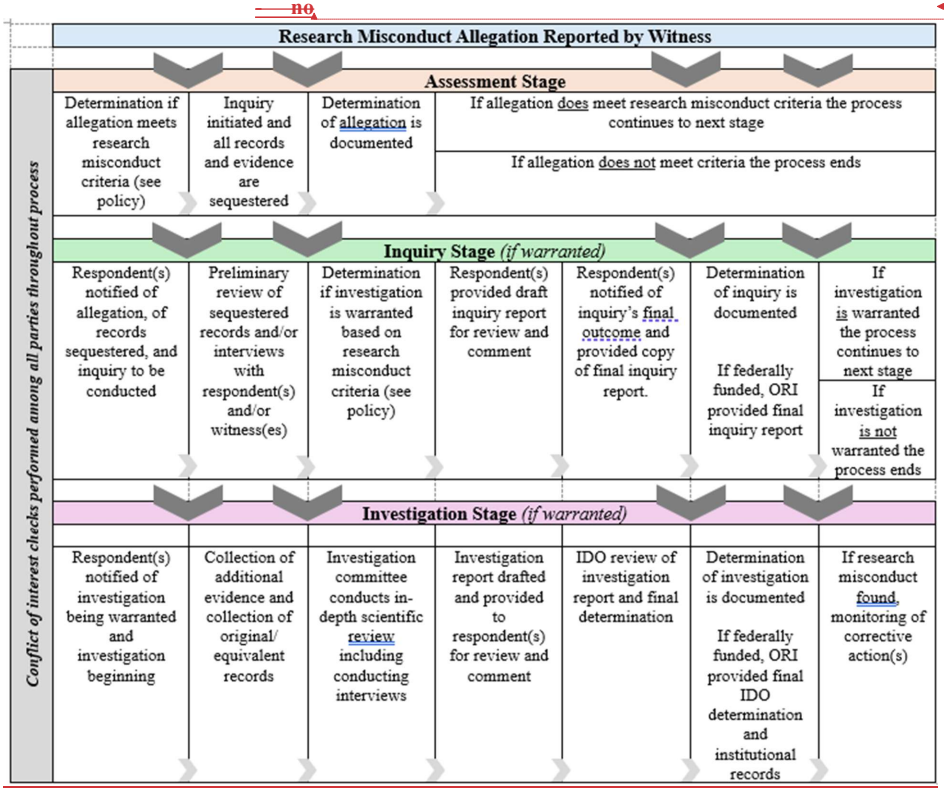

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