

**MARSHALL UNIVERSITY  
Policy No. UPGA-13  
RESEARCH INTEGRITY**

**1. General Information.**

- 1.1 This policy ensures that Marshall University's research standards are upheld with integrity for Marshall University, the Marshall University Research Corporation, Marshall Health and its research collaborators. It is designed to comply with federal regulations and to apply best practices for dealing with **research misconduct**.
- 1.2 It is Marshall University policy that Marshall University employees and those of its affiliates conduct **research** activities with the utmost integrity, that Marshall University employees and those of its affiliates engaged in **research** are prohibited from committing **research misconduct**, and that Marshall University investigates and adjudicates **allegations of research misconduct** involving Marshall University Research, including **research** conducted by its affiliates under the auspices of its **research integrity officer**. This policy applies to all research, not just work funded by federal sponsors.
- 1.3 Scope: This policy and its Administrative Procedures applyProcedure (ADMIN-22) are applicable to all individuals, including faculty, students, and staff at Marshall University engaged in **research**, research-training, or applications for research funding. This policy applies to any person paid by, under the control of, or affiliated with the University, including but not limited to scientists, trainees, technicians and other staff members, students, fellows, guest researchers, or collaborators at Marshall University.

This policy and related procedure(s) do not apply to undergraduate or graduate students engaged in course work when that course work does not generate or seek to generate published research.

This policy and related procedure (ADMIN-22) are only applicable to research misconduct occurring within six years of the date The United States Department of Health and Human Services (HHS) or Marshall receives an allegation of research misconduct, subject to the following exceptions:

- The six-year time limitation does not apply if the respondent 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 (subsequent use exception). For alleged research misconduct that appears subject to this subsequent use exception, but Marshall determines is not subject to

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the exception, Marshall 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 institutional proceeding or the completion of any HHS proceeding.

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

1.4 Statutory References: W. Va. Code §18B-1-6; 42 CFR Part 93; 45 CFR Part 689; 65 FR 76260-76264; DoDI 3210.07; 70 FR 37010-37016; 2 CFR Part 910.132; 10 CFR Part 733.3

4.5 Passage Date:

1-61.5 Effective Date: 01/01/2026

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2. **Definitions.** This policy uses defined terms with specific meanings. Defined terms used in this policy are in **bold** wherever they appear.

2.1 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 awards.

2.2 Administrative Record. The **administrative record** comprises: the institutional record; any information provided by the **respondent** to ORI, including but not limited to the transcript of any virtual or in-person meetings between the **respondent** and ORI, and correspondence between the **respondent** and ORI; any additional information provided to ORI 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 will also be made available to the **respondent**.

2.12.3 Affirmative Defense. Any defense by the **respondent**, including **honest error** or difference of opinion that must be proven by a **preponderance of the evidence**.

2.22.4 Allegation. A disclosure of possible **research misconduct** received through any means of communication and brought directly to the attention of an institutional official or funding source official.

2.5 Assessment. Is a consideration of whether an **allegation of research misconduct** appears to fall within the definition of **research misconduct**.

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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.

**2-32.6 Clear and Convincing Evidence.** This standard is more rigorous to meet than **preponderance of the evidence** standard. **Clear and convincing** evidence is highly and substantially more likely to be true than untrue. In other words, the contention is highly probable.

**2-42.7 Complainant.** A person who makes a **good faith allegation of research misconduct**.

**2-52.8 Conflict of Interest.** The real or apparent interference of one person's interests with the interests of another person, where potential bias may occur due to prior or existing personal or professional relationships. A **conflict of interest** may exist when an individual has a close familial, personal, or professional relationship with the **respondent** or **complainant**, or a direct relationship with the **research** referenced in an **allegation of research misconduct**, such that the relationship creates a strong potential for biasing the individual's decision-making either in a positive or negative manner.

**2-62.9 Deciding Official (DO).** The **institutional official**, appointed by the President of Marshall University, who makes final determinations on **allegations of research misconduct** and any responsive University actions. The **deciding official** will not be the same individual as the **research integrity officer**. The President may appoint more than one **deciding official** to accommodate the needs of the various campuses. The Provost decides matters involving all campuses of the University except its Medical School. The Dean of the School of Medicine decides all matters arising at the Medical School. If the Dean or Provost are the subject of the **investigation** or otherwise have a **conflict of interest**, the President will appoint another **institutional official** to be the **deciding official**.

**2-72.10 Destruction of Records.** The destruction, absence of, or **respondent's** failure to provide records adequately documenting the **research**, where Marshall establishes by a **preponderance of evidence** that (1) the **respondent intentionally, or knowingly, or recklessly** destroyed them; (2) had the opportunity to maintain the records after being informed of the research records but did not do so; or (3) maintained the misconduct allegations. A **respondent's** failure to provide **research records** and failed to produce them in a timely manner; and that the **respondent's** conduct constitutes a significant departure from accepted practices of the relevant documenting the questioned research community is evidence of **research misconduct** where the **respondent claims to possess the records but refuses to provide them upon request**.

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2.82.11 **Evidence.** Any Anything, including a document, tangible item, or testimony offered or obtained during a misconduct **proceeding** that intends to prove or disprove the existence of an alleged fact.

2.92.12 **Fabrication.** Making up data or results and recording or reporting them.

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

2.112.14 **Good Faith.** Having a reasonable belief in the truth of one's **allegation** or testimony ~~that a reasonable person in the same position could have~~, based on the information known at the time. An **allegation** or cooperation with a **research misconduct proceeding** is not in **good faith** if made with **knowing** or **reckless** disregard for information that would negate the **allegation** or testimony. 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 Marshall meet its responsibilities under federal regulations. 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.

2.122.15 **Honest Error.** An exception to the definition of **research misconduct** or an **affirmative defense** to an **allegation of research misconduct** in which a **respondent** asserts that the questioned conduct resulted from an unintended error rather than an **intentional, knowing, or reckless** distortion of the **research record**. **Respondent** carries the burden of establishing **honest error** by a **preponderance of the evidence**.

2.132.16 **Inquiry.** A preliminary information-gathering and fact-finding conducted to determine whether an **investigation** is warranted.

2.14 **Inquiry Committee.** The group charged with conducting the **inquiry**.

2.17 **Institutional Certifying Official.** The official responsible for assuring on behalf of Marshall that written policies and procedures for addressing allegations of research misconduct are in place. The Institutional Certifying Official is responsible for certifying the content of Marshall's annual ORI report and ensuring the report is submitted.

2.152.18 **Institutional Official.** Individuals to which reports of **research misconduct** may be made. These reports should be directed to the appropriate college dean, the **research integrity officer**, the vice president of research, or the provost.

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**2.19 Institutional Deciding Official.** The official who makes final determinations on allegations of research misconduct and any institutional actions. The same individual cannot serve as the Institutional Deciding Official and the Research Integrity Officer.

**2.20 Institutional Record.** The institutional record comprises: (a) The records that Marshall compiled or generated during the research misconduct proceeding, except records Marshall did not consider or rely upon. These records include but are not limited to: (1) documentation of the assessment; (2) if an inquiry is conducted, the inquiry report and all records (other than drafts of the report) considered or relied upon during the inquiry, including, but not limited to, research records and the transcripts of any transcribed interviews conducted during the inquiry, information the respondent provided to Marshall, and the documentation of any decision not to investigate; (3) if an investigation is conducted, the investigation report and all records (other than drafts of the report) considered or relied upon during the investigation, including, but not limited to, research records, the transcripts of each interview conducted, and information the respondent provided to Marshall; (4) decisions by the Institutional Deciding Official, such as the written decision from the Institutional Deciding Official; (5) the complete record of any institutional appeal; (b) a single index listing all the research records and evidence that Marshall compiled during the research misconduct proceeding, except records Marshall did not consider or rely upon; and (c) a general description of the records that were sequestered but not considered or relied upon.

**2.162.21 Intentionally.** Research was carried out with the respondent's intent to falsify, fabricate, or plagiarize.

**2.172.22 Investigation.** The formal development of factual records and examination and evaluation of all relevant facts to determine if research misconduct has occurred, and, if so, to determine if that record meets the responsible person criteria and follows the seriousness of the misconduct procedures outlined in 42 CFR Part 93.

**2.182.23 Investigation Panel.** A group of at least three (3) individuals charged with conducting the investigation.

**2.192.24 Investigator-Secretary.** The person appointed by the research integrity officer to assist in the investigation of a claim of research misconduct and to maintain records under this policy.

**2.202.25 Knowingly.** Knowingly is a lower standard of culpability than intentionally. Knowingly means that respondent acted with knowledge and information and awareness of the act. As an example, the respondent may not have had any direct involvement in the misrepresentation of results

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but knew that certain results presented by a coauthor were not consistent with earlier iterations of data.

**2.212.26 Mitigating Factors.** Facts which do not provide a defense for the **respondent** under this policy, but which may be considered by the **deciding official** in determining the appropriate University response to the finding of **research misconduct**.

**2.222.27 Plagiarism.** The appropriation of another person's ideas, processes, results, or words without giving appropriate credit. Plagiarism also 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. It 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.

**2.232.28 Proceeding.** Any action related to **research misconduct** that is an **allegation** assessment, **inquiry**, or **investigation** undertaken pursuant to this policy.

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

**2.252.30 Recklessly.** **Respondent** acted with disregard or indifference despite a known risk for harmfabrication, falsification, or plagiarism. Disregard may be shown by **evidence** that a representation is (1) false, misleading, or plagiarized; and (2) the **respondent** was aware of the probability of falseness, misleading, or plagiarized nature. Awareness can be inferred from **respondent's** failure to take reasonable steps to dispel these doubts.

**2.262.31 Record of Research Misconduct Proceeding.** Is (1) the **research record** and **evidence** secured for a **proceeding** pursuant to this policy; (2) the documentation of irrelevant or duplicative records; (3) the **inquiry** report and final documents produced in the course of preparing that report; (4) the **investigation report** and all records in support of the report; and (5) the complete record of any appeal within the University from the finding of **research misconduct**.

**2.272.32 Research.** A systematic experiment, study, evaluation, demonstration, or survey designed to develop or contribute to general knowledge (basic **research**) or specific knowledge (applied **research**) by establishing, discovering, developing, elucidating, or confirming information

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about, or the underlying mechanism relating to, the subject matter of any academic discipline. This includes scholarship and all creative works.

**2.282.33 Research Record.** The record of experimental methods, data, and results, whether in physical or electronic form, that embodies the facts related to and resulting from scientific inquiry. The **research record** includes but is not limited to research proposals, grant or contract applications, laboratory notebooks and records, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, animal facility records; human and animal subject protocols; consent forms; medical charts; records of telephone calls or e-mail correspondence; and patient files.

**2.292.34 Research Integrity Officer (RIO).** The University employee, appointed by the President of Marshall University, responsible for assessing **allegations of research misconduct**, conducting **investigations** of such **allegations** and for implementing the and administering Marshall's written policies and administrative procedures related to research misconduct.

**2.302.35 Research Misconduct.** Is the **intentional, knowing, or reckless fabrication, falsification, or plagiarism** in proposing, conducting, performing, reporting, or reviewing **research**. It includes the ethically unacceptable behavior that undermines the integrity of **research** that calls into question the validity of the **research**. It does not include **honest error** or differences of opinion. Failure to comply with federal, state, and municipal statutes and regulations governing scientific **research** is unlawful and may also be pursued by the University as a violation of the scientific integrity process.

**2.312.36 Respondent.** The person or persons against whom an **allegation of research misconduct** is directed or whose actions are the subject of the **inquiry or investigation**.

**2.322.37 Retaliation.** Any action that adversely affects the employment or other institutional status of an individual that is taken by the University or its employee because the individual has in **good faith**, made an **allegation of research misconduct** or of inadequate institutional response thereto or has cooperated in **good faith** with an **investigation** of such **allegation**. Any act of **retaliation** taken by a person or entity not within the control of Marshall University is outside the scope of this policy.

**2.38 Witnesses.** People whom Marshall has reasonably identified as having information regarding any relevant aspects of the **investigation**. Witnesses provide information for review during **research misconduct proceedings**. 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.

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### 3. Responsibility to Report Misconduct.

- 3.1 All employees or individuals associated with Marshall University have the obligation to report to an **institutional official** ([see Section 2.15 of this policy](#)) potential **research misconduct** as they become aware of it, in a reasonable amount of time and to cooperate in any **investigation** of such behavior. This includes authors who become aware of accusations of misconduct concerning their publications.
- 3.2 Informal requests for information or consultation any University official concerning **research misconduct** will not, in and of itself, be construed as formal charges of **research misconduct**.
- 3.3 If the **allegation** is not **research misconduct**, the **RIO** may refer the **allegation** to other offices with the responsibility for resolution.

### 4. Confidentiality.

1. ~~All aspects of the misconduct process are intended to be kept confidential by all parties complainant, respondent, RIO, committee and panel members, notified University officials, and witnesses to the extent possible and consistent with fair treatment of such persons balanced against the responsibility to carry out the inquiry, investigations, and to meet legal requirements.~~
1. **Disclosure of the identity of the complainant, respondent, and witnesses while conducting the research misconduct proceeding is limited, to the extent possible, to those who need to know, as determined by Marshall, consistent with a thorough, competent, objective, and fair research misconduct proceeding, and as allowed by law. Those who need to know may include institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions. This limitation on disclosure of the identity of respondents, complainants, and witnesses no longer applies once Marshall has made a final determination of research misconduct findings.**
2. To protect the identity of individuals accused of misconduct, a numbering system will be adopted and assigned. When possible, all deliberations, reports, and correspondence will use this number to avoid unnecessarily identifying individuals.
3. Although best efforts will be made, due to other disclosure requirements or University responsibilities, to the nature of any hearing proceedings or as otherwise required by law, anonymity cannot be guaranteed.

### 5. Allegation.

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- 4.1 **Allegations of research misconduct** may come from any source, whether associated with Marshall University or not. Such **allegations** may be filed orally or in writing, and may be filed anonymously.
- 4.2 Anonymity of the **complainant** may be preserved if the **RIO**, after reviewing the **allegation** and available information, determines that it is necessary to protect the **complainant** and that the identity of the **complainant** is not necessary to the **inquiry**. In this event, the **complainant** is Marshall University. There may also be instances where the University is the **complainant** because the identity of the **complainant** is unknown but the **evidence of research misconduct** is substantial.
- 4.3 **Complainants** should file **allegations** only when there is sufficient credible **evidence** to support the accusation. **Allegations of research misconduct** are serious charges and the filing of such **allegations** not made in **good faith** are an abuse of the procedures set forth in this policy, and may result in disciplinary action under other University rules, policies or procedures. The **deciding official** will determine whether any administrative action should be taken against the **complainant** should an **allegation** lack **good faith**.
- 4.4 **Allegations** must be filed with appropriate University Officials and immediately referred to the **research integrity officer** to trigger the procedures described in the policy.
- 4.5 If **allegations** are made against more than one individual, Marshall is not required to conduct a separate decision will be reached regarding inquiry for each individual.
- 4.6 If allegations involve multiple institutions, one institution should be designated as the lead institution. The lead institution should obtain the research records from other relevant institutions.
- 4.6.7 If the **allegation** is against a person who is no longer an employee of Marshall University, the requirements of written notice and an opportunity to answer to the charge of **research misconduct** will be observed as far as is practical, but the failure of the **respondent** to answer or to participate in the **investigation** will not deter the **inquiry** and **investigation**.
- 4.7.8 **Allegations** based upon misconduct that occurred seven (7) years or more will not be inquired into unless the circumstances indicate that the conduct was not discoverable earlier; that at any time the health or safety of the public is in jeopardy; or that the **respondent** has continued the misconduct through citation, republication, or other use.
- 4.8.9 If, in answer to an **allegation**, the **respondent** admits to **research misconduct**, the **respondent** will be asked to sign a statement attesting to

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the occurrence and the extent of the misconduct. An **investigation** will commence with the **respondent's** admission serving as the **inquiry** report.

## 5. Conflict of Interest.

- 5.1 The integrity of the **inquiry** and **investigation** process will be maintained by avoiding the real or apparent **conflict of interest**. Meaning that no individual or group—directly or indirectly associated with the conduct of the review—shall in fact or by appearance gain materially or otherwise from the outcome.
- 5.2 The University will take reasonable steps to prevent real or apparent **conflicts of interest** between the persons conducting the **inquiry** and the **respondent**. This includes as part of the selection process to serve on a panel, an **inquiry** into potential sources of real or apparent conflicts with the **respondent**.
- 5.3 Should the **respondent** believe any of the committee members has a **conflict of interest**, the burden of proof is on the **respondent** to demonstrate such conflict by **clear and convincing evidence**.
- 5.4 If it is discovered that a member of the misconduct panel failed to disclose a **conflict of interest** or if a conflict arises during the **proceeding**, a replacement will be designated. The replacement will be fully briefed on the **proceeding** so the process can continue without starting over.

## 6. Inquiry.

### 6. After an **allegation** is sent to the **RIO**, the **RIO** will then conduct an informal **inquiry**. Assessment.

- 6.1 An assessment determines whether an **allegation** warrants an **inquiry**. First, the **RIO**, or another designated institutional official, will promptly assess the **allegation** to determine whether the **allegation** falls within the definition of **research misconduct**; and is sufficiently credible and specific so that potential evidence of **research misconduct** may be identified.
- 6.2 If an **inquiry** must be conducted, the **assessment** must be documented; and all **research records** and other evidence must promptly be sequestered before or at the same time as Marshall notifies the **respondent** of the **allegation**.
- 6.3 When original research records cannot be obtained, copies of records that are “substantially equivalent in evidentiary value” will fulfill the sequestration requirement. Marshall may also sequester research records and evidence

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whenever additional items become known or relevant to the inquiry or investigation.

6.4 If the requirements for an **inquiry** are not met, sufficiently detailed documentation of the **assessment** must be retained to permit later review by **ORI** of the reasons why an **inquiry** was not conducted.

## 7. Inquiry.

6.17.1 The purpose of the **inquiry** is to conduct preliminary information gathering and fact-finding to determine if an **allegation** has enough substance to warrant an **investigation**. The purpose is not to reach a final conclusion about whether misconduct definitely occurred or who was responsible. An **inquiry** does not require a full review of the **evidence** related to the **allegation**.

6.2 When the **RIO** has reached a conclusion as to whether the **allegation** has sufficient **evidence** to warrant an **investigation**, the **RIO** will prepare a preliminary **inquiry** report and provide a copy to the **respondent**.

7.2 At the time of or before beginning an **inquiry**, Marshall must make a good faith effort to notify in writing the presumed **respondent**, if any. If the **inquiry** subsequently identifies additional **respondents**, Marshall must notify them as well. Only **allegations** specific to a particular **respondent** are to be included in the notification to that **respondent**. If additional **allegations** are raised, the **respondent(s)** must be notified in writing of the additional **allegations** raised against them.

7.3 Marshall may convene a committee of experts to conduct reviews at the **inquiry** stage to determine whether an **investigation** is warranted or the **inquiry** review may be done by a **RIO**, or designated institutional official, and they may utilize subject matter experts for assistance in the **inquiry**.

6.37.4 If the final decision from the **inquiry** is that an **investigation** is warranted, the **RIO** will inform any cognizant oversight agency or funding entity of the **allegation**, as required by contract or law, and will keep the oversight agency or funding entity informed as required.

7.5 Findings of **research misconduct**, including the determination of whether the alleged misconduct is **intentional**, **knowing**, or **reckless**, cannot be made at the **inquiry** stage.

7.6 If the **inquiry** exceeds 90 days, the **inquiry** report must document the reasons for the delay.

7.7 **Inquiry** report should also include a description of analyses conducted, transcripts of any interviews that were transcribed, a timeline and procedural history, an inventory of sequestered research records, and any

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institutional actions implemented. The inquiry report will be shared with the respondent, accompanied with all transcripts of transcribed interviews.

## 7.8. Investigation.

7.48.1 The **investigation** is not intended to be a formal legal proceeding. **Respondent** may, at **respondent's** expense, obtain the advice of counsel in connection with such **proceedings**. If **respondent** chooses to be represented by an attorney, notice must be given to the **RIO** at least five (5) business days prior to the scheduled meeting and a University Marshall assigned advisor will no longer be provided. If counsel is not retained, the **respondent** may ask for an advisor to be assigned from their department to assist in the **investigation**, which will be appointed from the faculty who is not part of the **investigation**.

7.28.2 The purpose of the **investigation** is to determine whether the **allegation** constitutes **research misconduct** based upon a **preponderance of the evidence** standard and to recommend the appropriate corrective actions or sanctions. The investigation must commence within 30 days after deciding the investigation is warranted.

7.38.3 During the **investigation**, diligent efforts will be made to ensure the **investigation** is thorough and sufficiently documented and includes examination of all research records and evidence relevant to reaching a decision on the merits of the **allegation**.

7.48.4 The **investigation panel** will interview each **respondent**, each **complainant** (if known), 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**.

7.58.5 The **investigation panel** must consider if: (a) there was 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 was proven by a preponderance of the evidence. The **investigation** should be completed within 120180 days of its initiation.

7.68.6 If the **investigation panel** determines that research misconduct is substantiated by the **investigation** findings, the **RIO** will make recommendations on administrative actions that can be taken against the **respondent**.

7.78.7 If the **investigation panel** determines the **respondent** did not commit **research misconduct**, Marshall may, to the extent possible, work with the **respondent** to rectify any injury done to the reputation of **respondent**, including providing a letter of the results of the **investigation**.

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8.8 The investigation report should also include an inventory of sequestered materials and how sequestration was conducted, transcripts of all interviews, and any scientific or forensic analyses conducted.

8.9 Upon the conclusion of the investigation, Marshall must file the entire institutional record with The Office of Research Integrity (ORI), including documentation of the assessment; the inquiry report and all records considered or relied on during the inquiry; the investigation report and all records considered or relied on during the investigation; all transcripts; decisions by the Institutional Deciding Official; records of any appeals; an index listing all the research records and evidence that Marshall compiled during the research misconduct proceeding; and a general description of the records that were sequestered but not considered or relied upon.

**8.9. Appropriate Expertise.**

8.19.1 The investigation panel will have the appropriate expertise to ensure a thorough evaluation of the evidence. The panel may include consultants, from within or outside of Marshall, with the appropriate expertise to aid the panel in evaluating the evidence and/or recommending appropriate corrective actions or sanctions. The panel will be chosen by Marshall.

8.29.2 The panel will include at least one researcher from the same discipline as respondent.

8.39.3 In cases where the misconduct involves a human subject or animal usage then a member of the University Institutional Review Board (IRB) or the Animal Care and Use Committee (IACUC), may be appointed as an additional member of the panel.

**9.10. Corrective and Administrative Actions.**

9.410.1 Interim actions may be taken by Marshall while an inquiry or investigation is on-going. Marshall will determine whether in the interest of protecting involved parties, to protect research funds, or if there is reason to believe that the health or safety of research subjects, patients, students and/or staff or others are endangered, administrative action might be taken. Such action is not considered a finding of research misconduct nor disciplinary action.

9.210.2 Following a finding of research misconduct, a sanction may be imposed by Marshall, up to and including termination or expulsion from Marshall.

9.310.3 The seriousness of the misconduct, along with the nature of the misconduct (e.g., knowingly, intentionally, recklessly), any mitigating factors, whether the incident was isolated, or part of a pattern, will be factors considered in determining sanctions.

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10.4 Findings from The Office of Research Integrity (ORI) are not required for Marshall's decisions regarding research misconduct to be considered final and to warrant remediation under this policy.

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#### **10.11. Correction of the Research Record.**

10.411.1 Marshall has the responsibility to identify whether correction or retraction of published or submitted work is required, to ensure the integrity of the scientific record is maintained.

10.411.2 If research misconduct is found under this policy and falsified, fabricated, or plagiarized research has been published or submitted, including within grant proposals, the respondent must work with the RIO and any other institutional officials or publishers to correct, retract, or withdraw the research record.

10.411.3 If research misconduct is not found under this policy, but falsified, fabricated, or plagiarized research has been published or submitted, including within grant proposals, the respondent will work with the RIO to correct, retract, or withdraw the research record.

10.411.4 Corrections or retractions occurring before a determination of whether research misconduct occurred will not stop the proceeding.

#### **11.12. Retaliation.**

11.412.1 Marshall does not tolerate retaliation in any form against individuals who participate in a research misconduct proceeding.

11.412.2 Retaliation will be referred to the proper office for appropriate University disciplinary procedures which may include termination.

#### **12.13. Reopened Complaints.**

12.413.1 Any allegation that has been closed with a determination that research misconduct did not occur may be reopened only if, in the opinion of the RIO in consultation with the deciding official, new and potentially significant information of research misconduct, not previously considered, has been presented.

#### **13.14. Official Records of Research Misconduct Proceedings.**

13.414.1 The official University record of research misconduct proceedings will include all reports, electronic recordings, computer files, documentary evidence, or other relevant matter collected and used by the committee.

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13.214.2 In all closed **research misconduct proceedings** the official Marshall record will be kept in the files of the vice president for research.

14.3 The official Marshall record will be kept for a minimum of seven (7) years or as required under the applicable University data and record retention policies.

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