



Responsible Conduct in Research and Scholarship

Introduction

It is the guiding principle of the University of West Georgia to maintain the highest standards of research and scholarship integrity regardless of the source of funding for that research or scholarship, or the type of research or scholarship being conducted. The University is committed to truth, accuracy, and intellectual honesty in research investigation and scholarship in the classroom, in proposing and conducting research and other forms of scholarship, in the reporting of results, and in relationships with colleagues. Fraud or misconduct in research or scholarship is an offense that severely damages the reputation of those involved, the university itself, and the entire educational community. The University of West Georgia complies with guidance issued by the federal Office of Research Integrity by promoting ethical conduct in academic research and scholarship and all aspects of the research enterprise.

This policy is intended to provide guidelines for reporting and investigating allegations of research and scholarship misconduct. The University must assure that research and scholarly misconduct is reported accurately and in a timely manner while simultaneously assuring that allegations are handled fairly and effectively in order to protect the reputations of all concerned.

This policy is adopted in compliance with various federal laws, regulations and policies dealing with misconduct in research and scholarship, including the Health Research Extension Act of 1985 (42 U.S.C. 289b), Public Health Service (PHS) regulations to be promulgated pursuant to that Act, and the policy adopted by the National Science Foundation (NSF), regulation 45 CFR Part 689. These laws, regulations, and policies require universities receiving federal funds to establish administrative procedures for reviewing allegations of misconduct in connection with research. This policy is in compliance with the Georgia Board of Regents Ethics Policy ([BOR Policy Manual 8.2.20](#)). This policy pertains to all research and creative activity conducted at UWG. The Associate Vice President for Research and Sponsored Operations, acting as the University's Research Integrity Officer, is responsible for implementing this policy and for acting as liaison with external agencies and/or individuals making allegations.

What is NOT Research or Scholarly Misconduct

Honest errors or honest differences in interpretations or judgments of data are not considered to be misconduct. Findings of misconduct require significant departure from accepted practices of the scholarly community for maintaining the integrity of the research record; must have been committed intentionally, or knowingly, or in reckless disregard of accepted practices; and, the allegations must be proven by a preponderance of evidence.

Policy Statement

Misconduct or fraud in research or scholarship is the fabrication, falsification, plagiarism of data or related information in the proposing, performing, reviewing or reporting of research or other scholarship results, tampering with the data of others and other practices that materially deviate from those that are commonly accepted within the academic community. Misconduct in research and scholarship can be reported to any official of the University. Such a disclosure triggers an inquiry where the facts are examined and the University determines whether or not to conduct a full investigation. A full investigation involves an in-depth University Committee examination of the allegations. A recommendation is given to the President if disciplinary action against the researcher should be taken.

Definitions

Allegation: Any written or oral statement or other indication of possible research or other scholarly misconduct made to an institutional official.

Complainant: An individual filing a written complaint of misconduct.

Conflict of Interest: 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.

Day or **Days:** Refers to working days.

Evidence: Documents or statements of any type which support or refute allegations and testimony.

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

Initial Inquiry: An information-gathering and initial fact-finding process to determine whether an allegation or apparent instance of misconduct warrants a formal investigation. An inquiry will be conducted with minimum publicity and maximum confidentiality.

Investigation: A formal examination and evaluation of all relevant facts to determine if an instance of misconduct has taken place, to evaluate its seriousness, and if possible, to determine responsibility and the extent of any adverse effects resulting from the misconduct.

Research Misconduct or **Scholarly Misconduct:** Fabrication or falsification of data, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the academic or research community for proposing, conducting, or reporting research or scholarly activity. It does not include honest error or honest differences in interpretation or judgments of data. Additionally, this definition includes violations of University policy pertaining to research, including the failure to obtain proper review and approval by the University committees responsible for research involving human subjects, animal subjects, radioactive materials, and biohazards, as well as the failure to comply with rules and guidelines set forth by the committees responsible for these areas.

NSF: The National Science Foundation.

Plagiarism: The act of appropriating the literary composition of another, or parts or passages of his or her writings, or the ideas or language of the same, and passing them off as the product of one's own mind. It involves the deliberate use of any outside source without proper acknowledgment. Plagiarism is scholarly misconduct whether it occurs in any published work or in applications for funding.

PHS: The Public Health Service.

President: The President of the University of West Georgia.

Respondent: An individual who is the subject of an inquiry or investigation.

University: The University of West Georgia.

Provost: The Provost and Vice President for Academic Affairs of the University of West Georgia.

Reporting of Possible Misconduct

All employees or individuals associated with the University of West Georgia are expected to report observed, suspected, or apparent misconduct to the Research Integrity Officer (Associate Vice President for Research and Sponsored Operations). If an individual is unsure as to whether a suspected incident falls within the definition of research or other scholarly misconduct, he/she should contact the Research Integrity Officer to discuss the suspected misconduct informally. This consultation will be kept confidential to the extent permissible by law.

Ultimately, all allegations of misconduct will be made in writing, signed by the Complainant, and will be made in confidence directly to the Research Integrity Officer. Upon receipt of a written complaint, the Research Integrity Officer will inform the Provost and Vice President for Academic Affairs, the University General Counsel, and the Respondent of the allegation. Every effort should be made to resolve the situation at this level. In the event that the person making the allegation considers

the Research Integrity Officer and/or the Provost to have a conflict of interest, the allegation may be reported directly to the President. Actions constituting research or other scholarly misconduct as defined in this document will not be actions that can be grieved through the Faculty Grievance Process.

Should attempts to resolve the situation be unsuccessful, the Research Integrity Officer will review the written complaint and consult with the University General Counsel to determine whether probable cause exists to conduct an Initial Inquiry, whether PHS or NSF support is involved, and whether the allegation falls under either the PHS or NSF definition of research or other scholarly misconduct. Sufficient evidence or information to permit further inquiry into an allegation does not always exist. If the issue involved is found not to warrant further inquiry, satisfactory resolution through means other than this policy should be sought and to the extent possible, the identity of the complainant(s) will remain confidential.

Initial Inquiry

Following the preliminary assessment, if the Research Integrity Officer, in consultation with the Provost and the University General Counsel, determines that the allegation provides sufficient information to allow specific follow-up, he or she will notify in writing, with return receipt, the Respondent's College Dean and the Respondent, and immediately begin the Initial Inquiry. At this point, if external funding is involved, the funding agency should be notified that an investigation has been initiated. The purpose of the Initial Inquiry is to make a preliminary evaluation of the available evidence and testimony of the Complainant, the Respondent, and key witnesses to determine whether there is sufficient evidence of possible research or other scholarly misconduct to warrant an investigation. The purpose of the Initial Inquiry is NOT to reach a final conclusion about whether misconduct definitely occurred or who was responsible. If it is determined that an Initial Inquiry is necessary, every reasonable effort will be made to protect the identity of the individual(s) involved (if the process reaches the Investigative Phase, however, the right of the Respondent to confront the Complainant requires that the identity of the Complainant be revealed).

The Research Integrity Officer is responsible for forming an Inquiry Committee, the membership of which will be determined by the Research Integrity Officer, the Dean of the Respondent's College, and the Provost.

Inquiry Committee

If it is determined that the formation of an Inquiry Committee is necessary, the Committee and Committee Chair will be appointed within 10 days of the initiation of the Inquiry. The Inquiry Committee will consist of a minimum of three persons who do not have real or apparent conflicts of interest in the case, are unbiased, and have the necessary and appropriate expertise to carry out a thorough and authoritative evaluation of the relevant evidence, interview the principals and key witnesses, and to conduct the Inquiry. These individuals may be faculty, subject matter experts, administrators, lawyers, or other qualified persons, and they may be internal or external the University.

Members of the Committee and experts will agree in writing to observe the confidentiality of the proceeding and any information or documents reviewed as part of the Inquiry. Outside of the official proceedings of the Committee, they may not discuss the proceedings with the Respondent, Complainant, witnesses, or anyone not authorized by the Research Integrity Officer to have knowledge of the Inquiry.

The Research Integrity Officer will notify the Respondent of the proposed Committee membership within five (5) days of its formation, in writing, with return receipt. If the Respondent submits a written objection to any appointed member of the Inquiry Committee or expert based on bias or conflict of interest, within five (5) days, the Research Integrity Officer will immediately determine whether to replace the challenged member or expert with a qualified substitute.

Notification of the Appropriate Parties

Upon initiation of the Inquiry, the Research Integrity Officer will notify the Respondent in writing, with return receipt, that a complaint of misconduct has been received and advise the Respondent of the Inquiry. The notification will specify the following:

- 1) The research or other scholarly project in question
- 2) The specific allegations
- 3) The definition of the misconduct
- 4) The identification of PHS or NSF funding, if involved

- 5) The list the names of the members of the Inquiry Committee (if appointed) and experts (if any)
- 6) An explanation of the Respondent's opportunity to challenge the appointment of a member of the Committee or expert for bias or conflict of interest
- 7) The Respondent's right to be assisted by counsel, to be interviewed, to present evidence to the Committee, and to comment on the Inquiry report
- 8) The Respondent's obligation as an employee of the University to cooperate with the investigation, and
- 9) A description of the University's policy on protecting the Complainant against retaliation and the need to maintain the Complainant's confidentiality during the Inquiry, and any subsequent proceedings.

Simultaneously, the Respondent will be notified that the relevant research records will be located, collected, inventoried, and secured in order to prevent the loss, alteration, or fraudulent creation of records (research records produced under federal grants, cooperative agreements, and most contracts are the property of the University, and employees cannot interfere with the University's right of access to them). The documents and materials to be sequestered will include all of the original items (or copies, if originals cannot be located) that may be relevant to the allegations. Additionally, records from other individuals, such as co-authors, collaborators, or Complainant(s) may need to be sequestered. The Research Integrity Officer will obtain the assistance of the Respondent's supervisor and University General Counsel in this process, as necessary. If the Respondent is not available, sequestration may begin in the Respondent's absence. The Respondent will not be notified in advance of the sequestration of research records.

To protect the rights of the Respondent and all other involved individuals, as well as to enable the University and its representatives to meet their institutional, regulatory, and legal responsibilities, documentation of custody must be ensured and maintained, with the originals kept intact and unmodified. Therefore, a copy of a dated receipt should be signed by the sequestering official and the person from whom an item is collected, and a copy of the receipt should be given to the person from whom the record is taken.

If it is not possible to prepare a complete inventory list at the time of collection, one should be prepared as soon as possible, and then a copy should be provided to the person from whom the items were collected within ten working days of the request. If the copy cannot be delivered to the individual within ten working days, a written explanation of the relevant circumstances, along with the anticipated delivery date, will be transmitted in confidence to that individual. This explanation will become a part of the Inquiry records. When the requested copy is delivered to the person from whom the original item has been taken, a dated receipt will be signed by that person and the designated University official, with copies provided to both individuals. The Research Integrity Officer will be responsible for maintaining files of all documents and evidence and for the confidentiality and the security of the files.

The Research Integrity Officer and Provost, in consultation with appropriate (including legal) advisor(s), will determine what additional notification(s) is necessary, including if and when external funding agencies should be notified. This notification will include a complete description of the evidence and will be provided by the Provost. The Research Integrity Officer, the Provost, and/or the Inquiry Committee may meet separately with the Respondent and Complainant and will review all pertinent and reasonable documentation to determine if a formal Investigation should be recommended. Refusal on the part of the Respondent to cooperate will be grounds for the recommendation for an Investigation.

The Respondent may consult with legal counsel or a non-lawyer personal advisor (who is not a principal or witness in the case) to seek advice, and may be accompanied by legal counsel or a non-lawyer personal advisor to any meeting on this matter. The Respondent's legal counsel's role, as well as the personal advisor's role is limited to advising the Respondent. Neither the legal counsel nor the personal advisor may participate in any administrative proceedings.

Charge to the Committee and the First Meeting

The Research Integrity Officer, or his or her designee, will prepare a charge for the Inquiry Committee that states the purpose of the Inquiry, describes the allegations and any related issues, outlines the appropriate procedures for conducting the Inquiry, assists the Committee with organizing plans for the Inquiry, and answers any questions raised by the Committee. The Research Integrity Officer, his or her designee, and the University General Counsel will be present or available throughout the Inquiry to advise the Committee as needed.

Conducting Interviews

The purpose of an interview at the Inquiry stage is to allow each Respondent, Complainant, or witness to tell his or her side of the story. Before an interview, the Committee should provide each witness with a summary of the matters or issues intended to be covered at the interview. If the Committee raises additional matters, the witness should be given an opportunity to supplement the record in writing or in another interview. Interviews with the Respondent will be transcribed or tape recorded. Interviews with anyone else will be summarized, tape-recorded, or transcribed. A transcript or summary of the interview will be provided to each witness for review and correction of errors. Witnesses may add comments or information. Changes to the transcript or summary will be made only to correct factual errors.

Witnesses may be accompanied and advised by legal counsel or by a non-legal advisor who is not a principal or witness in the case. However, the counsel or advisor may only advise the witness and may not participate directly in the interview. Witnesses will respond directly to the interview questions.

If the Respondent admits to the misconduct, he or she will be asked immediately to sign a statement attesting to the occurrence and extent of the misconduct. Normally, an admission is a sufficient basis to proceed directly to an Investigation. However, the admission may not be a sufficient basis for closing a case. Further investigation may be needed to determine the extent of the misconduct or to explore additional issues. If an admission is made, the Research Integrity Officer, in consultation with University General Counsel and other appropriate persons, will determine whether there is a sufficient basis to close a case, after the admission is fully documented and all appropriate procedural steps are taken.

Committee Deliberations

The Inquiry Committee will evaluate the evidence and testimony obtained during the Inquiry. After consultation with the Research Integrity Officer, Provost, and University General Counsel, the Committee members will decide whether there is sufficient evidence of possible misconduct to recommend further investigation. The scope of the Inquiry does NOT include deciding whether misconduct occurred or conducting exhaustive interviews and analyses.

The Inquiry Report

The Inquiry will be completed and a written report of the findings will be prepared by the committee and submitted to the Provost within 45 days following its first meeting, unless the Research Integrity Officer approves an extension for good cause. If the Inquiry cannot be completed within 60 days, a report will be made to the Provost citing progress to date, the reasons for the delay, and the estimated completion date. The Respondent and any other individual(s) involved will be informed of the delay.

The final report will contain the name and title of the committee members and experts, if any, the allegations, whether it involves a PHS or NSF funded project, a summary of the Inquiry process used, a list of the records reviewed, summaries of any interviews, a description of the evidence in sufficient detail to demonstrate whether an Investigation is warranted or not, the Committee's determination as to whether an Investigation is recommended, and whether any other actions should be taken if an Investigation is not recommended. University General Counsel will review the Report for legal sufficiency. The Respondent will be provided a copy of the Inquiry Report, with return receipt. The Complainant will be provided with those portions of the draft report that address the Complainant's role and opinions in the Investigation. The Research Integrity Officer may establish reasonable conditions for review to protect the confidentiality of the draft report. Within 15 days of the receipt of the draft report, the Respondent and Complainant will provide their comments, if any, to the Inquiry Committee. Any comments that the Respondent or Complainant submits on the draft report will become part of the final report and record. Based on the comments, the Inquiry Committee may revise the report as appropriate.

If the University plans to terminate an Inquiry of an allegation of misconduct on a PHS or NSF funded project, for any reason, without completing all relevant requirements under the applicable subparts or sections (e.g., 50.103 (d) for PHS and 689.3 for NSF), a report of such planned termination, including a description of the reasons for such termination will be made to the agency's cognizant office, which will then decide whether further Inquiry should be undertaken.

If the Inquiry reveals substantial evidence of misconduct, the Research Integrity Officer will transmit the final report and any comments to the Provost who will make the determination of whether findings from the Inquiry provide sufficient evidence

of possible research or other scholarly misconduct to justify conducting an Investigation. The Inquiry is completed when the Provost makes this determination.

The Provost, in consultation with the Research Integrity Officer, the University General Counsel, and other appropriate parties, will reach his/her determination on a case-by-case-basis, considering all relevant factors, including, but not limited to:

1. the accuracy and reliability of the source of the allegation of misconduct
2. the seriousness of the alleged misconduct
3. the scope of the alleged incident and the context in which it became known, and,
4. other information obtained during the Inquiry.

If an Investigation is initiated, any outside sponsoring agency that may be involved or have an interest in the alleged misconduct will be notified. The Provost, in consultation with the Research Integrity Officer and University General Counsel, will determine what this notification will include and to whom it will be directed. The Complainant and the Respondent will be notified in writing, with return receipt, when an Investigation will follow.

If the Inquiry does not produce substantial evidence of misconduct, the Provost will inform the person who made the allegation, the Respondent, the University General Counsel, the President, and any other individual(s) involved in the Inquiry to whom the identity of the Respondent was disclosed, and the matter will be closed. The University will make diligent efforts to restore the reputation of the Respondent by providing all relevant parties with a factual report of the outcome and the conclusions of the Inquiry. The University will maintain sufficiently detailed documentation of the Inquiry to enable it to respond to potential requests to review the reasons for determining that an Investigation was not warranted. These records will be maintained in the Office of the Associate Vice President for Research and Sponsored Operations in a secure manner in accordance with University System of Georgia Records Retention Policies.

If the allegation had been made in good faith, the University will make diligent efforts to protect against retaliation the positions and reputations of the Complainant(s) and other individuals who have cooperated with the University's Inquiry. Any alleged or apparent retaliation will be reported immediately to the Research Integrity Officer or Provost. If either the Research Integrity Officer or Provost is considered to have a conflict of interest, the alleged or apparent retaliation will be reported directly to the President.

Interim Administrative Actions

Upon recommendation of the Research Integrity Officer, the Provost, and the University General Counsel, the Dean of the Respondent's College may meet with the Respondent for the purpose of imposing temporary interim administrative actions prior to the completion of an Inquiry or Investigation, if necessary, to safeguard the integrity of the research or scholarly activity, prevent inappropriate use of sponsored funding, or otherwise protect the interests of a sponsor, the University, or the public. If temporary suspension of duties is imposed, such suspension will be without loss of pay, pending the conclusion of the process described in this document. The Respondent will be informed of the reasons for the action taken and afforded the opportunity to oppose the action.

Formal Investigation

The purpose of the Formal Investigation is to explore in detail the allegations, to examine the evidence in depth, and to determine specifically whether misconduct has been committed, by whom, and to what extent. The Investigation will also determine whether there are additional instances of possible misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where alleged misconduct involves clinical trials or potential harm to human subjects or the general public or if it affects research that forms the basis for public policy, clinical practice, or public health practice.

The Research Integrity Officer will notify the Respondent, in writing, with return receipt, as soon as reasonably possible after the determination is made to open an Investigation. The notification will include a copy of the Inquiry Report, the specific allegations, the sources of funding, if any, the definition of scholarly misconduct, the procedures to be followed in the Investigation, including the appointment of the Investigation Committee and experts, the opportunity of the Respondent to be interviewed, to provide information, to be assisted by counsel, to challenge the membership of the committee and experts based on bias or conflict of interest, and to comment on the draft report. The Research Integrity Officer will immediately

sequester any additional pertinent research records that were not previously sequestered during the Inquiry. This sequestration will occur before or at the time the Respondent is notified that an Investigation has begun. The procedures to be followed for sequestration during the Investigation are the same procedures that apply during the Inquiry.

The Research Integrity Officer is responsible for conducting or designating others to conduct the Investigation. In cases where the allegations and apparent evidence are straightforward, such as an allegation of plagiarism, or simple falsification, or an admission of misconduct by the Respondent, the Research Integrity Officer may choose to conduct the Investigation directly or designate another qualified individual to do so. In such cases, the Investigation official will obtain the necessary expert and technical advice to consider properly all scientific issues.

Investigative Committee

In complex cases, the Research Integrity Officer will appoint an Investigation Committee (hereafter known as the “Investigative Committee”) within 10 days of the notification to the Respondent that an investigation is planned. The Research Integrity Officer will be a member of the Committee, and will serve as Chairperson. The Investigative Committee should consist of at least three individuals who do not have real or apparent conflicts of interest in the case, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the allegations, interview the principals and key witnesses, and to conduct the investigation. These individuals may be scientists, administrators, subject matter experts, lawyers, or other qualified persons, and they may be internal or external to the University. Individuals appointed to the Investigative Committee may also have served on the Inquiry Committee.

Members of the Committee and experts will agree in writing to observe the confidentiality of the proceedings and any information or documents reviewed as part of the Inquiry. Outside of the official proceedings of the Committee, they may not discuss the proceedings with the Respondent, Complainant, witnesses, or anyone not authorized by the Research Integrity Officer to have knowledge of the Inquiry.

The Research Integrity Officer will notify the Respondent of the proposed Committee membership within five (5) days of its formation, in writing, with return receipt. If the Respondent submits a written objection to any appointed member of the Investigative Committee or expert based on bias or conflict of interest within five (5) days, the Research Integrity Officer will immediately determine whether to replace the challenged member or expert with a qualified substitute.

The Respondent may consult with legal counsel or a non-lawyer personal advisor (who is not a principal or witness in the case) to seek advice and may be accompanied by legal counsel or a non-lawyer personal advisor to any meeting on this matter. The Respondent’s legal counsel’s role, as well as the personal advisor’s role is limited to advising the Respondent. Neither the legal counsel nor the personal advisor may participate in any administrative proceedings.

Once formed, the Investigative Committee will, in consultation with the University General Counsel, establish the procedures to be followed in conducting the Investigation. The Complainant and Respondent will be fully informed of the procedures. The Investigative Committee will initiate the Investigation within 30 days of the completion of the Inquiry, and will take no more than 60 days to complete the Investigation, prepare a report of its findings, including recommended action(s), and submit the report to the Research Integrity Officer, the Provost, and the President. In undertaking this investigation, the Investigation Committee will act promptly, ensure fairness to all, secure the necessary and appropriate expertise to carry out a thorough and authoritative evaluation of the relevant evidence, and take precautions against real or apparent conflicts of interest.

Charge to the Committee and the First Meeting

The Research Integrity Officer, with the assistance of the University General Counsel, will convene the first meeting of the Investigation Committee. The Research Integrity Officer will define the subject matter of the Investigation in a written charge to the Committee. The charge will describe the allegations and related issues identified during the Inquiry, define research and other scholarly misconduct, and identify the name of the Respondent.

The Investigation may consist of a combination of activities including but not limited to: (1) examination of all documentation including, but not necessarily limited to, relevant research records, computer files, proposals, manuscripts, publications, correspondence, memoranda, and notes of telephone calls; (2) review of the report from the Inquiry; and, (3) interviews of parties and witnesses who may have been involved in or have knowledge about the case. Interviews of the Respondent will be

tape recorded or transcribed. All other interviews will be transcribed, tape recorded, or summarized. Summaries or transcripts of all interviews will be prepared, provided to the interviewed party for comment or revision, and included as part of the investigatory file.

Investigation Report

At the conclusion of the Investigation, the Investigation Committee will prepare a written Investigation Report. A draft Investigation Report will go through the review below and changes may be made. After this review is complete and any changes have been made, the Research Integrity Officer will submit the final Investigation Report to the Provost. The Investigation Report will be organized according to the following outline, except when special factors suggest a different approach.

1. Background
 1. Chronology of events
 2. Public health issues
2. Allegations
3. Sponsored Support or Application(s) (by Allegation)
4. University Inquiry: Process and Recommendation
 1. Composition of committee
 2. Individuals interviewed
 3. Evidence sequestered and reviewed
5. University Investigation: Process
 1. Composition of Investigation Committee
 2. Individuals interviewed
 3. Evidence sequestered and reviewed
6. University Investigation: Analysis of each Allegation
 1. Background
 2. Analysis of all of the relevant evidence and specific identification of evidence supporting the finding
 3. Conclusion: Research or other scholarly misconduct or no misconduct
 4. Effect of misconduct (for example, potential harm to research subjects, reliability of data, publications that need to be corrected or retracted, etc.)
7. Recommendation of Investigation Committee
8. Attachments

Comments on the Draft Investigation Report

1. University General Counsel

The Research Integrity Officer will provide the University General Counsel with a copy of the draft Investigation Report for a review of its legal sufficiency. The General Counsel's comments will be incorporated into the draft Investigation Report as appropriate.

2. Respondent

After the University General Counsel has reviewed the draft Investigation Report and the comments of the General Counsel have been incorporated into the draft report as appropriate, the Research Integrity Officer will provide the Respondent with a copy of the draft report. The Respondent will be allowed ten days to review and comment on the draft report and Respondent's written comments will be attached to the final Investigation Report. The findings of the final Investigation Report will take into account the Respondent's comments in addition to all of the other evidence.

3. Complainant

After the University General Counsel has reviewed the draft Investigation Report and the comments of the General Counsel have been incorporated into the draft report as appropriate, the Research Integrity Officer will offer the Complainant an opportunity to review those portions of the draft Investigation Report that address the Complainant's

role and opinions in the Investigation. The Complainant will be allowed ten days to review and comment on the draft Investigation Report. The Complainant's written comments will be attached to the final Investigation Report. The draft Investigation Report will take into account the Complainant's comments, in addition to all other evidence.

4. Confidentiality

In distributing the draft Investigation Report, or portions thereof, the Research Integrity Officer will inform each recipient of the confidentiality under which the draft Investigation Report is made available and may establish reasonable conditions consistent with laws of the State of Georgia and federal law to ensure this confidentiality during the Investigation.

Finalizing the Investigation Report

After the Investigation Committee has received comments to the Investigation Report, the Investigation Committee will review those comments and make any changes to the Investigation Report that the Investigation Committee deems necessary. The Investigation Committee will then issue its final Investigation Report. The Research Integrity Officer will maintain a file containing the final Investigation Report and the documentation to substantiate the findings of the Investigation Committee.

Investigation Decision and Notification

1. If the Investigation Committee determines that, by a preponderance of the evidence, no research or other scholarly misconduct has occurred, it will recommend such a finding to the Provost.
2. If the Investigation Committee determines that, by a preponderance of the evidence, that research or other scholarly misconduct has occurred, it will recommend such a finding to the Provost.

The Research Integrity Officer will provide the Provost with a complete copy of the final Investigation Report. Based on a preponderance of the evidence, the Provost will make the final determination as to whether to accept the recommendation of the Investigation Report, its findings, and recommended University actions, if any. The Provost may also return the Investigation Report to the Investigation Committee with a request for further fact-finding or analysis. The determination of the Provost, together with the Investigation Report, constitutes the final Investigation Report for purposes of a Sponsor's review.

When a final decision has been reached, the Research Integrity Officer will notify both the Respondent and the Complainant in writing of that decision. In addition, the Provost will, after consultation with the University General Counsel, determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the Respondent in the work, or other relevant parties should be notified of the outcome of the matter. If a Sponsor is involved, the Research Integrity Officer will also notify the Sponsor of the Investigation and its outcome. The Research Integrity Officer is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

Time Limit for Completing the Investigation

The Investigation Committee will complete the Investigation and submit its Investigation Report to the Provost no more than 90 calendar days after the decision of the Provost that an Investigation was necessary, unless the Research Integrity Officer approves an extension for good cause. If the Research Integrity Officer approves an extension, the reason for the extension will be entered into the records of the case and included in the final Investigation Report. The Respondent will also be notified of any extension.

The Investigation is completed when the Provost determines whether research or other scholarly misconduct has occurred. This determination will be made within 15 days of the Provost's receipt of the Investigation Report. Any extension of time, or any request by the Provost that the Investigation Committee conduct additional investigation or analysis, will be based on good cause and incorporated into the final Investigation Report.

Requirements for Reporting to ORI (if applicable)

The Research Integrity Officer will ensure compliance with the following requirements in those cases where an allegation of research or other scholarly misconduct involves Public Health Service support or sponsorship:

1. When an admission of research or other scholarly misconduct is made, the Research Integrity Officer may contact the ORI for consultation and advice. Normally, the individual making the admission will be asked to sign a statement attesting to the occurrence and extent of misconduct. The University will not accept an admission of research or other scholarly misconduct as the basis for closing a case or not undertaking an Investigation without prior approval from the ORI.
2. The decision of the University to initiate an investigation must be reported in writing to the Director of the ORI on or before the date the Investigation begins. At a minimum, the notification should include the name of the person(s) against whom the allegations have been made, the general nature of the allegation, and the PHS application or grant number(s) involved. Information provided to the Director of the ORI through this notification will be held in confidence by ORI to the extent permitted by law, will not be disclosed as part of the peer review and Advisory Committee review processes, but may be used by the Secretary of Health and Human Services, and any other officer or employee of the Department of Health and Human Services to whom similar authority may be delegated, in making decisions about the award or continuation of funding.
3. If the University plans to terminate an Inquiry or Investigation for any reason without completing all relevant requirements under 42 CFR 50.103(d), the Research Integrity Officer will submit to ORI a report of the planned termination, including a description of the reasons for the termination. ORI will then decide whether further investigation should be undertaken.
4. The Research Integrity Officer will notify the ORI of the final outcome of the Investigation. The Research Integrity Officer will make the Investigation Report and the documentation necessary to substantiate the findings of the Investigation Committee available to the Director of the ORI, upon request. The Director of the ORI will decide whether the ORI will either proceed in its own investigation or will act on the findings of the University. The final Investigation Report submitted to the ORI must describe the policies and procedures under which the Investigation was conducted, how and from whom information was obtained relevant to the Investigation, the findings, the basis for the findings, the actual text or an accurate summary of the views of any individual(s) found to have engaged in the misconduct, and a description of any sanctions taken by the University.
5. If the University determines that it will not be able to complete the Investigation in 120 days, the Research Integrity Officer will submit to the ORI a written request for an extension and an explanation for the delay that includes an interim report on the progress to date and an estimate for the date of completion of the Investigation Report and any other necessary steps. Any consideration for an extension must balance the need for a thorough and rigorous examination of the facts *versus* the interests of the Respondent and the PHS in a timely resolution of the matter. If the request is granted, the University must file periodic progress reports as requested by the ORI. If satisfactory progress is not made in the University's Investigation, the ORI may undertake an Investigation of its own.
6. Upon receipt of the final Investigation Report and supporting materials, the ORI will review the information in order to determine whether the Investigation has been performed in a timely manner and with sufficient objectivity, thoroughness, and competence. The ORI may then request clarification or additional information and, if necessary, perform its own investigation.
7. In addition to sanctions that the University may decide to impose, the Department of Health and Human Services also may impose sanctions of its own upon investigators or the University based upon authorities it possesses or may possess, if such action seems appropriate.
8. The Research Integrity Officer will keep the ORI apprised of any developments during the course of the Investigation which disclose facts that may affect current or potential Department of Health and Human Services funding for the individual(s) under investigation or that the Public Health Service needs to know to ensure appropriate use of federal funds and otherwise protect the public interest.