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References	CFR

Responding to Allegations of Research Misconduct

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POLICY STATEMENT

All members of the University of North Dakota (UND/University) engaged in research must adhere to ethical standards to protect the accuracy and reliability of the research record and published research results.

UND utilizes a framework to resolve allegations of research misconduct as promptly as possible while protecting the rights and integrity of all individuals involved.

REASON FOR POLICY

UND supports an environment of research integrity committed to honesty, transparency, and the highest ethical standards in all research endeavors. This policy also supports the University's compliance with State Board of Higher Education (SBHE) Policy 410, Responsible Conduct of Research, which requires institutions receiving external research funding or support to maintain expectations for research conducted with integrity and free of fabrication, falsification, and plagiarism. This policy establishes a consistent process for reporting, reviewing, and responding to allegations of research misconduct and supports the integrity of the University's research enterprise. As a recipient of and applicant for federal research funding, UND is required to maintain policies and procedures for addressing research misconduct and to provide certain assurances of compliance as a condition of eligibility for federal research support. This policy is intended to satisfy the requirements of 42 CFR Part 93, Public Health Service Policies (PHS) on Research Misconduct, as well as other applicable federal requirements and sponsor obligations related to research integrity. Although certain provisions of this policy are required by 42 CFR Part 93 and apply specifically to PHS supported research, UND may apply these research misconduct procedures as provided in this policy regardless of the source of research funding. This

policy does not supersede, replace, or establish an alternative to the federal regulation or any regulations for handling research misconduct. In the case of any conflict between this policy and any applicable regulation, the applicable regulation will prevail.

SCOPE OF POLICY

- President
- Vice Presidents, Associate & Assistant Vice Presidents
- Deans, Directors & Department Heads
- Area Managers & Supervisors
- Faculty
- Staff
- Students

CONTACTS

Specific questions should be directed to the following:

Subject	Contact	Phone	Website / Email
Policy Clarification	Integrity Officer	701.777.2167	heather.wages@UND.edu

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DEFINITIONS

Accepted Practices of the Relevant Research Community	Commonly accepted professional codes or norms within the overarching community of researchers and institutions.
Allegation	Any statement, describing possible research misconduct, made to an institutional official.
Committee of Investigation (CoI)	Three-member panel who gather and examine evidence during the investigation.
Complainant	An individual who in good faith makes an allegation of research misconduct.
Days	All references to days mean calendar days.
Deciding Official	An institutional official with appropriate authority in relation to the respondent who has not served as the inquirer or member of the Committee of Investigation (CoI) in the matter. The deciding official will ordinarily be the provost when the respondent is a faculty member and the appropriate vice president or other senior administrator when the respondent is a staff member, student, or former employee or student.
Disposition	The final decision of the deciding official resolving the allegation of research misconduct.
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 information provided during an interview.
Fabrication	Fabrication means making up data or results and recording or reporting them.
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.
Good Faith	As applied to a complainant or witness, good faith means having a reasonable belief in the truth of one's allegation or testimony, based on the information known to the complainant or witness at the time. An allegation or cooperation with a research misconduct proceeding is not in good faith if made with knowledge of or reckless disregard for information that would negate the allegation or testimony. As applied to an institutional or committee member, it means cooperating with the research misconduct proceeding by impartially performing the duties assigned for the purpose of helping an institution meet its responsibilities. 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.
Inquiry	Preliminary information-gathering and preliminary fact-finding to determine whether an allegation or apparent instance of research misconduct warrants an investigation.
Inquirer	The person performing an inquiry.
Integrity Officer	The person responsible for ensuring compliance with these policies and procedures for addressing allegations of research misconduct.
Intentionally	To act with the aim of carrying out the act.
Investigation	The formal examination and evaluation of all relevant facts to determine if research misconduct has occurred.
Knowingly	To act with awareness of the act.
Office of Research Integrity (ORI)	The federal agency that oversees and directs Public Health Service (PHS) research integrity activities on behalf of the Secretary of Health and Human Services. ORI is located within the Office of the Assistant Secretary for Health within Office of the Secretary of Health and Human Services in the Department of Health and Human Services.
Plagiarism	For the purposes of this policy, the appropriation of another person's ideas, processes, results, or words, without giving appropriate credit. Plagiarism includes the unattributed

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	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. 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.
Preponderance of 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.
Questionable Research Practices	Include practices that seriously deviate from those that are commonly accepted within the research community for proposing, conducting, or reporting research but may not necessarily constitute fabrication, falsification, or plagiarism. Examples include, but are not limited to ghost authorship, gift authorship, duplicate publication, inadequate record keeping as outlined by award stipulations, and failure to disclose conflicts of interest.
Recklessly	To propose, perform, or review research, or report research results, with indifference to a known risk of fabrication, falsification, or plagiarism.
Research	Includes all creative activity that supports the intellectual endeavors of the University of North Dakota.
Research Misconduct	Fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. For purposes of this policy, it also includes questionable research practices. Research misconduct does not include honest error or difference of opinion.
Respondent	The individual against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.
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 good faith allegation of research misconduct or good faith cooperation with a research misconduct proceeding.
Witness	A person who has special knowledge relative to the allegation and may be called during the inquiry or investigation.

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PRINCIPLES

General Provisions

The integrity of the research process is an essential aspect of a university's intellectual and social structure. Although incidents of research misconduct are rare, those that do occur threaten the entire research enterprise.

The integrity of the research must depend largely upon self-regulation. All members of the University community, including all faculty, staff, administrators, and students, both full and part time, who are affiliated with the University, share responsibility for following the implemented standards to assure ethical conduct in research, integrating these standards into their own work and reporting any abuse of the standards by others. This policy formalizes the rights and responsibilities of the University and University community in conducting research. The University is responsible for promoting practices that prevent misconduct and for developing policies and procedures for dealing with allegations of research misconduct.

It is important to create an atmosphere that encourages openness and creativity. It is particularly important to distinguish research misconduct from the honest error and the ambiguities of interpretation that are inherent in the research process. The following procedures apply to faculty, staff and, in certain circumstances, students.

Conduct that is reported or reviewed under this policy may also implicate other University policies, procedures, or regulatory requirements (e.g., Conflicts of Interest in Research policy; the Employee Responsibility and Activities: Theft, Fraud, Abuse and Waste policy; University Code of Conduct; and SBHE Policy 611.8, Research on Human Subjects) (see Related Information). When an allegation also falls within one of these, the integrity officer will, as appropriate, coordinate with other responsible offices, officials, and/or boards (e.g., Institutional Review Board) to determine whether separate review or action is required. A review under another University or regulator process does not preclude review under this policy when the alleged conduct may constitute research misconduct. Conduct that does not meet the definition of research misconduct may nevertheless constitute noncompliance with other University or regulatory requirements.

The primary way to encourage appropriate conduct in research at the University is for the University community to promote and maintain a climate consistent with ethical standards. To reduce the likelihood of research misconduct and promote high-quality research, the University community should promote and facilitate the following:

- **Commitment to Intellectual Honesty**. This commitment to intellectual honesty is evidenced by adherence to standards of the discipline and the University including but not limited to, submission of work to peer review; avoidance of conflicts of interest, fraud, and bias; scholarly exchange of ideas and data; and self-regulation.
- **Responsibility of Research Supervisor**. Supervisors of research should serve as mentors in conveying the ethics and responsibilities underlying research. Mentoring relationships between academic leaders and new practitioners should serve to enhance the transmission of ethical standards.
- **Appropriate Assignment of Credit and Responsibility**. Authors or creators should recognize the contributions of others through adequate citation and/or acknowledgment. They should

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also name as authors or creators only those who have had a genuine role in the research and who accept responsibility for the quality of the work being reported or presented.

General Guidance

The following principles guide the review of allegations of research misconduct at UND.

- The process must avoid damage to research.
- The University will provide leadership in the pursuit and resolution of charges. Members of the University community will cooperate with the integrity officer in the review of allegations and the conduct of inquiries and investigations. Members of the University community, including respondents, have an obligation to provide evidence relevant to research misconduct allegations to the integrity officer or other institutional officials.
- Process will be provided to all parties under UND and State Board of Higher Education (SBHE) policies and procedures. All parties will be fairly treated and their reputations guarded by providing confidentiality to the extent possible under UND and SBHE policies and procedures, applicable state and federal requirements, and the North Dakota Open Records Act (see NDCC 44-04-18 in Related Information). While conducting a research misconduct proceeding, disclosure of the identities of the parties will be limited, to the extent possible, to those who need to know as determined by the University. Those who need to know may include the Office of Research Integrity (ORI) or other state or federal funding agencies, institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions, or individuals formally retained by the University to assist with a proceeding. This limitation on disclosure of the identity of parties no longer applies once the University has made a final determination of research misconduct findings.
- Conflicts of interest will be avoided.
- Allegations will be resolved as expeditiously as possible.
- The University will document its actions at each stage of the process.
- The University will pursue allegations within the scope of this policy without regard to whether related civil or criminal proceedings have been initiated. The University may, at its option, suspend the inquiry/investigation temporarily, but is not under obligation to do so, as the standards of the University may differ from those of the courts.
- To the extent feasible and reasonable, the University will pursue the allegation of research misconduct to its conclusion, even if the respondent leaves or has left the University before the matter is resolved. If the respondent refuses to participate in the process after resignation, the University will use its best efforts to reach a conclusion concerning the allegations, noting in the report the respondent's failure to cooperate and its effect on the conclusion.
- The University will not permit retaliation in any form against complainants, witnesses, or committee members. Individuals should immediately report any alleged or apparent retaliation against complainants, witnesses, or committee members to the integrity officer, who must review the matter and, as necessary, make all reasonable and practical efforts to counter any potential or actual retaliation, and protect and restore the position and reputation of the person against whom retaliation is directed. This provision is intended to be consistent with, and at least as protective as, SBHE Policy 308.2 and University Code of Conduct (see Related Information).
- A finding of research misconduct requires that (1) there be a significant departure from

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accepted practices of the relevant research community, (2) the misconduct be committed intentionally, knowingly, or recklessly, and (3) the allegation be proved by a preponderance of the evidence.

Allegations Involving Students

Allegations involving students should be reported to the integrity officer who will make the decision as to whether the complaint should be handled in accordance with this policy or the procedures as stipulated in the Code of Student Life and/or other applicable University policies or procedures (see Related Information). If the decision is to proceed utilizing the Code of Student Life and/or other University policies or procedures, the allegation will be forwarded to the appropriate administrator.

Reporting Allegations of Research Misconduct

Allegations or evidence of possible research misconduct should be reported promptly to the integrity officer. Employees are also required to report suspected violations under SBHE Policy 308.2 and the University Code of Conduct (see Related Information). Allegations of research misconduct that are received through another channel, such as a supervisor, Human Resources, Academic Affairs, the Office of General Counsel, or the NDUS compliance and ethics hotline, will be promptly forwarded to the integrity officer.

Reports may be made orally or in writing and may come to the University through any means of communication. Individuals who are uncertain whether information should be reported should consult with the integrity officer or vice president for research and economic development (VPRED) for guidance. Nothing in this section prevents an individual from reporting an allegation directly to ORI or another appropriate federal agency when permitted by applicable law or regulation.

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Integrity Officer

The University will designate an integrity officer responsible for administering this policy and coordinating the University's response to allegations of research misconduct. In fulfilling the responsibilities of this policy, the integrity officer may consult with and obtain assistance from other appropriate University officials, legal counsel, subject matter experts, or external consultants when necessary and appropriate. Individuals consulted must maintain confidentiality as required by this policy and must not have an unresolved personal, professional, or financial conflict of interest that could affect the proceeding. If the integrity officer has a conflict of interest, is unavailable, or if other circumstances make it inappropriate for the integrity officer to perform a responsibility assigned under this policy, the University may designate another qualified individual to perform the responsibility or to serve as the integrity officer for the matter.

PROCEDURES

Pre-inquiry Assessment

Pre-inquiry Review by the Integrity Officer

Upon receipt by the integrity officer of an allegation of research misconduct, the integrity officer will promptly conduct a pre-inquiry review of the allegation to determine whether the allegation falls within the scope of this policy and warrants further review. As part of the review, the integrity officer will determine whether (1) the allegation is sufficiently credible and specific to permit further review; (2) the alleged conduct, if true, falls within the scope of this policy. As part of the pre-inquiry assessment, the integrity officer will verify with the VPRED or designee whether any federal, state, private, or other funding is related to the allegations.

If the integrity officer determines that criteria for an inquiry are met, the inquiry process will be initiated. On or before the date the respondent is notified, the integrity officer must take all reasonable and practical steps to obtain custody of all research records and evidence needed to conduct the research misconduct proceeding. In consultation with UND's general counsel, the integrity officer will determine whether a litigation or preservation hold should be issued under the Litigation and Preservation Hold Procedure (see Related Information), particularly where litigation, a grievance, a hearing, or a federal agency review is reasonably anticipated.

If the integrity officer determines that an inquiry is not warranted, the integrity officer will prepare an internal memorandum-for-file including a statement of the allegation and the rationale for not conducting an inquiry. After the resolution of the allegation of research misconduct this memorandum will be kept secure for seven years from the date of determination. Conduct that does not meet the definition of research misconduct may nevertheless raise concerns under other University policies, professional standards, sponsor requirements, or federal or state laws and regulations. When appropriate, the integrity officer may refer the matter to another University office or process. Such matters may be reviewed separately from, or when appropriate concurrently with, proceedings under this policy.

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Notification to Respondent

Within five days of the determination that an inquiry is warranted, the integrity officer will identify a proposed inquirer, who must have appropriate experience and expertise to evaluate the allegations and must not have an unresolved personal, professional, or financial conflict of interest with the respondent, complainant, or research at issue. In identifying an inquirer, consideration should be given to the respondent's position, the nature of the research at issue, and the expertise necessary to evaluate the allegations.

After a proposed inquirer is identified, the integrity officer will notify (notification #1) the respondent, the appropriate vice president or senior administrator, the VPRED, general counsel, and appropriate dean(s) or supervisor(s) of the allegation. The notification must include a copy of these procedures and the name of the proposed inquirer with a request to identify any real or potential conflict of interest between the proposed inquirer and the parties involved in the allegation.

If the inquiry subsequently identifies additional respondents, the integrity officer will formally notify each new respondent, and they will be given the opportunity to respond to the allegations. Identification of a new respondent does not require the integrity officer to begin a new process if the integrity officer

determines the allegations to be sufficiently related.

Interim Measures During Research Misconduct Proceedings

Interim measures may be imposed when necessary to protect the integrity of the research process, preserve evidence, safeguard research participants, prevent ongoing harm, or maintain the orderly functioning of the University during a research misconduct proceeding. These measures are not disciplinary in nature and do not represent a presumption of responsibility. They are temporary actions designed to ensure the research misconduct process can proceed fairly, comprehensively, and without interference.

The integrity officer, in consultation with relevant University official(s), may enact interim measures at any stage of a research misconduct proceeding when such measures are reasonably necessary under the circumstances.

Interim measures may include, but are not limited to:

- Restrictions on research activities, including supervision requirements, temporary suspension of certain data collection activities, or limitations on access to research laboratories, equipment, or data.
- Modification to roles or responsibilities, such as temporary reassignment of duties involving research oversight, student advising, or lab management, or administrative leave.
- Notification to external sponsors or regulatory bodies, as required by federal regulations, sponsor agreements, or applicable law.
- Temporary pause of related University processes if the respondent is participating in any University process or review that may involve the research at issue, or if a potential finding of research misconduct could reasonably affect the validity, completeness, or integrity of the associated process. Examples of University processes include, but are not limited to, pending applications for internal or external funding, dissertation defenses, and promotion, tenure, and evaluation processes.

Interim measures will remain in effect only for as long as necessary and will be reviewed periodically by the integrity officer. Respondents may request reconsideration or modification of interim measures by submitting a written request to the integrity officer explaining the basis for the change. The integrity officer will consider such requests promptly and will adjust interim measures when appropriate based on new information, changed circumstances, or the progression of the research misconduct proceeding.

Inquiry Phase

Purpose

In the inquiry phase, factual information will be gathered and expeditiously reviewed by the inquirer to determine whether the allegation warrants an investigation. The inquiry phase is designed to separate allegations deserving of further investigation from frivolous, malicious, unjustified, or clearly mistaken allegations. An inquiry does not require a full review of all evidence related to the allegation.

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Process and Structure

The integrity officer will provide the inquirer and the respondent with copies of all relevant documents. During the inquiry, the integrity officer and the inquirer will be responsible for maintaining the confidentiality of the information obtained and the security of relevant documents.

Responsibilities of the Inquirer

Records of the inquiry are to be stored securely throughout the inquiry and, at the end of the inquiry, transferred to the integrity officer.

The inquiry will begin as a paper review based on documentation received by the integrity officer and questions submitted by inquirer to the respondent or other witnesses, if necessary, for clarification. After reviewing all documentation including the written response to any questions asked, the inquirer may determine that follow-up interviews are necessary to complete the inquiry. If there is a need for interviews, the interviews will be recorded and, upon request, made available to the respondent after the completion of the disposition phase. Interviewees are expected to speak for themselves but may be accompanied by a support person. If the support person is serving as legal counsel for the interviewee, the University's Office of General Counsel must be notified in advance and must be present during the interview.

Information, expert opinions, records, and other pertinent information may be requested by the inquirer. All involved individuals are expected to cooperate with the inquirer by supplying such requested documents and information. A 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.

The inquiry will be completed within 50 days of its initiation. If the inquirer determines that circumstances clearly warrant an extension of time, a request for such an extension must be forwarded to the integrity officer. If the integrity officer grants the request, the inquirer will notify all relevant parties of the extension, including the VPRED. The record of the inquiry will include the rationale for exceeding the 50-day period.

The scope of the inquiry is not required to and does not normally include deciding whether research misconduct definitely occurred, determining who committed the research misconduct, or conducting exhaustive interviews and analyses.

Inquiry Findings

The completion of an inquiry is marked by a determination of whether an investigation is warranted. The inquirer will not determine if research misconduct occurred, nor assess whether the alleged research misconduct was intentional, knowing, or reckless; such a determination is not made until the case proceeds to an investigation, unless there is a legally sufficient admission of research misconduct as explained in the Completion of Cases section below.

At the conclusion of the inquiry, regardless of whether an investigation is warranted, the inquirer will prepare a written inquiry report. The report of the inquirer will specify the information that was reviewed,

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summarize relevant interviews, and include a recommendation to the integrity officer as to whether an investigation is warranted. If there is potential evidence of honest error or difference of opinion, the inquirer must note this in the inquiry report.

The report of the inquirer will be conveyed in writing to the integrity officer who will be responsible for communicating the findings to the respondent within 10 days of receipt of the report. The same report will be sent to the individuals notified of the inquiry. The respondent will be given the opportunity to comment in writing (notification #2) upon the findings and recommendations of the inquirer. If the respondent chooses to comment, such comments will be forwarded to the integrity officer as soon as possible but no later than 20 days from the date of notification of the inquiry report by the integrity officer. The respondent's comments will become part of the inquiry record. Within 20 days of receiving the comments from the respondent, the integrity officer will determine whether to proceed with an investigation.

If the integrity officer determines that an investigation is warranted, the integrity officer will initiate the investigation phase. Prior to notifying the respondent of the allegations, the integrity officer will take all reasonable and practical steps to obtain custody of, inventory and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceeding that were not previously sequestered during the inquiry. On or before the date on which the investigation phase begins, the integrity officer, in consultation with the VPRED and other applicable senior administrator(s), must:

1. Notify any sponsoring agency or funding source, including ORI, if appropriate, and
2. Notify the respondent in writing of the allegations to be investigated and provide the respondent with both a copy of the inquiry report and links to applicable regulations and policies.

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The integrity officer must also give the respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of investigation.

If the integrity officer determines that an investigation is unnecessary, the integrity officer will prepare an internal memorandum-for-file including a statement of the allegation and rationale for not investigating. This memorandum concludes the allegation of research misconduct and will be kept secure for seven years after the determination. A copy will be given to the individuals notified of the inquiry. The integrity officer, in consultation with the VPRED and other senior administrator(s), will inform all federal or state agencies, sponsors, or other external entities initially informed of the inquiry that the allegations of research misconduct were not supported.

Issues Unrelated to the Inquiry

If, in the course of the inquiry, the inquirer or integrity officer finds an issue unrelated to the inquiry or outside the purview of this policy, the integrity officer will send a separate letter to the administrator(s) who has the authority to act on the information, if necessary. Unrelated issues should not be contained in the official inquiry report nor should the letter to the administrator(s) reveal the subject matter of the inquiry or the parties involved.

Investigation Phase

Initiation and Purpose

The investigation is initiated when the integrity officer notifies the respondent in writing of the allegations to be investigated. The investigation must begin within 30 days after the determination by the integrity officer that an investigation is warranted. The purpose of the investigation is to develop a factual record by exploring the allegations in detail and examining the evidence in depth, leading to recommended findings on whether research misconduct has been committed, by whom, and to what extent.

Appointment of Investigation Committee

The integrity officer will consult with the chair of the University Senate to appoint a committee of investigation (CoI) as soon after the beginning of the investigation as is practical. The CoI must consist of three individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the investigation and should include individuals with the appropriate scientific expertise to evaluate the evidence and issues related to the allegation(s), interview the parties, and conduct the investigation. Committee members should be selected to provide an appropriate balance of relevant research or scholarly expertise and knowledge of applicable institutional standards and practices. At least one member should hold a position reasonably comparable to that of the respondent. When the respondent is a faculty member, the committee should ordinarily include tenured faculty members at or above the respondent's rank. When the respondent is not a faculty member, the committee should include members with appropriate knowledge of the respondent's professional role, responsibilities, and applicable standards. The third member may be appointed from outside the University community, if, in the judgment of the integrity officer, the circumstances justify such an appointment.

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Before the CoI is formally convened, the integrity officer will notify (notification #3) all parties in writing of the purpose of the investigation and the procedures that will be used in the investigation. Further, the parties will be informed of the proposed membership of the CoI for the purpose of identifying, in advance, any conflicts of interest.

Charge to the Committee and the First Meeting

The integrity officer will define the subject matter of the investigation in a written charge to the committee. The integrity officer will convene the first meeting of the CoI to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. Prior to or during the meeting, the CoI will be provided with copies of all pertinent documents in the possession of the integrity officer and a copy of this policy and procedures. The CoI will elect a chairperson to oversee procedural and administrative matters. All CoI members will be voting members.

Time for Completion

Every effort will be made to complete the investigation within 120 days. If the CoI determines that circumstances clearly warrant an extension of time, a request for such an extension must be forwarded to the integrity officer. If the integrity officer grants the request, the CoI will notify all relevant parties of

the extension, along with a rationale for the extension.

The integrity officer will convey any affected funding agency such information about the investigation as may be required by the funding agency, and will keep the funding agency up to date at intervals as required by the agency.

Investigation Process

During the investigation, the CoI must:

- Use diligent efforts to ensure that 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 each allegation.
- Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent possible, including participation of experts with appropriate expertise.
- 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, if determined relevant by the CoI. All parties will cooperate by producing any additional data requested by the CoI.
    - Individuals who are interviewed may have one support person accompany them to interviews with the CoI. The support person may not present information to the CoI or answer questions on behalf of the interviewee. If the support person is serving as legal counsel, the individual must identify the integrity officer in advance. The integrity officer will notify the University's Office of General Counsel who must be present during the interview.
    - All interviews during the investigation must be recorded and transcribed. Any exhibits shown to the interviewee during the interview must be numbered and referred to by that number in the interview. After each interview, the transcript must be made available to the relevant interviewee for comment or revision. The transcript with any corrections and numbered exhibits must be included in the institutional record of the investigation.
    - If an individual declines to participate in an interview, is unavailable, or otherwise fails to cooperate, the CoI will make reasonable efforts to obtain the individual's participation and document those efforts. When an interview cannot be obtained despite reasonable efforts, the CoI must document the circumstances surrounding the individual's nonparticipation and any resulting limitations on the investigation.
- Pursue diligently all significant issues and leads discovered that are relevant to the investigation, including any evidence of additional instances of possible research misconduct (by the respondent or additional respondents), and continue the investigation to completion.
- Report all significant developments during the investigation to the integrity officer. The integrity officer will report to any affected funding agency, sponsor, or UND official, if appropriate.

The respondent has the opportunity to address the charges and information in detail during their interview and in writing at the end of the process.

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The Investigation Report

Elements of the Investigation Report

After all information has been received and fact-finding interviews have been completed, the CoI will deliberate and prepare a written draft report of the investigation that includes:

- Description of the nature of the allegation(s) of research misconduct, including any additional allegation(s) addressed during the research misconduct proceeding.
- Description and documentation of federal or state support, including grant numbers, grant applications, contracts, and publications listing federal or state support. This should include known applications or proposals for support that the respondent has pending with state or federal agencies.
- Description of the specific allegation(s) of research misconduct for consideration in the investigation of the respondent.
- Composition of the CoI, including names, positions, and subject matter expertise.
- A reference to these policies and procedures.
- Identification and summary of the research records and evidence reviewed, and any evidence taken into custody but not reviewed.
- Transcripts of all interviews conducted (attached as exhibits to the report).
- A statement of findings for each allegation of research misconduct identified during the investigation. Each statement of findings must provide a finding as to whether research misconduct did or did not occur. For each instance of research misconduct that did occur:
    - Identify the person(s) responsible;
    - Summarize the facts and the analysis that support the conclusion, including individuals interviewed and documents reviewed. This should also consider the merits of any reasonable explanation of the respondent, including any effort by respondent to establish by a preponderance of the evidence that they did not engage in research misconduct because of honest error or a difference of opinion;
    - Identify the specific federal or state support, if applicable;
    - Identify whether any publications need correction or retraction;
    - List any current support or known applications or proposals for support that the respondent has pending with all federal or state agencies.
- If the CoI does not recommend a finding of research misconduct for an allegation, the investigation report will provide a detailed rationale for its conclusion.

Comments on the Draft Report and Access to Evidence

Upon completion of the draft report, the CoI will submit the draft report to the integrity officer. The integrity officer will give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to, the evidence upon which the report is based (notification #4). The respondent will be allowed 30 days from the date they receive the draft report to

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submit comments to the integrity officer. The respondent's comments must be included in and considered in the final report.

Finalizing the Report

The integrity officer will assist the CoI in finalizing the draft investigation report, including ensuring that the respondent's comments are included and considered, and transmit the final investigation report to the deciding official and VPRED.

Upon request, the integrity officer, in consultation with the VPRED and other applicable senior administrator(s), will maintain and provide to the ORI, or other federal or state agencies, all relevant sources of information and records of the institution's research misconduct proceeding.

Issues Unrelated to the Investigation

If, during its investigation, the CoI finds an issue unrelated to the investigation, the CoI will inform the integrity officer, who may send a separate notification to the administrator(s) who has authority to act on the information. This unrelated issue should not be contained in the official findings, nor should the letter to the administrator reveal the subject matter of the investigation or the parties involved.

Disposition Phase

Decision by the Deciding Official

The deciding official will, in consultation with the VPRED, consider the recommendations and findings of the CoI in the investigation report and will be responsible for determining in writing whether the University accepts the investigation report and its findings.

If the determination varies from the findings of the CoI, the deciding official will, as part of their written determination, explain in detail the basis for rendering a decision different from the findings of the CoI. Alternatively, the deciding official may return the report to the CoI with a request for further fact-finding or analysis.

If no research misconduct is found:

- Within 10 days after the final decision on the case has been made, the deciding official will inform the respondent, complainant, and the appropriate dean(s) that the allegations of research misconduct were not supported.
- The integrity officer, in consultation with the VPRED and other applicable senior administrator(s), will inform all federal or state agencies, sponsors, or other external entities initially informed of the investigation that the allegations were not supported.
- In determining whether to publicize the findings, the University will be guided by whether public announcements will be harmful or beneficial in restoring any reputation(s) that may have been damaged. The respondent's wishes will be taken into consideration when making publicity decisions.
- If the allegations are deemed to have been maliciously motivated, the integrity officer will report those findings to the deciding official, and a decision will be made whether to refer that

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finding for further investigation.

If research misconduct is found:

- Within 10 days after the final decision on the case has been made, the deciding official will inform the respondent, the VPRED, and appropriate University personnel, in writing, of the recommended responses. A copy of the report will accompany the decision.
- The University must respond in ways that are appropriate to the seriousness of the research misconduct. This includes, but is not limited to, one or more of the following:
    - Letter of reprimand.
    - Required training.
    - Removal from particular project.
    - Special monitoring of future work.
    - Probation for a specified period with conditions.
    - Suspension of rights and responsibilities for a specified period, with or without salary.
    - Financial restitution.
    - Demotion.
    - Termination of employment/enrollment.
- The integrity officer, in consultation with the VPRED and applicable senior administrator(s), is responsible for notification of all federal or state agencies, sponsors, or other entities initially informed of the investigation's outcome. Consideration should be given to formal notification of:
    - Sponsoring agencies, funding sources.
    - Co-authors, co-investigators, collaborators, departments.
    - Editors of journals in which fraudulent research was published.
    - State professional licensing boards.
    - Editors of journals or other publications, other institutions, sponsoring agencies, and funding sources with which the individual has been affiliated.
    - Professional Societies.

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Responses affecting employment or enrollment will be imposed in accordance with applicable SBHE and University policies and procedures.

Appeals

Respondents may appeal the response imposed by the University after a finding of research misconduct according to existing University and SBHE policies and procedures.

The integrity officer, in consultation with the VPRED and applicable senior administrator(s) must promptly notify all federal or state agencies, sponsors or other entities initially informed of the investigation's outcome if the respondent appeals. In considering the grounds for the institution's action, the body considering the appeal will not substitute its own judgment for that of the deciding official in

deciding that research misconduct occurred.

Completion of Cases

Research misconduct proceedings will ordinarily be carried through to completion in accordance with this policy. The University will diligently pursue significant issues and credible allegations of research misconduct that arise during the proceeding, including additional allegations or evidence that may warrant further review. A proceeding may conclude when the applicable requirements of this policy have been satisfied, including when the University determines at the assessment or inquiry stage that the criteria for proceeding to the next stage have not been met, or when the investigation or any applicable institutional review or appeal have been completed.

For matters subject to 42 CFR Part 93, the University will comply with applicable requirements for notification to and consultation with ORI, transmittal of the institutional record, and closure of the proceedings.

Respondent Admissions

The integrity officer will document respondent admissions, and if required, promptly notify ORI or other applicable regulatory body in advance if at any point during the proceeding (including the assessment, inquiry, investigation, or appeal stage) it plans to close a research misconduct case because the respondent has admitted to committing research misconduct or a settlement with the respondent has been reached.

If a respondent admits to research misconduct, the integrity officer will not close the case until it receives the respondent's signed, written admission and the admission is determined complete. The admission must state the specific research misconduct that occurred, which research records were affected, and that it constituted a significant departure from accepted practices of the relevant research community.

Maintaining Records

After the resolution of the allegation of research misconduct, all records created and relied upon during the proceeding will be maintained by the integrity officer. This includes the decision of the deciding official, the complete record of any appeal, and interview transcripts. Unless custody has been transferred to HHS or ORI 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 or the completion of any PHS or other federal or state proceeding involving the research misconduct allegation. The integrity officer is responsible for providing any information, documentation, research records, evidence, or clarification requested by ORI, or other federal or state agencies, to carry out its review of an allegation of research misconduct or of the institution's handling of such an allegation.

Records are maintained in accordance with the University Records Retention Schedule and any applicable litigation or preservation hold (see Related Information).

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RESPONSIBILITIES

All University employees and individuals made aware of an allegation of research misconduct	• Report allegations of research misconduct to the integrity officer
Integrity Officer	• Collect, advise, investigate, and monitor allegations of research misconduct
Deciding Official	• Determine and implement any University responses to findings of research misconduct

RELATED INFORMATION

- 42 CFR Part 93 - Public Health Service Policies on Research Misconduct
- 42 CFR 93.315 - Institutional Appeals
- NDCC 44-04-18 - Access to public records – Electronically stored information
- NDUS HR Policy 25 - Job Discipline/Dismissal
- NDUS HR Policy 27 - Appeal Procedures
- NDUS HR Policy 28 - Grievance Procedures
- SBHE Policy 308.2 - Required Reports of Violations; Reprisal or Retaliation Prohibited
- SBHE Policy 308.4 - Conflict of Interest
- SBHE Policy 311 - Public Records
- SBHE Policy 410 - Responsible Conduct of Research
- SBHE Policy 605.3 - Nonrenewal, Termination or Dismissal of Faculty
- SBHE Policy 605.4 - Hearings and Appeals
- SBHE Policy 611.8 - Employee Responsibility and Activities: Research on Human Subjects
- SBHE Policy 612 - Faculty Grievances
- UND Code of Conduct
- UND Code of Student Life
- UND Faculty Handbook
- UND Policy - Conflicts of Interest in Research
- UND Policy - Employee Responsibility and Activities: Theft, Fraud, Abuse and Waste
- UND Procedure - Litigation and Preservation Hold
- UND Records Retention Schedule
- UND Staff Handbook

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FORMS

There are no forms associated with this policy.

APPENDICES

There are no appendices associated with this document.

Approval Signatures

Step Description	Approver	Date
Campus Comment	Jennifer Rogers: Director of University Policy	Pending
Executive Council (1st Reading)	Jennifer Rogers: Director of University Policy	11/2026
Policy Advisory Group	Jennifer Rogers: Director of University Policy	10/2026
Policy Office	Jennifer Rogers: Director of University Policy	10/2026
Policy Owner	Heather Wages: Dir of Policy & Admin, AA/VPAA PAG Liaison	10/2026