

Procedures for Responding to Allegations of Research Misconduct

Responsible Unit: Research Integrity Program

E-mail: rio@arizona.edu

Last Revised Date: January 2026

A. Introduction

These procedures specify how allegations of Research Misconduct will be handled by the University pursuant to the Responding to Allegations of Research Misconduct Policy.

In certain cases where the interests of the University are implicated, the Senior Vice President for Research and Innovation (SVPRI) or the Provost and Chief Academic Officer may apply these Procedures as a mechanism for reviewing allegations of improper conduct which may not meet the definition of Research Misconduct. Examples include, without limitation, allegations of: persistent non-compliance with sponsor and university policies, and implications of federal policies in research.

B. Definitions

Capitalized terms used but not defined in these procedures shall have the meanings assigned in the Policy.

Accepted Practices of the Relevant Research Community means those practices established by 42 CFR Part 93 and by PHS funding components, as well as commonly accepted professional codes or norms within the overarching community of researchers and institutions that apply for and receive PHS awards.ⁱ

Administrative Record means the institutional record; any information provided by the respondent to ORI, including but not limited to the transcript of any virtual or in-person meetings under § 93.403(b) between the respondent and ORI, and correspondence between the respondent and ORI; any additional information provided to ORI while the case is pending before ORI; and any analysis or additional information generated or obtained by ORI. Any analysis or additional information generated or obtained by ORI will also be made available to the respondent.ⁱⁱ **Conflict of Interest** means the real or apparent interference of one person's interest with the interests of another person, where potential bias may occur due to prior or existing personal, professional, or financial relationships. Generally, differences of professional opinion held in good faith and without prospect of financial gain should not be construed as a Conflict of Interest.

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

Institutional Record means (a) The records that the institution compiled or generated during the research misconduct proceeding, except records the institution did not consider or rely on. These records include but are not limited to (1) documentation of the assessment as required by § 93.306(c); (2) if an inquiry is conducted, the inquiry report and all records (other than drafts of the report) considered or relied on during the inquiry, including, but not limited to, research records and the transcripts of any transcribed interviews conducted during the inquiry, information the respondent provided to the institution, and the documentation of any decision not to investigate as required by § 93.309(c); (3) if an investigation is conducted, the investigation report and all records (other than drafts of the report) considered or relied on during the investigation, including, but not limited to, research records, the transcripts of each interview conducted pursuant to § 93.310(g), and information the respondent provided to the institution; (4) decision(s) by the Institutional Deciding Official, such as the written decision from the Institutional Deciding Official under § 93.314; (5) the complete record of any institutional appeal consistent with § 93.315; (b) a single index listing all the research records and evidence that the institution compiled during the research misconduct proceeding, except records the institution did not consider or rely on; and (c) a general description of the records that were sequestered but not considered or relied on.^{iv}

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.^v

Research Integrity Officer (RIO) means the institutional official responsible for administering the institution's written policies and procedures for addressing allegations of research misconduct in compliance with the PHS regulation.^{vi} **Sequestration** means steps taken by the RIO on behalf of the University to: (1) obtain custody of the Research Record and evidence needed to conduct the Research Misconduct proceeding; (2) inventory the records; (3) preserve the records in a secure manner; and (4) maintain the records as required by law and policy.

C. General Responsibilities

1. The RIO will:
 - a. Upon receiving an allegation of research misconduct, the RIO or another designated institutional official will promptly assess the allegation to determine whether the allegation (a) is within the definition of research misconduct under the PHS regulation, (b) is within the applicability criteria of the regulation at § 93.102, and (c) is sufficiently credible and specific so that potential evidence of research misconduct may be identified.^{vii}
 - 1) If the RIO determines that the requirements for an inquiry are met, they shall document the assessment, promptly sequester all research records and other evidence per the PHS regulation, and promptly initiate the inquiry.^{viii}
 - 2) If the RIO determines that requirements for an inquiry are not met, they will keep sufficiently detailed documentation of the assessment to permit a later review by ORI of the reasons why an inquiry was not conducted.^{ix} The institution will keep this documentation and related records in a secure manner for seven years and provide them to ORI upon request.^x

- b. Provide impartial assistance to Complainants, Respondents, and witnesses.
 - c. Provide training, technical assistance, advice, and logistical support to members of the Panel and Committee and other personnel concerning their responsibilities under the Policy and these procedures.
 - d. Sequester additional Research Records as necessary at any point during the Research Misconduct proceedings.
 - e. Notify Sponsors of Research Misconduct proceedings as required by applicable regulations and guidelines.
 - f. Provide training to the University community on the content of this Policy and the expectations of the University for integrity in Research, scholarship, and creative endeavors.
 - g. Ensure all aspects of the Policy and these procedures are carried out consistently, fairly and in accordance with federal regulations, when applicable.
 - h. Maintain current knowledge of applicable Research integrity standards and practices, as well as for implementing (or causing to be implemented) any such standards or practices required by governmental or external Sponsors.
 - i. In cases where the RIO has a Conflict of Interest with respect to a given allegation of Research Misconduct, refer the Complainant to the Deciding Official (DO), who will appoint a substitute to carry out the RIO's duties with respect to that allegation.
 - m. Request the DO to appoint a University official with the appropriate level of clearance to serve in the role of substitute RIO, in the event that an allegation of Research Misconduct concerns classified Research, and the RIO does not have the necessary clearance to review evidence. In such cases, the substitute RIO will carry out the RIO's duties prescribed in this Policy with respect to the allegation of Research Misconduct.
2. The DO, as designated by the University President, is the Senior Vice President for Research and Partnerships, unless the University President designates otherwise. The DO will:
- a. Provide general oversight regarding the consistent and fair application of the Policy and these procedures and the RIO's fulfillment of their duties as described above; and
 - b. After an Investigation or in the event that a Respondent admits in writing to have committed Research Misconduct, make a final determination in writing on behalf of the University that includes whether research misconduct occurred, and if so, what kind and who committed it, and a description of the relevant actions the UA has or will take. The DO's written decision becomes part of the institutional record.

3. The Complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with all stages of a Research Misconduct proceeding. The Complainant:
 - a. May submit allegations of Research Misconduct to the RIO by any means of communication.
 - b. May submit evidence at any stage of the Research Misconduct Proceeding.
 - c. If requested appear for an interview.
 - d. Will be given the opportunity to be interviewed by and present evidence to the Committee during an Investigation.
 - e. If the RIO, Panel, or Committee determines the Complainant may be able to provide pertinent information or clarification to any portion of the draft Inquiry or Investigation report, these portions may be given to the Complainant for comment.
 - f. Will be informed of the results of the Assessment, Inquiry and Investigation.
4. The Respondent is responsible for maintaining confidentiality and cooperating with all stages of a Research Misconduct proceeding. The Respondent:
 - a. Has the burden of going forward with and proving, by a preponderance of evidence, affirmative defenses raised.^{xi}
 - b. Is responsible for assisting the RIO with Sequestration of Research Records. The respondent's destruction of research records documenting the questioned research is evidence of research misconduct where a preponderance of evidence establishes that the respondent intentionally or knowingly destroyed records after being informed of the research misconduct allegations.^{xii} The respondent's failure to provide research records documenting the questioned research is evidence of research misconduct where the respondent claims to possess the records but refuses to provide them upon request.^{xiii}
 - c. Will be give the opportunity to be interviewed by and present evidence to the Committee.
 - d. Will not be present during the witnesses' interviews but will be provided a transcript of the interview after it takes place.^{xiv}
 - e. The respondent will have opportunities to (a) view and comment on the inquiry report, (b) view and comment on the investigation report, and (c) submit any comments on the draft investigation report within 30 days of receiving it.^{xv}

D. General Principles

1. Confidentiality

To the extent possible, consistent with these procedures, and as allowed by law, University policy, and ABOR Policy 6-912, disclosure of the identity of respondents, complainants, and witnesses while the institution is conducting the research misconduct proceedings is limited to those who need to know, which the institution will determine consistent with a thorough, competent, objective, and

fair research misconduct proceeding. Those who need to know may include institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions.^{xvi} This limitation on disclosure no longer applies once the institution has made a final determination of research misconduct findings.^{xvii}

The RIO, Panel, and Committee may request a recipient of confidential information to sign a confidentiality agreement. The RIO, Panel, and Committee may also require information that should not be copied or openly distributed to be accessed and viewed under supervision of the RIO.

2. Extensions and Approvals

- a. Should it be necessary to extend any deadline beyond what these procedures require, an extension may be granted for good cause. Extensions may be approved for the following circumstances:
 - 1) If additional time is needed to complete the initial Assessment, the RIO must submit a written request for an extension to the DO and cite the reasons for the request.
 - 2) During the Inquiry and Investigation stages, the requesting party must ask the RIO for an extension in writing, citing the reason for the request. The RIO will determine whether the request warrants approval.
 - 3) If the allegations concern funded Research, the RIO must also consult with the applicable Sponsor according to the Sponsor's guidelines regarding extensions.
- b. The RIO must document the reasons for requesting or granting any extension.

3. Multiple Respondents or additional allegations

- a. During a Research Misconduct proceeding, the University will pursue diligently all significant issues and leads discovered throughout the Assessment, Inquiry, and Investigation, including any evidence of additional allegations of possible Research Misconduct.
- b. During any phase of a Research Misconduct proceeding, additional allegations may arise that are related to an ongoing Inquiry or Investigation and justify broadening the scope beyond the initial complaint. If any new allegations arise, the RIO will assess them according to the specific and credible standard used during the Assessment. If the new allegations are deemed specific and credible, the RIO will notify the Respondent in writing of the decision to review the new allegations with a description of the allegations.
- c. In cases where a new specific and credible allegation is received related to an ongoing Inquiry or Investigation and it involves a new Respondent, the RIO will notify the new Respondent in writing of

the allegation and sequester additional data if necessary. Only allegations specific to a particular Respondent will be included in the notification.

- d. In cases where multiple institutions are involved in a research misconduct proceeding, one institution should be designed as the lead institution. All institutions will coordinate to participate in all proceedings and to share relevant materials, such as research records.

4. Legal Representation

- a. The Respondent, at their expense, may employ and be accompanied by legal counsel during any interviews or meetings with the Panel and Committee. The Respondent must notify the RIO in advance if they intend to be accompanied by legal counsel at any meeting that is part of the Research Misconduct proceedings. The Respondent's legal counsel is permitted to only advise the Respondent, and may not directly address the Panel, Committee, witnesses, or any other persons involved in the Research Misconduct proceedings.
- b. The University Office of the General Counsel (OGC) will advise the RIO, the Panel, and the Committee on procedural and legal matters. The Panel and Committee, through their respective chairs, may request permission from OGC to obtain independent counsel.

5. Informal Resolution and Admissions

- a. **Informal Resolutions.** If at any time the University concludes that allegations of Research Misconduct under this Policy may be resolved in a manner satisfactory to the University, the Sponsor (if any), and the Respondent, then the University may enter into an agreement in the form of an informal resolution. The informal resolution is subject to the approval of the DO, in consultation with the Provost. If the allegations concern scholarly, creative, or Research activities supported by a Sponsor, then the informal resolution may also be subject to the approval of the Sponsor or affiliated agency. In such instances, the informal resolution must address the interests of all affected parties.
- b. **Admissions.** If at any time a Respondent wishes to make an admission of Research Misconduct, they will work with the RIO to draft and sign a written statement specifying the affected research records and confirming the misconduct was falsification, fabrication, and/or plagiarism; which research records were affected; the misconduct was committed intentionally, knowingly, or recklessly; and it constituted a significant departure from accepted practices of the relevant research community.^{xviii} The written statement will include any corrective actions determined in consultation with the DO, department head and Dean.
- c. The institution will not close the case until providing the sponsor and ORI as applicable with the respondent's signed written admission. The institution must also describe how it determined that the

scope of the misconduct was fully addressed by the admission and confirmed the respondent's culpability.

6. Notification of Special Circumstances

Special Circumstances Concerning Federally Funded Research. The RIO, in consultation with the DO, will immediately notify the appropriate federal agency if there is reason to believe that (a) there is an immediate health or safety hazard; (b) there is an immediate need to protect federal resources; (c) the allegation of Research Misconduct involves a matter of public health (e.g., a clinical trial); (d) there is an indication of possible violation of criminal or civil law, which must be reported within 24 hours of obtaining the information; (e) there is an immediate need to protect the interests of the Complainant or of the Respondent, or any co-investigators or associates; (f) Research activities should be suspended; or (g) it is probable that the allegation is going to be publicly reported.

7. Restoration of Reputation and Protections Against Retaliation

- a. The University recognizes that, when making an allegation of Research Misconduct, or when such an allegation is made against a researcher, the reputation of both the Complainant and the Respondent may be negatively affected. Therefore, if requested and as appropriate, the University will undertake reasonable efforts to restore the reputations of persons alleged to have engaged in Research Misconduct but against whom no Finding of Research Misconduct is made.
- b. The University also will make reasonable efforts to protect the positions and reputations of (a) those persons who, in good faith, come forward with allegations; (b) witnesses who participate in the Research Misconduct proceedings; and (c) individuals who serve on the Panel and Committee. Furthermore, the University will make all reasonable efforts to counter potential or actual Retaliation against the persons identified in this paragraph for their role in the Research Misconduct proceedings.

E. Assessment

1. Receipt of Allegations

An assessment's purpose is to determine whether an allegation warrants an inquiry.^{xix} An assessment is intended to be a review of readily accessible information relevant to the allegation.^{xx}

Anyone may submit an allegation of Research Misconduct to the RIO by any means of communication. If an allegation is submitted to any University official or employee other than the RIO, that person is responsible for immediately forwarding the allegation to the RIO and keeping the contents of the allegation confidential. Regardless of how the allegations are initially communicated, the RIO will work with the Complainant to formalize the allegations in writing.

2. Anonymous Allegations

Individuals may contact the RIO at any time to ask questions about Research Misconduct or the Procedures for Handling Allegations of Research Misconduct without disclosing their names and without

making allegations. A Complainant that wishes to remain anonymous may submit allegations of Research Misconduct to the attention of the RIO through the University Compliance and Ethics Hotline. However, because of the inherent difficulty in investigating and resolving allegations from unidentified persons, the University encourages individuals to make only attributable allegations of Research Misconduct.

3. Conduct of the Assessment

- a. Upon receiving an allegation of research misconduct, the RIO will **promptly** determine whether the allegation (a) falls within the definition of research misconduct, (b) is within the applicability criteria of the Policy, and (c) is credible and specific enough to identify and sequester potential evidence.^{xxi}
- b. If the allegation does not constitute a possible violation of the Policy, then the RIO shall dismiss the matter without further Inquiry. If appropriate, the RIO may notify the Complainant and Respondent of this decision.
- c. If the allegation appears to raise issues other than Research Misconduct under the Policy, which other University offices could address more appropriately, then the RIO will refer the Complainant to those offices for consultation.

4. Assessment Documentation

- a. The RIO shall produce a written Assessment documenting the steps taken to evaluate each allegation and the RIO's rationale for their determination.
- b. The written Assessment will be retained per the Policy.

F. Inquiry

1. Purpose of the Inquiry

The purpose of the Inquiry is to conduct a preliminary review of the available evidence to determine whether each allegation of Research Misconduct warrants an Investigation. An Inquiry is warranted if the allegation (a) falls within the definition of research misconduct under 42 CFR Part 93, (b) is within the applicability criteria of § 93.102, and (c) is sufficiently credible and specific so that potential evidence of research misconduct may be identified.^{xxii} An Inquiry does not require a full review of all related evidence. It is not the purpose of the Inquiry to make a determination as to whether or not Research Misconduct occurred, nor assess whether the alleged misconduct was intentional, knowing, or reckless.

2. Notification of Respondent

- a. Upon determining that an allegation of Research Misconduct merits review by an Inquiry Panel, the RIO will make a good-faith effort to notify the Respondent in writing of:

- 1) The allegations of research misconduct raised against the Respondent(s),
 - 2) The relevant research records that have been sequestered; and
 - 3) An inquiry will be conducted to decide whether to proceed with an investigation.
- b. The RIO will also provide the Respondent with a copy of the Policy, the rights and responsibilities of the Respondent, the role of the Panel, and the Inquiry process.
- c. The DO and the Respondent's Dean and Department Head (or equivalent) will be copied on the notification letter.
- d. If the inquiry identifies additional allegations or respondents, the RIO will subsequently provide notification per these procedures.

3. Sequestration and Custody of the Research Record

- a. Either before or at the time the RIO notifies the Respondent of the allegations, the RIO will take all reasonable and practical steps to:
- 1) Obtain custody of the Research Record and other relevant evidence deemed necessary or advisable to conduct an Inquiry or Investigation contemplated under the Policy and these Procedures; and
 - 2) Inventory the sequestered Research Records and evidence; and
 - 3) Store the sequestered Research Records and evidence in a secure manner and in accordance with applicable University, state, and/or federal record retention policies. Whenever additional items become known or relevant to the inquiry or investigation the RIO will obtain, inventory, and securely sequester such evidence.
- b. If the Research Records or evidence encompass scientific instruments shared by a number of users, then custody may be limited to copies of the data or evidence on such instruments, if the copies of the data or evidence are substantially equivalent to the evidentiary value of the instruments. The Respondent is responsible for assisting the RIO with Sequestration of Research Records. If the Respondent is unwilling or unable to cooperate, the RIO will preserve the evidence without the Respondent's assistance. The RIO will note the Respondent's unwillingness or inability to cooperate and will also note any other impediments to constructing the record of the Inquiry or Investigation.
- c. The respondent's destruction of research records documenting the questioned research is evidence of research misconduct where a preponderance of evidence establishes that the respondent intentionally or knowingly destroyed records after being informed of the research misconduct allegations.^{xxiii}

- d. The Respondent's failure to provide relevant research records in a timely manner is evidence of research misconduct where the respondent claims to possess the records but refuses to provide them upon request.^{xxiv}
- e. The RIO will maintain all physical and electronic records and evidence in a secure environment for the duration of the Research Misconduct proceeding and for at least 7 years thereafter in accordance with federal regulations and state record retention requirements. The Respondent may request in writing that the RIO provide copies or give reasonably supervised access to the Research Records so that, if appropriate and possible, the Respondent may continue their scholarship or Research. The RIO will maintain files of all documents and evidence gathered in the course of any Assessment, Inquiry or Investigation, and will maintain the security and confidentiality of those files, to the extent permitted by law or required by the Sponsor, if applicable, and as necessary to protect the identity of human subjects.

4. Opportunity to Respond to Allegations

Within 14 calendar days of receiving notice of the allegation and the decision to proceed with an Inquiry from the RIO, the Respondent may provide the RIO with a detailed written response to the allegation. The response should address the substance of each allegation in detail, specifically referencing any Research Records that support the response in order to allow the Panel to understand the Respondent's position and the basis for it, and readily locate and consult the relevant portions of the Research Record. The Respondent shall provide any additional records that have not already been sequestered by the RIO.

5. Appointment of the Panel

- a. Upon completing the Assessment and determining that the allegation of Research Misconduct merits further inquiry, the RIO will request that the Chair of the University Committee on Ethics and Commitment (UCEC) appoint a Panel to conduct an Inquiry. In lieu of a committee, the institution may task the RIO or another designated institutional official to conduct the inquiry, provided this person utilizes subject matter experts as needed to assist in the inquiry.^{xxv}
- b. The UCEC Chair will appoint a Panel to be composed of the 3 UCEC members whose area of expertise is most relevant to the Research in question. In the event that a member of the UCEC does not have expertise in a discipline relevant to the Inquiry, then the UCEC Chair, in consultation with the RIO, may appoint, as a substitute, an ad hoc member to the Panel with such expertise.
- c. Panel members should not have bias or a conflict of interest related to the Respondents. The RIO will determine whether an actual bias or conflict of interest exists. If so, the RIO will replace the member with a qualified alternate.

6. Inquiry Timeline

The RIO must convene and charge the Panel at the conclusion of the Assessment and a determination that an Inquiry is warranted.

The Inquiry Panel must complete the inquiry within **90 days** of its convening unless circumstances warrant a longer period, in which it will sufficiently document the reasons for exceeding the time limit in the inquiry report.^{xxvi}

7. Inquiry Initiation and Charge

The RIO will ensure all committee members understand their roles and responsibilities, keep the identities of all individuals confidential, and conduct the proceedings in compliance with the Policy.

8. Roles and Responsibilities of the Panel

The Panel's roles and responsibilities consist of the following:

- a. Engage in preliminary fact-finding by conducting an initial review of the allegations, the available evidence, and the Respondent's written response to the allegations, if submitted.
- b. Conduct interviews with individuals who possess information relevant to the Inquiry, if appropriate and necessary to fulfill the purpose of the Inquiry.
- c. Pursue diligently and document all significant issues and leads discovered in the course of the Inquiry that are deemed relevant, including any evidence of additional instances of possible Research Misconduct, and continuing the Inquiry to completion.
- d. Keep thorough records, including written transcripts and/or audio recordings of any interviews conducted with Respondents, Complainants, and/or witnesses.
- e. Based on the available evidence, determine whether the allegation warrants an Investigation under the Policy if (a) there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct under 42 CFR Part 93 and involves PHS-supported biomedical or behavioral research, biomedical or behavioral; and (b) preliminary information-gathering and fact-finding from the inquiry indicates that the allegation may have substance.^{xxvii}
- f. Prepare a written report with assistance from the RIO, including findings and recommendations for an appropriate course of action.

9. Interview Documentation

All interviews conducted as part of the Inquiry must be recorded. Any recording method is acceptable so long as it allows for subsequent review and transcription of the contents of the interview. If, at the request of the Panel or any subsequent Committee convened in the matter, such recordings are transcribed and

used as evidence, then the transcription must be provided to the interviewee for correction. The corrected transcript of such interviews shall be included in the record of the Inquiry and Investigation, if one ensues.

10. Criteria Warranting an Investigation

An investigation is warranted if (a) there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct under the Policy; and (b) preliminary information-gathering and fact-finding from the inquiry indicates that the allegation may have substance.^{xxviii}

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

11. Documenting the Inquiry

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

- a. The names, professional aliases, and positions of the respondent and complainant(s).
- b. A description of the allegation(s) of research misconduct.
- c. Details about the PHS funding, including any grant numbers, grant applications, contracts, and publications listing PHS support.
- d. The composition of the inquiry committee, if used, including name(s), position(s), and subject matter expertise.
- e. An inventory of sequestered research records and other evidence and description of how sequestration was conducted.
- f. Transcripts of interviews, if transcribed.
- g. Inquiry timeline and procedural history. If the Inquiry takes longer than 90 days to complete, the report must document the reasons for exceeding the 90-day period.
- h. Any scientific or forensic analyses conducted.
- i. The basis for recommending that the allegation(s) warrant an investigation.
- j. The basis on which any allegation(s) do not merit further investigation.
- k. Any comments on the inquiry report by the respondent or the complainant(s).
- l. Any institutional actions implemented, including internal communications or external communications with journals or funding agencies.^{xxx}
- m. Documentation of potential evidence of honest error or difference of opinion.^{xxxi}

12. Opportunity to Comment on the Inquiry Report

The RIO will provide the Respondent with a complete copy of the report and may, but is not required to, provide the Complainant a copy of that portion of the report directly related to the allegations and evidence presented in the complaint. The Respondent and Complainant may comment on the report in writing within 7 calendar days. All written comments shall be appended in full to the final Inquiry report.

13. Inquiry Conclusion and Determination

- a. If the Inquiry Panel, RIO or other designated institutional official determines that a full Investigation is warranted, the RIO must, in a reasonable amount of time, give the Respondent written notice of the decision to conduct an investigation of the alleged misconduct, including a copy of the inquiry report, the Policy, these procedures, and include any additional allegations raised against them not previously addressed in the inquiry. The Respondent will be allowed an opportunity to review the witness transcripts.^{xxxii} Copies of the notification will be sent to the President, DO, Provost, the Respondent's Dean and Department Head, and Complainant(s) as applicable that the University will appoint a Committee to conduct an Investigation. If the allegation concerns Research supported by a Sponsor, then the RIO will notify the Sponsor of the intent of the University to conduct an Investigation according to applicable laws, regulations, and grant or contract terms. Within 30 days of determining that an investigation is warranted, the RIO will provide ORI with a copy of the inquiry report.^{xxxiii}
- b. If the Inquiry Panel, RIO or other institutionally designated official determines that there is insufficient evidence in support of the allegation to warrant an Investigation, the RIO will formally dismiss the allegation and notify the Respondent and Complainant, if applicable, in writing of the decision. The RIO will also direct the Respondent's dean, department head, the provost, and DO to promptly remove any reference to the allegation from the Respondent's personnel file. If the Panel determines that the allegation raises issues that another University office should address, then the Panel may recommend that the RIO refer the Complainant to that office. The RIO will keep sufficiently detailed documentation to permit a later review by ORI of why the institution did not proceed to an investigation, store these records in a secure manner for at least seven years after the termination of the inquiry, and provide them to ORI upon request.^{xxxiv}

14. Notification of Sponsors

- a. In cases involving sponsored Research, the RIO will notify the Sponsor of the outcome of the Inquiry and provide documentation in accordance with the applicable Sponsor's guidelines.
- b. Within 30 days of determining that an investigation is warranted (e.g. upon final completion of the Inquiry), the RIO will provide ORI with a copy of the inquiry report, notify ORI of the decision to proceed to investigation, and will begin the investigation process.^{xxxv}

15. Option to Skip Inquiry and Move Directly to Investigation

- a. In rare cases where sufficient evidence is received by the RIO at the Assessment stage to meet the criteria warranting an Investigation outlined in Section V.J above (for example, when an audit of a clinical trial has already been conducted), or when directed by a Sponsor, the RIO may request approval to forego an Inquiry and move directly to an Investigation. Before requesting such approval, the RIO must provide a written explanation of the rationale for the change in procedure to the Respondent for review and give the Respondent the opportunity to respond.
- b. The RIO shall submit the request to proceed directly to Investigation in writing to the DO, the UCEC, and the Sponsor, if any. Any such request should include as an attachment any response submitted by the Respondent. The DO, UCEC, and Sponsor, must all approve the request in writing in order to initiate the change in procedure. If approval to proceed directly to Investigation is granted, the RIO must notify the Respondent and Complainant in writing immediately.

G. Investigation

1. Purpose of the Investigation

- a. The purpose of an Investigation is to formally develop a factual record, pursue leads, examine the record, and recommend finding(s) to the DO, who will make the final decision, based on a preponderance of evidence, on each allegation and any corrective actions.^{xxxvi} 2. As part of its investigation, the institution will diligently pursue all significant issues and relevant leads, including any evidence of additional instances of possible research misconduct, and continue the investigation to completion.^{xxxvii}
- b. If an Investigation reveals additional instances of possible Research Misconduct, or if other Respondents are identified, then the Committee shall immediately notify the RIO in writing. The RIO, in consultation with the DO, will decide whether to broaden the scope of the Investigation beyond the original allegation or whether a new and separate Research Misconduct proceeding should be initiated.

2. Notification of Respondent

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

If additional respondent(s) are identified during the investigation, the institution will notify them of the allegation(s) and provide them an opportunity to respond consistent with the PHS regulation.^{xxxix}

3. Custody of the Research Record

The RIO will take all reasonable and practical steps, on or before the date on which the Respondent is notified of the Investigation, to obtain custody of and inventory and sequester in a secure manner, any additional items that become known or relevant to the investigation and retain them for seven years after its proceeding or any HHS proceeding, whichever is later.^{xl}

Panel members should not have bias or a conflict of interest related to the Respondents. The RIO will determine whether an actual bias or conflict of interest exists. If so, the RIO will replace the member with a qualified alternate.

4. Investigation Timeline

The RIO must convene and charge the Committee within 30 calendar days of the completion of the Inquiry. The Investigation, including submission of the final report and issuance of the institutional decision, should be completed within 180 calendar days, unless circumstances clearly warrant a longer period. The RIO, with the Sponsor's concurrence (if any), must approve any extension to the 180 calendar day timeframe and document the reason for the extension.

5. Appointment of the Committee

- a. A Committee consisting of at least three (3) members will be appointed in the following manner:
 - 1) The RIO will appoint a minimum of three (3) University employees to serve on the Committee, at least one of whom must be a faculty member.
 - 2) The RIO may consult with the DO, Provost, and Dean of the college in which the Respondent holds their primary appointment to identify qualified appointees.
 - 3) One faculty member will be identified among the panel to serve as Chair of the Committee.
- b. The Committee must be composed of individuals who 1) have the appropriate expertise to conduct an authoritative evaluation of the evidence and issues related to the allegation; and 2) do not have personal, professional, or financial conflicts of interest with the Respondent, the Complainant, or those known to be potential witnesses. An institution may use the same committee members from the inquiry in their subsequent investigation.
- c. When appropriate and subject to the DO's approval, the RIO may appoint experts from outside the University to serve on the Committee. The Committee may seek additional consultation from individuals outside of the ABOR system who have demonstrated expertise in the discipline or area of research or scholarship that is the subject of the Investigation.

- d. Panel members should not have bias or a conflict of interest related to the Respondents. The RIO will determine whether an actual bias or conflict of interest exists. If so, the RIO will replace the member with a qualified alternate.

6. Investigation Initiation and Charge

a. The RIO will:

- 1) Ensure all Committee members understand their roles and responsibilities, keep the identities of all individuals confidential, and conduct the proceedings in compliance with the Policy.
- 2) Initiate the Investigation by convening the Committee and delivering a charge letter which describes the allegation(s), identifies the Respondent(s), articulates the Committee's roles and responsibilities, and references the applicable sections of the Policy and these procedures.

- B. The investigation committee will conduct interviews, pursue leads, and examine all research records and other relevant evidence in reaching a decision on the merits of the allegation(s).^{xli} The institution will use diligent efforts to ensure that the investigation is thorough, sufficiently documented, and impartial and unbiased to the maximum extent practicable.^{xlii} The institution will notify the respondent in writing of any additional allegations raised against them during the investigation.^{xliii}

7. Roles and Responsibilities of the Committee

a. The Committee's roles and responsibilities consist of the following:

- 1) Conduct a thorough examination of all facts and evidence relevant to reaching a decision on the merits of each allegation.;
- 2) Conduct interviews with the Respondent, Complainant and any other individuals who possess information relevant to the Investigation;
- 3) Pursue all significant issues and leads discovered in the course of the Investigation that are deemed relevant, including any evidence of additional instances of possible Research Misconduct;
- 4) Secure any necessary and appropriate outside expertise in consultation with the RIO;
- 5) Maintain confidentiality of the Respondent, Complainant, and all witnesses to the extent possible;
- 6) Keep thorough records, including detailed documentation of methods of analysis, written transcripts and/or audio recordings of any interviews conducted with Respondents, Complainants, and witnesses;
- 7) Continue the Investigation to completion;

- 8) Based on a preponderance of evidence, determine for each allegation whether Research Misconduct occurred and, if so, the responsible person and the nature and seriousness of the Misconduct;
- 9) Prepare a preliminary report with the assistance of the RIO and consider any comments submitted from the Respondent; and
- 10) Submit a final report to the RIO.

8. Rights of the Respondent at Fact-Finding Meetings

When the Respondent is interviewed by the Committee, the Respondent may be accompanied by an advisor, who may be an attorney. If the Respondent plans to be accompanied by an advisor at a meeting or interview with the Committee, he or she must alert the RIO and Committee Chair to this fact at least 15 calendar days prior to the meeting. The advisor's role (whether an attorney or not) at any such meeting or interview with the Committee will be limited to advising the Respondent. The advisor may not address the Committee or any witnesses. If counsel is present with the Respondent, the OGC will likewise be asked to be present at the meeting, for the limited purpose of advising the RIO and the Committee.

9. Interviews

- a. All interviews conducted as part of the Inquiry must be recorded and transcribed. Any recording method is acceptable so long as it allows for subsequent review and transcription of the contents of the interview. The transcript of the interview must be made available to the relevant interviewee for correction. The corrected transcript of such interviews shall be included in the institutional record of the Investigation.
- b. The Respondent must not be present during any witness interview but must be provided a transcript of the interview with redactions as appropriate to maintain confidentiality. ^{xliv}

10. Record of the Investigation

- a. The Committee will keep a written transcript or an audio recording of all fact-finding meetings at which it receives evidence or interviews witnesses. In addition to maintaining these transcripts or audio recordings, the Committee will make and keep accurate and complete records, including originals or legible and complete photocopies or digital scans, of all documents or records it obtains.
- b. The RIO must give the respondent, and if applicable the complainant, a copy of the draft investigation report, and concurrently, a copy of or supervised access to, the research record and other evidence the investigation considered or relied upon. The Respondent must submit any comments on the draft report within 30 days.

c. The RIO will preserve the evidence of each Investigation for a minimum of 7 years in such a manner that it is not subject to unauthorized use or tampering.

11. Evidentiary Standard and Burden of Proof for a Finding of Misconduct

- a. In order to recommend a finding of Misconduct under this Policy, the institution must determine upon completion of the Investigation, and for each allegation, that:
 - 1) there was a significant departure from accepted practices of the relevant research or scholarly community; *and*
 - 2) the Misconduct was committed Intentionally or Knowingly or Recklessly; *and*
 - 3) the allegation is proven by a Preponderance of the Evidence.
- b. When recommending a finding of research misconduct, the Committee shall make every effort to specify how the misconduct was committed, based on the following definitions:
 - 1) Intentionally means to act with the aim of carrying out the act.
 - 2) Knowingly means to act with awareness of the act.
 - 3) Recklessly means to propose, perform, or review research, or report research results, with indifference to a known risk of fabrication, falsification, or plagiarism.^{xiv} [Recklessness is distinguished from negligence, where an individual deviates from ordinary care that a typical researcher in the relevant Research community would have exercised, but the individual is unaware that there was a substantial risk of Falsification, Fabrication, or Plagiarism.]
- c. The University bears the burden of proof for making a Finding of Research Misconduct.
- d. The Respondent has the burden of proving, by the same evidentiary standard:
 - 1) Any and all affirmative defenses raised, such as “honest error” or mitigating circumstances. The institution shall give due consideration to admissible, credible evidence of honest error or difference of opinion presented by the respondent; and
 - 2) Any mitigating factors relevant to a decision to impose administrative actions after a misconduct proceeding.

12. Report of the Investigation

- a. Within 180 days (of receiving its charge?), the Committee will prepare a written report describing the process of the Investigation and the Committee's findings, conclusions, and recommendations for an

appropriate course of action. If the investigation takes more than 180 days to complete, the institution will ask ORI in writing for an extension and document the reasons for exceeding the 180-day period in the investigation report.^{xlvi}

b. The Investigation report for each respondent should generally include:

- 1) Names, titles, and institutional affiliations of all individuals involved in the Investigation, including the Respondent, Complainant, Committee members, and any witnesses or consulted experts;
- 2) Description and documentation of the PHS support, including any grant numbers, grant applications, contracts, and publications listing PHS support. This documentation includes known applications or proposals for support that the respondent has pending with PHS and non-PHS Federal agencies.
- 3) Description of the nature of the allegation(s) of research misconduct, including any additional allegation(s) addressed during the research misconduct proceeding.
- 4) Description of the specific allegation(s) of research misconduct for consideration in the investigation of the respondent, including a summary of the facts, evidence, and analysis which support the conclusion. When making a Finding of Research Misconduct, each statement should also identify:
 - a) the person(s) responsible for the Research Misconduct;
 - b) whether the Research Misconduct was committed Knowingly, Intentionally, or Recklessly;
 - c) whether the Research Misconduct was Falsification, Fabrication, or Plagiarism;
 - d) identify any significant departure from the accepted practices of the relevant research community and that the allegation was proven by a preponderance of the evidence;
 - e) summarize the facts and analysis supporting the conclusion and consider the merits of any explanation by the respondent; and
 - f) identify the specific PHS support; and (g) state whether any publications need correction or retraction.^{xlvii}
- 5) If the investigation committee does not recommend a finding of research misconduct for an allegation, the report will provide a detailed rationale for its conclusion.
- 6) Composition of investigation committee, including name(s), position(s), and subject matter expertise.
- 7) Inventory of sequestered research records and other evidence, except records the institution did not consider or rely on.^{xlviii} This inventory will include manuscripts and funding proposals that were considered or relied on during the investigation. The inventory will also include a description of how any sequestration was conducted during the investigation.
- 8) Transcripts of all interviews conducted.
- 9) Identification of the specific published papers, manuscripts submitted but not accepted for publication (including online publication), PHS funding applications, progress reports,

- presentations, posters, or other research records that contain the allegedly falsified, fabricated, or plagiarized material.
- 10) Any scientific or forensic analyses conducted.
 - 11) A copy of these policies and procedures.
- c. Any comments made by the respondent and complainant(s) on the draft investigation report and the committee's consideration of those comments.
 - d. The report should also include any recommendations the Committee wishes to make and their rationale. When making recommendations concerning a Finding of Research Misconduct, the Committee should consider 1) the seriousness of the Research Misconduct; 2) whether it was an isolated event or part of a pattern; and 3) whether it had a significant impact on the Research Record, research subjects, other researchers, the institutions, or the public welfare.
 - e. The report will include adequate information and steps to meet the University's obligations to Sponsors, if any, and to third parties affected by the report's findings (e.g., journals).
 - f. Immediately upon completing its report, the Committee shall provide the Respondent, and the Complainant if applicable, a complete copy of the report, the research records and other evidence the investigation committee considered or relied on. The Respondent may respond to the preliminary report in writing within 15 calendar days upon receiving their copy. The Committee will add, as an appendix to the final report, any written responses submitted by the Respondent and Complainant.
 - g. As soon as the Committee reviews the Respondent's and Complainant's comments (if any), makes any necessary changes, and signs off on the final report, the RIO will send the completed report and any appendices to the DO and the Provost.

13. Institutional Decision

- a. The DO will consider the Committee's recommendations and, in consultation with the Provost, will make a final written determination whether the University accepts, rejects, or modifies the Investigation report, its findings, and any recommended institutional actions. If the DO's determination diverges from the findings of the Committee, the DO will explain in writing their rationale for the decision, and will cite any relevant evidence that supports the decision. The DO may also return the report to the Committee and request additional fact-finding and/or analysis.
- b. The DO shall immediately notify the Respondent of the University decision. Copies of the institutional decision will be sent to the relevant Dean, Department Head, Provost, and University President.

14. Institutional Appeals

- a. Respondent who is dissatisfied with the DO's decision may request reconsideration of the decision by filing a written request with the DO not later than 10 calendar days following receipt of the decision. Any request for reconsideration must be based on one or more of the following grounds:
 - 1) Irregularities in the proceedings, including any abuse of discretion or misconduct by the Committee or the RIO that deprived the Respondent of a fair and impartial process;
 - 2) Newly discovered material evidence that with reasonable diligence could not have been presented to the Committee for consideration; or
 - 3) A decision that is not justified by the evidence or is contrary to law.
- b. If the Respondent requests reconsideration, then the DO will issue a final decision within 20 calendar days of receiving that request. If the Respondent makes no request for reconsideration, then the DO's decision becomes final at the expiration of the 10 calendar day period during which the Respondent could have requested reconsideration.
- c. Once the University decision is final, the DO will submit the University decision to the University President describing the Investigation and the basis for the decision, and will provide a copy of the decision to the Respondent, the Respondent's Dean, and the Respondent's Department Head.
- d. The DO, in consultation with the Provost and the Dean of the college in which the Respondent holds their primary appointment, and the Respondent's Department Head, may impose appropriate sanctions and/or administrative actions, up to and including termination, in accordance with established Arizona Board of Regents and University Policies.
- e. The Institution must promptly notify the Sponsor and relevant federal agency if a respondent appeals an institutional finding or research misconduct or institutional actions.

15. Notifications

At the conclusion of the proceedings, the RIO is responsible for ensuring all applicable federal agencies and/or Sponsors are notified of the University decision according to relevant regulations and guidelines. Generally speaking, this means the RIO will submit to the federal agency and/or Sponsor a copy of the Investigation report and institutional record, the final University decision, and a statement of any administrative actions taken. These records include documentation of the assessment, a single index listing all research records and evidence, the inquiry report and investigation report, and all records considered or relied on during the investigation.^{xlix} The institutional record also includes the DO's final

decision and any information the respondent provided to the institution.ⁱ The institutional record must also include a general description of the records that were sequestered but not considered or relied on.ⁱⁱ

16. Additional Actions

Notwithstanding the results of any Investigation or disciplinary proceeding following a Finding of Research Misconduct at the University, the federal government may, in its sole discretion, take additional action related to the same or different facts and allegations. Action taken by the federal government may or may not be based upon the University Investigation and Finding of Research Misconduct and is beyond the purview of the University. The institution agrees to cooperate with ORI during any research misconduct proceeding or compliance review, including addressing deficiencies or additional allegations in the institutional record if directed by ORI and to assist in administering and enforcing any HHS administrative actions imposed on institutional members.ⁱⁱⁱ

-
- i § 93.200.
ii § 93.202.
iii § 93.210.
iv § 93.220.
v § 93.228.
vi § 93.233.
vii § 93.306(b).
viii § 93.306(c).
ix § 93.306(c)(3).
x § 93.318.
xi §§ 93.105(b)(2) and 93.105(b)(3).
xii § 93.105(b)(1).
xiii § 93.105(b).
xiv § 93.310(g)(5).
xv §§ 93.307(g)(3) and 93.312.
xvi § 93.106(a).
xvii § 93.106(a).
xviii §§ 93.103 and 93.317(b).
xix § 93.306(a).
xx § 93.204.
xxi § 93.306(b-c).
xxii § 93.307(a)(1-3).
xxiii § 93.105(b)(1).
xxiv § 93.105(b).
xxv § 93.307(e)(2).
xxvi § 93.307(h).
xxvii § 93.307(f)(i-ii).
xxviii § 93.307(f)(i-ii).
xxix § 93.307(f)(ii)(2).
xxx § 93.309(a)(1-12).
xxxi § 93.307(g)(2).
xxxii §§ 93.310(c) and 93.310(g)(5).
xxxiii § 93.309(a).
xxxiv § 93.309(c).
xxxv § 93.309(a).
xxxvi §§ 93.310 and 93.314.
xxxvii § 93.310(j).
xxxviii § 93.310(a-c).
xxxix § 93.310(c)(2).
xl § 93.318.
xli § 93.310.
xlii § 93.310(f).
xliiii § 93.310(c)(1).
xliv §§ 93.106, 93.300(d), and 93.310(g)(5). Institutions must, to the extent possible, provide confidentiality to respondents, complainants, and witnesses and protect complainants, witnesses, and committee members from retaliation. It is up to institutions to determine how to do so in practical terms (e.g., by redacting transcripts).
xlv § 93.231.
xlvi § 93.311(b).
xlvii § 93.313(k)(1)(i-vii).

^{xlviii} § 93.313(e).

^{xlix} §§ 93.220(a)(1-3) and 93.220(b).

^l § 93.220(a)(3-4).

ⁱⁱ § 93.220(c).

ⁱⁱⁱ § 93.300(g-h).