

# Policy 7.8

## Policy on Research Misconduct

**Responsible Official:** VP for Research Administration  
**Administering Division/Department:** Research Compliance  
**Effective Date:** May 15, 2008  
**Last Revision:** July 29, 2008

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### Overview

This policy sets forth the policies and procedures that should be followed in reporting, inquiring into and investigating allegations of research misconduct and/or violation of research related laws, regulations or policies.

### Applicability

This Policy and Procedure (the *Policy*) applies to all *Institutional Members* as that term is defined herein.

This document sets forth procedures for handling different types of *Allegations of Research Misconduct* (e.g., fraud, falsification and plagiarism) and/or allegations that *Research* laws, regulations or policies have been violated. The procedure to be followed for handling specific allegations will depend on the nature of the allegations. Federal regulations require that certain procedures be followed in handling *Allegations of Research Misconduct* involving *Research* that receives federal funding, and these procedures incorporate those requirements as appropriate.

### Policy Details

This document is divided into sections. **Sections 7.8.01, 7.8.02 and the Policy Definitions Section** of this document set forth definitions, general principles and roles and responsibilities that apply to all proceedings under this document, no matter what the nature of the allegations or the source of funding of the *Research* involved.

**Section 7.8.01** sets forth the procedure for reporting *Allegations of Research Misconduct* or *Regulation/Policy Violations*, as well as Emory's policy prohibiting retaliation against anyone who reports any such allegations in *Good Faith*.

**Section 7.8.02** describes the roles and responsibilities of key persons and committees in implementing these procedures.

**Section 7.8.03** sets forth the procedure for handling *Allegations of Research Misconduct*. The summary set forth below provides assistance in determining when the procedure in **Section 7.8.03** should be followed:

The procedure in **Section 7.8.03** will apply if the allegations received concern *Research Misconduct*, as defined in the **Policy Definitions Section** below.

**Section 7.8.03** is designed to comply with federal regulatory requirements for the conduct of *Inquiries* and *Investigations* into *Allegations of Research Misconduct Involving Federally-Sponsored Research* and it is based in part on the *Office of Research Integrity's* "Sample Policy and Procedures for Responding to Allegations of Research Misconduct." found at [http://ori.dhhs.gov/policies/ori\\_policies.shtml](http://ori.dhhs.gov/policies/ori_policies.shtml).

**Section 7.8.04** sets forth the procedure for handling allegations of violations of *Research*-related laws, regulations or policies. The summary set forth below provides assistance in determining when the procedure in **Section 7.8.04** should be followed:

The procedure in **Section 7.8.04** will apply if the allegations received do not concern *Research Misconduct*, but rather concern *Other Allegations*, as defined in **Policy Definitions Section**.

**Multiple Allegations of Different Types:** If the allegations received include some that would fall under the procedure in **Section 7.8.03** and some that would fall under the procedure in **Section 7.8.04**, then the *Administrative Official*, at his/her option, can:

- a. Permit an *Inquiry Committee* established under **Section 7.8.03** to also serve as the *Institutional Review and Investigation Committee* under **Section 7.8.04** for the purposes of reviewing the allegations that fall under **Section 7.8.04** in accordance with the procedures set forth in that section; or
- b. Establish an *Inquiry Committee* (and, if necessary, an *Investigation Committee*) to review allegations falling under **Section 7.8.03**, and establish a separate *Institutional Review and Investigation Committee* to review the allegations falling under **Section 7.8.04**.

## **Section 7.8.01**

### **Statement of Policy and General Principles**

**A. Use of Capitalized/Italicized Words:** This *Policy and Procedure for Receipt and Handling of Allegations of Research Misconduct and/or Violations of Research-Related Laws, Regulations or Policies* is referred to throughout this document as the *Policy*. The meanings of all other capitalized, italicized terms used in this *Policy* are set forth below in **Policy Definitions Section**.

**B. Statement of Policy:** The validity of *Research* and other scholastic endeavors is based on the implicit assumption of honesty and objectivity by the investigator and on the explicit premise that *Research* data can be verified. An academic institution and its faculty, students and staff must uphold this principle and endeavor to maintain public trust in the *Research* process.

An academic institution's primary responsibility is to create and maintain an academic environment that fosters ethical behavior in scholarship and serves to prevent misconduct in *Research* and to promote *Research* that is carried out in accordance with all applicable regulations and policies. In order to carry out this responsibility, faculty, staff and students should immediately report any evidence of misconduct in *Research* or violations of *Research*-related policies and regulations to the appropriate administrative officials of Emory University (hereafter also referred to as "Emory," "University," or the *Institution*). These officials, in turn, should promptly review, inquire into and/or investigate any allegation that they receive.

This *Policy* sets forth the procedures that should be followed in reporting, inquiring into, and investigating such allegations. The procedures to be followed in a specific matter are determined by the nature of the allegations involved. Matters that involve *Allegations of Research Misconduct* will be conducted in accordance with the procedures set forth in **Section 7.8.03** of this *Policy*. Matters that do not involve *Allegations of Research Misconduct*, but rather involve *Other Allegations* will be conducted in accordance with the procedures set forth in **Section 7.8.04** of this *Policy*.

**C. General Principles:** The following general principles will apply to all proceedings under this *Policy*:

**1. Responsibility to Report Research Misconduct or Regulation/Policy Violations:** All *Institutional Members* to whom this *Policy* applies should immediately report any observed or suspected *Research Misconduct* or *Regulation/Policy Violation* to their supervisor, the chair or chief administrator of

their department, the dean/director of their unit, or directly to the *RIO*. If an allegation is initially reported to any one other than the *RIO*, then that person, in turn, should report the allegation to the *RIO*. Similarly, if the *RIO* initially receives a report, then s/he should notify the appropriate *Administrative Official* and any other appropriate administrators and/or University committees or units that may have jurisdiction over the issue.

If an individual is not sure whether or not a particular incident or practice constitutes *Research Misconduct* or a *Regulation/Policy Violation* that is covered by this *Policy*, then s/he may call the *RIO* to discuss the matter confidentially and obtain guidance. Such calls may be made anonymously.

Contact information for the *Research Integrity Officer* is as follows:

Director  
Office of Research Compliance  
Emory University  
1599 Clifton Road, Room 4.105  
Atlanta, GA 30322  
Phone: 404-727-2398  
Fax: 404-727-2328  
Email: [kwest02@emory.edu](mailto:kwest02@emory.edu)

In addition, individuals may make anonymous reports through the Emory University Trust Line by calling 1-888-550-8850. The Trust Line is operated by an independent third party who will maintain the caller's anonymity, while ensuring that the caller's report is routed to the proper individuals within the University.

**2. Responsibility to Cooperate with Inquiries, Investigations and Institutional Reviews and Investigations:** All Emory University employees, faculty, students, agents, and other *Institutional Members* are obliged to cooperate fully with the *RIO*, *Administrative Official* and other institutional officials in the review of allegations and the conduct of any proceedings under this *Policy*. Such persons also are obligated to provide any relevant *Evidence* to the *RIO*, any *Inquiry Committee*, any *Investigation Committee*, any *Institutional Review and Investigation Committee*, and any other University unit or committee with jurisdiction regarding the matter at issue, as well as any appropriate governmental regulatory or funding agency.

**3. Inform Researchers and Administrators of this Policy:** Emory University shall work to ensure that its faculty, staff, students and administrators who are involved in *Research* are aware of and familiar with this *Policy* and any changes thereto. Emory also shall stress to all such persons and administrators the importance of complying with this *Policy*.

**4. Administrative Actions/Sanctions:** At any time during or after an *Inquiry, Investigation, Research Misconduct Proceeding* or *Institutional Review and Investigation* or other proceeding under this *Policy*, Emory University, on its own initiative or in consultation with appropriate governmental agencies, reserves the right to take any *Administrative Actions/Sanctions* necessary to protect the health and safety of *Research* subjects; to protect the funds or resources of sponsors; to protect the University's reputation and academic integrity; to protect the integrity of the *Research* process; to comply with any applicable governmental laws, regulations or policies; and/or to comply with any contractual obligations. These actions may include, but are not limited to, additional monitoring of the *Research* process and the handling of funds and equipment; reassignment of personnel or of the responsibility for the handling of funding/resources; additional review of *Research* data and results; withdrawal of pending abstracts; manuscripts, publications, and grant applications; and suspension of a *Respondent* (provided, however, that suspension prior to the completion of an *Investigation* or *Institutional Review and Investigation* shall be without interruption of salary or benefits).

**5. Notification of Government Agencies and Sponsors:** If the allegations received are *Allegations of Research Misconduct* relating to *Research* that receives support from a sponsor other than Emory University, then the *RIO* will make the following notifications to *Research* sponsors (specifically including but not limited to *ORI* and the *NSF OIG*):

Notification on or before the initiation of a *Investigation* regarding *Allegations of Research Misconduct*;

Notification of special circumstances, as set forth in **Section 7.8.01-C.6** below.

Notification of the findings of *Research Misconduct* at the conclusion of an *Investigation* or of findings of a *Regulation/Policy Violation* at the conclusion of an *Institutional Review and Investigation*.

**6. Notification of Special Circumstances:** At any time during any phase of a *Research Misconduct Proceeding* or other proceeding conducted under this *Policy*, the *RIO* will notify the *Administrative Official*, any government agency that is supporting the *Research*, or any other *Research* sponsor, if any of the circumstances set forth below exist. In the case of *Research* receiving *PHS Support* the *RIO* shall provide notice to *ORI* and in the case of *Research* receiving *NSF Support*, the *RIO* will notify the *NSF OIG*. Circumstances requiring notification are as follows:

- a. Health or safety of the public is at risk, including an immediate need to protect human or animal subjects.
- b. The resources or interests of any governmental agency providing support to the *Research* including, but not limited to *HHS*, *PHS* or *NSF*, are threatened.
- c. *Research* activities should be suspended.
- d. There is a reasonable indication of possible violations of civil or criminal law.
- e. In the case of *Federally-Sponsored Research*, the federal government's action is required to protect the interests of those involved in *Research Misconduct Proceedings*.
- f. In the case of *Federally-Sponsored Research*, the *Institution* believes that a *Research Misconduct Proceeding* may be made public prematurely so that the federal government may be required to take appropriate steps to safeguard *Evidence* and protect the rights of those involved.
- g. The research/scientific community or public should be informed, as determined by the *Institution* or appropriate government agency.

**7. Relationship Between this Policy and Federal Regulations:** *Federally-Sponsored Research* projects are subject to specific laws, regulations and policies (collectively, *Governmental Requirements*). In the case of *Federally-Sponsored Research* supported by funding from the *PHS*, the applicable *Governmental Requirements* are set forth at 42 CFR Part 93, which can be found at [http://www.access.gpo.gov/nara/cfr/waisidx\\_06/42cfr93\\_06.html](http://www.access.gpo.gov/nara/cfr/waisidx_06/42cfr93_06.html).

In the case of *Research* supported by funding from the *NSF*, the applicable *Governmental Requirements* are set forth in 45 CFR Part 689, which can be found at [http://www.access.gpo.gov/nara/cfr/waisidx\\_06/45cfr689\\_06.html](http://www.access.gpo.gov/nara/cfr/waisidx_06/45cfr689_06.html).

In some cases, *Governmental Requirements* specify that certain provisions be set forth within this *Policy*, and Emory has incorporated those requirements herein. From time to time, the University shall review this *Policy* in order to cause the *Policy* to remain in conformance with such requirements. If, however, there is, at any time, a conflict between such *Governmental Requirements* and this *Policy*, the *Governmental Requirements* shall supersede this *Policy* and must be followed with regard to any matters on which this *Policy* and such *Governmental Requirements* differ.

**8. Non-Exclusivity of this Policy:** Particular allegations and events may fall within the scope of more than one University policy and/or more than one set of *Governmental Requirements*. In addition, more than one University unit or government regulatory entity may have jurisdiction over certain allegations or events. Accordingly, the fact that proceedings are brought under this *Policy* does not preclude additional proceedings before other University units or committees and/or under other policies or regulations. For example, certain allegations regarding *Research* involving human subjects may fall within the scope of this *Policy* and within the scope of policies and procedures set forth by the Emory Institutional Review Board (IRB). In any case in which another University unit or committee may have jurisdiction pursuant to another applicable regulation or policy, the *Administrative Official* may, with the concurrence of that University unit or committee, combine the fact-finding proceedings under the other policy with those under this *Policy* by permitting a representative from that unit or committee to serve as a member of any *Inquiry Committee*, *Investigation Committee*, and/or and *Institutional Review and Investigation Committee* established under this

*Policy*, and to report the facts found in such *Inquiry, Investigation* or *Institutional Review and Investigation* back to the University unit or committee for possible adoption.

**9. Confidentiality:** The *RIO, Administrative Official, Committee Members* and other institutional officials involved in the conduct of proceedings under this *Policy* shall limit the disclosure of the following information to those who need to know in order to fulfill requirements of the *Policy*, fulfill any applicable *Governmental Requirements*, respond to any subpoena or other legal request for information/materials, and to carry out any proceeding conducted under this *Policy* in a thorough, competent, fair and objective manner:

- a. The identity of the *Complainant* (if known) and the *Respondent*; and
- b. Any records or *Evidence* from which *Research* subjects might be identified.

The *RIO* may use written confidentiality agreements or other mechanisms to ensure that a recipient does not make any further disclosure of identifying information.

**10. Protecting Complainants, Witnesses and Committee Members:** *Institutional Members* may not retaliate in any way against *Complainants*, witnesses or *Committee Members*. *Institutional Members* should immediately report any alleged or apparent retaliation against *Complainants*, witnesses or *Committee Members* to the *RIO*, who shall 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 the *Retaliation* is directed. The *Administrative Official* and other appropriate University officials shall cooperate with the *RIO* in ensuring that retaliation does not occur.

**11. Protecting the Respondent:** The *Administrative Official* involved in the conduct of proceedings under this *Policy* will make all reasonable and practical efforts to protect and restore the reputation of persons alleged to have engaged in *Research Misconduct* or *Regulation/Policy Violations*, but against whom no finding of *Research Misconduct* or *Regulation/Policy Violation* is made.

## **SECTION 7.8.02**

### **Roles and Responsibilities:**

Set forth below are the various persons and committees who are involved in proceedings under this *Policy*, along with a description of their responsibilities.

**1. Research Integrity Office or RIO:** The Director of the Office of Research Compliance will serve as the *RIO*. The *RIO* shall be familiar with this *Policy* and with other applicable *Governmental Requirements* and Emory policies. The *RIO* shall be responsible for the general oversight and administration of proceedings under this *Policy*. The *RIO's* responsibilities shall include the following activities:

- a. Consult confidentially with persons uncertain about whether to submit an allegation of *Research Misconduct* or *Other Allegations*.
- b. Receive *Allegations of Research Misconduct* and *Other Allegations*.
- c. Assess any allegations received to determine whether they fall within the scope of this *Policy*, and if so the applicable procedural section of this *Policy* that should be followed with respect to examining the allegations.
- d. Consult with the proper *Administrative Official* regarding the initiation and administration of any necessary *Inquiry, Investigation* or *Institutional Review and Investigation*.
- e. Make any notifications and reports to governmental officials, sponsors and/or University officials, committees or units required by this *Policy*, applicable *Government Requirements* or other University policies.
- f. Inform *Respondents, Complainants*, and witnesses of procedural steps in the *Research Misconduct* proceedings or other proceedings under this *Policy*.
- g. Sequester *Research* data and *Evidence* pertinent to the allegations received and maintain it securely in accordance with this *Policy* and applicable *Governmental Requirements*.

h. Maintain records of *Research Misconduct Proceedings* and other proceedings carried out under this *Policy* in accordance with any applicable record retention requirements set forth in Emory policies or applicable *Governmental Requirements* and make such records available to appropriate governmental agencies as required by applicable *Governmental Requirements*.

i. Assist any *Inquiry Committee*, *Investigation Committee* and *Institutional Review and Investigation Committee* in complying with this *Policy* and with all other applicable *Governmental Requirements* and Emory policies.

j. Work to ensure the confidentiality of the proceedings and to maintain the security and confidentiality of records of proceedings carried out under this *Policy*.

k. Take any other actions necessary to carry out the duties of the *RIO* under this *Policy*.

**2. *Administrative Official*:** The *Administrative Official* for a particular proceeding under this *Policy* is the Dean or Director (or his/her designee) of the Emory school or unit in which the *Respondent* works (or, in the case of a student *Respondent*, is enrolled). In the event that Dean or Director of a school or unit is the subject of the allegations that are being made, then the appropriate Vice President (or his/her designee) shall serve as the *Administrative Official*. The *Administrative Official*, in consultation with other appropriate Emory administrators, shall be responsible for reviewing/implementing recommendations of any *Inquiry Committee*, *Investigation Committee* or *Institutional Review and Investigation Committee* and prescribing appropriate *Administrative Actions/Sanctions*, if any, in response to a committee's findings. The *Administrative Official's* responsibilities shall include the following activities:

a. Provide confidentiality to those involved in any proceedings under this *Policy* in accordance with all applicable *Governmental Requirements*.

b. In consultation with the *RIO*, appoint the chair and members of any *Inquiry Committee*, *Investigation Committee* and/or *Institutional Review and Investigation Committee*, and ensure that these committees are properly staffed with persons with appropriate expertise to carry out a thorough and authoritative evaluation of the *Evidence*.

c. Determine whether each person involved in handling any allegations under this *Policy* has any unresolved personal, professional or financial conflict of interest and take appropriate action, including recusal to ensure that no person with such a conflict is involved in the proceedings.

d. In cooperation with other institutional officials, take all reasonable and practical steps to protect and restore the position and reputation of any *Good Faith Complainant*, witness, *Committee Member*, and *Respondent* against whom no finding has been made, and counter potential or actual *Retaliation* against them by *Respondent* or other *Institution Members*;

e. Ensure that *Administrative Actions* taken by the *Institution* and appropriate governmental agencies are enforced.

f. Cooperate with the *RIO* in notification of other involved parties such as sponsors, appropriate governmental agencies, law enforcement agencies, journals and other publishers, and professional and licensing boards of *Administrative Actions/Sanctions* taken, as required by *Governmental Requirements* and University policies

g. Notify the *Respondent* of the proceedings and provide opportunities for him/her to review/comment/respond to allegations, evidence and committee reports.

h. Receive and evaluate any report provided by any *Inquiry Committee*, *Investigative Committee* and/or *Institutional Review and Investigation Committee* and take any action regarding such reports as is required pursuant to this *Policy* or any applicable *Governmental Requirements*. Specifically, the *Administrative Official* shall take the following actions with regard to each of the reports named below:

i. *Inquiry Committee Report*: Review the report and, in consultation with the *RIO* and other appropriate institutional officials, make an *Administrative Determination* regarding (a) whether to accept the *Inquiry Committee's* findings as to whether an *Investigation* is

warranted under the criteria set forth in applicable laws and University policies; (b) whether to accept any other of the *Inquiry Committee's* recommendations; and (c) whether to impose any new or additional requirements. If an *Investigation* is to be initiated, the *Administrative Official* also shall ensure that the *RIO* sends any required notice of the initiation of an *Investigation* to *ORI* (and/or any other appropriate governmental agency) along with a copy of *Inquiry Committee's* report.

ii. *Investigation Committee Report*: Review the report and, in consultation with the *RIO* and other appropriate institutional officials, make an *Administrative Determination* regarding (a) whether to accept the *Investigation Committee's* findings; (b) whether to accept the *Investigation Committee's* recommendations, including recommendations regarding *Administrative Actions/Sanctions*; and (c) whether to impose any new or additional requirements. As appropriate, the *Administrative Official* also shall ensure that the *RIO* notifies *ORI* (and/or any other appropriate governmental agency) in writing of the *Administrative Official's Administrative Determination* with regard to findings and *Administrative Actions/ Sanctions* and provides a copy of the *Investigation Committee Report*.

iii. *Institutional Review and Investigation Committee Report*: Review the report and, in consultation with the *RIO* and other appropriate institutional officials, make an *Administrative Determination* regarding (a) whether to accept the *Institutional Review and Investigation Committee's* findings; (b) whether to accept the *Institutional Review and Investigation Committee's* recommendations, including recommendations regarding *Administrative Actions/Sanctions*; and/or (c) impose new or additional requirements. The *Administrative Official* shall ensure that the *RIO* notifies any appropriate governmental agencies or other parties (e.g., sponsors) of the *Administrative Official's Administrative Determination* regarding findings and *Administrative Actions/Sanctions*, and provides a copy of the report when required by applicable *Governmental Requirements*.

i. Take any other actions necessary to carry out the duties of the *Administrative Official* under this *Policy*.

**3. *Complainant***: The *Complainant* is the person who brings any allegations forward under this *Policy*. The *Complainant* is responsible for making all allegations in *Good Faith*; for maintaining confidentiality; and for cooperating with any *Inquiry Committee*, *Investigation Committee* or *Institutional Review and Investigation Committee*. If the *Complainant's* identity is known, the *Complainant* should be interviewed as a part of any *Inquiry*, *Investigation* or *Institutional Review and Investigation* conducted under this *Policy*. A *Complainant* may make allegations anonymously and request that anonymity be preserved throughout the proceeding. The *RIO* and any committee appointed under this *Policy* may take this fact into consideration in determining whether the allegations are substantive and/or brought in *Good Faith*.

**4. *Respondent***: The *Respondent* is the person against whom allegations are brought. The *Respondent* is responsible for maintaining confidentiality and cooperating with the *RIO* and with any *Inquiry*, *Investigation* or *Institutional Review and Investigation Committee*. The *Respondent* should be interviewed as a part of any *Inquiry*, *Investigation*, or *Institutional Review and Investigation* conducted under this *Policy*.

**5. *Inquiry Committee***: The *Inquiry Committee* shall conduct any *Inquiry* required under this *Policy*. The *Administrative Official* shall select the members and chair of any *Inquiry Committee*. In making this selection, the *Administrative Official* shall consult with the *RIO* and shall take care to ensure that all persons taking part in the *Inquiry* do not have real or apparent *Conflicts of Interest* and do have the necessary and appropriate expertise to properly conduct the *Inquiry*. If necessary, some or all members of the *Inquiry Committee* may be selected from outside the University. The *Inquiry Committee* is responsible for the following activities:

a. Following this *Policy* and all other applicable policies, procedures, and *Governmental Requirements* in carrying out its *Inquiry* duties.

b. Providing a report at the conclusion of the *Inquiry* that meets all requirements of this *Policy* and any applicable *Governmental Requirements*. The report shall include findings, conclusions, and recommendations and shall be provided to the *Administrative Official* and to the *RIO*.

c. Taking all reasonable steps to conduct its *Inquiry* in a fair and impartial manner and to protect the confidentiality of all aspects of the proceedings.

**6. Investigation Committee:** The *Investigation Committee* shall conduct any *Investigation* required under this *Policy*. The *Administrative Official* in consultation with the *RIO* shall select the members of the *Investigation Committee*. In making this selection, the *Administrative Official* shall consult with the *RIO* and shall take care to ensure that all persons taking part in the *Investigation* do not have real or apparent *Conflicts of Interest* and do have the necessary and appropriate expertise to properly conduct the *Investigation*. If necessary, some or all members of the *Investigation* may be selected from outside the University. The *Investigation Committee* is responsible for the following activities:

- a. Following this *Policy* and all other applicable policies, procedures, and *Governmental Requirements* in carrying out its *Investigation* duties.
- b. Providing a report at the conclusion of the *Investigation* that meets all requirements of this *Policy* and any applicable *Governmental Requirements*. The report shall include findings, conclusions, and recommendations and shall be provided to the *Administrative Official* and to the *RIO*.
- c. Taking all reasonable steps to conduct its *Investigation* in a fair and impartial manner and to protect the confidentiality of all aspects of the proceedings.

**7. Institutional Review and Investigation Committee:** The *Institutional Review and Investigation Committee* shall conduct any *Institutional Review and Investigation* required under this *Policy*. The *Administrative Official* shall select the members and chair of any *Institutional Review and Investigation Committee*. In making this selection, the *Administrative Official* shall consult with the *RIO* and shall take care to ensure that all persons taking part in the *Inquiry* do not have real or apparent *Conflicts of Interest* and do have the necessary and appropriate expertise to properly conduct the *Institutional Review and Investigation*. If necessary, some or all members of the *Institutional Review and Investigation Committee* may be selected from outside the University. The *Institutional Review and Investigation Committee* is responsible for the following activities:

- a. Following this *Policy* and all other applicable policies, procedures, and *Governmental Requirements* in carrying out its *Institutional Review and Investigation* duties.
- b. Providing a report at the conclusion of the *Institutional Review and Investigation* that meets all requirements of this *Policy* and any applicable *Governmental Requirements*. The report shall include findings, conclusions, and recommendations and shall be provided to the *Administrative Official* and to the *RIO*.
- c. Taking all reasonable steps to conduct its *Institutional Review and Investigation* in a fair and impartial manner and to protect the confidentiality of all aspects of the proceedings.

### **SECTION 7.8.03**

#### **Procedures to be Followed for Matters Involving Allegations of Research Misconduct**

**A. Scope and Applicability of Section 7.8.03 of this Policy:** Section 7.8.03 of this *Policy* is intended in part to carry out Emory University's responsibilities under applicable federal regulations regarding handling of *Allegations of Research Misconduct* involving *Federally-Sponsored Research*, including 42 CFR Part 93 and 45 CFR §§ 689.1 to .10. Section 7.8.03 applies to matters in which all of the following elements are present:

**1. Allegations of Research Misconduct.** *Allegations of Research Misconduct* include allegations of *Fabrication, Falsification or Plagiarism* in proposing, performing or reviewing *Research, Research proposals*, or in reporting *Research* results;

**AND**

**2.** The *Allegations of Research Misconduct* concern a person who, at the time of the alleged *Research Misconduct*, was an *Institutional Member*.

**B. Classification of Allegations:** Upon receipt of any allegations, the *RIO* will perform an assessment to determine if the allegations are (1) *Allegations of Research Misconduct* involving an *Institutional Member*; (2)

*Other Allegations* involving an *Institutional Member*; or (3) allegations that fall outside of the scope of this *Policy*. *Allegations of Research Misconduct* involving an *Institutional Member* will be handled in accordance with the procedure set forth in this **Section 7.8.03**. *Other Allegations* involving an *Institutional Member* shall be handled in accordance with **Section 7.8.04** of this *Policy*, and allegations that fall outside of the scope of the *Policy* shall be referred by the *RIO* to the appropriate University unit, committee or official for handling. In addition, the *RIO* shall refer to such other units, committees or officials those allegations which may fall both under this *Policy* and under the jurisdiction of any other University policy/committee.

**C. Assessment of Allegations of Research Misconduct:** Upon classifying an allegation as an *Allegation of Research Misconduct* that involves an *Institutional Member*, the *RIO* will promptly assess the allegation to determine whether it is sufficiently credible and specific so that potential *Evidence of Research Misconduct* may be identified. The assessment should be brief and completed promptly. In conducting the assessment, the *RIO* may but is not required to interview the *Complainant*, *Respondent*, or other witnesses. The *RIO* is not required to gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so that the potential evidence of *Research Misconduct* may be identified.

**D. Inquiry Procedure:**

**1. Initiation and Purpose of Inquiry:** If the *RIO* determines that the criteria for an *Inquiry* are met then the *RIO* will notify and consult with the appropriate *Administrative Official*. If the *Administrative Official* concurs in the assessment, then the *Administrative Official* shall initiate the *Inquiry*. The purpose of the *Inquiry* is to conduct an initial review of the available *Evidence* to determine whether to conduct an *Investigation*. An *Inquiry* does not require a full review of all the *Evidence* related to the *Allegations of Research Misconduct*.

**2. Notice to Respondent, Complainant and Others:** At the time of or before beginning an *Inquiry*, the *Administrative Official* shall make a reasonable, good faith effort to notify any known *Respondent* in writing. If the *Inquiry* identifies additional *Respondents*, they must be notified in writing. The *Administrative Official* also shall make a reasonable, good faith effort to notify the *Complainant* of the initiation of the *Inquiry* if the *Complainant* is known. If the *Inquiry* involves a published article or other document, any co-authors of the article/document who are not otherwise parties in the *Inquiry* shall be notified as well.

**3. Interim Administrative Actions/Sanctions and Notifications of Institution Officials, Government Agencies and Sponsors:**

- a. The *Administrative Official* will notify the Dean/Director of his/her unit of the initiation of the *Inquiry*.
- b. The *Administrative Official* in consultation with the *RIO* shall take any appropriate *Administrative Actions/Sanctions* in accordance with **Section 7.8.01-C.4**.
- c. The *RIO* shall make any notifications of government agencies and sponsors in accordance with **Section 7.8.01-C.5**.

**4. Sequestration of the Research Records:** On or before the date on which the *Respondent* is notified of the allegations or the *Inquiry* begins, the *RIO* shall take all reasonable and practical steps to obtain custody of the *Research Records* and *Evidence* needed to conduct the *Research Misconduct Proceeding*; inventory the *Research Records* and *Evidence*; and sequester them in a secure manner, except that 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, so long as those copies are substantially equivalent to the evidentiary value of the instruments.

**5. Appointment of the Inquiry Committee:** Promptly after the initiation of the *Inquiry*, the *Administrative Official* in consultation with the *RIO* shall appoint at least three members to form an *Inquiry Committee* and shall choose a committee Chair. The *Inquiry Committee* must consist of individuals who do not have unresolved personal, professional, or financial *Conflicts of Interest* with those involved with the *Inquiry*, and should include individuals with the appropriate expertise to evaluate the *Evidence* and issues related to the allegations, interview the *Respondent*, *Complainant* and key witnesses, and conduct the *Inquiry*. Some or all members of the *Inquiry Committee* may be selected from outside the University. Alternatively, the *Administrative Official* may appoint a standing committee that is authorized to conduct *Inquiries* and to add or use members when necessary to provide the necessary expertise and/or to eliminate *Committee Members* with *Conflicts of Interest*.

**6. Notification of Complainant and Respondent:** The *Administrative Official* must make a reasonable, good faith attempt to notify the *Complainant* and the *Respondent* in writing of the names of persons who have been selected to serve as members of the *Inquiry Committee*. The *Complainant* and the *Respondent* shall have ten days from the receipt of this notice in which to provide the *RIO* with any written objection to the membership of the *Inquiry Committee*. If no objection is received within this period, then any objection on the part of the *Complainant* or *Respondent* to the *Inquiry Committee* shall be considered waived. If an objection is made, then in order for it to be considered, it must be made in *Good Faith* and must set forth in sufficient detail a reasonable basis for the objection (e.g., *Conflict of Interest*). The *Administrative Official* in consultation with the *RIO* shall consider any objection, and if they determine that the objection is reasonable, the *Administrative Official* shall appoint a new member of the *Inquiry Committee*. If they determine that the objection is not made in *Good Faith* and/or is unreasonable, the membership of the *Inquiry Committee* shall stand.

**7. Charge to the Inquiry Committee and First Meeting:** The *RIO* shall prepare a charge for the *Inquiry Committee* that:

- a. Establishes a time for the completion of the *Inquiry*;
- b. Describes the allegation against the *Respondent* and any related issues identified during the assessment process;
- c. Advises the *Inquiry Committee* that the purpose of the *Inquiry* is to make a preliminary evaluation of the *Evidence* and testimony of the *Respondent*, *Complainant*, and key witnesses to determine whether there is sufficient substantive evidence of possible *Research Misconduct* to warrant an *Investigation*;
- d. Advises the *Inquiry Committee* that an *Investigation* is warranted if the *Inquiry Committee* determines that: (1) there is a reasonable basis for concluding that the allegation falls within the definition of *Research Misconduct*; and (2) the allegation may have substance, based on the *Inquiry Committee*'s review during the *Inquiry*;
- e. Advises the *Inquiry Committee* that it should make a finding as to whether the allegations were made in *Good Faith*;
- f. Advises the *Inquiry Committee* that it is responsible for preparing or directing the preparation of a written report of the *Inquiry* that meets the requirements of this *Policy* and, in the case of *Research* receiving *PHS Support*, meets the requirements of 42 CFR §93.309(a);
- g. Makes clear that the *Inquiry Committee* is not tasked with determining whether *Research Misconduct* occurred or if so, who was responsible; and
- h. Makes clear that the *Inquiry Committee* must take all reasonable steps to ensure the confidentiality of the *Research Misconduct Proceedings*.

At the *Inquiry Committee*'s first meeting, the *RIO* shall review the charge, discuss the allegations and any related issues, review the appropriate procedures for conducting the *Inquiry*, and answer any questions raised by the *Inquiry Committee*. The *RIO* will assist the *Inquiry Committee* with organizing plans for the *Inquiry*. The *RIO* must be present or available throughout the *Inquiry* to advise the *Inquiry Committee* as needed.

**8. Conduct of the Inquiry:** The *Inquiry Committee* should interview the *Complainant*, *Respondent*, and relevant witnesses as well as reviewing pertinent regulations, *Research Records* and materials. The *Inquiry Committee* should evaluate the *Evidence* and testimony and, after consultation with the *RIO*, determine whether there is sufficient substantive *Evidence* of possible *Research Misconduct* to recommend further *Investigation* based on the criteria found in this *Policy* and the criteria found in any applicable *Government Requirements* (e.g., for *Research* receiving *PHS Support*, the criteria found in 42 CFR §93.307(d)). The scope of the *Inquiry* will not normally include deciding whether *Research Misconduct* actually occurred. However, if a legally sufficient admission of *Research Misconduct* is made by the *Respondent*, *Research Misconduct* may be determined at the *Inquiry* stage if all relevant issues are resolved. For *Research* receiving *PHS Support*, however, the *RIO* and *Administrative Official* shall consult with *ORI* regarding the next steps to be taken in such a case.

**9. Inquiry Committee Procedures:** The *Inquiry Committee* shall take care to keep sufficiently detailed documentation of the conduct of the *Inquiry* in order to permit a later assessment of the reasons for its determination as to whether an *Investigation* was necessary. Rules of evidence applicable in courts of law shall not apply in the conduct of the *Inquiry*, and although parties are free to consult with legal counsel at their own expense, legal counsel shall not be permitted to attend any interviews or other proceedings conducted by the *Inquiry Committee*. Legal counsel for the *Respondent* may only conduct interviews of persons employed by the University through arrangement with the University's Office of the General Counsel and with the consent of the person to be interviewed.

**10. Inquiry Committee's Report:** Once the *Inquiry Committee* has reviewed all *Evidence* and come to a conclusion as to whether or not an *Investigation* should be conducted, it must draft an *Inquiry Committee Report* that includes the following information:

- a. The name and position of the *Respondent*;
- b. A description of any federal support, including, in the case of *Research* receiving *PHS Support*, grant numbers, grant applications, contracts, and publications listing the *PHS Support*;
- c. A description of the *Allegations of Research Misconduct*;
- d. A description of the *Evidence* reviewed, a summary of all relevant interviews, and the basis for the *Inquiry Committee's* conclusions and findings, including findings as to whether the allegations were brought in *Good Faith*; and recommendations as to whether an *Investigation* should proceed; and
- e. A recommendation as to other steps to be taken, if any. For example, if the *Inquiry Committee* determines that an *Investigation* is not warranted, it may recommend other actions to be taken. These recommendations may include, but are not limited to, recommendations with regard to the *Complainant* if the *Inquiry Committee* finds sufficient evidence to support a finding that the allegations against the *Respondent* were not made in *Good Faith* or recommendations regarding *Administrative Actions/Sanctions*.

The *Inquiry Committee Report* may be reviewed by University legal counsel for legal sufficiency and by the *RIO* for policy compliance. Modifications, if any, should be made by the *Inquiry Committee* after consultation with the *RIO* and University legal counsel.

**11. Notification to the Respondent and Complainant and Opportunity to Comment:** The *RIO* shall notify the *Respondent* of the recommendation of the *Inquiry Committee* as to whether an *Investigation* is warranted. The *RIO* will provide a draft of the *Inquiry Committee Report* to the *Respondent* for comment, and for *Research* receiving *PHS Support* the *RIO* shall include a copy of or a reference to 42 CFR Part 93. All respondents will be provided with a copy of Emory's policies and procedures on *Research Misconduct*. The *RIO* will provide to the *Complainant* for comment a summary of the *Inquiry Committee Report* and/or relevant portions of the report regarding the *Complainant's* testimony. The parties shall have ten days in which to provide their comments to the *Inquiry Committee*. The *Inquiry Committee* may, but is not required to, revise the *Inquiry Committee Report* based on the comments submitted. Any comments submitted will be attached to the *Inquiry Committee Report* and become a part of the *Inquiry Record*.

**12. Transmittal of the Final Report:** The *Inquiry Committee* will transmit the final *Inquiry Committee Report* to the *Administrative Official* and to the *RIO*.

**13. Institutional Decision and Notification:** After receipt and review of the *Inquiry Committee Report* and any comments from *Respondent* and *Complainant*, the *Administrative Official*, in consultation with the *RIO* and other appropriate institutional officials, shall make a written *Administrative Determination* as to (a) whether to accept the *Inquiry Committee's* findings, including those regarding whether an *Investigation* is warranted; (b) whether to accept any other recommendations put forward by the *Inquiry Committee*; and (c) whether to impose any new or additional requirements. In making this *Administrative Determination*, the *Administrative Official* shall give considerable weight to the findings and recommendations of the *Inquiry Committee*. In the event that the *Administrative Official* rejects the *Inquiry Committee's* findings and/or recommendations, he/she shall set forth in the written *Administrative Determination* the reasons therefor. The *Inquiry* is completed when the *Administrative Official* completes this *Administrative Determination*. The *Administrative Official* shall notify the *Respondent* and the *Complainant*

in writing of the *Administrative Determination* and provide the *RIO* and *Respondent* with copies of the *Administrative Determination* and the final *Inquiry Report*.

**14. Notification to Governmental Agencies:** If the *Administrative Official* makes the *Administrative Determination* to initiate an *Investigation*, then within thirty days of that finding, the *RIO* must notify any federal governmental agency that sponsors the *Research* involved in accordance with **Section 7.8.01-C.5**.

**15. Decision not to Initiate an Investigation:** If the decision is made not to initiate an *Investigation*, the University shall secure and maintain for seven years after termination of the *Inquiry* sufficiently detailed documentation of the *Inquiry* to permit a later assessment of the reasons why an *Investigation* was not conducted. For *Research* receiving *PHS Support*, these documents must be provided to *ORI* or other authorized *HHS* personnel upon request. The University also must notify *PHS*, other relevant *PHS* agencies or any other appropriate governmental agencies of any special circumstances that may exist pursuant to **Section 7.8.01-C.6**.

**16. Time Limit for Inquiry Phase:** By not later than sixty days after the date of the *Inquiry Committee's* initial meeting, the *Inquiry Committee* should complete its conduct of the *Inquiry* and transmit the final *Inquiry Committee Report* to the *Administrative Official* and the *Administrative Official* should issue his/her *Administrative Determination*. If circumstances exist that require an extension of this sixty day period, then the *Inquiry Committee* shall make these circumstances known to the *Administrative Official* and the *RIO*, and the *Administrative Official* and *RIO* shall jointly decide whether the circumstances warrant the grant of an extension, and if so, the length of that extension. If an extension of time is approved, the *RIO* shall notify the *Respondent* and the *Complainant* and document in writing the reason for the extension for inclusion in the *Records of Research Misconduct Proceedings*. The *Inquiry Committee Report* also shall include a statement that an extension was provided and the reason therefor.

**17. Record-Keeping Requirements:** The *RIO* shall keep all records from the *Inquiry Committee* or otherwise related to the *Inquiry* in a secure manner for at least three years after the later of the date on which the *Inquiry* or any subsequent *Investigation* concludes, except those records retained as documentation of the decision not to initiate an *Investigation*, which are described in **Section 7.8.03-D.15**. All records shall be made available upon request to governmental agencies as may be required by, and in accordance with, all applicable *Governmental Requirements*.

**18. Early Termination of an Inquiry:** If the *Inquiry Committee* determines that circumstances (e.g., full retraction of allegations, admission of *Respondent*) make it appropriate to terminate the *Inquiry* early, then the *Inquiry Committee* may document its reasons for an early termination in a report and submit the report to the *RIO* and the *Administrative Official* for consideration and a decision as to whether the *Inquiry* may be terminated. In the case of *Federally-Sponsored Research*, a copy of the report also must be provided to the sponsor and early termination must be approved by the sponsor, the *RIO* and the *Administrative Official*. (Specifically, in the case of *Research* receiving *PHS Support*, a copy of this report should be provided to *ORI* for determination as to whether early termination is appropriate or further *Inquiry* or an *Investigation* is necessary.) The resignation or termination of a *Respondent* prior to the conclusion of an *Inquiry* shall not in and of itself be sufficient justification to support the early termination of an *Inquiry*.

**19. Restoration of Reputations:** In the event that the *Inquiry Committee* determines that an *Investigation* is not warranted and no other violations are found, the University will diligently make appropriate efforts to restore the reputation of the *Respondent* and to protect the position and reputation of any *Complainant* who brought allegations in *Good Faith*.

#### **E. Investigation Procedure:**

**1. Initiation of the Investigation:** The *Administrative Official* and the *RIO* must initiate an *Investigation* by no later than thirty days after the determination by the *Administrative Official* that an *Investigation* should be initiated.

**2. Purpose of the Investigation:** The purpose of the *Investigation* is to develop a factual record by exploring the allegations in detail and examining the *Research Records* and all other evidence in depth, leading to recommended findings on whether *Research Misconduct* has been committed, by whom, and to what extent. The *Investigation* also will determine whether there are additional instances of possible *Research Misconduct* that would justify broadening the scope of the *Investigation* beyond the original allegations.

**3. Finding of Research Misconduct:** In order to find that a *Respondent* has committed *Research Misconduct*, the *Investigation Committee* must find that (a) there was a significant departure from accepted practices of the relevant research community; and (b) the *Research Misconduct* was committed intentionally, knowingly or recklessly; and (c) the allegations are proved by a *Preponderance of the Evidence*.

**4. Standard of Proof and Burden of Proof:** The *Institution* has the burden to prove that the *Respondent* committed *Research Misconduct* by a *Preponderance of the Evidence*. The destruction, absence of, or *Respondent's* failure to provide *Research Records* adequately documenting the questioned *Research* is *Evidence of Research Misconduct* when the *Institution* establishes by a *Preponderance of Evidence* that the *Respondent* intentionally, knowingly or recklessly had *Research Records* and destroyed them, had the opportunity to maintain the *Research Records* but did not do so, or maintained the *Research Records* and failed to produce them in a timely manner, and that the *Respondent's* conduct constitutes a significant departure from accepted practices of the relevant research community. The *Respondent* has the burden to prove, by a *Preponderance of the Evidence*, any affirmative defense that the *Respondent* may raise, including honest error or difference of opinion. The *Investigation Committee* will give due consideration to credible evidence of honest error or difference of opinion presented by the *Respondent*. The *Respondent* also has the burden to prove any mitigating factors that may be relevant to a decision to impose *Administrative Actions or Sanctions*.

**5. Notifications:** The *RIO* shall make the following notifications regarding the initiation of an *Investigation*:

- a. Notification to the appropriate Vice President, Provost and President of the University, as well as notification to the Dean/Director of the *Respondent's* unit if he/she is not the *Administrative Official*.
- b. Within thirty days of the *Administrative Official's* decision to initiate an *Investigation*, notification to sponsors and federal government agencies that support the *Research* involved, in accordance with the notification provisions of **Sections III.C.5 and III.C.6** of this *Policy*. In the case of any such notification of the initiation of an *Investigation* provided to *ORI* or *NSF OIG*, the notification shall contain at least the following information: (1) the *Administrative Official's Administrative Determination*; and (2) a copy of the *Inquiry Committee Report* and any comments thereon by the *Respondent* or the *Complainant*. The *RIO* shall provide the following information: (1) the name of the person against whom the allegations have been made; (2) the *PHS* or *NSF* application or grant numbers involved; (3) the University policies and procedures under which the *Inquiry* was conducted; and (4) the charges to be considered in the *Investigation*. In addition, at the request of *ORI* or the *NSF OIG*, the *RIO* shall provide the *Research Records* and *Evidence* reviewed, transcripts or recordings of any interviews, and copies of all relevant documents.

**6. Securing Documents; Taking Interim Actions and Referral to Other Research Committees:** On or before the date on which the *Respondent* is notified of the *Investigation*, the *RIO* shall take all reasonable and practical steps to secure any relevant documents and materials that were not otherwise secured during the *Inquiry*. Where the *Research Records* or *Evidence* encompasses scientific instruments shared by a number of users, then custody may be limited to copies of the data or *Evidence* on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. In addition, if facts have arisen during the *Inquiry* that indicate that aspects of the matter should be referred to other *Research Committees* for review and/or action, then the *RIO* shall make such referrals.

**7. Interim Administrative Actions and Sanctions:** The *Administrative Official* in consultation with the *RIO* shall take any appropriate *Administrative Actions/Sanctions* in accordance with **Section 7.8.01-C.4**. The *Administrative Official*, in consultation with the *RIO*, also shall take any interim *Administrative Actions/Sanctions* that may be necessary to protect any federal funds or to ensure that the purposes of federal financial assistance are being carried out. In addition, the *Administrative Official* and the *RIO* shall review the allegations to determine whether they also fall under the jurisdiction of any of the University *Research Committees*, and the *RIO* shall make any referrals to such *Research Committees* that were not made during the *Inquiry* phase (see **Section 7.8.03-B.** above).

**8. Appointing the Investigation Committee:** The *Administrative Official*, in consultation with the *RIO*, shall, within ten days of the initiation of the *Investigation* or as soon thereafter as practical, appoint at least three members to form an *Investigation Committee* and shall choose a committee Chair. The

*Investigation Committee* must consist of 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 expertise to evaluate the *Evidence* and issues related to the allegations, interview the *Complainant* and *Respondent* and key witnesses, and conduct the *Investigation*. Members of the *Inquiry Committee* shall be eligible to serve on the *Investigation Committee*. Some or all of the members of the *Investigation Committee* may be selected from outside the University. Alternatively, the *Administrative Official* may appoint a standing committee that is authorized to conduct *Investigations* and to add or use members when necessary to provide the necessary expertise and/or to eliminate *Committee Members* with *Conflicts of Interest*

**9. Notifying the Complainant and the Respondent** At the time of or before beginning an *Investigation*, the *RIO* must make a reasonable, good faith effort to notify the *Complainant* and the *Respondent* in writing of the convening of the *Investigation* and the membership of the *Investigation Committee*. The *Complainant* and the *Respondent* shall have ten days from the receipt of this notice in which to provide the *RIO* with any written objection to the membership of the *Investigation Committee*. If no objection is received within this period, then any objection on the part of the *Complainant* or *Respondent* to the *Investigation Committee* shall be considered waived. If an objection is made, then in order for it to be considered, it must be made in *Good Faith* and must set forth in sufficient detail a reasonable basis for the objection (e.g., *Conflict of Interest*). The *RIO*, in consultation with the *Administrative Official*, shall consider the objection, and if they determine that the objection is made in *Good Faith* and reasonable, they shall appoint a new member of the *Investigation Committee*. If they determine that the objection is not made in *Good Faith* and/or is unreasonable, the membership of the *Investigation Committee* shall stand.

**10. Charge to the Investigation Committee and First Meeting**: The *RIO* shall prepare a charge for the *Investigation Committee* that sets forth the following information:

- a. Identifies the *Respondent*.
- b. Describes the allegations and related issues identified during the *Inquiry*.
- c. Defines *Research Misconduct*.
- d. Advises the *Investigation Committee* that it must thoroughly evaluate the *Evidence* and testimony of the *Respondent*, *Complainant*, and relevant witnesses in order to determine whether, based on a *Preponderance of the Evidence*, *Research Misconduct* has occurred, and if so, to what extent, who was responsible, and how serious it was.
- e. Advises the *Investigation Committee* that in order to determine that the *Respondent* committed *Research Misconduct*, it must find that a *Preponderance of the Evidence* establishes that: (1) *Research Misconduct* occurred; (2) the *Research Misconduct* was a significant departure from accepted practices of the relevant research community; and (3) the *Respondent* committed the *Research Misconduct* intentionally, knowingly, or recklessly.
- f. Advises the *Investigation Committee* that the *Respondent* has the burden of proving by a *Preponderance of the Evidence* any affirmative defenses raised, including honest error or a difference of opinion;
- g. Informs the *Investigation Committee* that it must take all reasonable steps to ensure the confidentiality of the proceedings;
- h. Informs the *Investigation Committee* that if during the *Investigation*, additional information becomes available that substantially changes the subject matter of the *Investigation* or suggests additional *Respondents*, then the *Investigation Committee* should notify the *RIO*, who in conjunction with the *Administrative Official*, will determine whether it is necessary to notify the *Respondent* of the new subject matter, or provide notice to additional *Respondents*.
- i. Informs the *Investigation Committee* that it must prepare or direct the preparation of a written *Investigation Committee Report* that meets the requirements of this *Policy* and, in the case of *Research* receiving *PHS Support*, 42 CFR § 93.313 or, in the case of *Research* receiving NSF Support, 45 CFR § 689.4.

At the *Investigation Committee's* first meeting, the *RIO* shall review the charge, discuss the allegations and any related issues, review the appropriate procedures for conducting the *Investigation*, and answer any questions raised by the *Investigation Committee*. The *Investigation Committee* will be provided with a copy of this *Policy*; 42 CFR Part 93 in the case of *Research* receiving *PHS Support*; and 45 CFR Part 689 in the case of *Research* receiving *NSF Support*. The *RIO* must be present during or available throughout the *Investigation* to advise the *Investigation Committee* as needed.

**11. Conduct of the Investigation:** The *Investigation Committee* should take the following actions:

- a. Interview the *Respondent* and the *Complainant*, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the *Investigation*, including witnesses identified by the *Respondent* and *Complainant*; record or transcribe each interview; provide the recording or transcript to the interviewee for correction; and include the recording or transcript in the record of the *Investigation*.
- b. Use diligent efforts to ensure that the *Investigation* is thorough and sufficiently documents and includes examination of all *Research Records* and *Evidence* relevant to reaching a decision on the merits of each allegation. Such *Research Records* and *Evidence* should include pertinent regulations, *Research Records*, data, proposals, publications, correspondence, memoranda of telephone calls, and other materials, such as the records of the *Inquiry Committee* and a copy of the *Inquiry Committee Report* and attached comments.
- c. Take reasonable steps to ensure an impartial and unbiased *Investigation* to the maximum extent practical.
- d. Pursue diligently all significant issues and leads discovered that are determined relevant to the *Investigation*, including any *Evidence* of additional instances of possible *Research Misconduct*, and continue the *Investigation* to completion;
- e. Evaluate the *Evidence* and testimony and determine whether, based on a *Preponderance of the Evidence*, *Research Misconduct* occurred, and if so, to what extent and its seriousness.
- f. Prepare and maintain sufficient documentation regarding its conduct of the *Investigation* to substantiate the *Investigation Committee's* findings, which documentation may be required to be made available to government agencies in accordance with applicable *Governmental Requirements*.

**12. Legal Counsel:** All parties may retain legal counsel at their own expense, and legal counsel may be present during the *Investigation Committee's* interviews or proceedings, but legal counsel shall not be permitted to question interviewees or otherwise participate in the proceedings. Legal counsel may interview witnesses who are employees of the University only through arrangement with the University's Office of General Counsel, and only with the consent of the witness.

**13. Communications and Notifications During Investigation:** During the course of any *Investigation* into *Allegations of Research Misconduct*, the *Investigation Committee* should keep the *Administrative Official* and the *RIO* apprised of any developments that disclose facts that may affect current or future governmental funding for the *Respondent*, or that appropriate governmental agencies may need to know to ensure the appropriate use of governmental funds and to protect the public interest. In turn, the *RIO* shall provide notice to the following entities regarding such developments: (a) *NSF OIG* in the case of *Research* receiving *NSF Support*; (b) *ORI* in the case of *Research* receiving *PHS Support*; and (c) other appropriate governmental agencies, in the case of *Research* receiving support from governmental agencies other than *NSF* or *PHS*.

**14. Investigation Committee's Report:** The *Investigation Committee* and the *RIO* are responsible for preparing a written draft report of the *Investigation* that:

- a. Describes the nature of the *Allegation of Research Misconduct*, including identification of the *Respondent*.

- b. Describes and documents any *PHS Support*, *NSF Support* or other governmental support for the *Research*, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing *PHS Support*.
- c. Describes the specific *Allegations of Research Misconduct* considered in the *Investigation*.
- d. Includes the *Institution's* policies and procedures under which the *Investigation* was conducted.
- e. Identifies and summarizes the *Research Records* and *Evidence* reviewed and identifies any *Evidence* taken into custody but not reviewed.
- f. Includes a statement of findings for each *Allegation of Research Misconduct* identified during the *Investigation*. Each statement of findings must: (1) indicate whether the *Research Misconduct* was *Falsification*, *Fabrication*, or *Plagiarism*, and whether it was committed intentionally, knowingly, or recklessly; (2) summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the *Respondent*, including any effort by *Respondent* to establish by a *Preponderance of the Evidence* that the *Respondent* did not engage in *Research Misconduct* because of honest error or a difference of opinion; (3) identify any specific *PHS Support*, *NSF Support* or other governmental support; (4) identify whether any publications need correction or retraction; (5) identify the person(s) responsible for the *Research Misconduct*; and (6) list any current support or known applications or proposals for support that the *Respondent* has pending with any governmental agencies.
- g. Includes a statement of a finding of *Research Misconduct*. The finding must include the following elements: (1) there must be a significant departure from accepted practices of the relevant research community; (2) the *Research Misconduct* must be committed intentionally, or knowingly, or recklessly, and (3) the allegation must be proven by a *Preponderance of the Evidence*.
- h. Includes a description of the recommended *Administrative Actions/Sanctions*. The nature of the *Administrative Actions/Sanctions* recommended/imposed shall depend on the severity of the misconduct, and may range from a letter of reprimand to dismissal of the *Respondent*. Other *Administrative Actions/Sanctions* that may be imposed upon the *Respondent* include, but are not limited to, withdrawal of all pending abstracts and papers emanating from any *Research* tainted by *Research Misconduct*; restitution of funds to the funding agency as appropriate; notification of the editors of journals in which previous abstracts and papers were published; notification of institutions and sponsors with which the *Respondent* has been associated if there is reason to believe that the validity of previous *Research* might be questionable; and/or release of information about the incident to the press in cases in which health and safety issues or public funds were involved.

The *Investigation Committee Report* may be reviewed by University legal counsel for legal sufficiency and the *RIO* for policy compliance. Modifications, if any, should be made by the *Investigation Committee* after consultation with the *RIO* and University legal counsel.

**15. Comments on the Investigation Committee Report:** A draft of the *Investigation Committee Report* must be provided to the *Respondent* for comment, and the *Respondent* must either be provided with a copy of the *Evidence* on which the report is based or supervised access to that *Evidence*. The *Respondent* shall have thirty days from the date s/he received the draft report to provide comments to the *Investigation Committee*. The *Respondent's* comments must be considered and included in the final report. A draft of the *Investigation Committee Report*, or relevant portions of it, may be provided to the *Complainant* for comment. The *Complainant* shall have thirty days from the date s/he received the draft report to provide comments to the *Investigation Committee*. The *Complainant's* comments must be considered and included in the final report.

**16. Transmittal of Final Investigation Committee Report; Administrative Determination; and Implementation:** The *Investigation Committee* shall transmit the final *Investigation Committee Report* to the *Administrative Official* with a copy to the *RIO*. After receipt and review of the *Investigation Committee Report* and any comments from *Respondent* or *Complainant*, the *Administrative Official* shall, in consultation

with the *RIO* and other appropriate institutional officials, make a written *Administrative Determination* as to (a) whether to accept the *Investigation Committee's* findings; (b) whether to accept any recommendations put forward by the *Investigation Committee*; and (c) whether to impose any new or additional requirements. In making this *Administrative Determination*, the *Administrative Official* shall give considerable weight to the findings and recommendations of the *Investigation Committee*. In the event that the *Administrative Official* rejects the *Investigation Committee's* findings and/or recommendations, he/she shall set forth in the written *Administrative Determination* the reasons therefore, as well as the reasons for any new or additional requirements that the *Administrative Official* imposes. The *Administrative Determination* shall document any *Administrative Actions/Sanctions* that are to be imposed upon the *Respondent*, and the *Administrative Determination* document shall be added to the final *Investigation Committee Report*. The *Investigation* is finished when the *Administrative Official* completes this *Administrative Determination*. The *Administrative Official* shall notify the *Respondent* and the *Complainant* in writing of the *Investigation Committee's* findings and the *Administrative Determination* and provide the *RIO* and *Respondent* with copies of the *Administrative Determination* and the final *Investigation Committee Report*. The *Administrative Official* also shall notify the appropriate Vice President, the Provost, and President of the *Investigation Committee's* findings and the *Administrative Determination*.

If the *Investigation Committee* found that the *Respondent* committed *Research Misconduct* and the *Research* was *Federally-Sponsored*, then the *RIO* must, within the 120 day period for completing an *Investigation*, submit the following to *PHS ORI*, *NSF OIG*, and/or other appropriate government agency that sponsored the *Research*:

- a. A copy of the final *Investigation Committee Report* with comments attached (including sanctions to be imposed);
- b. A statement of whether the University accepts the findings of the *Investigation Committee Report*;
- c. A statement of whether the University found *Research Misconduct*, and if so, who committed the *Research Misconduct*; and
- d. A description of any pending or completed *Administrative Actions/ Sanctions* against the *Respondent*.
- e. After *ORI*, *NSF OIG* or other appropriate government agencies have been notified, the *RIO* will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the *Respondent* in the work, or other relevant parties should be notified of the outcome of the case. The *RIO* is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

**17. Appeal:** The *Respondent* shall have the right to appeal a finding of *Research Misconduct* to the Provost or the appropriate Vice President in charge of *Respondent's* unit within ten days of receipt by the *Respondent* of the final *Investigation Committee Report* and the *Administrative Official's* written determination. The only grounds for appeal are procedural error or substantive new *Evidence* in favor of the *Respondent*. The appeal must be in writing and must specifically enumerate the grounds for appeal and provide documentation or affidavits of any substantive new *Evidence* for consideration. If no appeal is received by the end of the ten day period, the *Respondent* shall be deemed to have waived any appeal rights. If an appeal is received in a timely fashion, the appropriate Vice President or Provost will appoint an *Appeals Committee* consisting of three individuals who have sufficient expertise to review the appeal and who do not have any *Conflict of Interest* with regard to the *Respondent* or the matter for review. Members of the *Inquiry Committee* or the *Investigation Committee* shall not be eligible to serve on the *Appeals Committee*. The *Appeals Committee* shall have thirty days within which to review the record of the *Inquiry* and *Investigation* proceedings, and the *Respondent's* substantive new evidence (if any), and issue an *Appeals Report* to the Provost or Vice President that provides as follows:

- a. If the *Appeals Committee* determines that the *Investigation* was not procedurally flawed and/or there is no substantive new *Evidence* that could justify reversing the decision of the *Investigation Committee*, then the appeal shall be denied.
- b. If the *Appeals Committee* determines that there were procedural errors in the *Investigation*, or discovers substantive new *Evidence* that could justify reversing the decision of the

*Investigation*, then the *Appeals Committee* may grant the appeal and recommend a new *Investigation* by the same or a different *Investigation Committee*.

**18. Time Limit for Investigation Phase:** By no later than sixty days after the date of the *Investigation Committee's* initial meeting, the *Investigation Committee* should complete its *Investigation* and submit its final report to the *Administrative Official*, and the *Administrative Official* should transmit the final report and the *Administrative Determination* (including a description of any *Administrative Actions/Sanctions* imposed) to the *Respondent*. The *Respondent* shall then have ten days from receipt of the final *Investigation Committee Report* and *Administrative Determination* within which to appeal any decision. The *Appeals Committee* shall have thirty days from the receipt of an appeal in which to grant or deny the appeal. If the appeal is denied, the final *Investigation Committee Report*, along with a notice of the denial of the appeal, must be provided to the *Respondent* and any federal government *Research* sponsor by not later than 120 days after the initial meeting of the *Investigation Committee*. In the case of *Research* receiving *PHS Support*, the notice shall be provided to *ORI*, and in the case of *Research* receiving *NSF Support*, notice shall be provided to *NSF OIG*.

**19. Extension of Time for Investigation:** If circumstances exist that require an extension of the 120-day period, the *Investigation Committee* shall tell the *Administrative Official* and the *RIO* about these circumstances. The *RIO* and the *Administrative Official* shall consider that request, and if they determine that the request is justified, then the *RIO* must submit any request for an extension of time to any federal sponsor in writing and include an explanation for requesting the extension; an interim report on the progress of the *Investigation* to date; and an estimate of the date of completion of the *Investigation*. When an *Appeals Committee* grants an appeal, the *RIO* shall automatically consider an extension of time and shall submit a request for an extension to any federal sponsor. In the case of *Research* receiving *PHS Support*, requests for extension of time shall be provided to *ORI*, and in the case of *Research* receiving *NSF Support*, requests shall be provided to *NSF OIG*. If the request for an extension is granted, the *Investigation Committee* (or the new *Investigation Committee*, as the case may be, in the event an appeal is granted) shall then be required to make periodic reports to the *RIO* on its progress, which in turn will forward to the federal sponsor. If an extension of time is approved, the *RIO* shall notify the *Respondent* and the *Complainant* and document in writing the reason for the extension and include this in the *Investigation Committee Report*.

**20. Record Keeping Requirements:** The *RIO* shall keep all records from the *Investigation Committee* or otherwise related to the *Investigation* in a secure manner for at least seven years after the date on which the *Investigation* (including any appeal thereof) concludes, or any *PHS* or *NSF* proceeding involving the *Research Misconduct* allegation is completed, whichever is later, unless *ORI*, *NSF OIG* or another applicable government agency notifies the University that it no longer needs to retain the records. All records shall be made available upon request to governmental agencies as may be required by, and in accordance with, all applicable laws. If the *Respondent* is found by the *Investigation Committee* to have committed *Research Misconduct* or a *Regulation/Policy Violation* and the *Administrative Official* accepts this determination, then this finding and a summary of the *Investigation Committee's* report shall be placed in the Emory University personnel file of the *Respondent*.

**21. Early Termination of an Investigation:** If the *Investigation Committee* determines that circumstances (e.g., full retraction of allegations, admission of *Respondent*) call for it to consider terminating its *Investigation* then it may document its reasons for early termination in a report and submit the report to the *RIO* and *Administrative Official* for consideration and a decision as to whether the *Investigation* may be terminated. The *RIO*, in turn, shall submit a copy of the report to any federal sponsor (*ORI* in the case of *Research* receiving *PHS Support* and *NSF OIG* in the case of *Research* receiving *NSF Support*). Early termination must be approved by any federal sponsor, the *RIO* and the *Administrative Official*. The resignation or termination of a *Respondent* prior to the conclusion of an *Investigation* shall not in and of itself be sufficient justification to support the early termination of an *Investigation*.

**22. Restoration of Reputations:** In the event that the *Investigation Committee* determines that no *Research Misconduct* has occurred, this determination is accepted by the *Administrative Official* and no other violations have occurred, then the University will diligently make appropriate efforts to restore the reputation of the *Respondent* and to protect the position and reputation of any *Complainant* who brought allegations in good faith.

**SECTION 7.8.04**  
**Procedures to be Followed for Matters Involving Other Allegations**

**A. Initial Assessment of Allegations:** Upon receipt of allegations of a possible *Regulation/Policy Violation* (collectively referred to as “*Other Allegations*”), the *RIO* will promptly perform an assessment of the allegations to make the following determinations:

1. A determination as to whether or not the *Other Allegations* fall within the scope of this *Policy*; and
2. A determination as to whether or not the *Other Allegations* fall within the jurisdiction of any other *Research Committee* responsible for the oversight of *Research* at the University (e.g., IRB, IACUC, etc.).

**B. Result of Initial Assessment:** The *RIO* shall take one of the following actions depending on his/her initial assessment of the *Other Allegations*:

1. If the *RIO* determines that the *Other Allegations* do not fall within the scope of this *Policy* and do not fall within the jurisdiction of another *Research Committee*, the *RIO* shall document his/her determination and make such referrals to other persons/units within the University for handling of the *Other Allegations* as the *RIO* deems appropriate.
2. If the *RIO* determines that the *Other Allegations* do not fall within the scope of this *Policy* and do fall within the jurisdiction of another *Research Committee*, the *RIO* shall make an appropriate referral of the *Other Allegations* to the appropriate *Research Committee* for handling.
3. If the *RIO* determines that the *Other Allegations* fall within the scope of this *Policy* and do not fall within the jurisdiction of another *Research Committee*, the *RIO* shall contact the appropriate *Administrative Official* and initiate the *Institutional Review and Investigation* process, as described below.
4. If the *RIO* determines that the *Other Allegations* fall both within the scope of this *Policy* and the jurisdiction of another *Research Committee*, the *RIO* in consultation with the appropriate *Administrative Official* and the Chair(s) of the appropriate *Research Committee(s)* shall either:
  - a. Refer the *Other Allegations* to the appropriate *Research Committee(s)* for handling under the *Research Committee’s(s’)* policies and procedures; or
  - b. Review the *Other Allegations* under the *Institutional Review and Investigation* process set forth in this *Policy* and appoint a member(s) of the other *Research Committee(s)* to in consultation with the *RIO* to review the *Other Allegations* under this *Policy* and serve as a member(s) of the *Institutional Review and Investigation Committee* that reviews the *Other Allegations* and to report findings of fact back to the *Research Committee(s)* for consideration and recommended actions. Under this latter option, the *Research Committee(s)* shall not be required to have a separate fact-finding process.

**C. Conduct of Initial Assessment:** In conducting the initial assessment, the *RIO* should interview the *Complainant*, *Respondent*, and other witnesses, and review any data submitted with the allegation or otherwise readily available. The *RIO* shall make this review in order to determine whether to recommend initiation of an *Institutional Review and Investigation* and/or refer this matter to another *Research Committee*. The *RIO* shall provide the results of his/her assessment to any *Research Committee*, *Institutional Review and Investigation Committee*, or other University personnel that is tasked with the handling of the *Other Allegations*.

**D. Initiation of Institutional Review and Investigation Process and Appointment of Institutional Review and Investigation Committee:** If the *RIO* determines that the initiation of an *Institutional Review and Investigation* is warranted, then the *RIO* will immediately notify the *Administrative Official*, and the *Administrative Official* shall work with the *RIO* to initiate the *Institutional Review and Investigation* process. The *Administrative Official*, in consultation with the *RIO*, shall, as soon as practical after the initiation of the *Institutional Review and Investigation*, appoint at least three members to form an *Institutional Review and Investigation Committee* and shall choose a committee Chair. The *Institutional Review and Investigation Committee* must consist of individuals who do not have unresolved personal, professional, or financial *Conflicts of Interest* with those involved with the *Institutional Review and Investigation*. *Committee Members* should include individuals with the appropriate expertise to evaluate the *Evidence* and issues related to the allegations, interview the *Complainant* and *Respondent* and key witnesses, and conduct the *Institutional Review and Investigation*. Some or all of the members of the *Institutional Review and Investigation Committee* may be selected from outside the University. Alternatively, the *Administrative Official* may appoint a standing committee that is authorized to conduct *Institutional Review and*

*Investigation* and to add or use members when necessary to provide the necessary expertise and/or to eliminate *Committee Members with Conflicts of Interest*

**E. Securing Records and Taking Interim Administrative Actions/Sanctions:** On or before the date on which the *Respondent* is notified of the initiation of the *Institutional Review and Investigation*, the *RIO* in consultation with the *Administrative Official* and must take all reasonable and practical steps to obtain custody of all original documents and other materials relevant to the allegations and sequester them in a secure manner. In the case of scientific instruments shared by a number of users, custody of copies of the data or evidence on such instruments may be maintained in lieu of the instruments provided that the copies are substantially equivalent to the data or evidence on the instruments. The *Administrative Official* also shall take any interim *Administrative Actions/Sanctions* that may be necessary or required in accordance with **Section 7.8.01-C.4** of this *Policy*.

**F. Notifications:** The *RIO* will make the following notifications regarding the initiation of the *Institutional Review and Investigation*:

1. Notice to the Dean/Director of the *Respondent's* unit in the event that the Chair of the unit is serving as the *Administrative Official*.

2. Notice to any sponsor of the *Research* in accordance with the notification provisions set forth in **Section 7.8.01-C.5 and 7.8.01-C.6** of this *Policy*.

3. Notice to the *Complainant* and the *Respondent* at the time of or before beginning an *Institutional Review and Investigation*. The *RIO* must make a good faith attempt to notify the *Complainant* and the *Respondent* in writing of the initiation of the *Institutional Review and Investigation* and the identities of the members of the *Institutional Review and Investigation Committee*.

**G. Objections Regarding Committee Members:** The *Complainant* and the *Respondent* shall have ten days from the receipt of notice of the names of the committee members in which to provide the *RIO* with any written objection to the members of the *Institutional Review and Investigation Committee*. If no objection is received within this period, then any objection on the part of the *Complainant* or *Respondent* to the committee membership shall be considered waived. If an objection is made, then in order for it to be considered, it must be made in *Good Faith* and must set forth in sufficient detail a reasonable basis for the objection (e.g., *Conflict of Interest*). The *Administrative Official* shall consider the objection, and if s/he determines that the objection is made in *Good Faith* and is reasonable, a new member shall be appointed. If s/he determines that the objection is not made in *Good Faith* or is unreasonable, the membership of the committee shall remain the same.

**H. Charge to the Institutional Review and Investigation Committee and First Meeting:**

**1. Charge to the Committee:** The *RIO* shall prepare a charge for the *Institutional Review and Investigation Committee* that sets forth the following information:

- a. Identifies the *Respondent*.
- b. Describes the allegations and related issues identified during the *RIO's* assessment of the allegations.
- c. Defines *Regulation/Policy Violation* and identifies pertinent regulations and policies that may have been violated.
- d. Advises the *Institutional Review and Investigation Committee* that it must thoroughly evaluate the *Evidence* and testimony of the *Respondent*, *Complainant*, and relevant witnesses in order to determine whether, based on a *Preponderance of the Evidence*, a *Regulation/Policy Violation* has occurred, and if so, to what extent, who was responsible, and how serious it was.
- e. Advises the *Institutional Review and Investigation Committee* that in order to determine that the *Respondent* committed a *Regulation/Policy Violation* it must find that a *Preponderance of the Evidence* establishes that the *Respondent* violated an applicable policy or regulation/law. If a violation is found, the *Institutional Review and Investigation Committee*

also shall determine whether the violation was or was not committed intentionally, knowingly, or recklessly.

- f. Advises the *Institutional Review and Investigation Committee* that the *Respondent* has the burden of proving by a *Preponderance of the Evidence* any affirmative defenses raised.
- g. Informs the *Institutional Review and Investigation Committee* that it must take all reasonable steps to ensure the confidentiality of the proceedings.
- h. Informs the *Institutional Review and Investigation Committee* that if during the *Institutional Review and Investigation*, additional information becomes available that substantially changes the subject matter of the *Institutional Review and Investigation* or suggests additional *Respondents*, then the *Institutional Review and Investigation Committee* should notify the *RIO*, who in conjunction with the *Administrative Official*, will determine whether it is necessary to notify the *Respondent* of the new subject matter; and/or provide notice to additional *Respondents*; initiate other proceedings; and/or make referrals to other *Research Committees*.
- i. Informs the *Institutional Review and Investigation Committee* that it must prepare or direct the preparation of a written *Institutional Review and Investigation Committee Report* that meets the requirements set forth in **Section 7.8.04-I.4** below.

**2. First Meeting:** At the *Institutional Review and Investigation Committee's* first meeting, the *RIO* shall review the charge, discuss the allegations and any related issues, review the appropriate procedures for conducting the *Institutional Review and Investigation*, and answer any questions raised by the *Institutional Review and Investigation Committee*. The *Institutional Review and Investigation Committee* will be provided with a copy of this *Policy* and with copies of any pertinent laws, regulations or policies pertaining to the allegation of a *Regulation/Policy Violation* at issue. The *RIO* must be present during or available throughout the *Institutional Review and Investigation* to advise the *Institutional Review and Investigation Committee* as needed.

#### **I. Conduct of the *Institutional Review and Investigation*:**

**1. Actions to be Taken:** The *Institutional Review and Investigation Committee* should take the following actions:

- a. Interview the *Respondent* and the *Complainant*, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the *Institutional Review and Investigation*, including witnesses identified by the *Respondent* and *Complainant*.
- b. Use diligent efforts to ensure that the *Institutional Review and Investigation* is thorough and includes examination of all *Research Records* and *Evidence* relevant to reaching a decision on the merits of each allegation. The documents and materials to be reviewed should include, at least, the following: *Research Records*; data; proposals; publications; correspondence; pertinent policies, laws and regulations; and other relevant materials, including notes from any interviews conducted by the *RIO*.
- c. Take reasonable steps to ensure an impartial and unbiased *Institutional Review and Investigation* to the maximum extent practical.
- d. Pursue diligently all significant issues and leads discovered that are determined relevant to the *Institutional Review and Investigation*, including any evidence of additional instances of possible *Regulation/Policy Violations* and continue the *Institutional Review and Investigation* to completion;
- e. Evaluate the *Evidence* and testimony and determine whether based on a *Preponderance of the Evidence*, a *Regulation/Policy Violation* occurred, and if so, what regulation or policy was violated, who was responsible, its seriousness, and whether it was violated intentionally, knowingly or recklessly.

- f. Prepare and maintain notes and summaries regarding its conduct of the *Institutional Review and Investigation* to substantiate the *Institutional Review and Investigation Committee's* findings.

**2. Legal Counsel:** All parties may retain legal counsel at their own expense, but legal counsel may not be present during the *Institutional Review and Investigation Committee's* interviews or other proceedings. Legal counsel may interview witnesses who are employees of the University only through arrangement with the University's Office of the General Counsel, and only with the consent of the witness

**3. Communications and Notifications During *Institutional Review and Investigation*:** During the course of any *Institutional Review and Investigation*, the *Institutional Review and Investigation Committee* should keep the *Administrative Official* and the *RIO* apprised of any developments that disclose facts that may affect current or future sponsored *Research* for the *Respondent*, or that may be relevant to protecting the reputation of the University and/or the public interest. The *RIO* also shall provide notifications in accordance with **Section 7.8.01-C.5 and III.C.6** above.

**4. *Institutional Review and Investigation Committee Report*:** The *Institutional Review and Investigation Committee*, in consultation with the *RIO*, is responsible for preparing a written draft report of the *Institutional Review and Investigation* that:

- a. Describes the allegations of the *Regulation/Policy Violation* that were received.
- b. Identifies the *Respondent* and the *Complainant*, unless the *Complainant* is anonymous.
- c. Describes the *Research* that is involved, including any funding for the *Research* received from the University or other sponsors
- d. Describes any publications from the *Research* or that may be affected by the *Research*.
- e. Describes the pertinent University policies and procedures, as well as any other laws, regulations or policies that apply.
- e. Identifies and summarizes the *Evidence* reviewed and testimony heard.
- f. Includes a statement of findings for each allegation. Each statement of findings must: (1) identify any *Regulation/Policy Violation* that occurred and what policy, regulation/law was violated; (2) identify whether the *Regulation/Policy Violation* was committed intentionally, knowingly, or recklessly; (3) summarize the facts and analysis supporting each statement of findings; (4) identify whether any publications need correction or retraction; (5) identify the person(s) responsible for the *Regulation/Policy Violation*.
- g. Includes a description of the recommended *Administrative Actions/Sanctions*. The nature of the *Administrative Actions/Sanctions* recommended/imposed shall depend on the severity of the misconduct/violation, and may range up to and include the dismissal of the *Respondent*. *Administrative Actions/Sanctions* may include, but are not limited to, any or all of the following: withdrawal of all pending abstracts and papers emanating from any *Research* tainted by the *Regulation/Policy Violation* ; restitution of funds to the *Research* sponsor, as appropriate; notification of the editors of journals in which previous abstracts and papers were published; notification of institutions and sponsors with which the *Respondent* has been associated if there is reason to believe that the validity of previous *Research* might be questionable; and/or release of information about the incident to the press in cases in which health and safety issues or public funds were involved.

**5. Comments on the *Institutional Review and Investigation Committee Report*:** A draft of the *Institutional Review and Investigation Committee Report* must be provided to the *Respondent* for comment. The *Respondent* shall have thirty days from the date s/he received the draft report to provide comments to the *Institutional Review and Investigation Committee*. The *Respondent's* comments must be considered and included as an attachment to the final report. A draft of the *Institutional and Investigation Committee Report*, or relevant portions of it, may be provided to the *Complainant* for comment. The *Complainant* shall have thirty days from the date s/he received the draft report to provide comments to the *Investigation Committee*. The *Complainant's* comments must be considered and included as an attachment to the final report.

**6. Transmittal and Implementation of the Final Report:** The *Institutional Review and Investigation Committee* shall provide the final *Institutional Review and Investigation Committee Report* to the *Administrative Official* with a copy to the *RIO*. The report may be reviewed by the University's counsel for legality and by the *RIO* for compliance with applicable policy. After receipt and review of the *Institutional Review and Investigation Committee Report* and any comments from *Respondent* or *Complainant*, the *Administrative Official* shall, in consultation with the *RIO* and other appropriate institutional officials, make a written *Administrative Determination* as to (a) whether to accept the *Institutional Review and Investigation Committee's* findings; (b) whether to accept any recommendations put forward by the *Institutional Review and Investigation Committee*; and (c) whether to impose any new or additional requirements. In making this *Administrative Determination*, the *Administrative Official* shall give considerable weight to the findings and recommendations of the *Institutional Review and Investigation Committee*. In the event that the *Administrative Official* rejects the *Institutional Review and Investigation Committee's* findings and/or recommendations, he/she shall set forth in the written *Administrative Determination* the reasons therefore, as well as the reasons for any new or additional requirements that the *Administrative Official* imposes. The *Administrative Determination* shall document any *Administrative Actions/Sanctions* that are to be imposed upon the *Respondent*, and the *Administrative Determination* document shall be added to the final *Institutional Review and Investigation Committee Report*. The *Institutional Review and Investigation* is finished when the *Administrative Official* completes this *Administrative Determination*. The *Administrative Official* shall notify the *Respondent* and the *Complainant* in writing of the *Institutional Review and Investigation Committee's* findings and the *Administrative Determination* and provide the *RIO* and *Respondent* with copies of the *Administrative Determination* and the final *Institutional Review and Investigation Committee Report*. The *Administrative Official* also shall notify the appropriate university officials of the *Institutional Review and Investigation Committee's* findings and the *Administrative Determination*.

Based on the final report and the *Administrative Determination*, the *RIO* will determine whether sponsors, government agencies, law enforcement agencies, professional societies, professional licensing boards, editors of journals, collaborators of the *Respondent* in the work, or other relevant parties should be notified of the outcome of the case. The *RIO* is responsible for ensuring compliance with all notification requirements set forth in **Section 7.8.01-C.4** above.

**7. Appeal:** The *Respondent* shall have the right to appeal a finding of a *Policy/Regulation Violation* to the Provost or the appropriate Vice President in charge of *Respondent's* unit within ten days after the *Administrative Official* provides the *Respondent* with the final *Institutional Review and Investigation Committee Report* and the *Administrative Official's* written determination. The only grounds for appeal are procedural error, or substantive new *Evidence* in favor of the *Respondent*, that would necessitate the reversal of the decision. The appeal must be in writing and must specifically enumerate the grounds for appeal and provide documentation or affidavits of any substantive new evidence for consideration. If no appeal is received by the end of the ten day period, the *Respondent* shall be deemed to have waived any appeal rights. If an appeal is received in a timely fashion, the appropriate Vice President or Provost will appoint an *Appeals Committee* consisting of three individuals who have sufficient expertise to review the appeal and who do not have any *Conflict of Interest* with regard to the *Respondent* or the matter for review. Members of the *Institutional Review and Investigation Committee* shall not be eligible to serve on the *Appeals Committee*. The *Appeals Committee* shall have thirty days within which to review the record of the *Inquiry* and *Investigation* proceedings, and the *Respondent's* substantive new *Evidence* (if any), and issue an *Appeals Report* to the Provost or Vice President that provides as follows:

- a. If the *Appeals Committee* determines that the *Institutional Review and Investigation* did not have such procedural errors, and/or there exists no substantive new *Evidence* that could justify reversing the decision of the *Institutional Review and Investigation Committee*, then the appeal shall be denied.
- b. If the *Appeals Committee* determines that there were procedural errors in the *Institutional Review and Investigation*, or that substantive new *Evidence* exists that could justify reversing the decision of the *Institutional Review and Investigation*, then the *Appeals Committee* may grant the appeal and recommend a new *Institutional Review and Investigation* by the same or a different *Institutional Review and Investigation Committee*.

**8. Time Limit for Institutional Review and Investigation:** By no later than ninety days after the date of the *Institutional Review and Investigation Committee's* initial meeting, the *Institutional Review and Investigation Committee* should conduct its *Institutional Review and Investigation* and submit its final report to the *Administrative Official* and the *Administrative Official* shall issue the *Administrative Determination*. The

*Administrative Official* shall have thirty days within which to provide the *Respondent* with the final report and the *Administrative Determination*. The *Respondent* shall then have ten days from receipt of the final *Institutional Review and Investigation Committee Report* and *Administrative Determination* within which to appeal any decision. The *Appeals Committee* shall have thirty days from the receipt of an appeal in which to grant or deny the appeal. If the appeal is denied, the final *Institutional Review and Investigation Committee Report*, *Administrative Determination*, and notice of the denial of the appeal, must be provided to the *Respondent* within 180 days after the initial meeting of the *Institutional Review and Investigation Committee*. Notwithstanding anything to the contrary herein, any of the foregoing periods may be extended for reasonable cause by the *Administrative Official* in consultation with the *RIO*, upon written application for an extension by the *Institutional Review and Investigation Committee*.

**9. Record-Keeping Requirements:** The *RIO* shall keep all records related to the *Institutional Review and Investigation* in a secure manner for at least three years after the date on which the *Institutional Review and Investigation*, and any subsequent appeal concludes. All records shall be made available upon request to governmental agencies as may be required by law, and in accordance with, all applicable *Governmental Requirements*.

**10. Early Termination of an Institutional Review and Investigation:** If the *Institutional Review and Investigation Committee* determines that circumstances (e.g., full retraction of allegations, admission of *Respondent*) make it appropriate to terminate the *Institutional Review and Investigation* early, then the *Institutional Review and Investigation Committee* may document the reasons for an early termination in a report and submit the report to the *Administrative Official* for consideration and a decision as to whether the *Institutional Review and Investigation* may be terminated. The resignation or termination of a *Respondent* prior to the conclusion of an *Institutional Review and Investigation* shall not in and of itself be sufficient justification to support the early termination of an *Institutional Review and Investigation*.

**11. Restoration of Reputations:** In the event that the *Institutional Review and Investigation Committee* determines that there was no *Regulation/Policy Violation* this determination is accepted by the *Administrative Official*, and no other violations have occurred, then the University will diligently make appropriate efforts to restore the reputation of the *Respondent* and to protect the position and reputation of any *Complainant* who brought allegations in good faith.

## Definitions

Throughout this *Policy*, Defined Terms are shown as italicized, capitalized terms. These terms and their meanings are set forth below:

***Administrative Official*** means the institutional official who makes final determinations with regard to *Allegations of Research Misconduct Regarding Federally-Sponsored Research* and/or *Other Allegations* as well as any institutional *Administrative Actions/Sanctions* to be taken.

***Administrative Actions/Sanctions*** means any actions taken by Emory University on its own initiative or in consultation with appropriate governmental officials at any time during or after an *Research Misconduct Proceeding*, *Institutional Review and Investigation* or other proceeding under this *Policy* in order to protect the health and safety of *Research* subjects; to protect the funds or resources of sponsors; to protect the University's reputation and/or academic integrity; to protect the integrity of the *Research* process; to comply with any applicable governmental laws, regulations or policies; and/or to comply with any applicable Emory University policies or contractual obligations.

***Administrative Determination*** means the action taken by an *Administrative Official*, in consultation with the *RIO* and other appropriate institutional officials, with regard to (a) accepting or rejecting the findings of an *Inquiry Committee*, *Investigation Committee*, or *Institutional Review and Investigation Committee*; (b) accepting or rejecting the recommendations of the aforesaid committees; and/or (c) imposing any new or additional requirements.

***Allegation of Research Misconduct*** means a disclosure of possible *Research Misconduct* through any means of communication. The disclosure may be by written or oral statement or other

communication to an official of the *Institution* or a federal government official, who in turn notifies an official of the Institution.

**Appeals Committee:** A committee that is established by the *Institution* to consider an appeal of the decision of an *Investigation Committee* or of an *Institutional Review and Investigation Committee*.

**Committee Member:** A member of a committee that the *Institution* impanels: (a) for the purpose of conducting an *Inquiry* or *Investigation* into an *Allegation of Research Misconduct* under **Section 7.8.03** of this *Policy*; or (b) for the purpose of conducting an *Institutional Review and Investigation* into *Other Allegations* under **Section 7.8.04** of the *Policy*; or (c) for the purpose of considering an appeal of the decision of an *Investigation Committee* or of an *Institutional Review and Investigation Committee*.

**Complainant** means a person who in *Good Faith* makes an *Allegation of Research Misconduct* or *Other Allegations*. A *Complainant* may make allegations anonymously and request that anonymity be preserved throughout the proceeding; however, the *RIO* and any committee appointed under this *Policy* may take this fact into consideration in determining whether the allegations are substantive and/or brought in *Good Faith*.

**Conflict of Interest** means the real or apparent interference of one person's or entity's interests with the interests of another person or entity, where potential bias may occur due to prior existing personal or professional relationships.

**Evidence** means any document, tangible item, or testimony offered or obtained during a *Research Misconduct Proceeding* or other proceeding under this *Policy* that tends to prove or disprove the existence of an alleged fact.

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

**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 Records*.

**Federally-Sponsored Research** means *Research* that is funded by an entity or component of the United States federal government, which includes but is not limited to:

- a. Any type of *Research* receiving funding from a federal source, including *Research* in science, medicine, social sciences and other academic areas.
- b. Activities receiving *NSF Support*.
- c. *Research* receiving *PHS Support*, including --
  - i. *Research* projects that are supported by, or for which an application for support has been submitted to *PHS* and/or agencies that administer funds made available under the *PHS Act* (e.g., National Institutes of Health).
  - ii. Biomedical or behavioral *Research*, *Research* training or activities related to that *Research* or *Research* training (e.g., operation of tissue and data banks and dissemination of *Research* information).
  - iii. Applications or proposals for *PHS Support* for biomedical or behavioral *Research*, *Research* training or activities related to that *Research* or *Research* training.
  - iv. *Plagiarism* of *Research Records* produced in the course of *Research*, *Research* training or activities related to that *Research* or *Research* training that received *PHS Support*; and
  - v. Any *Research* proposed, performed, reviewed or reported, or any *Research Records* generated from that *Research*, regardless of whether an application or proposal for *PHS* funds resulted in a grant, contract, cooperative agreement other form of *PHS Support*.

**Good Faith** as applied to a *Complainant* or witness means having a belief in the truth of one's allegation or testimony that a reasonable person in the *Complainant's* or witness's position would have, based on the information known to the *Complainant* or witness at the time. An allegation is not made, and cooperation with a *Research Misconduct Proceeding*, or other proceeding under this *Policy*, is not undertaken in *Good Faith* if it is made/undertaken with knowing or reckless disregard for information that would negate the allegation or testimony. *Good Faith* as applied to a *Committee*

*Member* means cooperating with the purpose of helping an *Institution* meet its responsibilities under this *Policy* and, as applicable, under 42 CFR Part 93 or other applicable federal regulations. A *Committee Member* does not act in *Good Faith* if his/her acts or omissions on the committee are dishonest or influenced by personal, professional, or financial *Conflicts of Interest* with those involved in the *Research Misconduct Proceeding* or other proceedings under this *Policy*.

**Governmental Requirements** is a collective reference to all United States federal laws, regulations and polices that apply to specific *Research*.

**Health and Human Services or HHS** means the United States Department of Health and Human Services.

**Inquiry** means preliminary information-gathering and preliminary fact-finding to determine whether an *Allegation of Research Misconduct* has substance and warrants an *Investigation* in accordance with the criteria and procedures set forth in 42 CFR §§93.307-93.309 in the case of *Research* receiving *PHS Support*, or other applicable federal regulations, including 45 CFR §§ 689.1- .10 in the case of *Research* receiving *NSF Support*.

**Inquiry Committee** means the group of individuals appointed to conduct an *Inquiry* under this *Policy*.

**Inquiry Committee Report** means the written report issued by the *Inquiry Committee* to the *Administrative Official* and the *RIO* at the end of the *Inquiry Committee's* proceedings.

**Institution** means any individual or entity that applies for or receives *PHS*, *NSF* or other federal government support for any activity or program that involves the conduct of *Research*, including activities related to that *Research*, or *Research* training. This term includes, but is not limited to, colleges and universities. For purposes of this *Policy*, Emory University shall be considered to be the *Institution*.

**Institutional Member** means a person who is employed by, is an agent of, or is affiliated by contract or agreement with an *Institution*. *Institutional Members* may include, but are not limited to, officials, tenured and untenured faculty, teaching and support staff, researchers, research coordinators, clinical technicians, postdoctoral and other fellows, students, volunteers, agents, and contractors, subcontractors, and subawardees, and their employees.

**Institutional Review and Investigation** means the information-gathering, fact-finding, evaluation and determination process conducted by an *Institutional Review and Investigation Committee* in order to make findings as to whether or not there has been an occurrence of (a) *Research Misconduct*; or (b) a *Regulation/Policy Violation*.

**Institutional Review and Investigation Committee** means the group of individuals appointed to conduct an *Institutional Review and Investigation* under this *Policy*.

**Institutional Review and Investigation Committee Report** means the written report issued by the *Institutional Review and Investigation Committee* to the *Administrative Official* and the *RIO* at the end of the committee's proceedings.

**Investigation** means the formal development of a factual record and the examination of that record leading to a decision as to whether or not there has been *Research Misconduct*, as well as making recommendations for other appropriate actions, including *Administrative Actions/Sanctions*.

**Investigation Committee** means the group of individuals appointed to conduct an *Investigation* under this *Policy*.

**Investigation Committee Report** means the written report issued by the *Investigation Committee* to the *Administrative Official* and the *RIO* at the end of the *Investigation Committee's* proceedings.

**National Science Foundation or NSF** means the independent federal agency founded to promote the progress of science which has promulgated the regulations set forth at 45 CFR Chapter VI, Parts 601 to 690, including the policies at Part 689 governing matters concerning *Research Misconduct* as it pertains to *Research* receiving *NSF Support*.

**Notice** means a written communication served in person or sent by mail or its equivalent to the last known street address, facsimile number or email address of the addressee.

**NSF Office of Inspector General** or the **NSF OIG** means the office within *NSF* that oversees investigations of *Research Misconduct* and conducts *NSF* inquiries or investigations into such allegations.

**NSF Support** means *NSF* funding (or applications or proposals therefor) for any type of *Research*, or related training or education.

**Office of Research Integrity** or **ORI** means the office to which the *HHS* Secretary has delegated responsibility for addressing research integrity and misconduct issues related to activities receiving *PHS* Support.

**Other Allegations** means any disclosure or communication of possible *Regulation/Policy Violations* to any official of the *Institution* or to any governmental official who, in turn, discloses or communicates the information to an official of the *Institution*.

**PHS Support** means *PHS* funding, or applications or proposals therefor, for biomedical or behavioral *Research*, biomedical or behavioral *Research* training, or activities related to that *Research* or training, that may be provided through *PHS*; funding for *PHS* intramural *Research*; *PHS* grants, cooperative agreements or contracts, or subgrants or subcontracts under those *PHS* funding instruments; or salary or other payments under *PHS* grants, cooperative agreements or contracts.

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

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

**Public Health Service** or **PHS** means the units within the Department of Health and Human Services including the Office of Public Health and Science and the following Operating Divisions: Agency for Healthcare Research and Quality, Agency for Toxic Substances and Disease Registry, Centers for Disease Control and Prevention, Food and Drug Administration, Health Resources and Services Administration, Indian Health Service, National Institutes of Health, Substance Abuse and Mental Health Services Administration, and the offices of the Regional Health Administrators.

**Records of Research Misconduct Proceedings** means:

- a. Any *Research Records* and *Evidence* secured for the *Research Misconduct Proceeding* pursuant to **Section 7.8.03** of this policy, 42 CFR §§93.305, 93.307(b) and 93.310(d), and any other applicable federal regulations, except to the extent the *RIO* determines and documents that those records are not relevant to the proceeding or that the records duplicate other records that have been retained;
- b. Any documentation of the determination of irrelevant or duplicate records;
- c. Any *Inquiry Committee Report* and final documents (not drafts) produced in the course of preparing that report, including the documentation of any decision not to investigate;
- d. Any *Investigation Committee Report* and all records (other than drafts of the report) in support of the report, including the recordings or any transcripts of each interview conducted; and
- e. The complete record of any appeal within the *Institution* from the finding of *Research Misconduct*.

**Records of Proceedings** means any reports and supporting documentation related to a proceeding conducted under this *Policy* other than a *Research Misconduct Proceeding*.

**Regulation/Policy Violation** means a material failure to comply with any applicable federal, state or local law, regulation or policy or with any applicable Emory University policy or requirement that applies to *Research* or the conduct or funding of *Research* that does not fall within the definition of *Research Misconduct*. *Regulation/Policy Violations* include, but are not limited to, the following acts: (i) material failure to comply with federal, state, or local laws, regulations and policies

and/or Emory policies, procedures, and requirements regarding *Research*; (ii) failure to obtain proper review and approval by the responsible Emory *Research* review/oversight committee or committees (e.g., Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), Conflict of Interest Committee(s), Radiation Safety Committee, Institutional Health and Biosafety Committee, all such committees collectively referred to herein as “*Research Committees*”); (iii) the failure to follow policies or requirements established by or recommendations made by Emory *Research Committees*; (iv) failure to meet other material legal requirements governing *Research*; (v) failure to notify Emory authorities when it becomes apparent that *Research Misconduct* or a *Regulation/Policy Violation* probably has occurred; and (vi) failure to cooperate in proceedings under this *Policy* or other applicable policies, procedures or regulations. For purposes of this *Policy*, a *Regulation/Policy Violation* does not include *Allegations of Research Misconduct* or findings of *Research Misconduct*.

**Research** means a systematic experiment, study, evaluation, demonstration or survey designed to develop or contribute to general knowledge (basic research) or specific knowledge (applied research) including, but not limited to *Research* relating broadly to public health by establishing, discovering, developing, elucidating or confirming information about, or the underlying mechanism relating to, biological causes, functions or effects, diseases, treatments, or related matters to be studied. With regard to *Research* funded by the *NSF*, *Research* includes proposals submitted to *NSF* in all fields of science, engineering, mathematics, and education and results from such proposals.

**Research Committees:** Those committees at Emory University that are responsible for review and oversight of *Research*, including, but not limited to, the Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), Conflict of Interest Committee(s), Radiation Safety Committee, Institutional Health and Biosafety Committee (IHBC).

**Research Integrity Officer (RIO)** means the *Institution’s* official responsible for:

- a. Assessing *Allegations of Research Misconduct* to determine whether they fall within the definition of *Research Misconduct*; are covered by 42 CFR Part 93 if the *Research* has received *PHS Support*; are covered by 45 CFR § 689.1 to .10, if the *Research* has received *NSF Support*; and warrant an *Inquiry* on the basis that the allegations are sufficiently credible and specific so that the potential *Evidence of Research Misconduct* may be identified;
- b. Assessing *Other Allegations* to determine if they fall within the scope of this *Policy*, and if so, determining whether they come under the procedures set forth in **Section 7.8.03** or **Section 7.8.04** of this *Policy*;
- c. Overseeing the administration of *Inquiries* and *Investigations*; and overseeing the administration of an *Institutional Review and Investigation*; and
- d. Carrying out other responsibilities assigned to the *RIO* in this *Policy*.

**Research Misconduct** means *Fabrication*, *Falsification*, or *Plagiarism* in proposing, performing or reviewing *Research*; submitting proposals for *Research*; or in reporting *Research* results. It does not include honest error or honest differences in interpretations or judgments of data.

**Research Misconduct Proceeding** means any actions related to *Allegations of Research Misconduct* taken under this *Policy*, including but not limited to, allegation assessments, *Inquiries* and *Investigations*.

**Research Records** means those records of data or results that embody the facts resulting from scientific inquiry, including but not limited to, *Research* proposals, laboratory records (physical and electronic), progress reports, abstracts, theses, oral presentations, internal reports, journal articles, as well as these and any other documents and materials that (a) a *Respondent* provides to *HHS*, *NSF*, other federal agencies, or institutional officials in the course of a *Research Misconduct Proceeding*; or (b) a *Respondent* provides to officials of the *Institution* or appropriate governmental officials during the conduct of any other proceeding conducted under this *Policy*.

**Respondent** means the person against whom an *Allegation of Research Misconduct* or *Other Allegation* is directed or who is the subject of a *Research Misconduct Proceeding* or other proceeding conducted under this *Policy*.

**Retaliation** means an adverse action taken against a *Complainant*, witness, or *Committee Member* by an *Institution* or one of its members in response to:

- *Good Faith Allegations of Research Misconduct*;
- *Other Allegations* made in *Good Faith*; or
- *Good Faith* cooperation with a *Research Misconduct Proceeding* or any other proceeding conducted under this *Policy*.

**Secretary of HHS** means the Secretary of *HHS* or any other officer or employee of *HHS* to whom the Secretary delegates authority.

#### Related Links

- Current Version of This Policy: <http://policies.emory.edu/7.8>

#### Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Office of Research Compliance	404-727-3827	kwest02@emory.edu

#### Revision History

- Version Published on: [Jul 29, 2008](#) (*Added text to definitions: Reg/PolicyViolation & ResearchCommittees*)
- Version Published on: [May 15, 2008](#) (*Original Publication*)