

3344-28-01 Introduction.

(A) General policy

Cleveland state university endorses the ~~principal-principle~~ that its faculty and staff are entitled to full freedom in research and to full freedom in the publication of the results of those research endeavors. Corresponding with this principle of full freedom in research is the obligation to maintain the highest standards of professional ethics. Membership in the academic community imposes on faculty, staff, and students the commitment to foster and to defend intellectual honesty in research and scholarship. The primary responsibility of the faculty is to their subject and to seeking and stating the truth. University faculty and staff pledge quality and integrity in their research and publications primarily through self-regulation, through adherence to individual ethical principles, through dependence on accepted disciplinary professional standards, and by reference to the traditions and standards of collegiality characteristic of all institutions of higher learning. This document articulates university policy on academic integrity in research and publication and prescribes procedures for impartial fact-finding and fair adjudication of allegations of academic research misconduct.

(B) Scope

This policy and the associated procedures apply to all individuals engaged in academic research at Cleveland state university, including faculty members, professional staff, scientists, trainees, technicians and other staff members, students, fellows, volunteers, ~~guest~~ guest researchers, or collaborators. The policy and the associated procedures are derived from the ~~office of research integrity's~~ Office of Research Integrity's "model policy for responding to allegations of academic research misconduct" and as such are particularly appropriate for scientific research supported by, or for which support is requested from, the ~~public health service~~ Public Health Service "PHS," the ~~national science foundation,~~ NSE, National Science Foundation "NSF", or any other federal agency. The ~~office of research integrity~~ Office of Research Integrity, "ORI," is an independent entity within the U. S. ~~department of health and human services~~ Department of Health and Human Services reporting directly to the secretary of health and human services. "ORI" is responsible for protecting the integrity of "PHS" extramural and intramural research programs. "PHS" regulations, at ~~42 C.F.R. 50(a)~~ 42 CFR Part 93 apply to any research, research-training or research-related grant, or cooperative agreement with the "PHS."

- (C) (C) This statement of policy and procedures does not apply to authorship or collaboration disputes. In the case of PHS supported research, the policy applies only to allegations of research misconduct that occurred within six years of the date the institution or HHS received the allegation, subject to the subsequent use, health or safety of the public, and grandfather exceptions in 42 CFR § 93.105(b).

- (D) These procedures shall normally be followed when an allegation of possible misconduct in academic research is received by a university official. Particular circumstances in an individual case may dictate variation from normal procedure deemed in the best interests of Cleveland state university and the “PHS” or other federal agency. Such variations from normal procedure should be constructed to ensure fair treatment to the subject of the inquiry or investigation. Any significant variation from normal procedure should be approved in advance by the chief academic officer of Cleveland state university.

3344-28-02 Definitions.

- (A) “Academic research misconduct,” herein, sometimes referred to as “misconduct,” means fabrication, falsification, plagiarism, undisclosed conflicts of interest as defined in the policy for managing conflict of interest, or other practices that seriously deviate from those that are commonly accepted within the academic research community for proposing, conducting, reviewing, or reporting research and was committed intentionally, knowingly, or recklessly. It does not include honest error or honest differences in interpretations or judgments of data.
- (B) “Allegation” means any written or oral statement or other indication of possible academic research misconduct made to an institutional officer.
- (C) “Complainant” means a person who makes an allegation of academic research misconduct or inadequate institutional response thereto or who cooperates with an investigation of such allegation. There can be more than one complainant in any inquiry or investigation.
- (D) “Conflict of interest” means the real or apparent interference of one person's interest with another, where potential bias may occur due to prior or existing personal or professional relationships.
- (E) “Deciding official” means the institutional official who makes final determinations on allegations of academic research misconduct and on any responsive institutional actions. At Cleveland state university the deciding official is the provost and senior vice president.
- (F) “Good faith allegation” means an allegation of academic research misconduct made by a complainant who honestly believes that academic research misconduct may have occurred. A good faith allegation need not be objectively made or be subsequently verified to be made in good faith. However, a complainant who recklessly disregards available evidence available that disproves an allegation has not made the allegation in good faith.

- (G) Inquiry means information gathering and initial fact-finding to determine whether an allegation or apparent instance of academic research misconduct warrants an investigation.
- (H) “ORI” means the ~~office of research integrity~~ Office of Research Integrity, which is an independent entity within the U.S. ~~department of health and human services~~ Department of Health and Human Services reporting to the ~~secretary of health and human services~~ Secretary of Health and Human Services. The “ORI” is responsible for protecting the integrity of extramural and intramural research programs, ~~“EHS.”~~.
- (I) “PHS” means the ~~public health service~~ Public Health Service, which is part of the ~~department of health and human services~~ Department of Health and Human Services, “DHHS” of the federal government.
- (J) ~~“PHS” regulation~~ “PHS regulation” means the public health service regulation codified at ~~42 C.F.R. 50(a)~~ entitled “responsibility of PHS awardee and applicant institutions for dealing with and reporting possible misconduct in science.” 42 CFR Part 93, titled “Public Health Service Policies On Research Misconduct”
- (K) “PHS support” means “PHS” grants, contracts, or cooperative agreements, or applications, ~~therefore for any of these.~~
- (L) “Research integrity officer” or “RIO” means the institutional official responsible for assessing allegations of academic research misconduct and determining when such allegations warrant inquiries and for overseeing inquiries and investigations. At Cleveland state university the research integrity officer is the vice president for research or their designee.
- (M) “Research record” means any data, document, computer file, computer disk, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of an allegation of scientific misconduct. A research record includes, but is not limited to: grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; correspondence; videos; photographs; x-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records;

animal facility records; human and animal subject protocols; consent forms; -medical charts; and patient research files.

- (N) ~~Respondent~~—“Respondent” means the person against whom an allegation of academic research misconduct is directed, or the person who is the subject of the inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

- (O) “Retaliation” means any deliberate response by Cleveland state university, or an employee of Cleveland state university, that adversely affects the employment or other institutional status of a respondent to whom an allegation of misconduct has been directed by not proven or of a complainant who, in good faith, has made an allegation of academic research misconduct or inadequate institutional response, thereto, or who has cooperated in good faith with an investigation of such allegation.

3344-28-03 Rights and responsibilities.

- (A) Research integrity officer.

All records related to a case shall be treated as confidential insofar as is permitted by the law of the state of Ohio and no materials growing out of a case shall be placed in the respondent's personnel file prior to the final disposition of the matter.

- (B) The research integrity officer,—"RIO" will have primary responsibility for adherence to the procedural requirements set forth in this document and, therefore, shall be sensitive to the varied demands made on those who conduct research, those who are accused of misconduct, and those who report apparent misconduct in good faith.

- (C) The research integrity officer will ~~attempt to resolve~~ assess, on an informal and confidential basis, any reported misconduct. Should the "RIO" determine there is insufficient reason to pursue the matter, the "RIO" shall notify the respondent of the complaint and its disposition.

- (D) ~~Should such an informal review prove not to be successful in resolving the problem~~ assessment indicate that there is sufficient reason to pursue the matter further, the research integrity officer has two options: ~~(1) the "RIO" together with the respondent may decide to proceed directly to the investigation phase, or, (2) if either the "RIO" or the respondent so desires, the procedure will move to the inquiry phase.~~ (1) The RIO will initiate an inquiry proceeding as described in section 3344-28-05, or (2) if the RIO concludes that the allegation falls within the definition of research misconduct and the assessment described in 3344-28-03 (C) indicates that the allegation may have merit, the RIO will submit a written request to the Deciding Official and Sponsoring Agency, if any, to proceed directly to an investigation. If approval to proceed directly to investigation is granted, the RIO will immediately inform the respondent and complainant. The "RIO" will appoint the inquiry and/or investigation committees and ensure that necessary and appropriate expertise is secured to carry out a thorough and authoritative evaluation of the relevant evidence in an inquiry of investigation. It is the responsibility of the research integrity officer to ensure that neither the inquiry nor the investigation committee exceeds the scope of its charge. Moreover, the research integrity officer will ensure that interim administrative actions are taken, as appropriate, to protect federal funds. The research integrity officer will attempt to ensure that confidentiality is maintained throughout all of these proceedings.

- (E) The research integrity officer will assist inquiry and investigation committees and all institutional personnel to comply with these procedures and with applicable standards imposed by governmental or external funding sources. The research integrity officer also is responsible for maintaining files of all documents and evidence as well as for the confidentiality, insofar as is permitted by the state of Ohio, and the security of the files.
- (F) The research integrity officer will report to the “ORI” as required by regulation and keep the “ORI” apprised of any developments during the course of the investigation that may affect current or potential “DHHS” funding for the individual(s) under investigation or that the “PHS” needs to know to ensure appropriate use of federal funds and otherwise protect the public interest.
- (G) Complainant
- The complainant shall have an opportunity to testify before the inquiry and/or investigation reports pertinent to that testimony, to be informed of the results of the inquiry and/or investigation, and to be protected from retaliation.
- (H) The complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with an inquiry or investigation.
- (I) Allegations of academic research misconduct made in bad faith, having no basis in fact or put forth merely to discredit the respondent, shall, themselves, constitute academic research misconduct, which shall be subject to formal review by the research integrity officer as well as the provost and academic dean of the college, wherein, the faculty or staff member holds an institutional appointment.
- (J) Respondent
- The respondent shall be informed in writing of the allegations if and when a formal inquiry and/or investigation is initiated; shall receive the written notice at the time of or before the beginning of the inquiry; shall be provided with a copy of this policy and informed of the composition of the inquiry and/or investigative committee; and shall be notified in writing of the final determinations and resulting actions as soon as possible following the conclusion of all formal actions. The respondent shall also have the opportunity to be interviewed by and to present witnesses and evidence to the inquiry and investigation:
- ~~(K) Committees~~ committees, to be present at an inquiry and/or investigative hearing, to review the inquiry and investigation reports, and to have the assistance of private legal counsel or another

advisor (who is not a principal or witness in the case) during the inquiry and/or investigative hearing, ~~but may advise the respondent.~~ Further, the respondent may write out questions to be asked of witnesses during an inquiry and/or investigation, hear the answer(s), and submit for response any follow-up questions.

(K) ~~(L)~~(K) The respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry or investigation.

(L) Institutional official.

The research integrity officer will conduct the inquiry or will appoint inquiry and, if necessary, investigation committees and ensure that necessary and appropriate expertise is secured to carry out a thorough and authoritative evaluation of the relevant evidence in an inquiry or investigation. The research integrity officer will also ensure that interim administrative actions are taken, as appropriate, to protect federal funds and guarantee that the purposes of the federal financial assistance are carried out.

(M) The research integrity officer will receive the reports and written comments of the respondent and the complainant, if any are made. The deciding ~~officer~~ official shall determine whether to conduct an investigation, or to recommend that sanctions be imposed, or to take appropriate administrative actions.

3344-28-04 General policies.

(A) Responsibility to report misconduct.

All employees or individuals associated with Cleveland state university are required to report observed, suspected, or apparent academic research misconduct to the research integrity officer. ~~¶~~ If an individual is uncertain whether a suspected incident of misconduct falls within the definition, he or she may ~~call~~ contact the research integrity officer at ~~(216) 687-3595~~ to discuss the suspected misconduct informally. If the circumstances described by the individual do not meet the definition of academic research misconduct, the research integrity officer will refer the individual or allegation to other offices or officials with appropriate responsibility for resolving the problem in question.

(B) Evidentiary standard.

~~Clear and convincing evidence is required~~ For each allegation, the evidentiary standard for a finding that academic research misconduct has occurred is that there was a significant departure from accepted practices of the relevant research community; and that the misconduct was committed intentionally, knowingly or recklessly; and that the allegation is proven by a preponderance of the evidence.

(C) Preliminary assessment

Upon receiving an allegation of academic research misconduct, the research integrity officer shall immediately assess the information to determine whether there is sufficient evidence to warrant an inquiry. ~~¶~~ In assessing the allegation, the research integrity officer also shall determine whether “PHS” support or “PHS” applications for funding are involved, and whether the allegation falls under the “PHS” definition of misconduct in science.

(D) Cooperation with inquiries and investigations.

All Cleveland state university employees shall cooperate with the research integrity officer in the review of allegations and the conduct of inquiries and investigations. Employees have an obligation to provide relevant evidence to the research integrity officer or other institutional officials on misconduct allegations.

(E) Protection of respondents.

Inquiries and investigations will be conducted in a manner that will ensure fair treatment to the respondent(s) of the inquiry or investigation and confidentiality to the extent possible, insofar as is permitted by the laws of the state of Ohio, consistent with protecting public health and safety and with carrying out the inquiry or investigation.

(F) If the respondent is found not to have committed academic research misconduct, or if after an allegation of academic research misconduct has been made, there is no inquiry and/or investigation because the "RIO" or the deciding official has determined that none is warranted, after consultation with the respondent the university shall undertake efforts, as it deems appropriate in its sole discretion, to restore the reputation of the respondent.

(G) Institutional employees who are accused of academic research misconduct may at any time consult private legal counsel and/or another member of the university community for personal advice during interviews or meetings on the case, or private legal counsel for personal advice during investigative hearings.

(H) Protection of complainants.

At any time, an employee may have confidential discussions and consultation with the research integrity officer about concerns of possible misconduct and will be counseled about appropriate procedures to report allegations.

(I) The research integrity officer will monitor the treatment of individuals who bring allegations of misconduct or inadequate institutional response thereto, or who cooperate in inquiries or investigations. The university is required to protect from retaliatory actions those persons who, in good faith, make allegations. The research integrity officer will ensure that those making an allegation in good faith or cooperating with an inquiry or investigation into an allegation of academic research misconduct will not be retaliated against in the terms and conditions of their employment or other institutional status at Cleveland state

- (J)
- (K) university. Instances of apparent retaliation will be reviewed by the research integrity officer for appropriate action.
- (L) If retaliation is confirmed, complainants will be consulted regarding appropriate corrective actions to be taken on their behalf to restore or protect their positions or reputations.
- (M) Securing data and evidence.

The first step after determining that an allegation falls within the definition of academic research misconduct is to sequester all relevant research records and materials. ~~The “PHS” office of research integrity at 301-443-5330 can provide advice and assistance in this regard.~~ The research integrity officer shall ensure immediate securing of all relevant materials.

- (N) Any such actions taken prior to a final determination should be devised and taken as to create minimal interference with the regular research activities of the respondent and other involved parties.

3344-28-05 Inquiry.**(A) Purpose of the inquiry**

Cleveland state university shall inquire immediately into an allegation or other evidence of possible academic research misconduct that has been assessed per 3344-28-04 (C) to warrant an inquiry proceeding. The purpose of the inquiry is ~~to evaluate the situation~~ to determine whether there is sufficient evidence of possible academic research misconduct to warrant an investigation. The purpose of the inquiry is not to reach a final conclusion of whether misconduct occurred or who was responsible.

(B) Appointment of inquiry committee

If the research integrity officer decides that an inquiry should be conducted, the research integrity officer shall initiate the process by appointing an inquiry committee within ten days of determining that an inquiry is necessary. Alternatively, the research integrity officer may conduct the inquiry proceeding himself/herself, subject to the same responsibilities as an inquiry committee. The inquiry committee, if appointed, shall consist of two or more individuals who have ~~no real or apparent conflicts of interest in the case~~ unresolved personal, professional, or financial conflicts of interest with those involved with the inquiry, are unbiased, and have appropriate qualifications to evaluate the issues raised and to interview the principals and the key witnesses as well as to conduct the inquiry. Individuals chosen to serve on the inquiry committee may be scientists, subject matter experts, or other qualified persons, and they may be from inside or outside the university. The inquiry committee selects its own chair.

(C) The research integrity officer shall notify the respondent of the proposed committee membership within ten days of making the determination that an inquiry is required. If the respondent submits a written objection to any appointed member of the inquiry committee based on bias or conflict of interest within five working days of receiving the names of the inquiry committee members, the research integrity officer shall determine whether to replace the challenged member with a qualified substitute. The respondent retains the right to lodge a written objection to any substitute within two working days of receipt of notice.

(D) Charge to inquiry committee

The charge to the inquiry committee should specifically limit its scope, as required by the "PHS" regulation, to evaluating the facts to determine only whether there is sufficient evidence of academic research misconduct to warrant an investigation.

(E) The research integrity officer shall define the subject matter of the inquiry in a written charge to the inquiry committee that describes the allegations and any related issues identified during the allegation assessment, defines academic research misconduct, and identifies the name of the respondent. The charge shall state that the purpose of the inquiry committee is to make a preliminary evaluation of the evidence and testimony of the respondent, complainant, and key witnesses to determine only whether there is sufficient evidence of academic research misconduct to warrant an investigation. The purpose is not to determine whether academic research misconduct definitely occurred or who was responsible.

(F) A copy of the charge to the inquiry committee shall be sent to the respondent.

(G) At the inquiry committee's first meeting, the research integrity officer shall review the charge with the committee and shall discuss the allegation(s), any related issues, and the appropriate procedures for conducting the inquiry. It is the responsibility of the research integrity officer to assist the inquiry committee with plans for organizing the inquiry and to answer any questions raised by the inquiry committee members. The research integrity officer and university legal counsel shall be present or available throughout the inquiry process to advise the inquiry committee as needed. The committee also has the right to consult any additional experts it deems necessary.

(H) During the inquiry, if additional information becomes available that substantially changes the subject matter of the inquiry or would suggest additional respondents or require a modification of the initial charge, the inquiry committee shall notify the research integrity officer, who shall determine whether it is necessary to notify the respondent of the new subject matter or to provide notice to additional respondents, to modify the original charge, or to initiate a new inquiry rather than continuing the one currently underway. The respondent shall be notified of any significant change.

(I) Inquiry process

An inquiry normally shall involve interviewing the complainant, the respondent, all the key witnesses, as well as examining relevant research records and materials. At the beginning of the inquiry process, the inquiry committee normally shall invite the respondent to prepare a brief written response to the allegations received from the complainant.

(J) Time limit for completing inquiry report

The inquiry committee normally shall complete the inquiry and submit its report in writing to the research integrity officer and the respondent no more than sixty calendar days following the initiation of the inquiry process, with the initiation being defined as the date upon which the committee first meets. If the research integrity officer approves an extension of ~~time~~ this time limit, the reason for the extension shall be entered into the records of the case and the report. The respondent and complainant also shall be notified of the extension and its justification.

(K) Inquiry report contents

A written report shall be prepared that states: the name and position of the respondent, the name and title of each of the inquiry committee members and additional experts consulted, if any; the allegations; the “PHS” or other external support; the initial charge; a summary of the inquiry process used; a list of the research records reviewed; summaries of interviews; a description of the evidence in sufficient detail to demonstrate whether an investigation is recommended and whether any other actions should be taken if an investigation is not recommended; the comments to the first draft from the complainant and respondent; and the final report. Documentation of the misconduct proceeding including copies of evidence pertinent to the inquiry decision shall be maintained for at least 7 years after the termination of the inquiry and be made available to authorized ORI or HHS personnel if requested.

(L) Comments by respondent and complainant

~~(1) The individual(s) against whom the allegation was made~~ respondent is to be given a copy of the draft inquiry report by the research integrity officer. If their identity is known, ~~the person(s) who raised the~~ (2) Allegation the complainant shall be provided with only those sections of the report that address their role and opinions in the inquiry as well as a summary of the inquiry findings. Any comments that the complainant and/or the respondent submit on the report shall become part of the inquiry record.

(M) Confidentiality

The research integrity officer may establish reasonable conditions for review to protect the confidentiality of the draft report insofar as is permitted by the laws of the state of Ohio.

(N) Receipt of comments

Within fourteen calendar days of their receipt of the draft report, the complainant and the respondent shall provide their comments. Any comments that the complainant or respondent submits on the draft report shall become part of the final inquiry report and record. Based on the comments received, the inquiry committee may revise the report as appropriate within ten days of receipt of comments.

(O) Inquiry decision and notification

After receipt of both the final inquiry report and the written comments of the respondent and the complainant, if any are made, a determination shall be made whether to conduct an investigation, drop the matter, or to take some other appropriate action(s).

(P) Decision by deciding official.

The research integrity officer shall transmit the final report and any comments to the deciding official, who shall make the determination of whether findings from the inquiry provide sufficient evidence of possible academic research misconduct to justify conducting an investigation. The inquiry process is completed when the deciding official makes the determination. If the deciding official determines that an investigation is warranted, the investigation shall begin within 30 days of the determination.

(Q) Notification.

Within five working days, the research integrity officer shall notify both the respondent and the complainant in writing of the deciding official's decision of whether to proceed to an investigation and shall remind them of their obligation to cooperate in the event that an investigation is opened. The research integrity officer shall also notify all appropriate institutional officials of the deciding official's decision.

3344-28-06 Conducting the investigation.**(A) Purpose of the investigation**

The purpose of the investigation is to explore in detail the allegations, to examine the evidence in depth, and to determine specifically whether academic research misconduct has been committed, and if so, the responsible person and the seriousness of the misconduct. The investigation also will determine whether there are additional instances of possible academic research misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where the alleged misconduct involves clinical trials, or potential harm to human subjects or the public, or if it affects research that forms the basis for public policy, clinical practice, or public health practice. The findings of the investigation will be set forth in an investigation report.

(B) Sequestration of the research records

The research integrity officer shall immediately sequester any additional pertinent research records not previously sequestered during the inquiry process. This sequestration should occur before or at the time the respondent is notified that an investigation has begun. The need for additional sequestration of records may occur for any number of reasons; for example, the university's decision to investigate additional allegations not considered during the inquiry stage may require additional documentation contained within the research records, or the inquiry process may identify additional research records that will be needed during the investigation.

(C) Any such administrative actions taken prior to a final determination should be devised and taken to create minimal interference with the regular research activities of the respondent and other involved parties.**(D) Appointment of the investigation committee**

Within ten days of the notification to the respondent that an investigation will be conducted, or as soon thereafter as

practicable, the research integrity officer, in consultation with other university officials as appropriate, will appoint an investigation committee.

- (E) Appointees may not have served on the inquiry committee. The investigation committee should consist of at least three individuals who do not have any real or apparent ~~conflicts of interest with the respondent or the case in question~~ unresolved personal, professional, or financial conflicts of interest with those involved with the investigation. The members of the investigation committee shall have the necessary expertise to examine the evidence, interview the principals and key witnesses, and conduct the investigation. The investigation committee members may be scientists, subject matter experts, or other qualified persons, and they may be from inside or outside the university. The investigation committee selects its own chair.
- (F) The research integrity officer shall notify the respondent of the proposed investigation committee membership within ten days of the time of the notification to the respondent that an investigation will be conducted. If within five working days of receiving the names of the investigation committee members, the respondent submits a written objection to any appointed member of the investigation committee based on bias or conflict of interest, the research integrity officer shall determine within five working days whether to replace the challenged member with a qualified substitute. Substitute members may also be challenged by the respondent within two working days.
- (G) Charge to investigation committee and the first meeting
- (1) Charge to the committee
- The research integrity officer shall define the subject matter of the investigation in a written charge to the committee that describes the allegation(s) and related issues identified during the inquiry, define academic research misconduct, and identify the complainant and the respondent. The charge shall state that the committee is to evaluate the evidence and testimony of the respondent, the complainant, and key witnesses to determine whether there is ~~clear and convincing~~ a preponderance of the evidence that academic research misconduct occurred and, if so, to what extent, who was responsible, and its seriousness.
- (2) During the investigation, if additional information becomes available that substantially changes the subject matter of the investigation or would suggest additional respondents or a

modification of the original charge, the committee shall notify the research integrity officer, who shall determine whether it is necessary to notify the respondent of the new subject matter or to provide notice to additional respondents, to modify the original charge, and to initiate a new inquiry or continue the investigation underway. The respondent must be notified immediately of any significant change.

- (3) A copy of the charge shall be sent to the respondent
- (4) First meeting

The research integrity officer, with the assistance of university legal counsel, shall convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for conducting the investigation. It is the responsibility of the research integrity officer to assist the investigation committee with plans for organizing the investigation and to answer any questions raised by the investigation committee members. The research integrity officer and university legal counsel shall be present or available throughout the investigation process to advise the investigation committee as needed.

- (H) Investigation process

The investigation normally shall include examination of all documentation including, but not necessarily limited to, relevant research data materials, proposals, publications, correspondence, memoranda, and notes of telephone calls. Whenever possible, interviews should be conducted of all individuals involved either in making the allegation or against whom the allegation is made, as well as other individuals who might have information regarding

key aspects of the allegations. All interviews should be tape-recorded. Copies of these interview tapes should be prepared, and recorded material containing evidence on which the investigation report is based shall be provided to the respondent, and included as part of the investigatory file. A copy of the tape of respondent's interview may be provided to the interviewed party upon request.

(I) Time limit for completing the investigation report

An investigation should ordinarily be completed within one hundred and twenty days of its initiation, with the initiation being defined as the date upon which the committee first meets. This includes time for conducting the investigation- including providing the respondent with the opportunity to confront and question all witnesses, preparing the report of findings, making the report available for comment by the subjects of the investigation, as well as submitting the report to the research integrity officer and the "ORI."

(J) The investigation report

The final report, if submitted to "ORI," shall state the policies and procedures under which the investigation was conducted, describe how and from whom information relevant to the investigation was obtained, state the findings, and explain the basis for the findings. Any final report shall include the actual text or an accurate summary of the views of any individual(s) found to have engaged in misconduct, as well as a description of any intermediate administrative actions taken by the university.

The investigation report must be in writing and include the following sections:

- (1) Description of the allegations of research misconduct
- (2) Description and documentation of any PHS support (e.g., grant numbers, grant applications, contracts, publications listing PHS support)
- (3) The institutional charge
- (4) The policies and procedures under which the investigation was conducted
- (5) A summary of the research records and evidence, including identification of any evidence taken into custody but not reviewed
- (6) A statement for each separate allegation of research misconduct of a finding of whether or not research misconduct did or did not occur, and if so
 - Identification of whether the research misconduct was falsification, fabrication, or plagiarism, and if it was intentional, knowing, or in reckless disregard;
 - A summary of the facts and analyses which support

- the conclusion and consider the merits of any reasonable explanation by the respondent
 - Identification of specific PHS support
 - Identification of whether any publications need correction or retraction
 - Identity of the person(s) responsible for the misconduct; and
 - A list of any current support or known applications or proposal for support that the respondent has pending with non-PHS Federal agencies
- (7) Comments made by the respondent and complainant on the draft investigation report

All relevant research records and records of the research misconduct proceeding, including the results of all interviews and transcripts or recordings of such interviews shall be maintained and provided to ORI up request.

(K) Comments on the draft investigation report

(1) Respondent

The research integrity officer shall provide the respondent with a copy of the draft investigation report and, concurrently, a copy of or supervised access to the evidence on which the report is based for comment and rebuttal. The respondent shall be allowed ~~fourteen~~ thirty days to review and to comment on the draft report. The respondent's comments shall be attached to the final report. In addition to all the other evidence, this report should take into account the respondent's comments.

(2) Complainant

The research integrity officer shall provide the complainant, if they are identifiable, with those portions of the draft investigation report that address the complainant's role and opinions in the investigation. The report should be modified in its final version, as appropriate, based on the complainant's comments.

(3) Confidentiality

In distributing the draft report, or portions, thereof, to the respondent and to the complainant, the research integrity officer shall inform the recipient of the confidentiality under which the draft report is made available. The research integrity officer may establish reasonable conditions to ensure such confidentiality insofar as permitted by the law of the state of Ohio. For example, the research integrity officer may request that the recipient sign a confidentiality statement or to come to his or her office to review the report.

(4) Transmittal of the final investigation report

After comments have been received and the necessary changes, if any, have been made in the draft report, the investigation committee should transmit the final report with attachments, including the respondent's and the complainant's comments, to the deciding official, through the research integrity officer.

(5) Decision by institutional official

Based on the findings presented in the final investigation report, the deciding official shall determine whether misconduct has occurred, and what sanctions or administrative actions are to be undertaken.

3344-28-07 Notification and reporting requirements.

(A) Reporting to “ORI”

(1) The university's decision to initiate an investigation shall be reported in writing to the director of “ORI” where applicable, on or before the date the investigation begins. At a minimum, the notification should include the name of the person(s) against whom the allegations have been made, the general nature of the allegation, and the “PHS” (or other federal agency) applications or grant numbers involved. “ORI” also shall be notified of the outcome of the investigation. Any significant variations from the provisions of these institutional policies and procedures should be explained in any reports submitted to the “ORI.”

(2) If the university plans to terminate an inquiry or investigation for any reason without completing all relevant federal requirements, the research integrity officer shall submit a report of the planned termination to “ORI,” including a description of the reasons for the termination. “ORI” will then decide whether further investigation should be undertaken.

(3) If the university determines that it will not be able to complete the investigation in one hundred and twenty days, the research integrity officer shall submit to the “ORI” a written request for an extension and an explanation for the delay that includes an interim report on the progress to date and an estimate for the date of completion of the report and other necessary steps. If the request is granted, the research integrity officer will file periodic progress reports as requested by the “ORI.” If satisfactory progress is not made in the university's investigation, the “ORI” may undertake an investigation of its own or take other steps as appropriate.

(4) When public health service funding or applications for funding are involved and an admission of academic research misconduct is made, the research integrity officer must notify the ~~office of research integrity~~ ORI immediately for consultation and advice. Normally, the ~~individually~~ individual making the admission will be asked to sign a statement acknowledging the misconduct. When the case involves “PHS” funds, the university will not ~~except~~ accept an admission of academic research misconduct as a basis for closing a case or not undertaking an investigation without prior approval by “ORI.”

(5) The research integrity officer shall keep “ORI” apprised of any developments during the course of the investigation that disclose facts ~~possible~~

possibly affecting current or potential ~~department of health and human services~~ Department of Health and Human Services (or other federal agency) funding for the individuals(s) under investigation or that the “PHS” (or other federal agency) needs to know to ensure appropriate use of federal funds and otherwise protect the public interest.

(6) The research integrity officer shall notify “ORI” at any stage of the inquiry or investigation when:

- (a) There is an immediate health hazard involved;
- (b) There is an immediate need to protect federal funds or equipment;
- (c) There is an immediate need to protect the interests of the person(s) making the allegations or of the individual(s) who is (are) the subject of the allegations as well as co-investigators and associates, if any;
- (d) It is probable that the alleged incident is going to be reported publicly; or
- (e) There is a reasonable indication of possible criminal violation.

(7) In these instances, the research integrity officer must inform “ORI” within twenty-four hours of obtaining the information.

(B) Notification of other involved individuals or parties when a final decision on the case has been reached by the both the respondent and the complainant in writing. _

—
In addition, the research integrity officer shall 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 concerned parties, should be notified of the outcome of the case. The research integrity officer is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

3344-28-08 Other considerations.

(A) Termination of institutional employment or resignation prior to completing inquiry or investigation

(1) The termination of employment at Cleveland state university of the respondent, by resignation or otherwise, before or after an allegation of possible academic research misconduct has been reported shall not preclude or terminate the academic research misconduct procedures.

(2) If the respondent, without admitting to the misconduct, elects to resign his or her position prior to the initiation of an inquiry, but after an allegation is reported, or during an inquiry or investigation, the inquiry or investigation will proceed. If the respondent refuses to participate in the process after resignation, the committee will use its best efforts to reach a conclusion concerning the allegations, noting in its report the respondent's failure to cooperate and the resulting effect on its review of all the evidence.

(B) Restoration of reputations

The research integrity officer will ensure that the respondent's personnel file contains a copy of the original allegation and of the final report. If the inquiry or investigation results in the conclusion that ~~clear and convincing~~ a preponderance of the evidence of academic research misconduct has not been found, all persons who have been interviewed or otherwise informed of the charge will be notified in writing that the charges have been investigated and that the committee has been unable to find ~~clear and convincing~~ a preponderance of evidence of academic research misconduct. Respondents in such cases should be consulted regarding other actions that might be taken on their behalf to restore their reputations.

(C) Interim administrative actions

~~(D)~~ The research integrity officer will take interim administrative actions, as appropriate, to protect federal funds and insure that the purposes of the federal financial assistance are carried out.

3344-28-09 Retention of records.

- (A) Sufficiently detailed documentation of inquiries that do not proceed to an investigation shall be maintained for at least ~~three~~ seven years after the termination of the inquiry to permit later assessment of the case.
- (B) After completion of a case and all ensuing related actions, the research integrity officer will prepare a complete file, including the original records of an inquiry or investigation, and copies of all documents and other materials furnished to the research integrity officer or committees. The research integrity officer shall retain the file for ~~three~~ seven years from the date that the university closes the case, or if the inquiry or investigation is reported to “ORI”, from the date that “ORI” completes its review of the case and all related actions. Access to materials in the file shall be available to the “ORI” or other authorized personnel upon request.
- (C) The respondent’s permanent file shall contain a copy of the initial allegation and of the final report.

3344-28-10 Sanctions and administrative actions.

- (A) When an allegation of misconduct has been substantiated, Cleveland state university shall recommend appropriate sanctions through the procedures specified by the collective bargaining agreement or, in the case of non-bargaining unit members, by the applicable procedure.

- (B) If the deciding official determines that the alleged misconduct is substantiated by the findings, the deciding officials, after consultation with the research integrity officer, will decide on the appropriate sanctions to be recommended through the procedures specified in the collective bargaining agreement. The possible actions may include:
 - (1) Restitution of funds to any sponsoring agency as appropriate;
 - (2) Withdrawal correction of all pending or published abstracts and papers emanating from the research in question;
 - (3) Removal from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible termination of employment.