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DIFFERENCE.**

Marquette University Research Misconduct Policy

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General Policies and Principles

Marquette University is committed to upholding the highest standards of scientific rigor in research.¹ This institution is committed to fostering an environment that promotes research integrity and the responsible and ethical conduct of research, discourages research misconduct, and deals promptly with allegations or evidence of possible research misconduct.²

This policy applies to all disciplines of research and scholarship including the applied and natural sciences engineering, health sciences, social sciences, and humanities. This policy applies not only to recipients of federal grants but also to individuals engaging in research activities whether funded or not.

¹ Updated document format adapted from Department of Health and Human Services Office of Research Integrity example policy (<https://ori.hhs.gov/sample-policy-procedures-responding-research-misconduct-allegations>) and includes footnotes pointing to 42 CFR Part 93 for reference. Adaptations were made to align with Marquette University policies and practices as well as to generalize for work supported by other external sponsors. **This policy applies to any misconduct allegations received January 1, 2026 or later.**

² 42 CFR Part 93 § 93.300(c).

All members of the Marquette community are expected to conduct research with honesty, rigor, and transparency. Each institutional member is responsible for contributing to an organizational culture that establishes, maintains, and promotes research integrity and the responsible conduct of research. Students who are accused of research misconduct are subjected to the guidelines within this policy. However, students who are accused of academic dishonesty not relating to sponsored research will be subject to other applicable University policies.

Research misconduct is defined as fabrication, falsification, or plagiarism, whether committed by an individual directly or through the use or assistance of other persons, entities, or tools, including artificial intelligence (AI)-based tools, in proposing, performing, or reviewing research, or in reporting research results.

- Fabrication is making up data or results and recording or reporting them.
- Falsification is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.
- Plagiarism is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit. Plagiarism includes the unattributed verbatim or nearly verbatim copying of sentences and paragraphs from another's work that materially misleads the reader regarding the contributions of the author. It does not include the limited use of identical or nearly identical phrases that describe a commonly used methodology.
 - Note that for Public Health Service (PHS)-related allegations, plagiarism does not include self-plagiarism or authorship or credit disputes, including disputes among former collaborators who participated in the development or conduct of a research project.

Research misconduct does not include honest error or differences of opinion.

Marquette University strives to reduce the risk of research misconduct, support all good-faith efforts to report suspected misconduct, promptly and thoroughly address all allegations of research misconduct, and seek to rectify the scientific record and/or restore researchers' reputations, as appropriate. Research misconduct is contrary to the mission of Marquette University, the health and safety of the public, the integrity of research, and the conservation of public funds. Both the institution and its institutional members have an affirmative duty to protect those funds from misuse by ensuring the integrity of all research conducted on behalf of the University.³

Marquette is responsible for ensuring that these policies and procedures for addressing allegations of research misconduct meet the requirements of the [PHS Policies on Research Misconduct](#) (42 CFR Part 93, "the PHS regulation") when PHS-related research activities are involved. The institution will establish and maintain these policies and procedures, inform all institutional members about these policies and procedures, and make these policies and procedures publicly available. The University is committed to following these policies and procedures when responding to allegations of research misconduct.⁴

³ § 93.100.

⁴ § 93.300(a).

For definitions of terms used in this section and elsewhere, see the Definitions section.

Scope and Applicability

As noted above, this policy applies to potential research misconduct in any research or scholarly discipline, regardless of funding status. This policy and its associated procedures apply to allegations of research misconduct involving all forms of research as defined herein, including activities related to external or internal funding proposals, research or research training, research records produced, and reporting of research. This policy applies to any allegation received on or after January 1, 2026.

Marquette University's policy is consistent with the requirements of federal agencies from which the institution requests and receives funding for research and research training, including 42 CFR part 93, "Public Health Service Policies on Research Misconduct." These policies and procedures apply to allegations of research misconduct involving:

1. Applications or proposals for PHS support for biomedical or behavioral research, biomedical or behavioral research training, or activities related to that research or research training.⁵
2. PHS-supported biomedical or behavioral research.⁶
3. PHS-supported biomedical or behavioral research training programs.⁷
4. PHS-supported activities that are related to biomedical or behavioral research or research training, such as, but not limited to, the operation of tissue and data banks or the dissemination of research information.⁸
5. Research records produced during PHS-supported research, research training, or activities related to that research or research training.⁹
6. Research proposed, performed, reviewed, or reported, as well as any research record generated from that research, regardless of whether an application or proposal for PHS funds resulted in an awarded grant, contract, cooperative agreement, subaward, or other form of PHS support.¹⁰

These policies and procedures apply only to research misconduct occurring within six years of the date¹¹ Marquette University receives an allegation of research misconduct, subject to the following exceptions:

- The six-year time limitation does not apply if the respondent continues or renews any incident of alleged research misconduct that occurred before the six-year period through the use of, republication of, or citation to the portion(s) of the research record alleged to have been fabricated, falsified, or plagiarized, for the potential benefit of the respondent ("subsequent use

⁵ § 93.102(b)(1).

⁶ § 93.102(b)(2).

⁷ § 93.102(b)(3).

⁸ § 93.102(b)(4).

⁹ § 93.102(b)(5).

¹⁰ § 93.102(b)(6).

¹¹ § 93.104(a).

exception”).¹² For alleged research misconduct that appears subject to this subsequent use exception, but Marquette University determines is not subject to the exception, the institution will document its determination that the subsequent use exception does not apply and will retain this documentation for the later of seven years after completion of the institutional proceeding or the completion of any external agency proceeding.¹³

- The six-year time limitation also does not apply if the institution or a federal sponsor determines that the alleged research misconduct, if it occurred, would possibly have a substantial adverse effect on the health or safety of the public.¹⁴

These policies and procedures do not supersede or establish an alternative to the PHS regulation or any existing regulations for handling research misconduct involving non-PHS supported research.¹⁵ They do not replace the PHS regulation, and in case of any conflict between this document and 42 CFR Part 93, the PHS regulation will prevail for cases that are related to PHS regulation. Sponsor-specific requirements will be reviewed and followed for any research misconduct allegations that involve externally-funded projects.

Definitions

Accepted practices of the relevant research community. This term means those practices of the relevant research community established by federal guidelines and specific funders, as well as commonly accepted professional codes or norms within the overarching community of researchers and the institution.

Administrative action means an institutional action in response to a research misconduct proceeding taken to protect the health and safety of the public, to promote the integrity of research, research training, or activities related to that research or research training and to conserve public funds; or an institutional action in response either to a breach of a material provision of a settlement agreement in a research misconduct proceeding or to a breach of any federal debarment or suspension.

Administrative record. The administrative record comprises: the institutional record; any information provided by the respondent, including but not limited to transcript of any virtual or in-person meetings, and correspondence while the case is pending; and any analysis or additional information generated by the institution. Any analysis or additional information generated or obtained by the institution will also be made available to the respondent.

Allegation. This 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 institutional official.

¹² § 93.104(b)(1).

¹³ §§ 93.104(b)(1) and 93.318.

¹⁴ § 93.104(b)(2).

¹⁵ § 93.102(c).

Assessment. Assessment means a consideration of whether an allegation of research misconduct appears to fall within the definition of research misconduct; appears to involve research, research training, or activities related to research and research training; and is sufficiently creditable and specific so that potential evidence of research misconduct may be identified. The assessment only involves the review of readily accessible information relevant to the allegation.¹⁶

Complainant. Complainant means an individual who in good faith makes an allegation of research misconduct.¹⁷

Conflict of interest for purposes of this Policy means the real or apparent interference of one person's interests with the interests of another person, where potential bias may occur due to prior or existing personal or professional relationships.

Day, for the avoidance of any misunderstanding, shall mean one calendar day unless otherwise specified. Where the policy or federal regulation requires action by the institution to take place within a specified number of days, weekends and holidays shall be included in the count. If a deadline falls on a Saturday, Sunday, or Federal Holiday, the deadline will be extended to the next day that is not a Saturday, Sunday, or Federal Holiday. Where a time extension is required, the policy explains when and how an extension may be requested. The Research Integrity Officer (RIO) has the authority to request extensions from cognizant federal agencies as appropriate.

Evidence. Evidence means anything offered or obtained during a research misconduct proceeding that tends to prove or disprove the existence of an alleged fact. Evidence includes documents, whether in hard copy or electronic form, information, tangible items, and testimony.¹⁸

Extramural support means funding from an outside entity, or applications or proposals therefore, for research, research training, or activities related to that research or training, that may be provided through: grants, cooperative agreements, or contracts or subgrants or subcontracts; or salary or other payments under grants, cooperative agreements or contracts.

Fabrication. Fabrication means making up data or results and recording or reporting them.¹⁹

Falsification. Falsification means manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.²⁰

Good faith. (a) Good faith as applied to a complainant or witness means having a reasonable belief in the truth of one's allegation or testimony, based on the information known to the complainant or witness at the time. An allegation or cooperation with a research misconduct proceeding is not in good faith if made with knowledge of or reckless disregard for information that would negate the allegation or testimony. (b) Good faith as applied to an institutional or committee member means cooperating with the research misconduct proceeding by impartially carrying out the duties assigned for the purpose of helping an institution meet its responsibilities under this policy. An institutional or committee member

¹⁶ § 93.204.

¹⁷ § 93.206.

¹⁸ § 93.210.

¹⁹ § 93.211.

²⁰ § 93.212.

does not act in good faith if their acts or omissions during the research misconduct proceedings are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.²¹

Inquiry means preliminary information-gathering and preliminary fact-finding that meets the criteria and follows the procedures described in this policy and its associated procedures (CFR 93.307-309). The aim of an inquiry is to determine whether an allegation or apparent instance of research misconduct warrants an investigation.

Institution. Institution means Marquette University.

Institutional Deciding Official. Institutional Deciding Official (IDO) means the Marquette University Provost or their delegate. The same individual cannot serve as the Institutional Deciding Official and the Research Integrity Officer.²²

Institutional member. Institutional member and members means an individual (or individuals) 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, technicians, postdoctoral and other fellows, students, volunteers, subject matter experts, consultants, or attorneys, or employees or agents of contractors, subcontractors, or sub-awardees.²³

Institutional record. The institutional record comprises: (a) The records that the institution compiled or generated during the research misconduct proceeding, except records the institution did not consider or rely on. These records include but are not limited to (1) documentation of the assessment as required by extramural agencies; (2) if an inquiry is conducted, the inquiry report and all records (other than drafts of the report) considered or relied on during the inquiry, including, but not limited to, research records and the transcripts of any transcribed interviews conducted during the inquiry, information the respondent provided to the institution, and the documentation of any decision not to investigate as required by § 93.309(c); (3) if an investigation is conducted, the investigation report and all records (other than drafts of the report) considered or relied on during the investigation, including, but not limited to, research records, the transcripts of each interview conducted pursuant to § 93.310(g), and information the respondent provided to the institution; (4) decision(s) by the Institutional Deciding Official, such as the written decision from the Institutional Deciding Official under § 93.314; (5) the complete record of any institutional appeal consistent with § 93.315; (b) a single index listing all the research records and evidence that the institution compiled during the research misconduct proceeding, except records the institution did not consider or rely on; and (c) a general description of the records that were sequestered but not considered or relied on.²⁴

Intentionally. To act intentionally means to act with the aim of carrying out the act.²⁵

²¹ § 93.214.

²² § 93.218.

²³ § 93.219.

²⁴ § 93.220.

²⁵ § 93.221.

Investigation. Investigation means the formal development of a factual record and the examination of that record that meets the criteria and follows the procedures of §§ 93.310 through 93.317.²⁶

Knowingly. To act knowingly means to act with awareness of the act.²⁷

Preponderance of the evidence. Preponderance of the evidence means proof by evidence that, compared with evidence opposing it, leads to the conclusion that the fact at issue is more likely true than not.²⁸

Recklessly. To act recklessly means to propose, perform, or review research, or report research results, with indifference to a known risk of fabrication, falsification, or plagiarism.²⁹

Research Integrity Officer. The Research Integrity Officer (RIO) is the institutional official responsible for assessing allegations of research misconduct and determining when such allegations warrant inquiries and for overseeing inquiries and investigations. At Marquette University, the Vice President for Research and Innovation, or designated successor to the chief research officer position, is the RIO.

Research misconduct. Research misconduct means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Research misconduct does not include honest error or differences of opinion.³⁰

Research misconduct proceeding. Research misconduct proceeding means any actions related to alleged research misconduct taken under this part, including but not limited to, allegation assessments, inquiries, investigations, ORI or other federal agency oversight reviews, hearings, and administrative appeals.

Research record. Research record means the record of data or results that embody the facts resulting from scientific inquiry. Data or results may be in physical or electronic form. Examples of items, materials, or information that may be considered part of the research record include, but are not limited to, research proposals, raw data, processed data, clinical research records, laboratory records, study records, laboratory notebooks, progress reports, manuscripts, abstracts, theses, records of oral presentations, online content, lab meeting reports, and journal articles.³¹

Respondent. Respondent means the individual against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.³²

Retaliation. Retaliation means an adverse action taken against a complainant, witness, or committee member by an institution or one of its members in response to (a) a good faith allegation of research misconduct or (b) good faith cooperation with a research misconduct proceeding.³³

²⁶ § 93.222.

²⁷ § 93.223.

²⁸ § 93.228.

²⁹ § 93.231.

³⁰ § 93.234.

³¹ § 93.236.

³² § 93.237.

³³ § 93.238.

Roles, Rights, and Responsibilities

Institution

Marquette University's General Responsibilities

To the extent possible, the institution will limit disclosure of the identity of respondents, complainants, and witnesses while conducting the research misconduct proceedings to those who need to know, inform all institutional members about these policies and procedures, and make these policies and procedures publicly available.³⁴ Once the University has made a final determination of research misconduct findings, federal reporting guidelines will govern whether and to what extent the disclosures may be limited. The institution will respond to each allegation of research misconduct in a thorough, competent, objective, and fair manner.³⁵ The institution will take all reasonable and practical steps to ensure the cooperation of respondents and other institutional members with research misconduct proceedings, including, but not limited to, their providing information, research records, and other evidence.³⁶ The institution agrees to cooperate with extramural agencies during any research misconduct proceeding or compliance review, including addressing deficiencies or additional allegations in the institutional record if directed by the extramural agency and to assist in administering and enforcing any administrative actions imposed on institutional members by the extramural agency.³⁷ The institution may also take steps to manage published data or acknowledge that data may be unreliable.³⁸

Marquette University's Responsibilities During and After a Research Misconduct Proceeding

Except as may otherwise be prescribed by applicable law, the institution will maintain confidentiality for any records or evidence from which research subjects might be identified and will limit disclosure to those who need to know to carry out a research misconduct proceeding.³⁹ Before or at the time of notifying the respondent of the allegation(s) and whenever additional items become known or relevant, the institution will promptly take all reasonable and practical steps to obtain all research records and other evidence and sequester them securely.⁴⁰ The institution will prepare the institutional record so that it contains all required elements, i.e., research records that were compiled and considered during the proceedings, assessment documentation, and inquiry and/or investigation reports. Upon completion of the inquiry, the institution will provide federal sponsor agencies with the complete inquiry report and add it to the institutional record in cases where the research is related to extramural sponsors.⁴¹ The institution will maintain the institutional record and all sequestered research records and other evidence in a secure manner for seven years after completion of the institutional and/or external agency proceeding.⁴²

The institution will provide information related to the alleged research misconduct and proceedings to extramural agencies upon request and transfer custody or provide copies of the institutional record or

³⁴ §§ 93.106(a) and 93.302(a)(4)(ii).

³⁵ § 93.241.

³⁶ § 93.300(f).

³⁷ § 93.300(g-h).

³⁸ § 93.106(c).

³⁹ § 93.106(b). Applicable to all PHS confidentiality requirements in this section.

⁴⁰ § 93.305.

⁴¹ §§ 93.317 and 93.220.

⁴² § 93.318.

any component of it and any sequestered evidence, regardless of whether the evidence is included in the institutional record.⁴³ Additionally, the institution will promptly notify extramural agencies of any special circumstances that may arise.⁴⁴

Disclosure of the identity of respondents, complainants, and witnesses while the institution is conducting the research misconduct proceedings is limited to those who need to know, which the institution will determine consistent with a thorough, competent, objective, and fair research misconduct proceeding, and as allowed by law. Those who need to know may include institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions.⁴⁵

Marquette University's Responsibilities to the Complainant(s)

The institution will provide confidentiality to the extent required by this policy for all complainants in a research misconduct proceeding. The institution will also take precautions to ensure that individuals responsible for carrying out any part of the research misconduct proceeding do not have potential, perceived, or actual personal, professional, or financial conflicts of interest with the complainant(s).⁴⁶ The institution agrees to take all reasonable and practical steps to protect the positions and reputations of complainants and to protect these individuals from retaliation by respondents and/or other institutional members.⁴⁷ If Marquette University chooses to notify one complainant of the inquiry results in a case, all complainants will be notified by the institution, to the extent possible.⁴⁸

Marquette University's Responsibilities to the Respondent(s)

As with complainants, the institution will provide confidentiality to the extent required by this policy to all respondents in a research misconduct proceeding. The institution will make a good-faith effort to notify the respondent(s) in writing of the allegations being made against them.⁴⁹ The institution will take precautions to ensure that individuals responsible for carrying out any part of the research misconduct proceeding do not have unresolved personal, professional, or financial conflicts of interest with the respondent.⁵⁰ The institution is responsible for giving the respondent(s) copies of or supervised access to the sequestered research records.⁵¹ The institution will notify the respondent whether the inquiry found that an investigation is warranted, provide the respondent an opportunity to review and comment on the inquiry report, and attach their comments to the inquiry report.⁵² If an investigation is commenced, the institution must notify the respondent, give written notice of any additional allegations raised against them not previously addressed by the inquiry report, and allow the respondent(s) an opportunity to review the witness transcripts.⁵³ The institution will give the respondent(s) an opportunity to read and comment on the draft investigation report and any information or allegations

⁴³ § 93.318(b).

⁴⁴ § 93.305(g).

⁴⁵ § 93.106(a).

⁴⁶ §§ 93.300(b) and 93.305(f)(1).

⁴⁷ § 93.300(d).

⁴⁸ § 93.308(b).

⁴⁹ § 93.307(c).

⁵⁰ § 93.300(b).

⁵¹ § 93.305(b).

⁵² §§ 93.308(a) and 93.307(g).

⁵³ §§ 93.310(c) and 93.310(g)(5).

added to the institutional record.⁵⁴ The institution will give due consideration to admissible, credible evidence of honest error or difference of opinion presented by the respondent.⁵⁵

The institution will bear the burden of proof, by a preponderance of the evidence, for making a finding of research misconduct.⁵⁶ The institution will make all reasonable, practical efforts, if requested and as appropriate, to protect or restore the reputation of respondents against whom no finding of research misconduct is made.⁵⁷

Marquette University's Responsibilities to Committee Members

The institution will ensure that a committee, consortium, or person acting on the institution's behalf conducts research misconduct proceedings in compliance with this policy. The institution will take all reasonable and practical steps to protect the positions and reputations of good-faith committee members and to protect these individuals from retaliation.⁵⁸ The institutional counsel will be available to provide institutional guidance and assistance in interpretation of policy.

Marquette University's Responsibilities to the Witness[es]

The institution will provide confidentiality to the extent required by this policy for all witnesses. The institutions will take precautions to ensure that individuals responsible for carrying out any part of the proceedings do not have unresolved personal, professional, or financial conflicts of interest with the witnesses.⁵⁹ The institutions will also take all reasonable and practical steps to protect the positions and reputations of witnesses and to protect these individuals from retaliation.⁶⁰

Research Integrity Officer

The Research Integrity Officer (RIO) is the institutional official responsible for Marquette's written policies and procedures for addressing allegations of research misconduct in compliance with this policy and federal regulations.⁶¹ The same individual will not serve as both the Institutional Deciding Official and the RIO.⁶² At Marquette, the Vice President for Research and Innovation, or designated successor to the chief research officer position, is designated as RIO and the Provost, or her or his delegate, serves Institutional Deciding Official.

The RIO shall:

- appoint the inquiry and investigation committees and ensure that they include the necessary and appropriate expertise to conduct a thorough and authoritative evaluation of the evidence in an inquiry or investigation.

⁵⁴ § 93.312.

⁵⁵ § 93.105(b).

⁵⁶ §§ 93.105 and 93.103(c).

⁵⁷ §§ 93.105 and 93.304(c).

⁵⁸ §§ 93.305(f) and 93.300(d).

⁵⁹ § 93.300(b).

⁶⁰ § 93.300(d).

⁶¹ § 93.233.

⁶² § 93.218.

- assist inquiry and investigation committees and all institutional members in complying with these procedures and with the applicable standards imposed by the government or other external sponsors.
- secure and maintain the institution's files and records pertaining to inquiries and investigations, including research records.
- monitor the treatment of individuals who bring allegations of misconduct or of inadequate institutional response thereto and those who cooperate in inquiries or investigations. The RIO shall also ensure that these persons shall not be retaliated against in the terms and conditions of their employment or other status at the institution and will review instances of alleged retaliation for appropriate action. Institutional members should report any alleged or apparent retaliation to the RIO.
- require timely compliance with all notification requirements of PHS and other federal agencies. For the purpose of complying with the PHS regulation, this includes filing an annual report with ORI which contains information specified by ORI on the institution's compliance with the PHS regulation. Along with its assurance or annual report, an institution will send ORI such other aggregated information as ORI may request on the institution's research misconduct proceedings covered by the PHS regulation and the institution's compliance with these regulations.

The RIO has the sole authority to determine the need for and to request any appropriate and well justified time extensions from cognizant federal agencies.

The RIO shall report to the Institutional Deciding Official.

Complainant

The complainant is the person who in good faith makes an allegation of research misconduct.⁶³ The complainant brings research misconduct allegations directly to the attention of an institutional official through any means of communication.

The complainant will make allegations in good faith, having a reasonable belief in the truth of one's allegation or testimony, based on the information known to the complainant at the time.⁶⁴

Respondent

The respondent is the individual against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.⁶⁵ The respondent has the burden of going forward with and proving, by a preponderance of evidence, affirmative defenses raised.⁶⁶ The respondent's destruction of research records documenting the questioned research is evidence of research misconduct where a preponderance of evidence establishes that the respondent intentionally or knowingly destroyed records after being informed of the research misconduct allegations.⁶⁷ The respondent's failure to provide research records documenting the questioned research is evidence of

⁶³ § 93.206.

⁶⁴ § 93.214.

⁶⁵ § 93.237.

⁶⁶ §§ 93.105(b)(2) and 93.105(b)(3).

⁶⁷ § 93.105(b)(1).

research misconduct where the respondent claims to possess the records but refuses to provide them upon request.⁶⁸

The respondent will not be present during the witnesses' interviews but will be provided a transcript of the interview after it takes place.⁶⁹ The respondent will have opportunities to (a) view and comment on the inquiry report, (b) view and comment on the investigation report, and (c) submit any comments on the draft investigation report to Marquette University within 30 days of receiving it.⁷⁰

If admitting to research misconduct, the respondent will sign a written statement specifying the affected research records and confirming the misconduct was falsification, fabrication, and/or plagiarism; committed intentionally, knowingly, or recklessly; and a significant departure from accepted practices of the relevant research community.⁷¹

Committee Members

Committee members are experts who act in good faith to cooperate with the research misconduct proceedings by impartially carrying out their assigned duties for the purpose of helping Marquette meet its responsibilities under this policy.⁷² Committee and consortium members will have relevant scientific expertise and be free of real or perceived conflicts of interest with any of the involved parties.⁷³ In order to serve on the inquiry or investigation committee, prospective members must agree to observe the confidentiality of the proceedings and any information or documents reviewed as part of the inquiry. Outside of the official proceedings of the committee, they may not discuss the proceedings with the respondent, complainant, witnesses, or anyone not authorized by the RIO to have knowledge of the inquiry.

Committee members or anyone acting on behalf of Marquette University will conduct research misconduct proceedings consistent with this policy. They will determine whether an investigation is warranted, documenting the decision in an inquiry report.⁷⁴ During an investigation, committee or consortium members participate in recorded interviews of each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent(s).⁷⁵ They will also determine whether or not the respondent(s) engaged in research misconduct and document the decision in the investigation report.⁷⁶ They consider respondent and/or complainant comments on the inquiry/investigation report(s) and document that consideration in the investigation report.⁷⁷

An investigation into multiple respondents may convene with the same investigation committee or consortium members or anyone acting on behalf of Marquette University, but there will be separate

⁶⁸ § 93.105(b).

⁶⁹ § 93.310(g)(5).

⁷⁰ §§ 93.307(g)(3) and 93.312.

⁷¹ §§ 93.103 and 93.317(b).

⁷² § 93.214(b).

⁷³ § 93.305(f).

⁷⁴ § 93.307.

⁷⁵ § 93.310(g).

⁷⁶ § 93.313.

⁷⁷ § 93.313(j).

investigation reports and separate research misconduct determinations for each respondent.⁷⁸ Committee or consortium members may serve for more than one investigation, in cases with multiple respondents.⁷⁹ Committee members may also serve for both the inquiry and the investigation.

Witnesses

Witnesses are individuals whom the institution has reasonably identified as having information regarding any relevant aspects of the investigation. Witnesses provide information for review during research misconduct proceedings. Witnesses will cooperate with the research misconduct proceedings in good faith and have a reasonable belief in the truth of their testimony, based on the information known to them at the time.⁸⁰

Institutional Deciding Official

The RIO shall provide a Deciding Official with the investigation report. The Deciding Official shall consider the assembled record, including any comments provided by the respondent and/or complainant on the draft investigation report. Based on a preponderance of the evidence the Deciding Official shall decide whether the institution will accept the investigation report, its findings, and shall determine the appropriate institutional actions.

If this determination varies from that of the investigation committee, the Deciding Official shall provide a written statement explaining in detail the basis for rendering a decision different from that of the investigation committee; he or she shall also include this statement in the institution's letter transmitting the investigation report to ORI for cases subject to the PHS regulation or to the appropriate agency official for other funding agencies. The Deciding Official's explanation should be consistent with the PHS or other relevant federal definition of research misconduct, the institution's policies and procedures, and the evidence reviewed and analyzed by the investigation committee. The Deciding Official may also return the report to the investigation committee with a request for further fact-finding or analysis. The Deciding Official's determination, along with the investigation report, constitutes the final investigation report for purposes of ORI or other federal agency review.

Procedures for Addressing Allegations of Research Misconduct

Assessment

An assessment's purpose is to determine whether an allegation warrants an inquiry.⁸¹ An assessment is intended to be a review of readily accessible information relevant to the allegation.⁸²

Upon receiving an allegation of research misconduct, the RIO or another designated institutional official will promptly assess the allegation to determine whether the allegation (a) is within the definition of

⁷⁸ § 93.310(c)(3).

⁷⁹ § 93.305(d).

⁸⁰ § 93.214(a).

⁸¹ § 93.306(a).

⁸² § 93.204.

research misconduct, (b) is within the applicability criteria and time limitations, and (c) is sufficiently credible and specific so that potential evidence of research misconduct may be identified.⁸³ If the RIO or another designated institutional official determines that the requirements for an inquiry are met, they shall document the assessment, promptly sequester all research records and other evidence per the PHS regulation, and promptly initiate the inquiry.⁸⁴ If the RIO or another designated institutional official determines that requirements for an inquiry are not met, they will keep sufficiently detailed documentation of the assessment to permit a later review of the reasons why Marquette University did not conduct an inquiry.⁸⁵ The institution will keep this documentation and related records in a secure manner for seven years and provide them to federal agencies upon request.⁸⁶

If there is any doubt about whether an allegation may be subject to federal regulation, the RIO may consult with institutional counsel and the federal agency or agencies.

There is not always sufficient information to permit further inquiry into an allegation. For example, an allegation that a researcher's work should be subjected to general examination for possible misconduct is not sufficiently credible or specific to initiate an inquiry. In the case of such a vague allegation, the RIO should make an effort to obtain more information before initiating an inquiry. This information may be sought from any reasonable source, including the person making the allegation. At the same time, it is important to recognize that the complainant is not the equivalent of a "party" in a dispute. Once the complainant has made an allegation of research misconduct, that person does not participate in the research misconduct proceeding except as a witness. The institution has an obligation to pursue allegations of research misconduct independent of the complainant's role.

Inquiry

An inquiry is warranted if the allegation (a) falls within the definition of research misconduct under 42 CFR Part 93, (b) is within the applicability criteria of § 93.102, and (c) is sufficiently credible and specific so that potential evidence of research misconduct may be identified.⁸⁷ An inquiry's purpose is to conduct an initial review of the evidence to determine whether an allegation warrants an investigation.⁸⁸ An inquiry does not require a full review of all related evidence.⁸⁹ Marquette University will complete the inquiry within 90 days of initiating it unless circumstances warrant a longer period, in which it will sufficiently document the reasons for exceeding the time limit in the inquiry report.⁹⁰

Sequestering Evidence and Notifying the Respondent

Before or at the time of notifying the respondent(s), the RIO will obtain the original or substantially equivalent copies of all research records and other evidence that are pertinent to the proceeding, inventory these materials, sequester the materials in a secure manner, and retain them for seven years.⁹¹

⁸³ § 93.306(b).

⁸⁴ § 93.306(c).

⁸⁵ § 93.306(c)(3).

⁸⁶ § 93.318.

⁸⁷ § 93.307(a)(1-3).

⁸⁸ § 93.307(b).

⁸⁹ § 93.307(b).

⁹⁰ § 93.307(h).

⁹¹ §§ 93.305(a) and 93.318.

The institution has a duty to obtain, inventory, and securely sequester evidence that extends to whenever additional items become known or relevant to the inquiry or investigation.⁹²

At the time of or before beginning the inquiry, Marquette University will make a good-faith effort to notify the presumed respondent(s), in writing, that an allegation(s) of research misconduct has been raised against them, the relevant research records have been sequestered, and an inquiry will be conducted to decide whether to proceed with an investigation.⁹³ If additional allegations are raised, the institution will notify the respondent(s) in writing.⁹⁴ When appropriate, the institution will give the respondent(s) copies of, or reasonable supervised access to, the sequestered materials.⁹⁵

If additional respondents are identified, Marquette University will provide written notification to the new respondent(s).⁹⁶ All additional respondents will be given the same rights and opportunities as the initial respondent.⁹⁷ Only allegations specific to a particular respondent will be included in the notification to that respondent.⁹⁸

Convening the Committee and Ensuring Neutrality

Marquette University will ensure that all inquiry committee members understand their commission, keep the identities of respondents, complainants, and witnesses confidential, and conduct the research misconduct proceedings in compliance with institutional and applicable sponsor regulations.

The RIO, in consultation with other institutional officials as appropriate, shall appoint an inquiry committee and committee chair. The size and constitution of the committee shall be determined by the RIO. The committee shall include at least three Marquette faculty members. The inquiry committee should consist of individuals who do not have real or apparent conflicts of interest in the case, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the allegation, interview the principals and key witnesses, and conduct the inquiry. These individuals may be scientists, subject matter experts, administrators, lawyers, or other qualified persons, and they may be from inside or outside of the institution.

The RIO shall notify the respondent of the proposed committee membership, and the respondent will have the opportunity to submit a written objection to any appointed member of the committee based on bias or conflict.

The RIO will prepare written instructions for the inquiry committee that describes the allegations and any related issues identified during the allegation assessment and states the purpose of the inquiry and the criteria warranting an investigation.

At the first meeting, the RIO and institutional counsel will review the instructions with the inquiry committee, discuss the allegations, any related issues, and the appropriate procedures and time limits for conducting the inquiry, assist the committee with organizing plans for the inquiry, and answer any

⁹² §§ 93.305(a)(2) and 93.318.

⁹³ § 93.307(c).

⁹⁴ § 93.307(c).

⁹⁵ § 93.305(b).

⁹⁶ § 93.305(d).

⁹⁷ § 93.305(d).

⁹⁸ § 93.307(c).

questions. The RIO and institutional counsel will be available throughout the inquiry to advise as needed. The RIO, in consultation with institutional counsel, will provide staff assistance and guidance to the inquiry committee and any experts on the procedures for conducting and completing the inquiry, including procedures for maintaining confidentiality, conducting interviews, analyzing data, and preparing the inquiry report.

Determining Whether an Investigation Is Warranted

The inquiry committee will examine the relevant evidence, including research records and materials. The inquiry committee may interview the complainant, the respondent, and experts or witnesses. Any interviews must be recorded and/or transcribed. Interviewees must be provided with a copy of the transcript to review and correct errors. Interviewees may add comments or information. Changes to the transcript will be made only to correct factual errors.

After consultation with the RIO and institutional counsel, the inquiry committee members will decide whether there is, at this stage, sufficient evidence of possible scientific misconduct to recommend further investigation.

The inquiry committee will not determine if research misconduct occurred, nor assess whether the alleged misconduct was intentional, knowing, or reckless; such a determination is not made until the case proceeds to an investigation.⁹⁹

Documenting the Inquiry

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

1. The names, professional aliases, and positions of the respondent and complainant(s).
2. A description of the allegation(s) of research misconduct.
3. Details about external funding if applicable, including any grant numbers, grant applications, contracts, and publications listing relevant support.
4. The composition of the inquiry committee, if used, including name(s), position(s), and subject matter expertise.
5. An inventory of sequestered research records and other evidence and description of how sequestration was conducted.
6. Transcripts of interviews, if transcribed.
7. Inquiry timeline and procedural history.
8. Any scientific or forensic analyses conducted.
9. The basis for recommending that the allegation(s) warrant an investigation.
10. The basis on which any allegation(s) do not merit further investigation.
11. Any comments on the inquiry report by the respondent or the complainant(s).
12. Any institutional actions implemented, including internal communications or external communications with journals or funding agencies.¹⁰⁰
13. Documentation of potential evidence of honest error or difference of opinion.¹⁰¹

⁹⁹ § 93.307(f)(ii)(2).

¹⁰⁰ § 93.309(a)(1-12).

¹⁰¹ §§ 93.307(g)(2).

Completing the Inquiry

The RIO will give the respondent a copy of the draft inquiry report for review and comment.¹⁰² The RIO may, but is not required to, provide relevant portions of the report to a complainant for comment.¹⁰³

The RIO shall establish reasonable conditions for review to protect the confidentiality of the inquiry report. The RIO will establish a reasonable deadline of no less than seven days for written comment that is consistent with the institution's obligations under this policy. The RIO shall inform the respondent of the deadline in writing. The respondent shall provide comments to the RIO within the allotted time or the opportunity for comment shall be deemed waived. Any comments that the respondent submits to the RIO within the allotted time must be attached to the inquiry report.

The RIO may approve an extension for good cause, and the reason for the extension will be included in the RIO's notification letter described below and, in this way, entered into the records of the research misconduct proceeding.

The RIO, after carefully considering the inquiry report and any timely comments from the respondent, shall decide whether an investigation is warranted. The RIO's decision shall be written in the form of a determination letter and shall include the following, with attachments as appropriate:

- the date of the letter
- the institution's determination to conduct an investigation or not;
- the charges, if any, for the investigation to consider
- a description of the institutional policies and procedures under which the inquiry was conducted and a copy of the policies and procedures or reference to these;
- a detailed record of any time extensions granted, and any correspondence with the cognizant federal agency.
- the inquiry report with any timely comments received from the respondent:
 - the date the report is submitted to the RIO
 - the name and position of the respondent;
 - a description of the allegations of research misconduct;
 - the PHS or other federal support pertinent to the allegation, including for example, grant numbers, grant applications, contracts, and publications listing the PHS or other federal support;
 - the committee's recommendation to conduct an investigation or not;
 - the basis for the recommendation that the alleged actions require an investigation or not;
 - respondent's comments, if any, on the inquiry report.

The RIO will take possession of, and provide to the appropriate federal agency upon request, the following:

- the research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents.

¹⁰² § 93.307(g)(3).

¹⁰³ § 93.308(b).

The RIO will notify the respondent of the inquiry's final outcome and provide the respondent with copies of the final inquiry report, federal regulations as applicable, and these policies and procedures.¹⁰⁴ The institution may, but is not required to, notify a complainant whether the inquiry found that an investigation is warranted.¹⁰⁵ If the institution provides notice to one complainant in a case, it must provide notice, to the extent possible, to all complainants in the case.¹⁰⁶

If an Investigation Is Not Warranted:

The Institution will keep sufficiently detailed documentation of inquiries to permit a later assessment by ORI or other federal agency of the reasons why the institution decided not to conduct an investigation. The institution shall keep these records in a secure manner for at least 7 years after the termination of the inquiry, and upon request, provide them to ORI or other authorized federal agency personnel.

For allegations subject to PHS regulation, the institution annually reports to ORI on allegations received, inquiries, and investigations. Where an inquiry finds that an investigation is not warranted, the inquiry and its outcome will be noted in the annual report to ORI.

For allegations subject to the NSF regulation, the institution will notify NSF as required by the agency. NSF does not, at present, require notification where an inquiry is completed within 90 days and finds no investigation is warranted. Where the RIO has requested an extension from NSF, the RIO shall follow NSF's instructions regarding subsequent reporting and notification.

If an Investigation is Warranted:

If the RIO determines that an investigation is warranted, the institution must: (a) within a reasonable amount of time after this decision, provide written notice to the respondent(s) of the decision to conduct an investigation of the alleged misconduct, including any allegations of research misconduct not addressed during the inquiry.¹⁰⁷ On a case-by-case basis, may choose to notify the complainant that there will be an investigation of the alleged misconduct but is required to take the same notification action for all complainants in cases where there is more than one complainant.¹⁰⁸

For the purpose of complying with the PHS regulation, the RIO must transmit the determination letter and the inquiry report with the respondent's or complainant's comments (if any) to ORI within 30 days of finding that an investigation is warranted (typically within 120 days of delivering the instructions to the inquiry committee at its first meeting), and before initiating an investigation. The report to ORI should include any institutional actions implemented, including communications with journals or funding agencies.

The RIO will be prepared to provide the following additional information to ORI on request:

- The research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents.

¹⁰⁴ § 93.308(a).

¹⁰⁵ § 93.308(b).

¹⁰⁶ § 93.308(b).

¹⁰⁷ § 93.308(a).

¹⁰⁸ § 93.308(b).

For allegations subject to NSF regulation, upon a finding of the inquiry that an allegation warrants an investigation, the RIO will immediately notify NSF OIG and shall keep NSF OIG informed as appropriate during the investigation.

Investigation

The purpose of an investigation is to formally develop a factual record, pursue leads, examine the record, and recommend finding(s) to the IDO, who will make the final decision, based on a preponderance of evidence, on each allegation and any institutional actions.¹⁰⁹ As part of its investigation, the institution will pursue diligently all significant issues and relevant leads, including any evidence of additional instances of possible research misconduct, and continue the investigation to completion.¹¹⁰

The investigation will begin within 30 days after determining that an investigation is warranted. The investigation shall be said to begin at the first meeting of the investigation committee at which the committee receives its instructions.

Notifying the Respondent and Sequestering Evidence

The RIO will notify the respondent(s) of the allegation(s) within 30 days of determining that an investigation is warranted and before the investigation begins.¹¹¹ If any additional respondent(s) are identified during the investigation, the institution will notify them of the allegation(s) and provide them an opportunity to respond consistent with this policy and any applicable federal guidelines.¹¹² If the institution identifies additional respondents during the investigation, it may choose to either conduct a separate inquiry or add the new respondent(s) to the ongoing investigation.¹¹³ The institution will obtain the original or substantially equivalent copies of all research records and other evidence, inventory these materials, sequester them in a secure manner, and retain them for seven years after its proceeding or any external proceeding, whichever is later.¹¹⁴

Convening an Investigation Committee

The RIO, in consultation with other institutional officials as appropriate, shall appoint an investigation committee and committee chair. The size and constitution of the committee shall be determined by the RIO. The committee shall include at least three Marquette faculty members. The investigation committee should consist of individuals who do not have real or apparent conflicts of interest in the case, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the allegation, interview the principals and key witnesses, and conduct a thorough investigation of all research records and evidence relevant to reaching a decision on the merits of the allegations. These individuals may be scientists, subject matter experts, administrators, lawyers, or other qualified persons, and they may be from inside or outside of the institution. They may be individuals who served on the inquiry committee.

¹⁰⁹ §§ 93.310 and 93.314.

¹¹⁰ § 93.310(j).

¹¹¹ § 93.310(a-c).

¹¹² § 93.310(c)(2).

¹¹³ § 93.310(c)(2) and 93.310(c)(3).

¹¹⁴ § 93.318.

The RIO shall notify the respondent of the proposed committee membership and the respondent will have the opportunity to submit a written objection to any appointed member of the committee based on bias or conflict.

After vetting investigation committee members for conflicts of interest and appropriate professional expertise, the RIO will convene the committee and ensure that the members understand their responsibility to conduct the research misconduct proceedings in compliance this policy.¹¹⁵ The investigation committee will conduct interviews, pursue leads, and examine all research records and other evidence relevant to reaching a decision on the merits of the allegation(s).¹¹⁶ The RIO, in consultation with institutional counsel, will provide staff assistance and guidance to the investigation committee and any experts on the procedures for conducting and completing the investigation, including procedures for maintaining confidentiality, conducting interviews, analyzing data, and preparing the investigation report.

The institution will use diligent efforts to ensure that the investigation is thorough, sufficiently documented, and impartial and unbiased to the maximum extent practicable.¹¹⁷ The institution will notify the respondent in writing of any additional allegations raised against them during the investigation.¹¹⁸

Conducting Interviews

The investigation committee will interview each respondent, complainant(s), 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.¹¹⁹ The institution will number all relevant exhibits and refer to any exhibits shown to the interviewee during the interview by that number.¹²⁰ The institution will record and transcribe interviews during the investigation and make the transcripts available to the interviewee for correction.¹²¹ The institution will include the transcript(s) with any corrections and exhibits in the institutional record of the investigation.¹²² The respondent will not be present during the witnesses' interviews, but the institution will provide the respondent with a transcript of each interview, with redactions as appropriate to maintain confidentiality.

Documenting the Investigation

Marquette University will complete all aspects of the investigation within 180 days. The institution will conduct the investigation, prepare the draft investigation report for each respondent, and provide the opportunity for respondents to comment.¹²³ The institution will document the IDO's final decision and

¹¹⁵ § 93.310(f).

¹¹⁶ § 93.310.

¹¹⁷ § 93.310(f).

¹¹⁸ § 93.310(c)(1).

¹¹⁹ § 93.310(g).

¹²⁰ § 93.310(g)(2).

¹²¹ § 93.310(g)(1) and 93.310(g)(3).

¹²² § 93.310(g)(4).

¹²³ §§ 93.106, 93.300(d), and 93.310(g)(5). Institutions must, to the extent possible, provide confidentiality to respondents, complainants, and witnesses and protect complainants, witnesses, and committee members from retaliation. It is up to institutions to determine how to do so in practical terms (e.g., by redacting transcripts).

transmit the institutional record (including the final investigation report and IDO's decision) to appropriate federal agencies as applicable.¹²⁴ If the investigation takes more than 180 days to complete, the institution will ask sponsor agencies in writing for an extension and document the reasons for exceeding the 180-day period in the investigation report.¹²⁵ The investigation report for each respondent will include:

1. Description of the nature of the allegation(s) of research misconduct, including any additional allegation(s) addressed during the research misconduct proceeding.
2. Description and documentation of external funding support if applicable, including any grant numbers, grant applications, contracts, and publications listing this support. This documentation includes known applications or proposals for support that the respondent has pending with PHS and non-PHS Federal agencies.
3. Description of the specific allegation(s) of research misconduct for consideration in the investigation of the respondent.
4. Composition of investigation committee, including name(s), position(s), and subject matter expertise.
5. Inventory of sequestered research records and other evidence, except records the institution did not consider or rely on.¹²⁶ This inventory will include manuscripts and funding proposals that were considered or relied on during the investigation. The inventory will also include a description of how any sequestration was conducted during the investigation.
6. Transcripts of all interviews conducted.
7. Identification of the specific published papers, manuscripts submitted but not accepted for publication (including online publication), funding applications, progress reports, presentations, posters, or other research records that contain the allegedly falsified, fabricated, or plagiarized material.
8. Any scientific or forensic analyses conducted.
9. A copy of these policies and procedures.
10. Any comments made by the respondent and complainant(s) on the draft investigation report and the committee's consideration of those comments.
11. A statement for each separate allegation of whether the committee recommends a finding of research misconduct.¹²⁷

If the committee recommends a finding of research misconduct for an allegation, the investigation report will present a finding for each allegation. These findings will (a) identify the individual(s) who committed the research misconduct; (b) indicate whether the misconduct was falsification, fabrication, and/or plagiarism; (c) indicate whether the misconduct was committed intentionally, knowingly, or recklessly; (d) identify any significant departure from the accepted practices of the relevant research community and that the allegation was proven by a preponderance of the evidence; (e) summarize the facts and analysis supporting the conclusion and consider the merits of any explanation by the respondent; (f)

¹²⁴ § 93.316.

¹²⁵ § 93.311(b).

¹²⁶ § 93.313(e).

¹²⁷ § 93.313(a-k).

identify the specific federal support where applicable; and (g) state whether any publications need correction or retraction.¹²⁸

If the investigation committee does *not* recommend a finding of research misconduct for an allegation, the investigation report will provide a detailed rationale for its conclusion.¹²⁹

The investigation committee should also provide a list of any current support or known applications or proposals for support that the respondent has pending with PHS and non-PHS Federal agencies.¹³⁰

Completing the Investigation

The RIO will give the respondent a copy of the draft investigation report and, concurrently, a copy of, or supervised access to, the research records and other evidence that the investigation committee considered or relied on.¹³¹ The respondent will submit any comments on the draft report to the institution within 30 days of receiving the draft investigation report.¹³² The RIO may approve an extension for good cause, and the reason for the extension will be included in the records of the research misconduct proceeding.

If the institution chooses to share a copy of the draft investigation report or relevant portions of it with the complainant(s) for comment, the complainant's comments will be submitted within 30 days of the date on which they received the report.¹³³ The institution will add any comments received to the investigation report.¹³⁴

Comments received within the time limit listed above will be shared with the committee and the committee will document its consideration of those comments (point 10 listed above for the investigation report).

IDO Review of the Investigation Report

The RIO shall provide the IDO (Provost) with the investigation report. The IDO shall consider the assembled record, including any comments provided by the respondent and/or complainant on the draft investigation report. Based on a preponderance of the evidence, the IDO shall decide whether the institution will accept the investigation report, its findings, and shall determine the appropriate institutional actions.

If this determination varies from that of the investigation committee, the IDO shall provide a written statement explaining in detail the basis for rendering a decision different from that of the investigation committee; he or she shall also include this statement in the institution's letter transmitting the investigation report to ORI for cases subject to the PHS regulation or to the appropriate agency official for other funding agencies. The IDO's explanation should be consistent with the PHS or other relevant federal definition of research misconduct, the institution's policies and procedures, and the evidence reviewed and analyzed by the investigation committee. The IDO may also return the report to the

¹²⁸ § 93.313(k)(1)(i-vii).

¹²⁹ § 93.313(k)(2).

¹³⁰ § 93.313(k)(3).

¹³¹ § 93.312(a).

¹³² § 93.312(a).

¹³³ § 93.312(b).

¹³⁴ § 93.313(j).

investigation committee with a request for further fact-finding or analysis. The IDO's determination, along with the investigation report, constitutes the final investigation report for purposes of ORI or other federal agency review.

When a final decision on the case has been reached by the institution, the RIO shall notify both the respondent and the complainant in writing. In addition, the RIO shall determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals, collaborators or the respondent in the work, or other relevant parties should be notified of the outcome of the case.

Institutional Administrative Actions

The institution shall take appropriate administrative actions against individuals when an allegation of research misconduct has been substantiated.

If the IDO determines that the alleged misconduct is substantiated by the findings, he or she will determine the appropriate actions to be taken after consultation with the RIO and others, including counsel, as appropriate. These actions may include:

- appropriate steps to correct the research record (e.g., withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found);
- removal of the responsible person from the particular project;
- special monitoring of future work;
- debarment from extramural grants; and/or
- initiation of steps leading to possible reprimand, probation, suspension, rank and/or salary reduction, or termination of employment.

For students, administrative actions may also include:

- loss of credit for the research; and/or
- initiation of steps leading to possible loss of assistantship, dismissal from the program, or dismissal from the university;
- In some serious cases, revocation of granted degrees may be warranted.

The IDO's decision with respect to the findings and corrective actions shall be final.

Creating and Transmitting the Institutional Record

After the IDO has made a final determination of research misconduct findings, the RIO will add the IDO's written decision to the investigation report and organize the institutional record in a logical manner.¹³⁵

The institutional record consists of the records that were compiled or generated during the research misconduct proceeding, except records the institution did not rely on.¹³⁶ These records include documentation of the assessment, a single index listing all research records and evidence, the inquiry

¹³⁵ §§ 93.220(a)(4) and 93.316.

¹³⁶ § 93.220.

report and investigation report, and all records considered or relied on during the investigation.¹³⁷ The institutional record also includes the IDO's final decision and any information the respondent provided to the institution.¹³⁸ The institutional record must also include a general description of the records that were sequestered but not considered or relied on.¹³⁹

After the IDO has made a final written determination, the institution must transmit the institutional record to federal agencies, where appropriate, in compliance with their guidance.¹⁴⁰

The institution shall cooperate fully and on a continuing basis with ORI or other federal agency during oversight reviews of the institution and its misconduct proceedings and during the process under which the respondent may contest findings of research misconduct by ORI or other federal agency and proposed administrative actions by the federal agency. This includes providing, as necessary to develop a complete record of relevant evidence, all witnesses, research records, and other evidence under institutional control or custody, or in the possession of, or accessible to, all persons that are subject to the institution's authority.

Other Procedures and Special Circumstances

Multiple Institutions and Multiple Respondents

If the alleged research misconduct involves multiple institutions, Marquette University may work closely with the other affected institutions to determine whether a joint research misconduct proceeding will be conducted.¹⁴¹ If so, the cooperating institutions will choose an institution to serve as the lead institution. In a joint research misconduct proceeding, the lead institution will obtain research records and other evidence pertinent to the proceeding, including witness testimony, from the other relevant institutions.¹⁴² By mutual agreement, the joint research misconduct proceeding may include committee members from the institutions involved.¹⁴³ The determination of whether further inquiry and/or investigation is warranted, whether research misconduct occurred, and the institutional actions to be taken may be made by the institutions jointly or tasked to the lead institution.¹⁴⁴

If the alleged research misconduct involves multiple respondents, Marquette may either conduct a separate inquiry for each new respondent or add them to the ongoing proceedings.¹⁴⁵ The institution must give additional respondent(s) notice of and an opportunity to respond to the allegations.¹⁴⁶

Respondent Admissions

Marquette will promptly notify ORI or the NSF OIG in advance if at any point during the proceedings (including the assessment, inquiry, investigation, or appeal stage) it plans to close a research misconduct

¹³⁷ §§ 93.220(a)(1-3) and 93.220(b).

¹³⁸ § 93.220(a)(3-4).

¹³⁹ § 93.220(c).

¹⁴⁰ § 93.316.

¹⁴¹ § 93.305(e).

¹⁴² § 93.305(e).

¹⁴³ § 93.305(e).

¹⁴⁴ § 93.305(e).

¹⁴⁵ § 93.305(d).

¹⁴⁶ § 93.305(d).

case because the respondent has admitted to committing research misconduct or a settlement with the respondent has been reached.¹⁴⁷ If the respondent admits to research misconduct, the institution will not close the case until providing the appropriate federal office with the respondent's signed, written admission.¹⁴⁸ The admission must state the specific fabrication, falsification, or plagiarism that occurred, which research records were affected, and that it constituted a significant departure from accepted practices of the relevant research community.¹⁴⁹ The institution must not close the case until giving the a written statement confirming the respondent's culpability and explaining how the institution determined that the respondent's admission fully addresses the scope of the misconduct.¹⁵⁰

Termination of employment or resignation prior to completing the inquiry or investigation

The termination of the respondent's employment, by resignation or otherwise, before or after an allegation of research misconduct has been reported, shall not preclude or terminate the research misconduct proceedings. If the respondent, without admitting to the misconduct, elects to resign his or her position prior to the initiation of the inquiry, but after an allegation has been reported, or during an inquiry or investigation, the inquiry or investigation shall proceed. If the respondent refuses to participate in the research misconduct proceedings after resignation, the committee shall use its best efforts to reach a conclusion concerning the allegations, noting in its report the respondent's refusal to cooperate and its effect on the committee's review of all the evidence.

Other Special Circumstances

At any time during a research misconduct proceeding, the institution shall take appropriate interim actions to protect public health, federal funds and equipment, and the integrity of the PHS or other federally supported research processes. The necessary actions will vary according to the circumstances of each case, but examples of actions that may be necessary include delaying the publication of research results, providing for closer supervision of one or more researchers, requiring approvals for actions relating to the research that did not previously require approval, auditing pertinent records, or taking steps to contact other institutions that may be affected by an allegation of research misconduct.

At any time during a research misconduct proceeding that involves PHS funding or applications for funding, the RIO shall notify ORI immediately if he or she has reason to believe any of the following special circumstances exist:

- health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
- HHS resources or interests are threatened;
- research activities should be suspended;
- there is a reasonable indication of possible violation of civil or criminal law;
- federal action is required to protect the interests of those involved in the research misconduct proceeding;
- HHS may need to take appropriate steps to safeguard evidence and protect the rights of those involved.

¹⁴⁷ § 93.317(a).

¹⁴⁸ § 93.317(b).

¹⁴⁹ §§ 93.103 and 93.317(b).

¹⁵⁰ § 93.317(b).

At any time during a research misconduct proceeding that involves NSF funding or applications for funding, the institution shall notify NSF Office of the Inspector General immediately if it has reason to believe any of the following special circumstances exist:

- there is reasonable indication of possible violations of civil or criminal law
- public health or safety are at risk;
- NSF's resources, reputation, or other interests need protecting;
- federal action may be needed to protect the interests of a subject of the investigation or of others potentially affected;
- the research community or the public should be informed; and/or
- research activities should be suspended.

Records Retention

Marquette University will maintain the institutional record and all sequestered evidence, including physical objects (regardless of whether the evidence is part of the institutional record), in a secure manner for seven (7) years after the completion of the proceeding or the completion of any external agency proceeding, whichever is later, unless custody has been transferred to the external sponsor agency.¹⁵¹

¹⁵¹ § 93.318.

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