University of Louisville

OFFICIAL UNIVERSITY ADMINISTRATIVE POLICY

POLICY NAME (R*)

Research Misconduct Policy

POLICY NUMBER (O*)

RES 1.04

INITIAL ADOPTION AND EFFECTIVE DATE (R*)

October 21, 2002

POLICY APPLICABILITY (R*)

This policy is applicable to:

- Research proposed, conducted or reported at the University of Louisville (University) by University-related individuals, i.e., those with an appointment or official affiliation with the University, including faculty, academic staff, students, postdoctoral scholars, visiting scholars who make significant use of university Research resources (including participation in any sponsored project awarded to the University, University of Louisville Research Foundation or University of Louisville Athletic Association), and those with any other University teaching and/or Research titles such as adjunct or clinical:
- Research proposed, conducted or reported elsewhere by such University-related individuals as part of their University-related duties or activities; and
- at the discretion of the University, to Research proposed, conducted, or reported where such Research is claimed, cited, or implied to have been done at the University, or where a University appointment or official affiliation is claimed, cited, or implied in connection with the Research.

REASON FOR POLICY (O*)

The University of Louisville (University) values the credibility of our Research activities and the integrity of our community above all. The integrity of Research is the subject of widely shared professional norms and legal requirements that place specific obligations on the University and all members of the University community. As a recipient of federal Research funds, the University must have institutional policies and procedures in place to address Allegations of Research Misconduct. Likewise, the University must have processes to ensure that malicious or frivolous Allegations do not unduly impact our Research community.

POLICY STATEMENT (R*)

It is the policy of The University to inquire into and, if necessary, investigate and resolve promptly and fairly all credible instances of alleged Research Misconduct and to comply in a timely manner with sponsor requirements for reporting cases of possible Research Misconduct when sponsored project funds are involved.
All employees or individuals associated with The University should report observed, suspected, or apparent Research Misconduct to the Director, the University of Louisville's Office of Research Integrity (ULORI) or another University designated Research Integrity Officer (RIO). If an individual is unsure whether a suspected incident falls within the definition of Research Misconduct, that person may contact the Director, ULORI to informally discuss the suspected Research Misconduct. If the circumstances described by the individual do not meet the definition of Research Misconduct, the Director, ULORI may refer the individual or Allegation to other offices or officials responsible for resolving the problem as necessary and appropriate.

Allegations of Suspected Research Misconduct. Allegations of Research Misconduct must be submitted in writing or verbally to a designated RIO. The RIO shall initiate the processes under this policy upon receiving an Allegation of Research Misconduct, regardless of whether the Allegation originates within or outside of the University and whether presented electronically, in writing or verbally.

Submitted Allegations will be treated as confidential to the extent legal and practicable and in most instances will be shared only among the RIO, the Deciding Official (DO), the Chief Compliance Officer, and the individuals charged with assessing the Allegations to determine whether they fall within the jurisdiction of this policy and to identify the specific Allegations, if any, to be brought forward in an Inquiry.

Any person, whether associated with the University or not, may bring a Good Faith Allegation of Research Misconduct. If Allegations are made against more than one Respondent, a single proceeding may be used, but a separate decision will be reached regarding each Respondent.

No Allegation shall be accepted or reviewed under this policy regarding conduct alleged to have occurred six years or more before the date of receipt of the Allegation, except as specified by law. At any stage of the Proceedings and as permitted by law, an Allegation may be dismissed upon the finding that the facts giving rise to the Allegation of Research Misconduct occurred more than six years before the receipt of the Allegation. Allegations extending beyond the six-year limitation occur when:

- Evidence is presented in the Allegation of a citation to the portion(s) of the research record (e.g., processed data, journal articles, funding proposals,

data repositories) alleged to have been fabricated, falsified, or plagiarized, for the potential benefit of the Respondent; or

- The Deciding Official (DO), following consultation with the Research Integrity Officer (RIO), determines that the alleged Research Misconduct could reasonably have a substantial adverse effect on the health or safety of the public.

Scope of Research Misconduct Proceedings. The initial scope of a Research Misconduct Proceeding will be based on the original Allegation. Should credible Evidence be verified during any of the phases (Assessment through Investigation), the University will widen the scope of the Research Misconduct Proceedings accordingly to ensure the integrity of the scientific record is maintained or restored.

Findings of Research Misconduct. A finding of Research Misconduct requires that:

- The action meets the federal definition of Research Misconduct, namely, Fabrication, Falsification, or Plagiarism in proposing, performing, or reviewing Research, or in reporting Research results; and
- A significant departure from accepted practices of the relevant research community exists;
- The Research Misconduct be committed Intentionally, Knowingly, or Recklessly by an identified individual; and
- The Allegation be proven by a Preponderance of Evidence.

A Respondent's destruction of Research Records documenting the questioned research is Evidence of Research Misconduct where the University or Health and Human Services (HHS) establishes by a Preponderance of the Evidence that the Respondent Intentionally or Knowingly destroyed records after being informed of the Research Misconduct Allegations. A Respondent's failure to provide Research Records documenting the questioned Research is Evidence of Research Misconduct where the Respondent claims to possess the records but refuses to provide them upon request.

The Respondent has the burden of proving by a Preponderance of the Evidence all affirmative defenses raised (honest error or difference of opinion). The Respondent has the burden of proving by a Preponderance of the Evidence any mitigating factors relevant to a decision to impose Administrative Actions after a Research Misconduct Proceeding.

The factual findings of the Investigation Panel shall be conclusive and binding on any subsequent University proceeding convened for other purposes (e.g., grievances submitted relating to any sanctions or correction actions imposed). The

lack of a Federal ORI finding of Research Misconduct does not overturn a University finding of Research Misconduct warranting remediation under this policy.

If at any time prior to initiating an Investigation the Respondent admits, in writing, to the facts alleged in the Allegation, the DO shall decide whether to order an immediate Investigation in lieu of continuing the Inquiry or Assessment. If an Investigation is ordered, the Respondent's written statement may serve as the Inquiry Report. For cases not involving federal agencies, if at any stage of a Research Misconduct Proceeding, a Respondent admits to Research Misconduct and provides that admission, in writing, the DO may elect to proceed directly to determine the appropriate administrative actions.

Timelines. Due to the sensitive nature of Allegations of Research Misconduct, each Complaint will be resolved as expeditiously as possible.

The Inquiry including preparing the report of findings, providing the draft report for comment, and the decision of the DO, should be completed within 90 Days of initiating the Inquiry unless the DO approves an extension.

The Investigation, including preparing the report of findings, providing the draft report for comment, and the decision of the DO, should be completed within 180 Days of initiating the Investigation, unless the DO approves an extension. In cases involving the Public Health Service, the Federal ORI must also approve the extension. The Investigation record must include documentation of the reasons for exceeding the 180-Day period.

Record Retention. All proceedings files and final reports will be maintained and secured by ULORI for the longer of (1) a period of seven years from the date of closure of the Research Misconduct Proceeding, or (2) for the period required by applicable regulations or ensuing related actions. The official University record of Research Misconduct Proceedings will include all reports, electronic recordings, computer files, documentary Evidence, or other relevant matter collected and used by the Panel(s).

Allegations Not Made in Good Faith. If the DO determines that the Complainant's Allegation of Research Misconduct was made with knowledge that the Allegation was frivolous and/or malicious, false, or with reckless disregard for or willful ignorance of facts that would disprove the Allegation, or that any member of the University community acted in violation of the Research Misconduct Policy, the DO, in consultation with University Counsel, will determine referrals to be made to other Institutional Officials for administrative action.

Confidentiality. All parties involved in the Research Misconduct Proceeding must maintain confidentiality regarding the nature and details of the case. All parties will be reminded of the confidentiality requirement throughout their participation in the proceedings. Inquiries and Investigations are conducted in a manner that ensures fair treatment to the Respondent and Confidentiality to the extent possible without compromising public health and safety or thoroughly carrying out the needs of an Inquiry and/or Investigation. Individuals who may have need to be aware of proceedings include institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions. The limitation on disclosure of the identity of respondents, complainants, and witnesses explicitly no longer applies once an institution has made a final determination of Research Misconduct findings.

Conflict of Interest. The integrity of the process will be maintained by disclosure and evaluation of any prejudicial Conflict of Interest. The University, through the Deciding Official, will address any potential, perceived, or actual personal, professional, or financial conflicts of interest between individuals leading the Research Misconduct Proceedings and the Complainant, Respondent, or witnesses.

Respondent's right to Consultation. At any stage of the Proceedings, a Respondent may consult with individuals of their choosing who do not otherwise have a role in the Proceedings. The advisor shall not present the case or otherwise directly participate in the Proceeding. Seeking guidance from an individual outside the Research Misconduct Proceedings does not alter the confidentiality provisions.

Retaliation. The University will not tolerate Retaliation in any form against any individual who participates in a Research Misconduct Proceeding. Retaliation is a serious violation that can subject the offender to disciplinary action under appropriate University rules or policies. All parties to Research Misconduct Proceedings, including Respondents, Complainants, Witnesses, Panel Members, the RIO, DO, and staff, are entitled to be treated respectfully.

Truthfulness. Although not under oath during Proceedings related to this policy, all participants are obliged to tell the truth and cooperate in the Proceedings. If at any stage in the Proceedings it is determined that any participant has not told the truth, such a finding may be the basis for disciplinary, personnel, or other appropriate action in accordance with University policies.

DEFINITIONS (O*)

Definitions for this policy are posted here.

RELATED INFORMATION (O*)

Department of Agriculture

- 2 CFR Part 422

Department of Defense

- DoDI 3210.7 (Research Integrity and Misconduct)

Department of Education

- 70 Fed. Reg. 66371 (Policy on Research Misconduct)

Department of Energy

- 2 CFR 910.132
- 10 CFR Part 733
- 48 CFR 952.235-71

Department of Health and Human Services

- 45 CFR Part 5 (Freedom of Information Regulation)
- 45 CFR Part 5b (Privacy Act Regulations)
- 45 CFR 46 (Protection of Human Subjects)

Department of Transportation

- 48 CFR 1252.235.70

Environmental Protection Agency

- EPA 3120.5
- 48 CFR 1552.203-72

National Aeronautics and Space Administration

- 14 CFR Part 1275 (Investigation of Research Misconduct)

National Endowment for the Humanities

- Research Misconduct Policy

National Science Foundation

- 45 CFR 689 (Research Misconduct)

- PAPPG, Chapter 12.C

Office of Privacy and Civil Liberties

- 5 USC § 552a (Privacy Act of 1974)

Office of Science and Technology Policy

- 65 Fed. Reg 76260 (Federal Research Misconduct Policy)

Public Health Service

- 42 USC § 289b (ORI Statutory Authority)
- 42 CFR Part 50 (Former Scientific Misconduct Regulations)
- 45 CFR Part 76 (HHS Debarment Regulations)
- 42 CFR Part 93 (PHS Policies on Research Misconduct)
- 59 Fed. Reg. 25953 (PHS ALERT Records Concerning Individuals Found to Have Committed Scientific Misconduct in PHS Sponsored Research)
- 65 Fed. Reg. 70830 (Notice of Proposed Rulemaking Regarding the Protection of Research Misconduct Whistleblowers)
- 65 Fed. Reg. 82972 (Notice of Proposed Rulemaking Regarding the Protection of Research Misconduct Whistleblowers - Technical Correction)
- 74 Fed. Reg. 44847 (Public Health Service Records Related to Inquiries and Investigations of Scientific Misconduct, HHS/OASH/ORI.)

Veterans Administration

- 48 CFR Part 852.235-70
- VHA Handbook 1058.02

PROCEDURES (O*)

Procedures for Responding to Allegations of Research Misconduct (RES 1.04a)
Procedures for Responding to Questionable Research Practices (RES 1.04c)

RESPONSIBILITIES (O*)

The Research Misconduct Roles and Responsibility Matrix is located here.

University of Louisville

OFFICIAL UNIVERSITY ADMINISTRATIVE POLICY

RESPONSIBLE AUTHORITY (R*)

Executive Vice President, Research and Innovation

RESPONSIBLE UNIVERSITY DEPARTMENT/DIVISION (R*)

Office of Research Integrity
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502-852-2454
ori@louisville.edu

HISTORY (R*)

This version of the policy, effective <ENTER EFFECTIVE DATE>, governs all Research misconduct proceedings in matters submitted on or after January 1, 2026. The former version of this policy will continue to govern matters in process prior to January 1, 2026, unless the University determines, in its sole discretion, that this revised policy will apply.

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Reviewed Date(s): 2015, October 2023

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The University Policy and Procedure Library is updated regularly. To ensure a printed copy of this document is current, please access it online at http://louisville.edu/policies.

R* = Required O* = Optional