

# RESEARCH INTEGRITY POLICY

## I. REFERENCES.

*UF Regulation 1.0101 Research Integrity, August 27, 2020*

*Exhibit A: Federal Research Misconduct Policies*

## II. INTRODUCTION.

**A. Scope.** This Policy sets forth the implementing procedures to *Regulation 1.0101 Research Integrity*. These procedures apply to allegations of research misconduct and other research integrity deviations when the respondent is an individual employed by, affiliated with, or acting on behalf of the University during the time the alleged misconduct occurred. All faculty, staff and students must report observed or suspected research misconduct and other violations of research integrity to UF Research

**B. Limitations.** An allegation of research misconduct occurring more than six (6) years prior to receipt of the allegations shall not be reviewed under this Policy unless:

- 1) a respondent continues or renews any incident of alleged research misconduct that occurred before the six (6) year limitation through the citation, re-publication or other use for the potential benefit of the respondent of the research record that is alleged to have been fabricated, falsified, or plagiarized; or,
- 2) the University determines that the alleged misconduct, if it occurred, would have a substantial adverse effect on the research community, the University or the health and safety of the public or research community.

## III. RESEARCH MISCONDUCT.

### A. Definitions.

*Deciding Official (DO)* means the Vice President for Research, who makes final determinations on allegations of research misconduct and other research integrity deviations.

*Research Integrity Officer (RIO)* means the institutional official appointed by the Vice President for Research who is primarily responsible for overseeing the procedures described in this Policy.

*Research Misconduct* means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.

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

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

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

**B. General Principles.** The general principles set forth below apply to allegations of research misconduct in connection with any research conducted at the University, independent of the status or source of funding or sponsorship.

- 1) Federal Research Misconduct Policies. The University shall comply with the statutory and regulatory requirements published by federal agency sponsors regarding the allegations of research misconduct related to activities sponsored by those agencies. (see Exhibit A “Federal Research Misconduct Policies”).
- 2) Research Misconduct Standard. A finding of research misconduct requires a determination that there has been a significant departure from the accepted practices of the relevant research community; that the research misconduct was committed intentionally, knowingly, or recklessly; and that the allegation has been proved by a preponderance of the evidence.
- 3) Questionable Research Practices. Reports of careless, irregular, or contentious research practices, as well as authorship disputes, may not meet the standard for research misconduct but may be a research integrity violation.
- 4) Good Faith. The University community shall promptly report any suspicions or concerns of deviations from standard research practices. All participants in the research misconduct review process shall act in good faith during the review. The University may take disciplinary action against participants not acting in good faith during the misconduct process or those who fail to comply with a reasonable direction by a University official.
- 5) Confidentiality. The procedures set forth herein are designed to protect the reputation and the rights of the respondent and the complainant, and to preserve the University’s commitment to research integrity. Allegations of research misconduct and proceedings conducted under this Policy may be damaging to the reputation of a respondent and other persons involved. Accordingly, the University shall use best efforts to conduct the reporting,

assessments, inquiries, and investigations in a confidential manner, to the extent permitted by law and by due process, and to limit disclosure of any information, records, or evidence to those with a need to know, including University persons who need to know in order to carry out their University roles. At any time, the University may need to notify or consult with outside entities about the allegation(s) or the process.

- 6) Intervening Actions. As necessary, the University may intervene, pending final resolution of an allegation and take action. For example, it may be necessary to act in order to protect human subjects or to preserve federal or other sponsor funds (including suspension of the research at issue), or other appropriate steps.
- 7) Conflict of Interest. Any individual involved in the research misconduct process shall disclose any unresolved professional, personal, or financial conflict of interest. The appropriate University official shall determine whether such individual's conflict of interest would negatively affect the integrity of the inquiry or investigation and if such a determination is made, such conflicted individual will not be assigned a decision-making role in the process.
- 8) Access to Records. In accordance with University regulations and policies, the University may access and take custody of all records in any location, whether physical or electronic, that may be necessary to review and evaluate the allegation of research misconduct.
- 9) Admission. In cases in which the respondent admits responsibility, the RIO in consultation with the appropriate University officials and, if needed, federal oversight agencies, may consider whether to modify or eliminate any of the procedural stages of the procedures set forth below.

### **C. University Review of Allegations.**

- 1) Review. The University's review of an allegation may occur in three (3) phases: (1) a preliminary assessment to determine whether the allegation meets the definition of research misconduct and an inquiry is warranted; (2) if warranted, an inquiry to determine whether sufficient evidence exists to proceed to an investigation of the allegation; and (3) if warranted, an investigation to examine and evaluate the facts and assess the merit of the allegation. The RIO is charged with overseeing and conducting the University's review process in a fair and unbiased manner.
- 2) Sequestration of Evidence. The RIO shall take reasonable, practical, and prompt steps to obtain custody of, inventory, and securely sequester all relevant research records, data, and any other relevant evidence. Should such evidence include data on instruments shared among several users,

copies of that data may be secured instead, provided that those copies are substantially equivalent to the evidentiary value of the instruments.

3) Preliminary Assessment. Upon receiving an allegation of research misconduct, the RIO shall assess the allegation to determine whether there is a reasonable basis to conclude that the allegation falls within the definition of research misconduct and is sufficiently credible and specific so that potential evidence of research misconduct may be identified. If so, an inquiry is warranted.

4) Inquiry.

- a. Purpose. The purpose of an inquiry is to gather information and facts to determine whether sufficient evidence exists to warrant an investigation of the allegation. If the RIO determines that the criteria for an inquiry are met, (s)he will promptly initiate an investigation. An inquiry does not require a full review of all the evidence related to the allegation.
- b. Notice to Respondent. Upon determining that an inquiry is warranted, the RIO shall provide written notice of the allegation(s) and a copy of this Policy and Regulation 1.0101 to the respondent. The respondent shall have an opportunity to respond to the notice.
- c. Process. The RIO may conduct the inquiry directly or may appoint an individual or individuals, without conflicts of interest, to conduct the inquiry. If necessary, the RIO may also engage an outside expert. The inquiry usually consists of the gathering and review of information related to the underlying allegation and may also consist of interviews with relevant witnesses, the complainant(s), and respondent(s). The RIO shall determine an investigation is warranted if there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct and preliminary information and fact gathering indicates that the allegation(s) may have substance.
- d. Report. The RIO, or the individual(s) appointed to conduct the inquiry, shall prepare a written report that includes: a description of the allegation(s); identification of the funding source for the research at issue; a description of the evidence reviewed; if applicable, a summary of the witnesses interviewed; and the conclusion of the inquiry as to whether the allegations warrant an investigation.
- e. Review of Report and Actions. If the inquiry concludes that an investigation is warranted, then the respondent shall have an

opportunity to review the report and provide a response, which shall become part of the record. The RIO shall transmit to the DO the final inquiry report, including the respondent's comments, if any. If the DO agrees with the finding that an investigation is warranted, then (s)he shall advise of any additional notifications that may be necessary (such as a dean or department chair, or sponsoring agency), and the RIO shall commence the investigation. If the inquiry will not proceed to an investigation, the RIO will inform the Respondent and other relevant individuals, as determined by the RIO, that there was not sufficient evidence to proceed to an investigation.

5) Investigation.

- a. Investigation Committee. Upon determining that an investigation is warranted, the RIO will appoint an investigation committee. The RIO shall determine the make-up and size of the committee, and such committee members shall not have unresolved personal, professional, or financial conflicts of interest with the individuals in the investigation (i.e., the complainant, respondent, or witnesses). The committee should include at least one faculty member with the appropriate scientific expertise in the field of research of the underlying allegation and may, if necessary, also include experts outside the University.
- b. Purpose. The purpose of an investigation is for a knowledgeable committee of faculty and experts to conduct a formal review and examination of the relevant facts to determine if by a preponderance of the evidence they conclude that research misconduct has been committed.
- c. Charge. The RIO will provide the charge to the committee, which will include: (1) a description of the purpose of the investigation; (2) the role and responsibility of the committee; (3) the definition of research misconduct and the requirements and standard necessary to support a committee finding of research misconduct; (4) the timeline of the investigation which shall be consistent with applicable federal and regulatory requirements, if any, (see exhibit A); and (5) a copy of this Policy, Regulation 1.0101, the allegation, [any applicable federal and regulatory requirements,] and the inquiry report.
- d. Responsibilities. The committee is responsible for making a good faith effort to: (1) diligently gather and examine all research records and evidence relevant to reaching a decision on the merits of each allegation; (2) interview the complainant, respondent and any additional individuals reasonably identified as having information

related to the investigation and such interviews shall be recorded or transcribed and made part of the record; (3) pursue all significant leads and issues relevant to the investigation, including any evidence of additional possible instances of research misconduct; and (4) make a determination whether research misconduct has occurred.

e. Respondent.

(1) Notice. The RIO will notify the respondent of the investigation, the make-up of the committee members, and the charge presented to the committee. The respondent has an opportunity to identify a conflict of interest with any of the committee members, and the RIO shall determine whether an alternative committee member is necessary.

(2) Advisor. The respondent may select an advisor of their choice to be present when they are interviewed by the committee. The role of the advisor is limited to advising the respondent, and the advisor may not address the committee or any witnesses.

f. Report. The committee shall prepare a written report that includes: (1) a description of the allegation(s); (2) the identification of the respondent; (3) funding source(s); (4) a list of the evidence reviewed and the methods used to examine it; (5) a statement of finding for each allegation as to whether research misconduct occurred and whether it was committed knowingly, intentionally, or recklessly; (6) the identity of the person(s) responsible for the misconduct; (7) the identification of any publications that need correction or retraction; and (8) the identification of any externally sponsored projects that may be affected by the misconduct.

6) Review of Report and Actions.

a. The respondent shall have an opportunity to review and provide comments to the report and, as determined by the RIO, shall also have a copy of or supervised access to the evidence on which the report is based.

b. The RIO shall submit the committee's investigation report, the complete investigation file, and the respondent's comments, if any, to the DO. The DO, in consultation with other appropriate University officials as needed, will: (1) determine whether to adopt, adopt with modification or reject the committee's findings; (2) notify the respondent and respondent's supervisors of the determination; (3) notify external agencies or others, as required in

applicable federal or state policies; (4) determine any actions to take related to the research, publications, data or other records or materials at issue in the research misconduct investigation; (5) if the respondent is an employee, recommend personnel action to the head of the respondent's unit in accordance with this Policy; and (6) if the respondent is a student, refer the matter to the Dean of Students Office for appropriate conduct proceedings, providing information and guidance as needed.

- D. Finding of No Research Misconduct.** In instances where the allegation(s) are not determined in inquiry or investigation to be research misconduct, the University shall use reasonable efforts to restore the reputation(s) of the individuals that are the subject of the allegations and to protect the individual(s) who made the allegations in good faith.
- E. Record Retention.** The RIO will securely maintain all inquiry and investigatory files and final reports for seven (7) years from the date of completion of the proceeding or completion of any federal or state proceeding, whichever is later.

**IV. OTHER VIOLATIONS OF RESEARCH INTEGRITY.** UF Research shall also investigate or refer to the appropriate University official alleged deviations from research integrity and accepted research practices that do not constitute research misconduct. Investigations will comport with the fundamental principles of due process. Such deviations include but are not limited to the following:

- A. Failure to disclose:** failing to disclose outside activities or financial interests, making incomplete disclosures of outside activities, or misrepresenting outside activities by individuals currently involved in research or potentially involved in future research.
- B. Breach of confidentiality:** taking or releasing the ideas or data of others by one with whom they were shared with an understanding or expectation of confidentiality (e.g., disclosing or misappropriating ideas from others' grant proposals, award applications, or manuscripts for publication when one is a reviewer for granting agencies or journals, or is an internal reviewer).
- C. Dishonesty in publication:** knowingly publishing material that will mislead readers (e.g., misrepresenting data, misrepresenting research progress; omitting contributors or adding the names of other authors without permission).
- D. Property violations:** stealing, tampering with, or destroying property of others, such as research papers, supplies, equipment, or products of research or scholarship.

- E. Failure to report observed research misconduct:** covering up or otherwise failing to report observed, suspected, or apparent research misconduct by others.
- F. Retaliation:** taking adverse action against an individual for having reported alleged research misconduct or other deviations in research integrity.
- G.** Directing or encouraging others to engage in any of the above listed offenses or failing to comply with the reasonable directions of a University official related to a research integrity investigation.

## **V. ADMINISTRATION OF DISCIPLINE.**

**A. Issuance of Discipline.** If the UF Research determines that an employee engaged in research misconduct or deviated from research integrity or accepted research practices, the dean, director or vice president of the respondent's unit shall take appropriate disciplinary action, up to termination, giving due consideration of UF Research's recommendation and in consultation with the Office of the Provost and Human Resources, where applicable. Discipline issued under this Policy shall otherwise be in accordance with the procedures applicable to the respondent's employment classification.

### **B. Grievances.**

- 1) Faculty and Graduate Assistants. A faculty member or graduate assistant disciplined under this Policy may grieve the discipline in accordance with the applicable grievance procedures, except that such grievance will begin at Step 2 of the grievance process. The deadline to file a Step 2 grievance shall be the deadline to file a Step 1 grievance under the applicable grievance procedure.
- 2) TEAMS and USPS Staff. A TEAMS or USPS employee disciplined under this Policy may request arbitration in accordance with the applicable grievance procedures if such discipline is arbitrable under such procedure. The deadline to file a request for arbitration shall be the deadline to file a Step 1 grievance under the applicable grievance procedure.

**C. Contact/Questions.** Any questions related to this policy should be directed to the RIO.