



Research Misconduct

1. Policy Statement

- 1.1. University research shall be conducted with integrity and in accordance with the values and professional norms of individual disciplines and those agreed upon by the research community.
- 1.2. Concerns about research practices that do not meet these expectations should be communicated to the university's Research Integrity Officer (RIO) in the Division of Research and Innovation (DRI). Allegations of research misconduct will be addressed as described in this policy; utilizing an approach that balances the interests of all parties, including those of the general scholarly community.
- 1.3. This policy aims to provide a consistent and effective approach to the three formal stages of the university's response to alleged or apparent misconduct involving university research: assessment, inquiry, and investigation.
 - 1.3.1. The Institutional Deciding Official (IDO) may direct the RIO to skip or abbreviate the assessment or inquiry phases if the matter is referred to OSU from the federal agency sponsoring the questioned research. This exception will only be considered if that agency demonstrates that they conducted that phase and determined that the criteria warranting the subsequent phase has been met.
 - 1.3.2. In consultation with the Office of General Counsel and other university support offices, as needed, the IDO may consider other exceptions to this policy when requirements from sponsoring or oversight agencies differ or conflict with the university policy.
- 1.4. This policy is intended to uphold the integrity of the research and scholarly record and is separate from personnel matters.

2. Reason for Policy

- 2.1. Every member of the Oregon State University ("university") community contributes to the organizational culture in which research is conducted. Research excellence is supported by this broader culture when research and scholarship are carried out with honesty, accountability, rigor, and transparency. OSU expects that these fundamental elements of research integrity will be demonstrated in all aspects of OSU research and

scholarship, including performing, proposing, reviewing, and disseminating results. Research misconduct betrays the public's trust in scholarship and damages the reputation of the entire research community. This policy reflects the university's commitment to fostering an environment that promotes integrity in all aspects of research.

3. Scope & Audience

- 3.1. This policy applies to all individuals involved in university research activities, including students and trainees, those with unpaid appointments, and those affiliated by contract or agreement with the university. Exceptions and additional considerations include:
 - 3.1.1. Funding. This policy applies whether or not the research activities are federally funded. However, the sections related to reporting to federal agencies will only apply when an allegation involves past, current, or pending federal support, regardless of whether an application or proposal for federal funds resulted in an awarded grant, contract, cooperative agreement, subaward, or other form of support.
 - 3.1.2. Students. Irrespective of employment status with the university, allegations of research misconduct committed by students are only covered by this policy in the context of federally funded research. All other such matters will be referred to the Office of Student Conduct and Community Standards and the Graduate School, as applicable.
 - 3.1.3. Not Covered. This policy is limited to addressing misconduct related to the conduct and reporting of research, as distinct from misconduct that may occur in the research setting but that does not affect the integrity of the research record, such as misallocation of funds, sexual harassment, and discrimination.
 - 3.1.4. Authorship Disputes. Authorship disputes and failure to acknowledge the contributions of another are not covered by this policy unless they involve research misconduct.
 - 3.1.5. Time Limitations and Subsequent Use. The RIO may dismiss an allegation brought more than six years after the alleged research misconduct occurred, unless:
 - a. The respondent continues or renews any incident through re-publication or citation to the portion(s) of the research record that is alleged to have been fabricated, falsified, or plagiarized;
 - b. The alleged misconduct, if it occurred, would possibly have an adverse effect on the health or safety of the public;

- c. The questioned research is sponsored by an agency that does not provide for dismissal based solely on a time limitation.

4. Definitions

- 4.1. **Adjudication:** Review of recommendations and determination of appropriate corrective actions.
- 4.2. **Allegation:** A written or verbal report of possible research misconduct brought directly to the attention of an institutional official.
- 4.3. **Assessment:** A preliminary evaluation of an allegation to determine whether it appears to fall within the definition of misconduct and is sufficiently credible and specific so that potential evidence of research misconduct may be identified. An assessment is limited to the review of readily accessible information relevant to the allegation.
- 4.4. **Fabrication:** Making up data or results and recording or reporting them.
- 4.5. **Falsification:** 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. While there are circumstances under which it may be appropriate to omit data in reporting research results, omission of data is considered falsification when it misleads the reader about the results of the research.
- 4.6. **Inquiry:** The assessment of whether the allegation has substance and if an investigation is warranted.
- 4.7. **Intent:**¹ Intent is about the state of mind of the person who allegedly committed research misconduct. Culpable intent is a necessary component of a finding of research misconduct.
 - 4.7.1. **Non-culpable intent:** Examples of non-culpable intent include honest error, carelessness, and sloppiness.
 - 4.7.2. **Reckless:** Indifference to the risk that the information, data, or materials were fabricated, falsified, or plagiarized.²
 - 4.7.3. **Knowing:** Awareness that an act could cause a specific result but did not necessarily intend for that result to occur (conscious).

¹ Federal funding agencies have differing definitions of intent and OSU will adhere to the applicable definitions of the relevant agency when making determinations of intent.

² In their differing definitions of reckless, ORI refers to a “known risk,” while NSF refers to risk taken “without thinking or caring about the consequences of the action, even if the subject did not fully realize the risk.”

- 4.7.4. **Intentional:** Awareness that an act could cause a specific result and committed the act to cause that result (purposeful, willful).
- 4.8. **Investigation:** The formal development of a factual record and the examination of that record leading to dismissal of the case or to a recommendation for a finding of research misconduct or other appropriate remedies.
- 4.9. **Plagiarism:** The appropriation of another person's ideas, processes, results, or words without giving appropriate credit.
- 4.9.1. 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.
- 4.9.2. For the purposes of this policy, plagiarism does not include:
- a. Limited use of identical or nearly identical phrases that describe a commonly used methodology
 - b. Self-plagiarism or the re-use of one's own previously published work (e.g., text, data, images, etc.) without sufficient acknowledgement of previous use. However, this practice may be prohibited by other University policies.
 - c. Authorship or credit disputes, including disputes among former collaborators who participated jointly in the development or conduct of a research project
- 4.10. **Preponderance of the Evidence:** Proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.
- 4.11. **Research:** For the purposes of this policy, research is the active pursuit of new ideas and knowledge intended for communication to peers or the public beyond the University.³ This applies to any form of scholarship and creative work⁴ across all fields and disciplines of scholarly inquiry, without limitation and irrespective of the presence or absence of external funding or sponsorship. The intended path for communication or peer validation may be refereed journals, monographs, exhibitions, performances, and other media or methods.
- 4.11.1. Definitions of research vary considerably across academic disciplines and federal policies. In some areas, research will include a systematic experiment,

³ Oregon State University, Promotion and Tenure Guidelines, revised February 5, 2014.

⁴ Rich G. Carter *et al.*, Innovation, entrepreneurship, promotion, and tenure. *Science* 373, 1312-1314 (2021). DOI:[10.1126/science.abj2098](https://doi.org/10.1126/science.abj2098).

study, evaluation, demonstration or survey designed to develop or contribute to general knowledge or specific knowledge;⁵ in others research is the interpretation and application of new ideas or new methods.

- 4.11.2. In determining whether the questioned work is within the scope of the aforementioned definition, those involved in the proceedings may take into account whether and how research is described in the respondent's position description, the nature of the work identified by the respondent in their bid(s) for promotion, the respondent's own characterizations of their work, research expectations within the respondent's academic unit, and the broader disciplinary norms.
- 4.12. **Research Misconduct:** Fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.
 - 4.12.1. A finding of research misconduct requires that there be a significant departure from accepted practices of the relevant research community; the misconduct be committed intentionally, knowingly or recklessly; and the allegation be proven by a preponderance of evidence.
 - 4.12.2. Researchers are responsible for ensuring integrity in their work and are accountable for the material they generate. Authors who rely on others, or on artificial intelligence (AI) or other digital tools, to generate that material without confirming the accuracy of the information open themselves up to findings of research misconduct should fabrication, falsification, or plagiarism be contained within those materials.
 - 4.12.3. Research misconduct does not include honest error or differences of opinion. Honest error is a conclusion that may be reached and documented during any phase of the proceedings and is distinct from a determination of intent.
 - 4.12.4. The Institution has the burden of proof for making a finding of research misconduct.
 - 4.12.5. The respondent has the burden of proving any affirmative defenses that they raise, such as honest error.
 - 4.13. **Research Record:** Research records and data is any information that has been collected, observed, generated, or created to validate research findings; and anything that may be necessary for the reconstruction and evaluation of research results and the events and processes leading to those results, regardless of the form of the media on which they are recorded.

⁵ Public Health Service Policies on Research Misconduct, Department of Health and Human Services 42 CFR 93.232.

- 4.14. **Retaliation:** An adverse action taken against a complainant, witness, or panel member by an institution or one of its members in response to a good faith allegation of research misconduct or good faith cooperation with a research misconduct proceeding. Retaliation is a serious violation that can subject the offender to disciplinary action.
- 4.15. **Sequestration.** Reasonable steps taken to obtain custody of all research records and evidence needed to conduct the research misconduct proceedings. This process is in the best interest of all parties, as it protects against claims that the research record was altered after the process was initiated. Research records and data are owned by the university, wherever it is located (*e.g.*, personal computers, cloud storage, electronic notebooks, etc.). All records relevant to a research misconduct proceeding must be surrendered to the RIO upon request. The RIO may engage the services of University Information Technology or others to secure or take possession of potentially relevant records.

5. Responsibilities & Procedures

5.1. Roles and Responsibilities

- 5.1.1. Everyone affiliated with the university has an ethical responsibility to act when they suspect that research misconduct has occurred and to report their concerns either to the university's RIO or through the university's Accountability and Integrity Hotline: [EthicsPoint](#). The individuals and administrative units listed below have additional roles and responsibilities.
- a. Associate Vice President for Research Integrity (AVPRI) will serve as the **Certifying Official** responsible for assuring that the institution has written policies and procedures for addressing allegations of research misconduct; and complies with its own policies and procedures. The Certifying Official is also responsible for certifying the content of the institution's annual reports to federal oversight agencies.
 - b. **Chief Information Security Officer (CISO)** or designee assists in preservation and sequestration of evidence related to a research misconduct allegation and advises on maintaining the security and confidentiality of those records.
 - c. **Complainant** is the person who makes an allegation of research misconduct. There can be more than one complainant in a single case. The complainant is expected to maintain confidentiality and cooperate with the process until it is complete. After making an allegation, the complainant's role is to serve as a witness.

Complainants have no legal standing in the process.

- d. **Vice President for Research and Innovation (VPRI)** will serve as the IDO and make the determinations as to whether an inquiry and subsequent investigation is warranted. The VPRI may delegate some or all of the DO authority to the AVPRI. In the event of such delegation, the AVPRI shall promptly inform the VPRI of substantial decisions or developments in research misconduct matters. The DO appoints the panel members and makes the final determination as to whether to accept their final recommendations. The DO determines the appropriate administrative actions within their scope of authority and may make recommendations to the provost, the Dean of the Office of Graduate Education, or others for additional corrective actions. If the respondent is someone who reports directly to the VPRI or another potential conflict of interest exists, the provost will assume the role and authority of the DO. The VPRI cannot serve on the inquiry or investigation panel, whether or not they are serving as the DO.
- e. **Office of General Counsel (OGC)** may provide advice throughout the process. Representatives from the OGC may be present to observe the proceedings of an inquiry or investigation panel but may not address the panel members, witnesses, outside counsel, or otherwise participate in the proceedings, except to answer procedural questions. When a legal matter, complaint, whistleblower claim, audit, or other similar process involves an allegation of research misconduct, OGC will refer that aspect of the matter to the RIO for assessment. Similarly, when the handling of an allegation of research misconduct involves a legal matter, the RIO will refer that aspect of the case to OGC. All aspects of the case may be handled in parallel.
- f. **Provost** shall serve as the DO when the VPRI is unable to do so.
- g. **Research Integrity Officer (RIO)** is designated by the VPRI to oversee the university's research misconduct process. The RIO serves as the intake point for allegations of research misconduct and is responsible for making a recommendation to the DO about whether an allegation warrants an inquiry.
 - i. The RIO assists panels in complying with this policy and provides reports to applicable funding and oversight agencies when required by regulation. The RIO may provide training, coordination, and advice to panel members throughout the process.

- ii. The RIO, in collaboration with the Office of Information Security, is responsible for securing and maintaining documents and evidence related to the proceedings.
- iii. The RIO also has the authority and responsibility to investigate instances of possible bad faith on the part of a complainant, witness, or panel member and to provide evidence of bad faith acts to the adjudicating authority.
- h. **Respondent** is the person against whom an allegation of research misconduct is directed or the person who is the subject of the inquiry or investigation. There can be more than one respondent in a single case. The respondent is responsible for maintaining confidentiality and cooperating with the process until it is complete.

5.2. Fair and Timely Process

- 5.2.1. **Safeguards for Complainants and Witnesses.** Every reasonable and practical effort will be made to protect the positions and reputations of those persons who, in good faith, make allegations of research misconduct. The university maintains a retaliation policy that aims to protect individuals from retaliation for a variety of activities undertaken in good faith such as filing complaints, cooperating with investigations, or engaging in a wide range of speech or whistle-blowing activities.
- 5.2.2. **Safeguards for Respondents.** Every reasonable and practical effort will be made to protect or restore the positions and reputations of those persons alleged to have engaged in misconduct but against whom no finding of research misconduct is made. Respondents will receive timely written notification of substantive allegations made against them; a description of all such allegations; reasonable access to the data and other evidence supporting the allegations; and the opportunity to respond to allegations, the supporting evidence, and the proposed findings of research misconduct, if any.
- 5.2.3. **Safeguards for Panel Members.** All reasonable and practical efforts will be taken to protect or restore the position and reputation of any panel member and to counter potential or actual retaliation against these members.
- 5.2.4. **Representation for Respondent(s) and Complainant(s):** The RIO will alert Employee Labor Relations (ELR) when a represented employee is to be given a Notice of Inquiry. A representative from ELR may be present when the Notice is provided to the employee but in order to protect the integrity of the investigation, ELR must not alert the respondent prior to the Notification.

- a. In addition to any rights which may be due under a collective bargaining agreement, respondents and complainants may elect to be represented by legal counsel or accompanied by an advisor of their choosing, so long as the advisor is not also a witness or other party to the case. When respondent and complainant meetings or interviews are scheduled, they may request that their representative be present to observe the proceedings. Representatives, advisors, and outside counsel may not address the panel members or otherwise participate in the proceedings.
 - b. If a party is represented by counsel, the university will also have counsel present.
- 5.2.5. **Fair Proceedings.** Reasonable steps will be taken to ensure that individuals responsible for carrying out any part of a research misconduct proceeding have the appropriate expertise for their role in the process and do not have unresolved personal, professional, or financial conflicts of interest with the complainant, respondent, or witnesses.
- a. When necessary to manage real or perceived conflicts of interest, the DO may appoint non-OSU members to an inquiry or investigation panel or establish a fully external panel.
- 5.2.6. **Time Limits.** Reasonable time limits will be placed on each phase of the proceeding, with allowances for extensions where appropriate. Extensions may be requested by any party involved in the case. Proceedings will continue during periods of extension. See also *General Provisions and Considerations, Unavailable Respondent*
- 5.2.7. **Day.** The term “day” as used in this policy refers to a “calendar day.” If the last day of a time period falls on a weekend or a day on which the university is closed, the time period will expire at the close of business on the next succeeding business day.

5.3. Reporting Procedures

5.3.1. Reporting Allegations of Research Misconduct

- a. Allegations of research misconduct can be reported by any means of communication to anyone at the university and should then be promptly relayed to the RIO. Under no circumstances should a department or complainant pursue an investigation on their own.
- b. Informal requests for information or consultation with the RIO concerning detrimental research practices or potential research misconduct will not, in

and of themselves, be construed as a formal allegation of research misconduct.

- c. When new allegations are received after a case has been closed, the RIO will determine whether to open a new case, create an addendum to the closed case, or decline to pursue the report. Factors in this determination may include the likelihood that the additional findings would alter the outcome of the closed case; whether additional proceedings would result in a duplicate review of the previously reviewed records; whether there is a new funding agency involved; and whether there is a new or additional respondent.

5.3.2. Preliminary Assessment

- a. **Purpose.** The purpose of the assessment is to determine whether the allegation warrants an inquiry. Notification to respondent, witness interviews, and sequestration are not expected to occur during the assessment.
- b. **Criteria warranting an inquiry.** An inquiry is warranted if the DO determines that the allegation:
 - i. involves research misconduct within the purview of this policy, and
 - ii. is sufficiently credible and specific that evidence of research misconduct may be identified.
- c. **Notification to Complainant.** The complainant will be notified of the outcome of this phase. If the totality of the complaint is dismissed at this stage, the respondent will not be notified of the allegations.
- d. **Timeline.** The preliminary assessment begins when an allegation is received by the RIO. Every reasonable effort will be made to complete the assessment within 30 days of initiating this phase of the proceedings, or as soon as practicable, depending on the complexity of the complaint. Formal requests for extensions are not required at this stage.
- e. **Review with DO or Designee.** Allegations that do not progress beyond the assessment stage will be reviewed with the DO or designee periodically, as determined by the RIO.
- f. **Record of Assessment.** Sufficiently detailed documentation of the assessment must be retained to permit a later review.

5.3.3. Inquiry

- a. **Inquiry Initiation.** The DO shall determine, based on the assessment report, whether to initiate an inquiry. The inquiry will begin within 30 days of a determination that this next phase is warranted.
 - i. The DO will direct the RIO to initiate the inquiry process if the criteria warranting an inquiry are met. The purpose of the inquiry is to evaluate whether there is sufficient evidence to initiate an investigation. Therefore, an inquiry does not require a full review of all the evidence related to the allegation, as it will not result in a final conclusion about whether misconduct occurred (exceptions noted elsewhere in this policy).
 - ii. Preservation orders, sequestration, and notification to the respondent will occur in the order deemed most appropriate for each circumstance.
- b. **Preservation and Sequestration.** Whenever possible, the institution must obtain the research records or other evidence before or at the time that the respondent is notified of the allegation(s); and whenever additional items become known or relevant to the inquiry or investigation. The RIO will take all reasonable and practical steps to preserve and obtain custody of all research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence, and sequester them in a secure manner. When any doubt exists about the relevance of an item to the allegation, the practice will be to sequester broadly and return to the respondent any items subsequently deemed to be unrelated.
 - i. Custody may be limited to copies of the data or evidence on instruments, so long as those copies are substantially equivalent to the evidentiary value of the original. Where appropriate, respondents will be given copies of, or reasonable, supervised access to the research records.
 - ii. This step may require the involvement of one or more administrative units within the university, including the Office of Information Security and the respondent's supervisor or dean.
- c. **Notification to the Respondent.** The RIO shall provide the respondent with this policy and written notification describing the allegation(s). Notification to the respondent starts the inquiry timeline.
 - i. If additional respondents are identified during the inquiry, the RIO must provide them with notice and an opportunity to respond to the allegations, consistent with the opportunity provided to the initial respondent.

- d. **Notification to Other Parties.** The RIO will notify the RIO(s) or their equivalent at other institutions if the alleged misconduct involved multiple institutions or when the respondent has a joint appointment at another institution. The RIO shall inform the relevant funding agencies, when consistent with agency requirements or contractual agreements, that an inquiry has been initiated. The RIO may notify affected units within the DRI and others with a need to know. The RIO will notify at least one individual in a position of administrative leadership within the respondent's college at each step after assessment.
- e. **Inquiry Panel.** Panel members are appointed by the DO, in consultation with the RIO. The panel shall consist of at least three individuals, who do not have real or apparent personal, professional or financial conflicts of interest with the complainant or respondent. Whenever possible, panel members will not have appointments in the same department as the respondent. The majority of members must be tenured academic faculty. The chair of the inquiry panel will be selected from the college leadership. In lieu of a panel, the IDO may task the RIO with conducting the inquiry, provided that the RIO utilizes subject matter experts as needed to assist with this phase.
- i. The RIO will notify the respondent of the proposed panel membership. Within five days of notification, the respondent may submit any written objections to a proposed member based on lack of requisite expertise or on conflict of interest, as described above. If determined by the RIO to have merit, a new member will be identified to replace the challenged member.
 - ii. The RIO and panel members will determine whether additional expertise regarding the analysis of specific evidence is needed. Consultants may be included in the process when the needed expertise is not available and without conflicts of interest at the university. Such experts shall serve in an advisory capacity; they do not vote and generally do not interview witnesses. Consultants need not be affiliated with the university.
- f. **Inquiry Process.** The panel shall take the following actions as needed to make a recommendation to the DO regarding whether the criteria warranting an investigation are met:
- i. Examine relevant information and records. The purpose of an inquiry is to conduct an initial review of the evidence in order to determine whether an allegation warrants an investigation. A full review of the evidence is not required.

- ii. Interview individuals when necessary to determine whether an allegation warrants an investigation. Interviews are not required during this phase and, if conducted, need not be recorded or transcribed. If the panel determines that an interview must be recorded, transcripts will be shared with the interviewees for corrections, and a redacted version will be included with the draft and final inquiry reports.
 - iii. Respondent cannot be present during interviews of witnesses or question witnesses at any stage of the proceedings.
- g. **Criteria warranting an investigation.** An investigation is warranted if the panel determines that:
- i. A reasonable basis for concluding that the allegation falls within the definition of research misconduct (involving research, research training or activities related to that research or research training); and
 - ii. Preliminary information-gathering and preliminary fact-finding from the inquiry indicates that the allegation may have substance.
- h. **Inquiry Report.** The panel will provide a separate report for each respondent for review by the DO. At a minimum, each draft report shall include:
- i. Institutional policies under which the investigation was conducted.
 - ii. The name, professional aliases, position, and contact information for the complainant and respondent.
 - iii. A description of the allegations of research misconduct and any additional allegation(s) addressed during the proceedings.
 - iv. Institutional charge (*e.g.*, description of the specific allegations of research misconduct for consideration in the investigation).
 - v. Description and documentation of any relevant funding, including grant, grant number, lead PI, date of application.
 - vi. Description of sequestration activities and inventory of the research records and evidence reviewed and relied on during the investigation.
 - vii. Description of any scientific or forensic analysis conducted.
 - viii. Redacted transcripts of any recorded interviews.

- ix. The basis for recommending whether the allegation(s) warrant (or do not warrant) an investigation.
 - x. Appendices that include all significant documentary evidence referenced in the report.
 - xi. Reasons for extensions.
 - xii. Panel composition, including names, positions, and expertise.
- i. **Comments.**
- i. The respondent(s) will be provided with the draft report for comment.
 - ii. The complainant(s) may be provided with the draft report or relevant portions of the draft report that are specific to their allegation(s).
 - iii. Within 7 days of receiving the draft report, the respondent and complainant may submit any comments for consideration by the panel. Those comments will be appended to the report, along with the panel's consideration of those comments.
 - iv. The panel may make revisions after reviewing the comments.
- j. **Recommendations to the DO.** The panel shall submit its report to the DO. In the event that the DO returns the report to the panel for additional work, and that work results in substantive changes to the report or additional documentary evidence, the revised report will be provided to the respondent for another seven-day comment period.
- k. **Inquiry in Lieu of Investigation.** The DO may determine that an inquiry may serve in place of an investigation if all of the following conditions are met:
- i. The inquiry has resulted in a finding, by a preponderance of the evidence, that research misconduct occurred (all criteria met for one or more allegations), and
 - ii. The inquiry has been sufficiently broad and thorough that it is unlikely that an investigation would uncover significant new information.
 - iii. If the DO determines that the inquiry may serve in place of an investigation, the RIO will comply with any agency requirements for

notification and proceed with any other elements of this policy, as if an investigation had been conducted.

- l. **Institutional Findings.** Within 15 days of receiving the inquiry report, the DO shall either return the report to the panel or provide the RIO with documentation of acceptance or rejection of the panel's recommendation. The final report shall be provided to the Respondent with the Notice of Investigation (if proceeding with Investigation) or Inquiry Outcome (if closing at Inquiry).
- m. **Notification to Complainant.** The complainant will be notified of the outcome of this phase.
- n. **Timeline.** Every reasonable effort will be made to complete all aspects of the inquiry, within 90 days of initiating this phase of the proceedings. This includes conducting the inquiry, preparing the draft report for each respondent, providing the draft report for each respondents' comment, DO deliberations, and sending the final report to any applicable federal agency.
- o. **Extensions.** Extensions are common and require approval from DO, in consultation with OGC and applicable federal agency. Requests for extensions will include an explanation for the delay and an estimated date of completion for the final report.
- p. **Record of Inquiry.** Sufficiently detailed documentation of the inquiry must be retained to permit a later review, if needed.

5.3.4. Investigation

- a. **Investigation Initiation.** The DO shall determine, based on the inquiry report and the respondent's comments, whether to initiate an investigation. The investigation will begin within 30 days of a determination that this next phase is warranted.
- b. **Sequestration and Preservation Orders.** Any additional pertinent records and other evidence needed to conduct the investigation that was not previously sequestered will be secured when the investigation is initiated. When possible, these additional sequestration activities will occur prior to or at the time the respondent is notified that an investigation will be conducted.
- c. **Notification to the Respondent.** The RIO must provide the respondent with written notification indicating whether the inquiry found that an investigation is warranted. The notice must include the inquiry report and

the research misconduct policy. Notification to the respondent starts the investigation timeline.

- i. The RIO will give the respondent written notice of any allegations of research misconduct to be pursued that were not addressed during the inquiry or in the initial notice of investigation.
 - ii. If additional respondents are identified during the investigation the RIO must provide them with notice and an opportunity to respond to the allegations, consistent with the opportunity provided to the initial respondent.
- d. **Notification to Other Parties.** The RIO may notify one or more individuals in a position of leadership within the respondent's college, including the respondent's immediate supervisor, unit or school head, associate dean for research, or academic dean. The RIO will notify the RIO(s) or their equivalent at other institutions if the alleged misconduct involved multiple institutions or when the respondent has a joint appointment at another institution. The RIO may notify others with a need to know.
- e. **Notification and Reporting to Federal Agencies.** This section applies when an allegation involves federally funded research (or an application for federal funding) and meets the federal definition of research misconduct.
- i. Within 30 days of a determination that an investigation is warranted, the RIO must provide the relevant federal agencies with the written finding by the DO and a copy of the inquiry report. See section on *Inquiry Report* for additional appendices).
 - ii. The RIO will inform the relevant federal agency when to do so is consistent with agency requirements or contractual agreements.
 - iii. In consultation with the DO, the RIO may inform federal partners as a courtesy at any point in the process.
 - iv. At any point during the misconduct proceedings, the university will notify the relevant federal agencies of any special circumstances that may exist. See section on *Administrative Actions*.
- f. **Investigation Panel.** Panel members are appointed by the DO, in consultation with the RIO. The panel shall consist of three to five individuals, who do not have real or apparent personal, professional or financial conflicts of interest with the complainant or respondent. At least two of those members must have appropriate scholarly expertise to evaluate the evidence and issues related to the allegation. Whenever

possible, panel members will not have appointments in the same department as the respondent. The majority of members must be tenured academic faculty. The chair of the investigation panel will be selected from the college leadership. Members of the inquiry panel may be selected to serve on the investigation panel. One panel may conduct a single investigation for a case involving multiple respondents.

- i. The RIO will notify the respondent of the proposed panel membership. Within five days of notification, the respondent may submit any written objections to a proposed member based on lack of requisite expertise or on conflict of interest, as described above. If determined by the RIO to have merit, a new member will be identified to replace the challenged member.
 - ii. The RIO and panel members will determine whether additional expertise regarding the analysis of specific evidence is needed. Consultants may be included in the process when the needed expertise is not available and without conflicts of interest at the university. Such experts shall serve in an advisory capacity; they do not vote and generally do not interview witnesses. The consultants need not be affiliated with the university.
- g. **The Investigative Process.** The panel is responsible for conducting interviews and evaluating evidence to determine whether, based on a preponderance of the evidence, research misconduct occurred. The panel will provide a report and recommendation for review by the DO. The investigation panel shall take the following actions, as appropriate:
- i. Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation. This includes consideration of whether additional individuals may be responsible for the alleged research misconduct and whether the proceedings should involve multiple institutions.
 - ii. Examine relevant information and records as needed to determine if research misconduct has occurred.
 - iii. When the respondent is a staff member, student, or postdoctoral fellow, the Panel may ask the DO to request that the respondent's supervisor (or other appropriate authority) review additional research records generated in whole or in part by that respondent.
 - iv. Take reasonable steps to interview each respondent, complainant, and any other available person who has been reasonably identified as

- having information regarding relevant aspects of the investigation, including witnesses identified by the respondent.
- (a) With the consent of the interview subject, each interview will be recorded and transcribed. Transcripts will be made available to the interview subject for corrections and suggested redactions.
 - (b) If the questioned research is supported by PHS funds, recording and transcription is required. Interview subjects who decline recording will not be interviewed.
 - (c) Exhibits shown to interview subjects during the interview will be numbered and referred to by that number in the interview.
 - (d) Corrected transcripts and associated numbered exhibits will be retained as part of the record of the investigation.
 - (e) Information identifying anyone other than the respondent may be redacted from the transcripts. Information that is publicly available and not identifying a party involved in the proceedings, will not be redacted.
 - (f) Federal agencies receiving the final report of investigation will be provided with unredacted transcripts.
 - (g) Respondent cannot be present during interviews of witnesses or question witnesses at any stage of the proceedings.
- v. Provide an opportunity for the respondent to present additional information about the allegation and the evidence developed by the Panel.
 - vi. Secure any necessary and appropriate expertise.
 - vii. Ensure that the investigation is thorough and sufficiently documented and includes examination of all research records and evidence relevant to reaching a decision on the merits of the allegations.
- h. **Investigation Report.** The panel will provide a separate report for each respondent for review by the DO. At a minimum, each draft report shall include:
- i. Institutional policies under which the investigation was conducted.

-
- ii. The name, professional aliases, position, and contact information for the complainant and respondent.
 - iii. A description of the allegations of research misconduct and any additional allegation(s) addressed during the proceedings.
 - iv. Institutional charge (*e.g.*, description of the specific allegations of research misconduct for consideration in the investigation).
 - v. Description and documentation of any relevant funding, including grant, grant number, lead PI, date of application.
 - vi. 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 allegedly contained the falsified, fabricated, or plagiarized material.
 - vii. Description of sequestration activities and inventory of the research records and evidence reviewed and relied on during the investigation.
 - viii. Description of any scientific or forensic analysis conducted.
 - ix. Transcripts of all interviews conducted.
 - x. A statement for each separate allegation of whether the panel recommends a finding of research misconduct. For each finding of research misconduct, the following elements must be present:
 - (a) Identify whether the research misconduct was falsification, fabrication, or plagiarism, and if it was made intentionally, knowingly, or recklessly.
 - (b) Summarize the facts and the analysis which support the conclusion and consider the merits of any explanation by the respondent.
 - (c) Identify any federal support specifically relevant to the findings and list of any current support or known applications or proposals for support that the respondent has pending with any federal agency.
 - (d) Identify the person(s) responsible for the misconduct.
 - xi. Detailed rationale for any allegation(s) for which the panel does not recommend a finding of research misconduct.
 - xii. Overall conclusion as to whether research misconduct occurred.

- xiii. Identify whether any publications or other research communication need correction or retraction.
 - xiv. Recommendations for institutional action.
 - xv. Appendices that include all significant documentary evidence referenced in the report.
 - xvi. Reasons for extensions.
 - xvii. Panel composition, including names, positions, and expertise.
- i. **Comments.**
- i. The respondent(s) will be provided with the draft report for comment.
 - ii. The complainant(s) may be provided with the draft report or relevant portions of the draft report that are specific to their allegation(s).
 - iii. Within 30 days of receiving the draft report, the respondent and complainant may submit any comments for consideration by the panel. Those comments will be appended to the report, along with the panel's consideration of those comments.
 - iv. The panel may make revisions after review of the comments.
- j. **Recommendations to the DO.** The panel shall submit its report to the DO. In the event that the DO returns the report to the panel for additional work, the revised report will be provided to the respondent for a seven-day comment period. The investigation panel may again make revisions after review of the respondent's comments. Comments will be appended to the final report.
- k. **Institutional Findings.** Within 14 days of receiving the investigation report, the DO shall either return the report to the panel with instructions or provide the RIO with written acceptance or rejection of the panel's recommendation.
- l. **Final Report.** Whether or not there are findings of research misconduct, the RIO shall provide a final report to the respondent, the applicable oversight agencies (as required), the respondent's supervisor, and Graduate School or office of student conduct (when

either the respondent or the complainant is a student). The final report shall include the following:

- i. The report from the investigation panel, including all attachments and exhibits.
 - ii. A statement indicating whether the panel found research misconduct, and if so, who committed the misconduct.
 - iii. A statement of whether the DO accepts the findings of the investigation panel.
 - iv. A description of any pending or completed administrative actions taken against the respondent.
 - v. Identification of any detrimental research practices identified during the investigation that do not constitute misconduct.
 - vi. DO's recommendations to other university officials for additional actions or sanctions, if any.
- m. **Notification to Complainant.** The complainant will be notified of the outcome of this phase.
- n. **Timeline.** Every reasonable effort will be made to complete all aspects of the investigation within 180 days of initiating this phase of the proceedings, including conducting the investigation, preparing the draft report for each respondent, providing the draft report for each respondents' comment, DO deliberations, and sending the institutional record to the applicable federal agency.
- o. **Extensions.** Extensions are common and require approval from DO, in consultation with OGC and applicable federal agency. Requests for extensions will include an explanation for the delay and an estimated date of completion for the final report.
- p. **Record of Investigation.** Sufficiently detailed documentation of the investigation must be retained to permit a later review.
- q. **Ongoing Cooperation with Federal Agencies.** The university will cooperate with the applicable agency during their review and any subsequent administrative hearings or appeals. This includes providing all research records and evidence under the university's control, custody, or possession and access to all persons within its

authority necessary to develop a complete record of relevant evidence.

5.3.5. Admission

- a. Except in rare and specific circumstances, all inquiries and investigations will be carried through to completion, and all plausible and significant concerns of possible research misconduct will be reviewed. Qualifying admissions of research misconduct made by a respondent may result in the process proceeding directly to an investigation or to a case closure.
- b. **Criteria for Admission.** An acceptable admission of research misconduct requires specific admission of all elements of the evidentiary standard and must:
 - i. Be made in writing, signed, and dated,
 - ii. Identify the specific instances of fabrication, falsification, or plagiarism,
 - iii. Explicitly acknowledge that the conduct admitted constitutes research misconduct, and
 - iv. Explain the manner in which the fabrication, falsification, or plagiarism was conducted or included in the research record.
- c. **Proceeding to Investigation.** An admission of research misconduct may be a sufficient basis for proceeding directly to the investigation stage. An investigation is typically still required when there is an admission because the investigation is used to determine (or confirm) the extent of the research misconduct or to explore other possible instances of fabrication, falsification, or plagiarism or other possible respondents who may share in the responsibility for research misconduct. An admission of research misconduct during the early stages of a research misconduct proceeding does not eliminate the need for the RIO to gather information or sequester evidence confirming the extent of the research misconduct.
- d. **Case Closure.** An admission may be used as a basis for recommending that a case be closed if it is unlikely that further investigation would uncover new information.
 - i. When recommending that a research misconduct proceeding be closed on the basis of a qualifying admission, the RIO will

provide the DO with a summary of the steps taken in accepting the admission, how the scope of the misconduct was fully addressed by the admission, and explanation of how the admission confirms the respondent's culpability. The summary will include any recommendations for administrative action or sanctions.

- ii. In proceedings where federal oversight officials have jurisdiction, the university must consult with the relevant federal agency prior to closing the case at any stage, including assessment.

5.3.6. Appeals

- a. A respondent may appeal to the provost for reconsideration of the DO's final determination. The request for an appeal must include specific justification on at least one of the following grounds:
 - i. Procedural irregularity that affected the outcome of the matter;
 - ii. New evidence that was not reasonably available to the panel prior to the determination, and that could affect the outcome of the matter;
 - iii. The determination was arbitrary, capricious, or an abuse of discretion. The process for appealing personnel actions is not covered by this policy.
- b. **Timeline.** Every reasonable effort will be made to complete all aspects of the appeals process within 60 days of its filing. Appeals from personnel or similar actions that would not result in a reversal or modification of the findings of research misconduct are excluded from the 180-day limit.
- c. When federally funded, the applicable agency will be notified of the appeal.

5.3.7. Administrative Actions

- a. At any stage in the proceedings, the university may take administrative actions to protect the welfare of human or animal research subjects or to prevent misuse of funds.
- b. The university will immediately notify the relevant federal agencies if:

-
- i. Public health or safety is at risk.
 - ii. Federal agency resources or interests are threatened.
 - iii. Research activities should be suspended.
 - iv. There is reasonable indication of possible violations of civil or criminal law.
 - v. Federal action is required to protect the interests of those involved in the investigation.
 - vi. Federal agency may need to take steps to safeguard evidence and protect the rights of those involved.
 - vii. The research community or public should be informed.
- c. The DO will decide what administrative actions are appropriate if a finding of research misconduct is made. A non-exhaustive list of examples of administrative actions include:
- i. Monitoring of future research activities.
 - ii. Participation in training programs.
 - iii. Adjustment of authorship.
 - iv. Corrections or retractions to manuscripts or grant applications requiring changes to funded awards. The RIO will work with the researchers involved to take action necessary to ensure the integrity of the research, including submitting correction and retraction requests to the relevant publishers and funding agencies. The RIO may request correction or retraction of published work or proposals at any time during the research misconduct proceedings if there is clear evidence of falsified, fabricated, or plagiarized research.
 - v. Imposing oversight or limitations to pending or future applications for funding.
- d. The DO is responsible for ensuring that the appropriate administrative actions are enforced.
- e. The respondent has the burden of proving any mitigating factors they assert are relevant to the potential imposition of administrative actions, irrespective of findings of research misconduct.

5.3.8. Recommendations for Disciplinary Actions or Sanctions

- a. The DO will make recommendations to the respondent's supervisor and may make recommendations to the provost, and leadership in Academic Affairs, the Graduate School, or Student Conduct and Community Standards, as appropriate. A non-exhaustive list of examples of such recommendations includes:
 - i. Pre-review of proposals or publications for specified duration before submission to agencies or journals.
 - ii. Review of random sampling of existing publications.
 - iii. Verification of corrections and retractions.
 - iv. Modification to lab or team structure.
 - v. Downsizing of responsibilities for improved oversight and mentoring.
 - vi. Dismissal.

5.3.9. General Provisions and Considerations

- a. **Confidentiality.** To the extent possible and consistent with a fair and thorough investigation, knowledge about substance of the allegations and the identity of the parties involved in the proceedings will be limited to those who need to know. Disclosures are made in the course of gathering information essential to a determination, to obtain necessary guidance, or to enable others to take appropriate action.

5.3.10. The RIO, in consultation with the DO and the OGC, is responsible for determining when a release of information is necessary or appropriate and the extent of the information to be released.

5.3.11. The RIO may communicate any aspect of the matters covered by this policy with other institutions, agencies, departments, offices, or individuals whose jurisdiction or interests are impacted by the alleged misconduct.

5.3.12. Additional considerations apply to the following:

- i. *Complainants and other witnesses.* Efforts shall be made to protect the identity of complainants and other

witnesses. The identity of these individuals will be known to those conducting the proceedings. Additionally, depending on the nature and specificity of the information provided, their identities may be readily ascertainable by others.

- ii. *Experts.* The goal of maintaining confidentiality does not prohibit university officials from consulting with persons within or outside the university community who may have relevant experience or expertise.
 - iii. *External Collaborators.* In the case of an external collaborator accused of research misconduct who is neither a university employee nor student, the RIO may refer the allegation to the collaborator's employer, affiliated institution, or to oversight officials, in lieu of conducting research misconduct proceedings at the university. The university will cooperate with any such proceeding at another institution unless doing so is prohibited by the funding agreement or applicable law.
 - iv. *Human Subjects.* Except as may otherwise be prescribed by applicable law, confidentiality must be maintained for any records or evidence from which human subjects participating in research might be identified. Disclosure is limited to those who have a need to know to carry out a research misconduct proceeding.
- b. **Cooperation.** Individuals involved in a research misconduct proceeding are expected to participate and cooperate in good faith. Obstruction of any aspect of the proceeding may itself constitute evidence of research misconduct. Obstruction includes intentionally withholding or destroying evidence in violation of a duty to disclose or preserve; falsifying evidence; encouraging, soliciting, or giving false testimony; and attempting to intimidate witnesses, or potential witnesses. The RIO 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 evidence. The destruction, absence of, or respondent's failure to provide research records adequately documenting the questioned research is evidence of research misconduct where the university establishes by a preponderance of the evidence that the respondent:

-
- i. Intentionally, knowingly, or recklessly had research records and destroyed them;
 - ii. Had the opportunity to maintain the records but did not do so; or
 - iii. Maintained the records and failed to produce them in a timely manner and that the respondent's conduct constitutes a significant departure from accepted practices of the relevant research community.
 - c. **Emergency Situations:** In the event of an emergency (e.g., public health crisis, natural disaster), the procedures referred to in this policy may be modified as appropriate for the situation. Such modifications may include alternative procedures for meetings, interviews, sequestration, and other proceedings when necessary to ensure appropriate operations. Documentation of any procedural modifications will be maintained in accordance with applicable record retention requirements.
 - d. **Multiple Respondents.** A single inquiry and investigation may be conducted, irrespective of the number of respondents. Each respondent will be provided notice of and an opportunity to respond to the allegations.
 - e. **Multiple Institutions.** When allegations involve research conducted at multiple institutions, one institution must be designated as the lead institution if a joint research misconduct proceeding is conducted. In a joint research misconduct proceeding, the lead institution should obtain research records and other evidence pertinent to the proceeding, including witness testimony, from the other relevant institutions. By mutual agreement, the joint research misconduct proceeding may include panel members from the institutions involved. 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.
 - f. **Record Retention.** The institutional record and all evidence and physical objects sequestered as part of the research misconduct proceedings shall be retained by the DRI for seven years after completion of the institutional or federal proceeding, whichever is later. This institutional record includes:
 - i. All records that the institution compiled or generated during the

research misconduct proceeding, except records the institution did not consider or rely on

- ii. Documentation of the assessment and, if conducted, the inquiry and investigation
- iii. The DO's written decisions regarding the Inquiry and Investigation
- iv. The complete record of any institutional appeal
- v. When some or all of the questioned research was federally funded, a single index will be created that lists all research records and evidence that the institution compiled during the research misconduct proceeding, except records the institution did not consider or rely on and general description of the records that were sequestered but not considered or relied on.

5.3.13. The institutional record does not include extemporaneous notes or draft documents generated by the DO, RIO, or panel members as part of the proceedings.

- a. **Representation.** In any part of this process, the witnesses and respondents may be represented by an attorney or may be accompanied by another person of their choice at their expense, so long as the advisor is not also a witness or other party to the case. Counsel or other representatives for a witness or respondent may only be present to observe. Such counsel or other representatives may not address the panel or otherwise participate in the proceedings.
- b. **Unavailable Respondent:** Initiation or continuation of a research misconduct proceeding will not be delayed by an unavailable respondent. The resignation or termination of employment, enrollment, or appointment of the respondent will not result in the dismissal of a proceeding. However, it will affect the imposition of actions, sanctions, and monitoring.

6. Related Policies, Procedures, or Information

6.1. Regulations and Guidance

- 6.1.1. Health and Human Services Policy, 42 CFR 93. URL: https://ori.hhs.gov/sites/default/files/42_cfr_parts_50_and_93_2005.pdf

- 6.1.2. Federal Research Misconduct Policy, 65 Fed. Reg. 76, 260 (2000). URL: <https://www.federalregister.gov/documents/2000/12/06/00-30852/executive-office-of-the-president-federal-policy-on-research-misconduct-preamble-for-research>
 - 6.1.3. National Science Foundation Policy, 45 CFR 689. URL: <https://www.nsf.gov/oig/pdf/cfr/45-CFR-689.pdf>
 - 6.1.4. The regulatory response to the misrepresentation of researcher qualifications varies. See the following for discussion: Open Mike from Michael Lauer, NIH's Deputy Directory for Extramural Research, May 21, 2020: <https://nexus.od.nih.gov/all/2020/05/21/case-study-in-review-integrity-embellished-credentials-in-a-grant-application/>
- 6.2. **Policies and Processes**
- 6.2.1. [University Code of Ethics](#)
 - 6.2.2. [Student Code of Conduct](#)
 - 6.2.3. [University Policy 04-110 Retaliation](#)
 - 6.2.4. [Human Research Protection Program \(HRPP\) and Institutional Review Board \(IRB\)](#)
 - 6.2.5. [Animal Care and Use, and Institutional Animal Care and Use Committee \(IACUC\)](#)
 - 6.2.6. [Acknowledgements](#). This policy reflects guidance provided by the U.S. Department of Health and Human Services and borrows extensively from policies and ideas freely shared between universities. This policy was made possible, in large part, by the generosity and collegiality demonstrated by the community of professionals who endeavor to enhance integrity in research.

History

Adopted as unit rule: The Oregon State University DRI adopted unit rule *Research Misconduct* on November 3, 1989. This unit rule was reviewed August 1995, December 2001, and March 2006.

Revised and adopted as University Policy: DRI unit rule *Research Misconduct* was revised, renumbered, and adopted as University Policy 06-100 *Research Misconduct* on August 26, 2022. Revisions were made to align with changes in federal regulations on December 18, 2025.

Next scheduled review date: January 2029.

Contacts

Division of Research and Innovation

541-737-3467

<https://research.oregonstate.edu/contacts>

Research Integrity Officer

541-737-9502

<https://research.oregonstate.edu/prrp/research-misconduct>

EthicsPoint

855-388-4971

<https://secure.ethicspoint.com/domain/media/en/gui/41096/index.html>

Available online at: <https://policy.oregonstate.edu/policy/research-misconduct>