RESEARCH MISCONDUCT
Administrative Policy and Procedures for Georgia State University

Responsible University Office: Office of the Vice President for Research
Responsible University Officer: Vice President for Research
Approval Date: February 10, 2016 by the University Administrative Council

Section I: Introduction
Georgia State University is committed to conducting research with integrity and the highest ethical standards. Additionally, the University is subject to federal and state laws, regulations, and policies that regulate research and establish related integrity and ethical standards. The responsibility for preserving the integrity of University research is shared by the administration, faculty, staff, and students. The University adopts this policy with goals of preserving the integrity of University research, protecting all researchers against false and injurious allegations, protecting those who in good faith wish to bring forward evidence of Research Misconduct, ensuring that all allegations of Research Misconduct will be reviewed fairly and accurately, and ensuring that University research meets the standards of academic integrity expected by the academic community.

Section II: Application
The policy and procedures set forth herein apply to all individuals at the University engaged in sponsored or non-sponsored research, including faculty; research scientists, technicians, and other staff members; undergraduate and graduate students employed in research; fellows, guest researchers, and visiting faculty or staff; faculty or staff on sabbatical leave; adjunct faculty when performing University work; and faculty or staff on leave without pay. This Policy does not apply to students in all circumstances, but shall apply only when an allegation of misconduct arises out of a student’s employment with or service to the University. This policy does not replace or
supersedes the University Student Code of Conduct and Administrative Policies, except when the alleged misconduct occurs in sponsor supported activities.

Further, the procedures set forth herein apply only to Research Misconduct alleged to have occurred within six (6) years of the date the University receives an allegation, except to the extent the Respondent continues or renews any incident of alleged Research Misconduct that occurred before the six-year limitation (for example, through citation, republication, or reuse of the research record), or if it is determined that the alleged Research Misconduct could have a substantial adverse effect on the health or safety of the public.

Section III. Definitions and Overview of Process.

A. Definitions

“Complainant” means a person who in good faith makes an allegation of Research Misconduct. The allegation may be made through any means of communication, written or oral. An allegation is made in “good faith” if the Complainant has a belief in the truth of the allegation that a reasonable person in the Complainant’s position could have, based on the information known to the Complainant at the time. An allegation is not in good faith if made with knowing or reckless disregard for information that would negate the allegation.

“Research Integrity Officer” or “RIO” means the University’s Associate Vice President for Research Integrity. The RIO has primary responsibility for implementing the University’s policies and procedures on Research Misconduct. The specific responsibilities of the RIO are set forth in detail throughout the policy, but include (a) receiving and assessing allegations of Research Misconduct to determine if they fall under the procedures set forth in this policy; (b) overseeing sequestration of research data and evidence; (c) determining whether allegations warrant an inquiry; (d) overseeing inquiries and investigations; (e) providing assistance to respondents, complainants, witnesses, and committees as described in this policy; (f) providing training, technical assistance, and advice to the inquiry and investigation committees; (g) ensuring that Respondents receive all notices and opportunities provided for in these policies and under any federal regulations; (h) ensuring that the University’s obligations to funding agencies, including all notification and reporting obligations, are fulfilled; (i) taking action, as appropriate, to notify other involved parties, such as sponsors, journals, or licensing boards of University findings; and (j) maintaining appropriate records of proceedings in accordance with this Policy and federal regulations.

“Research Misconduct” means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. “Fabrication” is making up data or results and recording or reporting them. “Falsification” is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record. “Plagiarism” is the appropriation of another person’s ideas, processes, results,
or words without giving appropriate credit. Research Misconduct does not include honest error or differences of opinion.

To constitute Research Misconduct, the behavior must:

1. Significantly depart from accepted practices of the relevant research community; and
2. Be committed intentionally, knowingly, or recklessly; and
3. Be proven by a preponderance of the evidence (i.e., the allegation is more likely than not to be true).

“Research Record” means the record of data or results that embody the facts resulting from scientific inquiry, including but not limited to research proposals, laboratory records both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided to a federal agency or a University employee in the course of the Research Misconduct proceeding.

“Respondent” means the person against whom an allegation of Research Misconduct is directed or who is the subject of a Research Misconduct proceeding.

B. Overview of Process

Subject to the specific procedures set forth in this Policy, the University’s process for responding to allegations of Research Misconduct involves three distinct phases:

1. When an allegation is received, RIO assesses whether the allegation falls under the definition of Research Misconduct and is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. If these criteria are met, the Vice President for Research will establish an inquiry committee. The RIO will oversee the sequestration of original documents and materials if necessary to protect the integrity of the proceedings.

2. An “Inquiry” is the procedure whereby a committee determines whether the allegation of misconduct provides a sufficient basis to warrant conducting an Investigation. The outcome of an Inquiry is not a finding of guilt but is a finding that the grounds to proceed to an Investigation are either present or absent.

3. An “Investigation” is a more exhaustive review of the allegation: the outcome of an Investigation may be a finding by the University that a researcher is guilty of Research Misconduct and that sanctions are in
order. Sponsors of research and editors of journals and others may have to be notified about the Investigation.

In reviewing the following procedures, it is important that this critical distinction be kept in mind: an “Inquiry” is intended to be a preliminary process leading to a decision that there are or are not sufficient grounds to conduct an Investigation. An “Investigation” is the process that may result in a finding of Research Misconduct.

Section IV. **General Policies and Principles.**

A. **Responsibility.**

Reporting Research Misconduct is a serious responsibility shared by all members of the University community. Reports may be written or oral and may be made to the RIO by telephone, electronic means, or in-person meeting. Individuals from outside the University (including other scientists, journal editors, or research subjects) should also report to the RIO any allegations of Research Misconduct involving persons employed by or affiliated with the University. Any other official who receives an allegation of Research Misconduct must report it immediately to the RIO. If an individual is unsure whether a suspected incident falls within the definition of Research Misconduct, he or she may meet with or contact the RIO to discuss the suspected Research Misconduct informally, which may include discussing it without disclosing the identity of the accused. If the circumstances described by the individual do not meet the definition of possible Research Misconduct, the RIO will refer the individual or allegation to other offices or officials with responsibility for resolving the problem. If the RIO determines that the circumstances described by the individual meet the definition of possible Research Misconduct, the University has an obligation to move forward under these procedures.

B. **Confidentiality**

All parties involved are afforded confidential treatment to the maximum extent permitted by applicable law. The University shall, except as otherwise prescribed by applicable laws and regulations, limit disclosure of the identity of Respondents and Complainants to those who need to know in order to carry out a thorough, competent, objective and fair Research Misconduct proceeding under this Policy. All parties involved shall make every reasonable effort to exercise discretion when dealing with issues related to an allegation. The RIO and Vice President for Research will exercise discretion in dealing with the complaint at the University level. Every reasonable measure will be taken to protect the complainant from retaliation (see Section X.B.).

Except as may otherwise be prescribed by applicable law, confidentiality must be maintained for any records or evidence from which research subjects might be identified, and disclosure shall be limited those who need to know to carry out a Research Misconduct proceeding.
C. Responding to Allegations

In responding to allegations of Research Misconduct, all University officials with an assigned responsibility for handling such allegations will make diligent efforts to ensure that:

1. Any assessment of an allegation, inquiry, or investigation is conducted in a timely, objective, thorough, and competent manner.

2. Reasonable precautions are taken to avoid bias and real or apparent conflicts of interest on the part of those involved in conducting the inquiry or investigation.

3. Interim administrative actions are taken, as appropriate, to protect Federal funds and the public health, and to ensure that the purposes of the Federal financial assistance are carried out.

D. Cooperation with Research Misconduct Proceedings

The University research community have an obligation to cooperate with the RIO and other institutional officials in the review of allegations and in the conduct of inquiries and investigations. The University research community, including Respondents, have an obligation to provide evidence relevant to Research Misconduct allegations to the RIO or other institutional officials.

E. Interim Administrative Actions and Notifications

Throughout the Research Misconduct proceeding, the RIO will review the situation to determine if there is any threat of harm to public health, funds and equipment, or the integrity of the research process. In the event of such a threat, the RIO will, in consultation with other institutional officials and the appropriate funding agency, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of funds and equipment; reassignment of personnel or of the responsibility for the handling of funds and equipment; additional review of research data and results; or delaying publication.

The RIO shall, at any time during a Research Misconduct proceeding, notify the appropriate funding agency immediately if he/she has reason to believe that any of the following conditions exist:

- Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
- Funding agency resources or interests are threatened;
• Research activities should be suspended;
• There is a reasonable indication of possible violations of civil or criminal law;
• Funding agency action is required to protect the interests of those involved in the Research Misconduct proceeding;
• The Research Misconduct proceeding may be made public prematurely and agency action may be necessary to safeguard evidence and protect the rights of those involved; or
• The research community or public should be informed.

F. Completion in Absence of Respondent

Even if the Respondent leaves the University before the case is resolved, the RIO, where possible, will continue the examination of the allegation and will reach a conclusion. Further, the University shall cooperate with the process of another institution or agency to resolve such questions to the extent permissible under federal or state law.

Section V. Decision to Initiate a Formal Inquiry.

A. Upon receipt of an allegation, the RIO will first determine whether the allegation should be handled under this policy and whether federal or non-federal funding is involved.

B. If it is appropriate to handle the allegation under this policy, the RIO, in consultation with the Vice President for Research, will determine whether sufficient basis exists to commence an Inquiry. In general, an allegation will provide a sufficient basis to commence an Inquiry if: (1) the allegation falls under the definition of Research Misconduct; and (2) the allegation is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified.

C. If the allegation, on its face, is not deemed a sufficient basis to commence an Inquiry, the RIO, will either:

1. determine that no Inquiry is warranted and proceed as provided below; or

2. if there is reason to believe that additional relevant information may provide a sufficient basis to commence an Inquiry, take appropriate steps to attempt to obtain promptly a more complete statement of the allegation and the basis for it and, if appropriate, attempt to obtain relevant information from the individual accused of misconduct.

In so doing, the RIO will make reasonable efforts to protect the privacy of those who in good faith report alleged misconduct, to afford confidential
treatment to the accused and to avoid unwarranted publicity regarding unverified allegations.

D. If the RIO determines that there is sufficient basis to commence an Inquiry, then the RIO will:

1. determine whether emergency, interim, or other appropriate institutional notifications or actions need to be taken;

2. immediately take reasonable and practical steps to obtain custody of relevant Research Records and evidence relating to the allegation that are needed to conduct the Research Misconduct proceeding, inventory the records and evidence, and sequester them in a secure manner. When appropriate, the University will give the respondent copies of, or reasonable supervised access to the Research Records. If, during the course of the proceeding, it is discovered that additional Research Records or evidence should be taken into custody, the RIO will continue to take such steps to obtain and maintain custody of such records; and

3. notify the Respondent that an Inquiry will be commenced, and provide a summary of the nature of the allegations.

E. If the RIO, in consultation with the Vice President for Research, determines that no Inquiry is warranted, a written summary of the reasons for such determination will be prepared and kept on file in the RIO’s office. This summary will then be available in the event of any future authorized Inquiries concerning the research or researchers or concerning the reasons for dismissing the allegations. A copy of this summary shall be provided to the individual against whom the allegation was made.

F. The RIO will inform the Complainant of the decision as to whether or not an Inquiry will commence.

G. In general, the RIO should notify and consult with the Office of Legal Affairs prior to deciding whether to commence an Inquiry.

Section VI  Inquiry into the Allegation.

A. Appointment of Inquiry Committee

1. If the RIO has determined that an Inquiry will be conducted, the Vice President for Research will appoint an Inquiry Committee. The Inquiry Committee will consist of two or more members of the faculty together with such technical, administrative, or other staff as may be deemed appropriate. The Vice President for Research should generally designate a member to serve as Chair of the Inquiry
Committee. In selecting members of the Inquiry Committee, the Vice President for Research will seek to ensure that the committee has available to it the necessary and appropriate expertise in relevant disciplines and has an appropriate understanding of the process and procedures that must be followed.

2. The Vice President for Research, in consultation with the Inquiry Committee, may add or replace members of the Inquiry Committee as needed to ensure the timely completion of the Inquiry and the committee’s competence to review the allegations.

3. The RIO will be responsible for making available to the Inquiry Committee appropriate administrative and clerical assistance to facilitate a prompt and thorough inquiry and the preparation of an appropriate report.

4. Individuals selected to serve on the Inquiry Committee or to provide professional assistance to the Inquiry Committee will be expected to disclose to the Vice President for Research any factors, including but not limited to unresolved personal, professional, or financial conflicts of interest, which would prevent them from serving fairly, objectively, and without bias, or which reasonably would give the appearance of a lack of fairness, lack of objectivity, or the presence of bias.

5. All persons who participate in the Inquiry as committee members, administrative or clerical staff, witnesses, or in any other capacity shall maintain the confidentiality of the Inquiry and of all information obtained in the course of the Inquiry, except as may be necessary in conjunction with the conduct of the Inquiry, including subsequent related reports or proceedings, and reports to officers of the University.

B. Committee Charge

1. The RIO will prepare a charge for the Inquiry Committee that:
   a. describes the allegations and any related issues identified during the allegation assessment;
   b. states that the purpose of the Inquiry is to conduct an initial review of the evidence, including the testimony of the Respondent, Complainant and key witnesses, to determine whether an Investigation is warranted, not to determine whether Research Misconduct definitely occurred or who was responsible;
   c. states that an Investigation is warranted if the Inquiry Committee determines that there is a reasonable basis for concluding that the allegation falls within the definition of Research Misconduct and the allegation may have substance, based on the
committee’s review during the Inquiry;
d. informs the Inquiry Committee that they are responsible for preparing or directing the preparation of a written report of the Inquiry that meets the requirements of this policy and any applicable federal regulations; and
e. sets the time for completion of the Inquiry.

2. A copy of the charge will be provided to the Respondent.

3. If during the course of the Inquiry, the Inquiry Committee determines that the scope of the Inquiry should be expanded beyond that covered by the initial charge, the Inquiry Committee will so notify the RIO and, with the approval of the RIO, will give appropriate notice to the Respondent of the expansion of the Inquiry. The RIO and/or Vice President for Research may meet with the committee at any time to review the progress of the Inquiry and to assist its focus. The Inquiry Committee may direct that additional research documents or materials be sequestered with the assistance of the RIO.

C. Inquiry Process

1. The Inquiry Committee will normally interview the Complainant, the Respondent, and key witnesses and will examine relevant Research Records and materials.

2. The Inquiry Committee should keep general minutes of its meetings and should, as a general rule, prepare written summaries of testimony from witnesses.

3. The Inquiry Committee will then evaluate the evidence, including the testimony obtained during the Inquiry.

4. After consultation with the RIO, the committee members will decide whether an Investigation is warranted based on the criteria in this policy and, if appropriate, any applicable regulations. The scope of the Inquiry does not normally include deciding whether Research Misconduct definitely occurred, nor does it require conducting exhaustive interviews and analyses.

5. The Inquiry, including preparation of the final Inquiry Report and the decision of the Vice President for Research on whether an Investigation is warranted, should generally be completed within sixty (60) calendar days of initiation of the Inquiry, unless the committee requests and the RIO approves a longer period. If the RIO approves an extension, the record of the Inquiry should include documentation of the reasons for exceeding the 60-day period.

D. Inquiry Report

1. The Inquiry Committee will prepare a written report for submission to the RIO, that includes:
a. the name and position of the Respondent;
b. a description of the allegations of Research Misconduct;
c. the source of funding for the research, if applicable, including, for example, grant numbers, grant applications, contracts and publications listing such support;
d. a description of the general procedures under which the Inquiry was conducted, including reference to these procedures as well as any federal regulations governing the conduct of the Inquiry;
e. a statement of the relevant evidence assembled and preliminarily reviewed by the committee; and
f. a statement of the conclusion of the committee as to whether the allegation appears to have substance and the information supporting that conclusion.

2. The inquiry report should be written in a form which, if accepted, may serve as an appropriate institutional statement of reasons for further institutional action, including commencement of an Investigation or dismissal of the allegations.

E. Inquiry Notifications and Decisions

1. The RIO shall notify the Respondent whether the Inquiry Committee found an Investigation to be warranted, and will provide the Respondent with a copy of the draft Inquiry Report. The Respondent will be asked to provide any comments on the report to the RIO and Inquiry Committee Chair within five (5) business days. The RIO will determine, on a case-by-case basis, whether the report or relevant portions thereof should also be provided to the Complainant for comment within five (5) business days. The Inquiry Committee will decide whether, in view of any comments received, any revisions to the report are warranted and will then provide the final Inquiry Report to the RIO.

2. The RIO will provide the final Inquiry Report as well as any comments submitted by the respondent to the Vice President for Research, who will, in consultation with the RIO, decide whether to accept, reject, or modify the Inquiry Report and determine in writing whether an Investigation is warranted. The Vice President for Research will provide written notification of his or her final decision to the Respondent. The Vice President for Research must also give the Respondent written notice of any new allegations of Research Misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the Inquiry or in the initial notice of Investigation.

3. Within thirty (30) calendar days of the Vice President’s decision that
an Investigation is warranted, the RIO will provide the appropriate funding agency, if applicable and where required, with the written decision and a copy of the Inquiry Report.

4. If the Vice President decides that an Investigation is not warranted, the RIO shall secure and maintain for seven (7) years after the termination of the Inquiry sufficiently detailed documentation of the Inquiry to permit a later assessment by the appropriate funding agency of the reasons why an Investigation was not conducted. These documents must be provided to a federal agency upon request.

Section VII. Investigation of Research Misconduct

A. Initiation of Investigation

If the Vice President for Research determines that an Investigation should be conducted, the Investigation should commence within thirty (30) days after such determination. The RIO will take all reasonable and practical steps to obtain custody of and sequester in a secure manner any Research Records and evidence needed to conduct the Investigation that were not previously sequestered during the Inquiry.

B. Appointment of the Investigation Committee

1. The Vice President for Research will notify the President of the University of the need for an Investigation regarding the allegation. The President will appoint an Investigation Committee. The function of the Investigation Committee will be to conduct an Investigation of the allegation and to prepare a report for the President containing the Investigation Committee’s determination as to whether Research Misconduct has occurred.

2. The Investigation Committee will consist of two or more members of the faculty together with such technical, administrative, or other staff as may be deemed appropriate. Faculty members, or other individuals who do not hold appointment or employment at the University, may be selected to serve. With the consent of the Respondent, individuals may be appointed to the Investigation Committee who previously served on the Inquiry Committee. The Vice President for Research will serve as Chair of the Investigation Committee. In selecting members of the committee, the President will seek to ensure that the committee as a whole has the necessary and appropriate expertise in relevant disciplines as well as an appropriate understanding of the process and procedures that must be followed. The President, in consultation with the Investigation Committee, may add or replace members of the committee as needed to ensure the timely completion of the Investigation and the committee’s competence to review the allegations.
3. The RIO will be responsible for making available to the Investigation Committee appropriate administrative and clerical assistance to facilitate a prompt and thorough Investigation and the preparation of an appropriate report.

4. Individuals selected to serve on the Investigation Committee or to provide professional assistance to the committee will be expected to disclose to the President any factors, including but not limited to unresolved personal, professional, or financial conflicts of interest, which would prevent them from serving fairly, objectively, and without bias, or which reasonably would give the appearance of a lack of fairness, lack of objectivity, or the presence of bias.

5. All persons who participate in the Investigation as committee members, administrative or clerical staff, witnesses, or in any other capacity shall maintain the confidentiality of the Investigation and of all information obtained in the course of the Investigation, except as may be necessary in conjunction with the conduct of the Investigation, including subsequent related reports or proceedings, and reports to officers of the University.

C. Charge to Investigation Committee

1. The RIO will define the subject matter of the Investigation in a written charge to the Investigation Committee that:

   a. describes the allegation and related issues identified during the Inquiry and identifies the Respondent;

   b. defines Research Misconduct;

   c. informs the Investigation Committee of the general procedures pursuant to which the Investigation should be conducted;

   d. informs the Investigation Committee that it must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, Research Misconduct occurred and, if so, the type and extent of it and who was responsible;

   e. informs the Investigation Committee that in order to determine that the Respondent committed Research Misconduct, it must find that a preponderance of the evidence establishes that:

      i. Research Misconduct, as defined in this policy, occurred (Respondent has the burden of proving by a preponderance of the evidence any affirmative defenses raised, including honest error or a difference of opinion);
ii. the Research Misconduct is a significant departure from accepted practices of the relevant research community; and

iii. the Respondent committed the Research Misconduct intentionally, knowingly, or recklessly;

f. informs the Investigation Committee that it must prepare a written Investigation Report that meets the requirements of this policy and any applicable federal regulations; and

g. sets the time for completion of the Investigation.

2. A copy of the charge will be provided to the Respondent.

D. Investigation Process

1. The Investigation normally will include examination by members of the Investigation Committee of all relevant documentation, including but not necessarily limited to relevant research data and proposals, publications, and correspondence. The Investigation Committee should keep general minutes of its meetings and must:

a. use diligent efforts to 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 each allegation;

b. take reasonable steps to ensure an impartial and unbiased Investigation to the maximum extent practical;

c. provide the Respondent with reasonable opportunity to present evidence, testify, and present witnesses with relevant information to the Investigation Committee. The Investigation Committee will interview the Respondent and other available persons who have been reasonably identified by the Respondent as having information regarding any relevant aspects of the Investigation;

d. interview the Complainant and other available persons, including those who have been reasonably identified by the Complainant or others as having information regarding any relevant aspects of the Investigation. The Respondent may listen contemporaneously to any interviews conducted by the Investigation Committee and submit any relevant questions to be asked of any witness by the Committee. For the protection of the witness, the Committee may require the Respondent to listen to or observe the interview from another room;

e. allow any person who appears as a witness before the Investigation Committee to be accompanied by counsel or a representative of his or her choice; however, the Chair of the Investigation Committee may limit the participation of counsel or representative to advising the witness;

f. record or transcribe each interview, provide either the recording
or transcript to the interviewee for review and correction and thereafter provide the Respondent with the recording or transcript as soon as practicable; and

g. pursue diligently all significant issues and leads discovered that are determined to be relevant to the Investigation, including evidence of any additional instances of possible Research Misconduct, and continue the Investigation to completion.

2. The Investigation Committee shall use its best efforts to complete the Investigation within 120 days of its start, including conducting the Investigation, preparing the report of findings, providing the draft report for comment and sending the final report to any federal agency (if required). If the RIO determines that the Investigation will not be completed within this 120-day period and federal funds are involved, he/she will request an extension of time from the appropriate federal agency setting forth the reasons for the delay if required. If extension is approved, the record of the Investigation should include documentation of the reasons for exceeding the 120-day period.

3. The ultimate burden of proof for a finding of Research Misconduct is on the University, and such a finding must be proved by a preponderance of the evidence. However, the Respondent has the burden of proving, by a preponderance of the evidence, any and all affirmative defenses raised or any mitigating factors relating to possible sanctions. Note that the destruction, absence of, or respondent’s failure to provide Research Records adequately documenting the questioned research may constitute evidence of Research Misconduct if done intentionally, knowingly, or recklessly and if the Respondent’s conduct constitutes a significant departure from accepted practices of the research community.

Section VIII Investigation Report.

A. The Investigation Committee will prepare a draft written report that:

1. describes the nature of the allegation of Research Misconduct, including identification of the respondent;

2. describes and documents the source of funding for the research, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing such support;

3. describes the specific allegations of Research Misconduct considered in the Investigation;

4. includes a description of the general procedures under which the Investigation was conducted, including reference to these procedures as well as any federal regulations governing the conduct of the Investigation;
5. identifies and summarizes the Research Records and evidence reviewed and identifies any evidence taken into custody but not reviewed;

6. includes a statement of findings for each allegation of Research Misconduct identified during the Investigation; and

7. recommends University actions and/or sanctions, as appropriate.

B. Each statement of findings should:

1. identify whether the Research Misconduct was falsification, fabrication, or plagiarism, and whether it was committed intentionally, knowingly, or recklessly;

2. summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the Respondent, including any effort by Respondent to establish by a preponderance of the evidence that he or she did not engage in Research Misconduct because of honest error or a difference of opinion;

3. identify the specific funding support;

4. identify whether any publications need correction or retraction;

5. identify the person(s) responsible for the misconduct; and

6. list any current support or known applications or proposals for support that the Respondent has pending with any federal agencies.

C. The record of the investigation should include the recording or transcript of all witness interviews.

D. Prior to the submission of the Investigation Report, the Investigation Committee, through the RIO, will provide the Respondent with a copy of the draft Investigation Report and a copy of or supervised access to the evidence on which the report is based, including copies of any documents and materials. Respondent must also receive any witness statements, recordings or transcripts produced during the Investigation if not previously provided to the Respondent.

E. The Respondent will be asked to provide any comments on the draft Investigation Report to the RIO and Investigation Committee Chair within thirty (30) calendar days. The RIO will determine, on a case-by-case basis, whether the draft Investigation Report or relevant portions thereof should also be provided to the Complainant for comment within thirty (30) days. After such thirty days, the Investigation Committee will decide whether, in view of any comments received, any revisions to the report are warranted and will then provide the final Investigation Report to the President.
Section IX  **Decision of President and Required Notifications**

A.  **Decision of President**

1. The President will decide:
   a. whether to accept the Investigation Report, its findings, and the recommended University actions; and
   b. if applicable, the appropriate University actions in response to the accepted findings of Research Misconduct.

2. If this determination varies from the findings of the Investigation Committee, the President will, as part of his/her written determination, explain in detail the basis for rendering a decision different from the findings of the Investigation Committee. Alternatively, the President may return the report to the Investigation Committee with a request for further fact-finding or analysis. The President will provide written notification of his or her final decision to the Respondent.

3. If required, the RIO will submit to the appropriate federal agency: (1) a copy of the final Investigation Report with all attachments; (2) a statement of whether the University accepts the findings of the Investigation Report; (3) a statement of whether the University found Research Misconduct and, if so, who committed the Research Misconduct; and (4) a description of any pending or completed administrative actions against the Respondent.

4. The RIO will determine whether any other entities such as professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the respondent in the work, or other relevant parties should be notified of the outcome of the case.

B.  **Disciplinary Action**

1. For those cases in which the President makes a finding of Research Misconduct, the President may uphold the Investigation Committee’s findings or impose other disciplinary action(s) within 15 business days of receiving the Investigation Report. The President may consult with the Committee in arriving at a decision.

2. According to the Faculty Handbook, examples of disciplinary actions may include (but are not limited to):
   a. oral reprimand with no permanent record;
   b. letter of reprimand that becomes part of the respondent's permanent record;
   c. special monitoring of future work;
d. removal from a particular project;
e. probation;
f. suspension;
g. rank reduction; or
h. termination of employment.

C. Finding of No Misconduct

1. If the President determines that there was no Research Misconduct, the President will notify the Respondent within 15 business days of receiving the final Investigation Report. The process shall be considered completed, with no disciplinary action taken by the University. New evidence may be an appropriate basis to initiate a new Inquiry/Investigation.

2. If the President determines that there was no Research Misconduct, the President, with assistance from the RIO, will take the appropriate steps to clear the Respondent's record. Such efforts may include notifying those individuals aware of or involved in the Investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of Research Misconduct was previously publicized, and expunging all reference to the Research Misconduct allegation from the Respondent’s personnel file.

D. Notification of Outcome

The President shall notify the Complainant and other concerned parties of the disposition of the Investigation within 15 business days of receiving the final Investigation Report. The President will discuss with the Respondent the appropriateness and desirability of notifying other individuals or agencies about the outcome of the Investigation.

E. Response to Disciplinary Action

The Respondent may accept the disciplinary action or request an appeal, first to the President, and then to the Board of Regents within 10 business days after receipt of the President’s actions.

Section X. Other Considerations

A. Record Retention and Confidentiality

All records related to this case shall be maintained privately and securely under the supervision of the RIO for at least seven years. All parties involved in the case shall be reminded that, except as required by federal and state law, all information about the case cannot be released outside the institution unless and until:
1. the allegations result in a finding of misconduct;
2. final disciplinary action is imposed; and
3. all avenues of appeal (if pursued) have been exhausted.

The Georgia Open Records Act (O.C.G.A. 50-18-70) governs access to and release of all data collected, created, received, maintained, or disseminated by public entities, including Georgia State University. The University will adhere to the requirements of the Georgia Open Records Act with respect to all actions taken and all information generated in the course of any inquiry and/or investigation under this policy.

B. Retaliation

It is University policy that no one shall retaliate against individuals who acted in good faith in reporting or providing information about suspected or alleged misconduct. When a complaint has been brought in good faith, even if mistakenly, the University will seek to protect the complainant against retaliation. Individuals who provide information to assist in resolving of an inquiry or investigation also are protected by these same guidelines. Individuals engaging in acts of retaliation are disciplined according to the appropriate University policies or applicable collective bargaining agreements.

C. False Accusations

If the allegations of Research Misconduct are found to be maliciously motivated, appropriate disciplinary actions shall be taken against those responsible. If the allegations, however are incorrect, and are found to have been made in good faith, no disciplinary measures will be taken.