SPG U-M Standard Practice Guide

UNIVERSITY OF MICHIGAN

Procedures for Investigating Allegations of Misconduct in the Pursuit of Scholarship and Research under SPG 303.03

A. Applicability of the Procedures

This document sets forth the implementing procedures to the Policy Statement on the Integrity of Scholarship and Research (SPG 303.03). These procedures apply to allegations of research misconduct when the respondent is one of the following individuals:

1. All instructional faculty (tenure track and clinical track), research faculty, librarians, and other University staff members, including without limitation: graduate student research assistants, graduate student teaching assistants, graduate student staff assistants, postdoctoral fellows and postdoctoral research associates, house officers, visiting faculty and students or staff, sponsored affiliates, temporary staff or student employees, faculty or staff on sabbatical leave, adjunct faculty and emeritus faculty when performing University work, faculty or staff on leave without pay, paid and unpaid interns, and all other members of the University of Michigan's academic community;

2. Students engaged in research or other scholarly activity. In cases in which the alleged misconduct relates to a student's coursework or other academic activities, the applicable school or college procedure for handling allegations of academic misconduct by students will apply. In cases in which the status of a student respondent is unclear, the responsible administrator will elect whether to employ these procedures or other procedures available for the investigation and adjudication of alleged academic misconduct by students; and

3. Former University students or employees, if the alleged misconduct occurred during the period of attendance or employment at the University.

B. Definition of Research Misconduct. Research Misconduct is defined as *fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results.*

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

2. *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.

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

C. Professional Disputes and Other Violations of Research Integrity. Adjudication of disputes/disagreements between current and/or former collaborators, as well as adjudication of other deviations from accepted research practices, including but not limited to those listed below, are generally outside the purview of SPG 303.03 and are typically managed by School/College, Departmental, or other appropriate administrative processes.

1. *Abuse of confidentiality*: sharing or releasing the ideas or data of others by one with whom they were shared with the legitimate expectation of confidentiality (e.g., disclosing ideas from others' grant proposals, award applications, or manuscripts for publication when one is a reviewer for granting agencies or journals, or is an internal reviewer);

2. *Dishonesty in publication*: knowingly publishing material that will mislead readers (e.g., misrepresenting research progress; adding the names of other authors without permission);

3. *Property violations*: stealing, tampering with, or destroying property of others, such as research papers, supplies, equipment, or products of research or scholarship;

4. Directing or encouraging others to engage in any of the above listed offenses.

D. Responsibilities of the Research Integrity Officer (RIO)

The RIO is appointed by the Vice President for Research and has the primary responsibility for overseeing the procedures described in this document. The research integrity team assesses allegations to ascertain whether they could, if true, constitute research misconduct under SPG 303.03; determines when the allegations warrant further inquiry; oversees inquiries; and oversees the activities of any investigation committees to ensure compliance with SPG 303.03 and the appropriate federal policies, if applicable. The RIO is also responsible for making timely reports to the relevant external agencies, as required, and for appropriately maintaining documentation of all research misconduct proceedings.

E. Considerations

1. **Confidentiality**
Care will be taken to handle reporting, preliminary assessments, inquiries, and investigations in a way that preserves confidentiality, and to provide information only to those with a need to know, which includes those within the University who need the information to perform their University roles. The procedures used are intended to safeguard the rights of the respondent; the complainant, if a complainant is identified; and witnesses; and to recognize the interest of the University's academic community in research integrity. The University will protect, to the best of its ability, the privacy of those who, in good faith, report allegations of research misconduct, as well as that of those who are the subjects of such allegations. The University will also provide, to the best of its ability, an expeditious and thorough review of the allegation, and will provide the respondent the opportunity to comment, as appropriate, during the review process.

2. **External Notifications**
Despite the University's general commitment to preserving confidentiality noted above, there may be cases in which the University may need – at any stage of the process, including before the University's review has concluded – to notify and/or consult with external entities, including applicable federal oversight agencies and research sponsors, about the allegation or aspects thereof. The Vice President for Research, in consultation with the Office of the General Counsel, will decide if and when a notification should occur, what any such notification will include, and to whom it should be directed.

3. **Interim Measures**
In some cases, it may be necessary to take interim measures pending final resolution of the research misconduct process. These interim measures could include actions to protect human subjects or the public health, or to preserve federal or other sponsor funds, and may include suspension of the research at issue or other appropriate steps. In such cases, the appropriate University official, in consultation with the Office of the General Counsel, will determine whether interim measures are needed and what measures are appropriate under the circumstances.

4. **Conflict of Interest**
The integrity of the process will be maintained by disclosure and evaluation of any potentially prejudicial conflict of interest. Individuals judged by the appropriate University official to have a conflict of interest that would jeopardize the credibility of the inquiry or investigation will either be recused or will not be assigned decision-making roles in the process.

5. **Access to Research Records**
In accordance with University policies and Standard Practice Guides, during its review of an allegation of research misconduct and other allegations regarding the conduct of research and scholarship, as described above, the University may access and take custody of all records, whether physical or electronic, that are

generated in the course of the research or scholarship and that may be relevant to its review of the allegation, regardless of where the records are stored.

6. **Modifications to Procedures**
   Under certain circumstances, including cases in which the respondent admits responsibility, the RIO, in consultation with the appropriate University officials, and, if needed, federal oversight agencies, may consider whether to modify or eliminate any of the procedural stages of the process set forth below.

F. Review of Reported Allegations and Sequestration of Evidence

The review of allegations may have three sequential stages: (1) preliminary assessment to assess whether the allegation (if taken as true) meets the University of Michigan's definition of research misconduct, as set forth in SPG 303.03; (2) an inquiry to determine whether the allegation warrants further formal investigation; and (3) when warranted, a formal investigation to thoroughly examine and evaluate all relevant facts to assess the validity of the allegation. Generally, the RIO will oversee the review process to ensure that these procedures are followed in a manner that is fair and unbiased. In cases in which the respondent is a faculty member, the Office of the Vice President for Research will consult with the Office of the Provost to determine whether and how that office would like to be involved in the review of the research misconduct allegation.

Initial sequestration of evidence may occur at any time after allegations are received. The RIO will take all reasonable and practicable steps to obtain custody of all relevant data and research records and evidence, as soon as feasible, and store them in a secure manner in accordance with the University policies outlined in Section III.A of the Standard Practice Guide 601.11. Sufficiently detailed documentation will be kept to permit later assessment of the adequacy of the process by the RIO. (This is particularly important in those instances in which the Vice President for Research determines that a formal investigation is not warranted). The documentation will be kept in a secure manner.

Different academic disciplines may have different forms of research records, both physical and electronic. Examples of research records include, but are not limited to, the following: research proposals; laboratory records, both physical and electronic, including lab notebooks; progress reports; theses; abstracts; presentations; internal reports; manuscripts and publications; notes; correspondence, including emails; videos; biological materials; equipment use logs; laboratory procurement records; certifications; and records related to the planning, conduct, management, and reporting of human or animal subject research.

1. **Preliminary Assessment**
   Upon receipt of a research misconduct allegation, the RIO will assess the allegation to determine, if taken as true, whether the allegation 1) falls within the University of Michigan's definition of research misconduct, such that the policy stated in Standard Practice Guide 303.03 applies, and 2) is sufficiently credible and specific that evidence of research misconduct may be identified. If these two criteria are met, the RIO may continue to the next step in the process, which is an inquiry. Allegations that are determined by the RIO not to involve research misconduct, even if taken as true, may be referred to other administrative channels, as appropriate.

2. **Inquiry**
   a. Purpose
      An inquiry is information-gathering and initial fact-finding to determine whether the allegation or potential instance of research misconduct has substance and warrants a formal investigation. It is intended to separate serious allegations deserving further formal investigation through this process from trivial, frivolous, unjustified, or clearly mistaken allegations.

b. Notification to Respondent(s)

Upon initiation of an inquiry, the respondent(s) will be informed of the allegation(s) and given an opportunity to respond to them. If additional respondents are identified during an inquiry, those individuals will be notified of the specific allegations raised against them. If additional allegations are identified during an inquiry, the respondent(s) will be notified in writing of the additional allegations raised against them.

c. Inquiry Process

The RIO may conduct the inquiry or may assign an individual or individuals without conflicts of interest to conduct the inquiry. In rare cases, if relevant expertise is lacking within the University, the RIO may seek the assistance of an external expert. The RIO will consult with the Office of the General Counsel prior to consulting with an external expert. Typically, the inquiry will include gathering and review of relevant information and may include interviews with the complainant(s), respondent(s), and other witnesses, as deemed appropriate. The inquiry will be completed within 90 days, unless additional time is required.

d. Inquiry Report

The individual(s) appointed to conduct the inquiry will prepare a written report. The report will include a statement of the allegation; a description of the evidence reviewed; summaries of the relevant interviews, if any; and the conclusions of the inquiry regarding whether there is sufficient evidence to warrant a formal investigation.

e. Inquiry Report Review and Actions

The respondent will be provided the opportunity to comment on the inquiry report and any such comment will become part of the record.

The report of the inquiry, along with any written comments on the report received from the respondent, will be provided to the Vice President for Research.

If the inquiry report recommends an investigation, and the Vice President for Research concurs that an investigation is warranted, (s)he will decide whether additional notification (e.g., to the appropriate Dean or Director), if any, is necessary, and the RIO will initiate the research misconduct investigation.

If the inquiry does not proceed to a formal investigation, the RIO will inform any persons involved in the inquiry to whom the identity of the respondent was disclosed by the University that the inquiry did not produce sufficient evidence to warrant formal investigation.

3. **Investigation**

a. Purpose

An investigation is the formal examination and evaluation of all relevant facts by a committee of knowledgeable faculty or, as needed, other individuals to determine if the preponderance of evidence supports the conclusion that research misconduct has taken place.

b. Selection of the Investigation Committee

Upon determining that a formal investigation is warranted, the RIO will appoint an investigation committee, the composition and size of which will be determined by the RIO. The appointed committee must have the necessary and appropriate expertise to carry out a thorough, formal investigation and authoritative evaluation of the relevant evidence. The committee members must not have any personal, professional, or financial conflicts of interest with either the respondent(s), the complainant(s), or witnesses. The investigation committee should include at least one faculty member who is an expert in the field of research that gave rise to the allegation and may, if necessary, also include one or more such experts from outside the University. The RIO will consult with the Office of the General Counsel prior to consulting with an external expert.

c. Charge to the Investigation Committee

The Vice President for Research will provide the investigation committee with its charge, which will include: (1) the purpose of the formal investigation; (2) copies of the allegations and the inquiry report; (3) responsibilities of the investigation committee, as set forth below; (4) the requirements that would need to be met to support a finding of research misconduct; and (5) the expected timeframe for formal investigation (consistent with applicable regulatory requirements, if any). The committee will be provided with a copy of SPG 303.03 and its associated procedures, as well as with copies of applicable federal regulations, if any.

d. Notification to Respondent(s)

The RIO will inform the respondent(s) of the initiation of the formal investigation, the composition of the investigation committee, and the charge to that committee. If a respondent has concerns that any committee member has a conflict of interest, the respondent can identify the basis for those concerns to the RIO, who will review and determine whether a conflict exists such that one or more alternative committee members should be appointed.

If additional respondents are identified during an investigation, those individuals will be notified of the specific allegations raised against them. If additional allegations are identified during an investigation, the respondent(s) will be notified in writing of the additional allegations raised against them.

e. Responsibilities of the Investigation Committee

The Committee will gather and review evidence and promptly reach a determination of whether research misconduct has occurred. The investigation will be completed within 180 days of the initial meeting of the committee, unless additional time is required. The committee's determination of research misconduct may also include recommended sanctions (e.g., reprimand, demotion, or discharge) or other actions appropriate for resolution of the matter.

During the formal investigation, every reasonable effort will be made to protect the confidentiality of the respondent(s), the complainant(s), and any witnesses, as set forth in Section E.1. However, at this stage, the respondent will normally be entitled to know the identity of all witnesses, if any, who will be called by the investigation committee. Cases that depend solely upon the observations or statements of the complainant either may be unable to proceed without the involvement of that individual, or the ability to review may be severely limited; other cases that can rely on documentary evidence may permit the complainant to remain uninvolved without compromising the investigation.

The investigation committee will keep the respondent and the Vice President for Research apprised of any additional allegations or other significant developments during the formal investigation, particularly if those developments might support expansion of the committee's investigative charge.

f. Rights of the Respondent at Respondent's Interview

When the respondent is interviewed by the committee, the respondent may be accompanied by an advisor, who may be an attorney. The advisor's role (whether an attorney or not) will be limited to advising the respondent. The advisor may not address the committee or any witnesses. If counsel is present with the respondent, the Office of the General Counsel will likewise be asked to be present at the meeting, for the limited purpose of advising the RIO and the investigation committee.

g. Interviews

The investigation may include interviews, which will be recorded and transcribed. Recordings and transcripts will be provided to the interviewed party for comment and will be included, along with any comments received, as part of the formal investigation file. Only the interviewed party, and any advisor (who will be subject to the same strictures set forth in 3.f, above), will be present at the interview with the committee.

h. The Investigation Report

The investigation committee will prepare a written report that summarizes its conclusion regarding whether misconduct occurred and that may recommend sanctions or remediation, if appropriate. The report must describe: the identity of the respondent; the nature of the allegation(s); the specific allegations; funding source(s); methods used to examine the evidence; a list of evidence reviewed; a statement of findings for each allegation specifying whether research misconduct occurred and whether it was committed intentionally, knowingly, or recklessly; the identity of the responsible individual for each finding of research misconduct; any publications that need correction or retraction; any federally funded projects that may have been impacted by the misconduct; any sanctions or remediation that the committee recommends; and comments on the draft investigation report by the respondent.

i. Review of the Investigation Report and Actions

The respondent will be afforded the opportunity to provide written comments on the draft report. The comments of the respondent on the draft report, if any, must be submitted within 30 days of the date on which the respondent received the draft and such comments will become part of the record.

The investigation committee will submit its report, along with the complete investigatory file, to the Vice President for Research. The Vice President for Research will take the following steps, in consultation with the Office of the Provost and the Office of the General Counsel, as necessary: (1) decide on what actions to take in light of the report, (2) notify the respondent and the dean or director of the decision, (3) decide whether or not the complainant will be notified, and (4) decide if and when external agencies or others, if any, are to be notified, what any such notification will include, and to whom it should be directed.

G. Resolution and Outcome

When allegations are not confirmed by the inquiry or the investigation, the University will provide for reasonable and practical efforts, if requested and as appropriate, to protect or restore the reputations of persons alleged to have engaged in misconduct.

The University will take reasonable and practical efforts to protect and restore the positions and reputations of those persons who, in good faith, made allegations as well as any witnesses and committee members and to protect these individuals from retaliation.

If the University determines, via the process set forth above, that research misconduct has occurred, the next step(s) depend upon the type of appointment the respondent holds, the seriousness of the misconduct, and the sanctions recommended. In all cases, however, the substantive determination of misconduct itself will not be subject to challenge. The paragraphs below describe the applicable process depending on the type of appointment held by the respondent and/or the recommended sanction:

1. **Faculty Cases Covered by Regents' Bylaw 5.09**
   If the Vice President for Research accepts the recommendations made by the investigation committee for sanction or dismissal, demotion, or terminal appointment against a faculty member to whom Regents' Bylaw 5.09 applies, the Provost and Executive Vice President for Academic Affairs may initiate the procedures required by the Bylaw.

2. **Faculty Cases in Which Bylaw 5.09 Does Not Apply**
   In cases to which Regents' Bylaw 5.09 does not apply, but which are covered by a school or college faculty grievance procedure, the dean will decide on the appropriate outcome, which the faculty member may then challenge through the applicable faculty grievance procedures.

3. **Cases Not Involving Faculty**
   In cases not involving faculty, the appropriate University manager and personnel department will initiate procedures required by the University's Standard Practice Guide 201.12, "Discipline", or the appropriate collective bargaining agreement.

   Staff members subject to the terms and conditions of collective bargaining agreements should consult the specific provisions in their current agreements dealing with misconduct. Any provision in such agreements that provide greater protections than the provisions stated herein supersede the affected provision of these procedures. Information concerning staff members covered by collective bargaining agreements may be obtained from the appropriate human resources office.

   Case outcomes involving students will be referred to the appropriate school or college for disciplinary actions.

H. Consistency with Federal Research Misconduct Regulations

The process set forth above is designed to be aligned with and used in conjunction with applicable federal research misconduct regulations. Definitions (e.g., terms defined in 42 CFR 93 Subpart B – see Appendix 1), reporting timelines, and other procedural requirements will directly follow applicable federal regulations.

I. Record Retention

All inquiry and investigatory files and final reports will be maintained and secured by the RIO for a period of seven years from the date of case closure, or for the period required by applicable regulations.

J. Questions

Questions regarding these procedures may be directed to the Office of the Vice President for Research or the Office of the General Counsel.

SPG 303.03 Procedures Appendix 1 – Terms defined in 42 CFR 93 Subpart B

§ 93.200 Accepted practices of the relevant research community.

Accepted practices of the relevant research community means those practices established by 42 CFR part 93 and by PHS funding components, as well as commonly accepted professional codes or norms within the overarching community of researchers and institutions that apply for and receive PHS awards.

§ 93.201 Administrative action.

Administrative action means an HHS action, consistent with § 93.407, taken in response to a research misconduct proceeding to protect the health and safety of the public, to promote the integrity of PHS-supported biomedical or behavioral research, biomedical or behavioral research training, or activities related to that research or research training, or to conserve public funds.

§ 93.202 Administrative record.

Administrative record comprises: the institutional record; any information provided by the respondent to ORI, including but not limited to the transcript of any virtual or in-person meetings under § 93.403(b) between the respondent and ORI, and correspondence between the respondent and ORI; any additional information provided to ORI while the case is pending before ORI; and any analysis or additional information generated or obtained by ORI. Any analysis or additional information generated or obtained by ORI will also be made available to the respondent.

§ 93.203 Allegation.

Allegation means a disclosure of possible research misconduct through any means of communication and brought directly to the attention of an institutional or HHS official.

§ 93.204 Assessment.

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

§ 93.205 Charge letter.

Charge letter means the written notice, as well as any amendments to the notice, sent to the respondent stating the findings of research misconduct and any proposed HHS administrative actions.

§ 93.206 Complainant.

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

§ 93.207 Contract.

Contract means an acquisition instrument awarded under the Federal Acquisition Regulation (FAR), 48 CFR chapter 1.

§ 93.208 Day.

Day means calendar day unless otherwise specified. If a deadline falls on a Saturday, Sunday, or Federal holiday, the deadline will be extended to the next day that is not a Saturday, Sunday, or Federal holiday.

§ 93.209 Departmental Appeals Board or DAB.

Departmental Appeals Board or DAB means the organization, within the HHS Office of the Secretary, established to conduct hearings and provide impartial review of disputed decisions made by HHS operating components.

§ 93.210 Evidence.

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

§ 93.211 Fabrication.

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

§ 93.212 Falsification.

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

§ 93.213 Funding component.

Funding component means any organizational unit of the PHS authorized to award grants, contracts, or cooperative agreements for any activity covered by this part involving research or research training; funding components may be agencies, bureaus, centers, institutes, divisions, offices, or other awarding units within the PHS.

§ 93.214 Good faith.

a) Good faith as applied to a complainant or witness means having a reasonable belief in the truth of one's allegation or testimony, based on the information known to the complainant or witness at the time. An allegation or cooperation with a research misconduct proceeding is not in good faith if made with knowledge of or reckless disregard for information that would negate the allegation or testimony.
b) Good faith as applied to an institutional or committee member means cooperating with the research misconduct proceeding by impartially carrying out the duties assigned for the purpose of helping an institution meet its responsibilities under this part. An institutional or committee member does not act in good faith if their acts or omissions during the research misconduct proceedings are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.

§ 93.215 Inquiry.

Inquiry means preliminary information-gathering and preliminary fact-finding that meets the criteria and follows the procedures of § 93.307 through § 93.309.

§ 93.216 Institution.

Institution means any person that applies for or receives PHS support for any activity or program that involves the conduct of biomedical or behavioral research, biomedical or behavioral research training, or activities related to that research or training. This includes, but is not limited to, colleges and universities, PHS intramural biomedical or behavioral research laboratories, research and development centers, national user facilities, industrial laboratories or other research institutes, research institutions, and independent researchers.

§ 93.217 Institutional Certifying Official.

Institutional Certifying Official means the institutional official responsible for assuring on behalf of an institution that the institution has written policies and procedures for addressing allegations of research misconduct, in compliance with this part; and complies with its own policies and procedures and the requirements of this part. The Institutional Certifying Official is responsible for certifying the content of the institution's annual report, which contains information specified by ORI on the institution's compliance with this part, and ensuring the report is submitted to ORI, as required.

§ 93.218 Institutional Deciding Official.

Institutional Deciding Official means the institutional official who makes final determinations on allegations of research misconduct and any institutional actions. The same individual cannot serve as the Institutional Deciding Official and the Research Integrity Officer.

§ 93.219 Institutional member.

Institutional member or members means an individual (or individuals) who is employed by, is an agent of, or is affiliated by contract or agreement with an institution. Institutional members may include, but are not limited to, officials, tenured and untenured faculty, teaching and support staff, researchers, research coordinators, technicians, postdoctoral and other fellows, students, volunteers, subject matter experts, consultants, or attorneys, or employees or agents of contractors, subcontractors, or sub-awardees.

§ 93.220 Institutional record.

The institutional record comprises:

a) The records that the institution compiled or generated during the research misconduct proceeding, except records the institution did not consider or rely on. These records include, but are not limited to:
    1) Documentation of the assessment as required by § 93.306(c).
    2) If an inquiry is conducted, the inquiry report and all records (other than drafts of the report) considered or relied on during the inquiry, including, but not limited to, research records and the transcripts of any transcribed interviews conducted during the inquiry, information the respondent provided to the institution, and the documentation of any decision not to investigate as required by § 93.309(c).
    3) If an investigation is conducted, the investigation report and all records (other than drafts of the report) considered or relied on during the investigation, including, but not limited to, research records, the transcripts of each interview conducted pursuant to § 93.310(g), and information the respondent provided to the institution.
    4) Decision(s) by the Institutional Deciding Official, such as the written decision from the Institutional Deciding Official under § 93.314.
    5) The complete record of any institutional appeal consistent with § 93.315.
b) A single index listing all the research records and evidence that the institution compiled during the research misconduct proceeding, except records the institution did not consider or rely on.
c) A general description of the records that were sequestered but not considered or relied on.

§ 93.221 Intentionally.

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

§ 93.222 Investigation.

Investigation means the formal development of a factual record and the examination of that record that meets the criteria and follows the procedures of §§ 93.310 through 93.317.

§ 93.223 Knowingly.

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

§ 93.224 Notice.

Notice means a written or electronic communication served in person or sent by mail or its equivalent to the last known street address, facsimile number, or email address of the addressee.

§ 93.225 Office of Research Integrity or ORI.

Office of Research Integrity or ORI means the office established by Public Health Service Act section 493 (42 U.S.C. 289b) and to which the HHS Secretary has delegated responsibility for addressing research integrity and misconduct issues related to PHS-supported activities.

§ 93.226 Person.

Person means any individual, corporation, partnership, institution, association, unit of government, or other legal entity, however organized.

§ 93.227 Plagiarism.

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

a) Plagiarism includes the unattributed verbatim or nearly verbatim copying of sentences and paragraphs from another's work that materially misleads the reader regarding the contributions of the author. It does not include the limited use of identical or nearly identical phrases that describe a commonly used methodology.
b) Plagiarism does not include self-plagiarism or authorship or credit disputes, including disputes among former collaborators who participated jointly in the development or conduct of a research project. Self-plagiarism and authorship disputes do not meet the definition of research misconduct.

§ 93.228 Preponderance of the evidence.

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

§ 93.229 Public Health Service or PHS.

Public Health Service or PHS consists of the following components within HHS: the Office of the Assistant Secretary for Health, the Office of Global Affairs, the Administration for Strategic Preparedness and Response, the Advanced Research Projects Agency for Health, the Agency for Healthcare Research and Quality, the Agency for Toxic Substances and Disease Registry, the Centers for Disease Control and Prevention, the Food and Drug Administration, the Health Resources and Services Administration, the Indian Health Service, the National Institutes

of Health, the Substance Abuse and Mental Health Services Administration, and any other components of HHS designated or established as components of the Public Health Service.

§ 93.230 PHS support.

PHS support means PHS funding, or applications or proposals for PHS funding, for biomedical or behavioral research, biomedical or behavioral research training, or activities related to that research or training, that may be provided through: funding for PHS intramural research; PHS grants, cooperative agreements, or contracts; subawards, contracts, or subcontracts under those PHS funding instruments; or salary or other payments under PHS grants, cooperative agreements, or contracts.

§ 93.231 Recklessly.

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

§ 93.232 Research.

Research means a systematic experiment, study, evaluation, demonstration, or survey designed to develop or contribute to general knowledge (basic research) or specific knowledge (applied research) by establishing, discovering, developing, elucidating, or confirming information or underlying mechanisms related to biological causes, functions, or effects; diseases; treatments; or related matters to be studied.

§ 93.233 Research Integrity Officer or RIO.

Research Integrity Officer or RIO refers to the institutional official responsible for administering the institution's written policies and procedures for addressing allegations of research misconduct in compliance with this part.

§ 93.234 Research misconduct.

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

§ 93.235 Research misconduct proceeding.

Research misconduct proceeding means any actions related to alleged research misconduct taken under this part, including allegation assessments, inquiries, investigations, ORI oversight reviews, and appeals under subpart E of this part.

§ 93.236 Research record.

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

§ 93.237 Respondent.

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

§ 93.238 Retaliation.

Retaliation means an adverse action taken against a complainant, witness, or committee member by an institution or one of its members in response to:

a) A good faith allegation of research misconduct; or
b) Good faith cooperation with a research misconduct proceeding.

§ 93.239 Secretary or HHS.

Secretary or HHS means the Secretary of HHS or any other official or employee of HHS to whom the Secretary delegates authority.

§ 93.240 Small institution.

Small institution means an institution that may be too small to conduct an inquiry or investigation into an allegation of research misconduct as required by this part without actual or apparent conflicts of interest.

§ 93.241 Suspension and Debarment Official or SDO.

Suspension and Debarment Official (SDO) means the HHS official authorized to impose suspension and debarment, which are the actions that Federal agencies take to disqualify persons deemed not presently responsible from doing business with the Federal Government.