

UA Little Rock

Research Misconduct Policy

Revised 6.28.24

The basic principle in the conduct of scholarly activity rests on objective inquiry and the pursuit of truth. Integrity in the conduct of scholarly activity is essential and must be maintained.

Although instances of misconduct are rare, it is acknowledged that they do occur. Once they do occur, they present a serious threat to continued public confidence in the integrity of the scholarship and the stewardship of funds that support the scholarly activity.

Scope

This policy applies to all individuals at the University of Arkansas at Little Rock (UA Little Rock) paid by, under the control of, or affiliated with the institution, including faculty, administrators, scientists, trainees, technicians and other staff members, students, fellows, guest researchers, or collaborators at the university. This policy neither limits nor supersedes the university's policies on Academic Integrity and Discipline for undergraduate and graduate students as stated in the UA Little Rock Student Handbook.

This statement of policy and procedures is intended to carry out UA Little Rock's responsibilities under the Public Health Service (PHS) Policies on Research Misconduct, 42 CFR § 93. This document applies to allegations of research misconduct (fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results) involving:

- A person who, at the time of the alleged research misconduct, was employed by, was an agent of, or was affiliated by contract or agreement with this institution; and/or
- (1) PHS supported biomedical or behavioral research, research training or activities related to that research or research training, such as the operation of tissue and data banks and the dissemination of research information; (2) Applications or proposals for PHS support for biomedical or behavioral research, research training or activities related to that research or research training; or (3) Plagiarism of research records produced in the course of PHS-supported research, research training or activities related to that research or research training. This includes any research proposed, performed, reviewed, or reported, or any research record generated from that research, regardless of whether an application or proposal for PHS funds resulted in a grant, contract, cooperative agreement, or other form of PHS support.

This statement of policy and procedures does not apply to authorship or collaboration disputes and applies only to allegations of research misconduct that occurred within six years of the date

the institution or HHS received the allegation, subject to the subsequent use, health or safety of the public, and grandfather exceptions in 42 CFR § 93.105(b).

Definitions

- A. Activity record means any data, document, computer file, computer diskette, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported activity that constitutes the subject of an allegation of misconduct. An activity record includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract process and other reports; laboratory notebooks; notes; correspondence; videos; photographs; works of art; X-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; and consent forms.
- B. Allegation means any written or oral statement or other indication of possible misconduct made to an institutional official.
- C. Complainant means a person who makes an allegation of misconduct.
- D. Conflict of interest means real or apparent bias due to prior or existing personal or professional relationships.
- E. Good faith allegation means an allegation made with the honest belief that misconduct may have occurred. An allegation is not in good faith if it is made with reckless disregard for, or willful ignorance of, facts that would disprove the allegation.
- F. Inquiry means gathering information and initial fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
- G. Research Integrity Officer means the UA Little Rock official responsible for assessing allegations of misconduct and determining when such allegations warrant inquiries and overseeing inquiries and investigations.
- H. Investigation means the formal examination and evaluation of all relevant facts to determine if misconduct has occurred, and, if so, to determine the responsible person and the seriousness of the misconduct.
- I. Respondent means the person against whom an allegation of misconduct is directed or the person whose actions are the subject of the inquiry or investigation. There can be more than one respondent in any inquiry or investigation.
- J. Retaliation means any action that adversely affects the employment or other institutional status of an individual that is taken by UA Little Rock or an employee because the

individual has, in good faith, made an allegation of misconduct or has cooperated in good faith with an investigation of such allegation, or inadequate institutional response thereto.

- K. Misconduct means fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scholarly community for proposing, conducting, or reporting scholarly activity. It does not include honest error or honest differences in interpretations or judgments of data.

Rights and Responsibilities

A. Research Integrity Officer

The Chancellor will appoint the Research Integrity Officer who will have primary responsibility for implementation of the procedures set forth in this document. The Research Integrity Officer will be a UA Little Rock official who is well qualified to handle the procedural requirements involved and is sensitive to the varied demands made on those who conduct scholarly activities, those who are accused of misconduct, and those who report apparent misconduct in good faith.

The Research Integrity Officer will preside over the inquiry and investigation committees and ensure that necessary and appropriate expertise is secured to carry out a thorough and authoritative evaluation of the relevant evidence in an inquiry or investigation.

The Research Integrity Officer will attempt to ensure that confidentiality is maintained. The Research Integrity Officer will assist inquiry and investigation committees and all UA Little Rock personnel in complying with this policy and with applicable standards imposed by government or external funding sources. The Research Integrity Officer is also responsible for maintaining files of all documents and evidence and for the confidentiality and the security of the files.

If a sponsored project is involved, the Research Integrity Officer will report to the Funding Agency and keep the Funding Agency apprised of any developments during the course of the inquiry or investigation that may affect current or potential sponsored funding for the individual(s) under investigation or that the Funding Agency needs to know to ensure appropriate use of external funds and otherwise protect the public interest.

B. Complainant

The complainant will have an opportunity to testify before the inquiry and investigation committees, to review portions of the inquiry and investigation reports pertinent to his/her allegations or testimony, to be informed of the results of the inquiry and investigation, and to be protected from retaliation. Also, if the Research Integrity Officer has determined that the complainant may be able to provide pertinent information on any portions of the draft report, these portions may be given to the complainant for comment.

The complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with an inquiry or investigation.

C. Respondent

The respondent will be informed of the allegations when an inquiry is opened and notified in writing of the final determinations and resulting actions. The respondent also will have the right to be interviewed by and present evidence to the inquiry and investigation committees, to review the draft inquiry and investigation reports, and to have the advice of legal counsel employed at his or her own expense.

The respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry or investigation. If the respondent is not found guilty of misconduct, he or she has the right to receive institutional assistance in restoring his or her reputation.

D. Deciding Official

The Chancellor will receive the inquiry and/ or investigation report and any written comments made by the respondent or the complainant on the draft report. The Chancellor will consult with the Research Integrity Officer or other appropriate officials and will determine whether to conduct an investigation, whether misconduct occurred, whether to impose sanctions, or whether to take other appropriate administrative actions [see Institutional Administrative Actions Section].

General Policies and Principles

A. Responsibility to Report Misconduct

All employees or individuals associated with the UA Little Rock should report observed, suspected, or apparent misconduct in scholarly activities to the Research Integrity Officer or Chancellor. If an individual is unsure whether a suspected incident falls within the definition of misconduct, he or she may call the Research Integrity Officer to discuss the suspected misconduct informally. If the circumstances described by the individual do not meet the definition of misconduct, the Research Integrity Officer will refer the individual or allegation to other offices or officials with responsibility for resolving the problem.

At any time, an employee may have confidential discussions and consultations about concerns of possible misconduct with the Research Integrity Officer and will be counseled about appropriate procedures for reporting allegations.

B. Protecting the Complainant

The Research Integrity Officer will monitor the treatment of individuals who bring allegations of misconduct or of inadequate institutional response thereto, and those who cooperate in inquiries or investigations. The Research Integrity Officer will ensure that

these persons will not be retaliated against in the terms and conditions of their employment or other status at the institution and will review instances of alleged retaliation for appropriate action.

Employees should immediately report any alleged or apparent retaliation to the Research Integrity Officer.

The UA Little Rock will protect the privacy of those who report misconduct in good faith to the maximum extent possible. For example, if the complainant requests anonymity, the University will make an effort to honor the request during the allegation assessment or inquiry within applicable policies and regulations, and state and local laws, if any. The complainant will be advised that if the matter is referred to an investigation committee and the complainant's testimony is required, anonymity may not be possible. UA Little Rock will undertake diligent efforts to protect the positions and reputations of those persons who, in good faith, make allegations.

C. Protecting the Respondent

Inquiries and investigations will be conducted in a manner that will ensure fair treatment to the respondent(s) in the inquiry or investigation and confidentiality to the extent possible without compromising public health and safety or thoroughly carrying out the inquiry or investigation.

D. Cooperation with Inquiries and Investigations

UA Little Rock employees will cooperate with the Research Integrity Officer and other UA Little Rock officials in the review of allegations and the conduct of inquiries and investigations. Employees have an obligation to provide relevant evidence to the Research Integrity Officer or other UA Little Rock officials on misconduct allegations.

E. Preliminary Assessment of Allegations

Upon receiving an allegation of misconduct, the Research Integrity Officer will immediately assess the allegation to determine whether there is sufficient evidence to warrant an inquiry and whether the allegation falls under the UA Little Rock's definition of misconduct.

Conducting the Inquiry

A. Initiation and Purpose of the Inquiry

If the Research Integrity Officer determines that the allegation provides sufficient information to warrant specific follow-up and falls under the definition of misconduct, he or she immediately will initiate the inquiry process. In initiating the inquiry, the Research Integrity Officer should clearly identify the original allegation and any related issues that should be evaluated. The purpose of the inquiry is to make a preliminary evaluation of the available evidence and testimony of the respondent, complainant, and key witnesses to determine whether there is sufficient evidence of possible misconduct to warrant an investigation. The purpose of the inquiry is not to reach a final conclusion

about whether misconduct definitely occurred or who was responsible. The findings of the inquiry must be set forth in an inquiry report. An Inquiry Committee shall be appointed as provided for herein.

B. Sequestration of the Activity Records

After determining that an allegation falls within the definition of misconduct, the Research Integrity Officer must ensure that all original activity records and materials relevant to the allegation are immediately secured. This sequestration should occur before the respondent is notified of the inquiry.

C. Appointment of the Inquiry Committee

The Inquiry Committee shall consist of the supervisory dean and supervisory chairperson and may include one additional expert appointed by the supervisory dean in the case of students and faculty OR the immediate supervisor and one additional expert in the case of other employees.

The Research Integrity Officer will notify the respondent of the inquiry and the members of the Inquiry Committee. If the respondent submits a written objection to any member of the Inquiry Committee based on bias or conflict of interest within 5 days, the Research Integrity Officer will determine whether to replace the challenged member with a qualified substitute.

D. Charge to the Committee and the First Meeting

The Research Integrity Officer will prepare a charge for the Inquiry Committee that describes the allegations and any related issues identified during the allegation assessment and states that the purpose of the inquiry is to make a preliminary evaluation of the evidence and testimony of the respondent, complainant, and key witnesses to determine whether there is sufficient evidence of possible misconduct to warrant an investigation. The purpose is not to determine whether misconduct definitely occurred or who was responsible.

At the committee's first meeting, the Research Integrity Officer will review the charge with the committee, discuss the allegations, any related issues, and the appropriate procedures for conducting the inquiry, assist the committee with organizing plans for the inquiry, and answer any questions raised by the committee. The Research Integrity Officer will be present throughout the inquiry to advise the committee as needed. Institutional legal counsel will be available to advise the committee if needed.

E. Inquiry Process

The Inquiry Committee normally will interview the complainant, the respondent, and key witnesses, as well as examine relevant activity records and materials. The Inquiry Committee then will evaluate the evidence and testimony obtained during the inquiry. After consultation with the Research Integrity Officer and institutional legal counsel (if deemed appropriate), the committee members will decide whether there is sufficient evidence of possible misconduct to recommend further investigation.

The Inquiry Report

A. Elements of the Inquiry Report

A written inquiry report shall be prepared that states the name and position of the committee members and experts, if any; the allegations; a summary of the inquiry process used; a list of the activity records reviewed; summaries of any interviews; a description of the evidence in sufficient detail to demonstrate whether an investigation is recommended and whether any other actions should be taken if an investigation is not recommended. Institutional legal counsel may review the report for legal sufficiency.

B. Comments on the Draft Report by the Respondent and the Complainant

The Research Integrity Officer will provide the respondent with a copy of the draft inquiry report for comment and rebuttal and will provide the complainant, if he or she is identifiable, with the portions of the draft inquiry report that address the complainant's role and opinions of the investigation.

1. Confidentiality

The Research Integrity Officer may establish reasonable conditions for review to protect the confidentiality of the draft report.

2. Receipt of Comments

Within 5 calendar days of their receipt of the draft report, the complainant and respondent will provide their comments, if any, to the inquiry committee. Any comments that the complainant or respondent submits on the draft report will become part of the inquiry report and record. Based on the comments, the inquiry committee may revise the report as appropriate.

C. Inquiry Decision and Notification

1. Decision by Deciding Official

The Research Integrity Officer will transmit the final report and any comments to the Chancellor (Deciding Official), who will make the determination of whether findings from the inquiry provide sufficient evidence of possible misconduct to justify conducting an investigation. The inquiry is completed when the Chancellor makes this determination, which will be made within 75 days of the first meeting of the inquiry committee. Any extension of this period will be based on good cause and recorded in the inquiry file.

2. Notification

The Research Integrity Officer will notify both the respondent and the complainant in writing of the Chancellor's decision of whether to proceed to an investigation and will remind them of the obligation to cooperate in the event an investigation is opened. The Research Integrity Officer will also notify all appropriate UA Little Rock officials of the Chancellor's decision.

D. Time Limit for Completing the Inquiry Report

The inquiry committee will normally complete the inquiry and submit its report in writing to the Research Integrity Officer no more than 60 calendar days following its first meeting. This includes conducting the inquiry, obtaining comments from the respondent and complainant, and submitting the report to the Chancellor through the Research Integrity Officer.

Conducting the Investigation

A. Purpose of the Investigation

The purpose of the investigation is to explore in detail the allegations, to examine the evidence in-depth, and to determine specifically whether misconduct has been committed, by whom, and to what extent. The investigation will also determine whether there are additional instances of possible misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where the alleged misconduct involves clinical trials or potential harm to human subjects or the general public or if it affects activity that forms the basis for public policy, clinical practice, or public health practice. The findings of the investigation will be included in an investigation report.

B. Sequestration of the Activity Records

The Research Integrity Officer will immediately sequester any additional pertinent activity records that were not previously sequestered during the inquiry. This sequestration should occur before or at the time the respondent is notified that an investigation has begun. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

C. Appointment of the Investigation Committee

The Chancellor shall appoint three tenured faculty members, who he/she deems to have appropriate expertise to assure a sound knowledge base from which to work, to the Misconduct in Scholarship Investigation Committee. The Chancellor can appoint additional members to the Investigation Committee if certain knowledge or experience is desired.

The Research Integrity Officer will notify the respondent of the proposed committee membership within S days of initiation of the investigation. If the respondent submits a written objection to any appointed member of the investigation committee within S days of receipt of such notification, the Research Integrity Officer will determine whether to replace the challenged member with a qualified substitute.

D. Charge to the Committee and the First Meeting

1. Charge to the Committee

The Research Integrity Officer will define the subject matter of the investigation in a written charge to the committee that describes the allegations and related issues identified during the inquiry, defines misconduct, and identifies the name of the respondent. The charge will state that the committee is to evaluate the evidence and testimony of the respondent, complainant, and key witnesses to determine whether, based on a preponderance of the evidence, misconduct occurred and, if so, to what extent, who was responsible, and its seriousness.

The Research Integrity Officer will inform the committee that in order to determine that the respondent committed research misconduct, it must find that a preponderance of the evidence establishes that: (1) 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); (2) the research misconduct is a significant departure from accepted practices of the relevant research community; and (3) the respondent committed the research misconduct intentionally, knowingly, or recklessly.

During the investigation, if additional information becomes available that substantially changes the subject matter of the investigation or would suggest additional respondents, the committee will notify the Research Integrity Officer, who will determine whether it is necessary to notify the respondent of the new subject matter or to provide notice to additional respondents.

2. The First Meeting

The Research Integrity Officer will convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. The investigation committee will be provided with a copy of this statement of policy and procedures and 42 CFR § 93. The Research Integrity Officer will be present or available throughout the investigation to advise the committee as needed.

E. Investigation Process

The Investigation Committee will be appointed and the process initiated within 30 days of the completion of the inquiry.

Consistent with PHS regulatory provisions from 42 CFR § 93, the investigation committee and the Research Integrity Officer must:

- 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, including, but not necessarily limited to, relevant activity records, computer files, proposals,

manuscripts, publications, correspondence, memoranda, and notes of telephone calls. 42 CFR § 93.310(b)

- Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practical;
- Interview each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of the investigation; and
- Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continue the investigation to completion. 42 CFR § 93.310(h)

In addition, on behalf of the UA Little Rock, the Research Integrity Officer is responsible for each of the following steps and for ensuring that the investigation committee: (1) uses diligent efforts to conduct an investigation that includes an examination of all research records and evidence relevant to reaching a decision on the merits of the allegations and that is otherwise thorough and sufficiently documented; (2) takes reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practical; (3) interviews each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and records or transcribes each interview, provides the recording or transcript to the interviewee for correction, and includes the recording or transcript in the record of the research misconduct proceeding; and (4) pursues diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continues the investigation to completion.

The Investigation Report

A. Elements of the Investigation Report (42 CFR § 93.313)

Consistent with PHS regulatory provisions from 42 CFR § 93, the investigation committee and the Research Integrity Officer are responsible for preparing a written draft report of the investigation that:

- Describes the nature of the allegation of research misconduct, including identification of the respondent;
- Describes and documents the PHS support, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing PHS support;
- Describes the specific allegations of research misconduct considered in the

investigation;

- Includes the institutional policies and procedures under which the investigation was conducted, unless those policies and procedures were provided to ORI previously;
- Identifies and summarizes the research records and evidence reviewed and identifies any evidence taken into custody but not reviewed; and
- Includes a statement of findings for each allegation of research misconduct identified during the investigation. Each statement of findings must: (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 PHS 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 non-PHS federal agencies. (42 CFR § 93.313)

B. Comments on the Draft Report and Access to Evidence

1. Respondent

The Research Integrity Officer must give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to the evidence on which the report is based. The respondent will be allowed 30 days from the date he/she received the draft report to submit comments to the Research Research Integrity Officer. The respondent's comments must be included and considered in the final report. 42 CFR § 93.312(a), 93.313(g)

2. Complainant

The Research Integrity Officer will provide the complainant with those portions of the draft investigation report that address the complainant's role and opinions in the investigation. The complainant's comments must be submitted within 30 days of the date on which he/she received the draft report and the comments must be included and considered in the final report.

C. Institutional Review and Decision

Based on a preponderance of the evidence, the Chancellor will make the final determination of whether to accept the investigation report, its findings, and the recommended institutional actions. If this determination varies from that of the Investigation Committee, the Chancellor will submit to the Investigation Committee a written explanation detailing the basis for rendering a decision different from that of the

Investigation Committee. The Chancellor's explanation should be consistent with the Institution's definition of misconduct, the Institution's policies and procedures, and the evidence reviewed and analyzed by the Investigation Committee. The Chancellor also may return the report to the Investigation Committee with a request for further fact-finding or analysis. The Chancellor's determination, together with the Investigation Committee's report, constitutes the final investigation report for purposes of Funding Agency review. If the activity is externally funded, the Chancellor will explain any variance in his/her final determination in the final investigation letter transmitting the report to the Funding Agency.

When a final decision on the case has been reached, the Research Integrity Officer will notify both the respondent and the complainant in writing. In addition, the Chancellor will determine whether law enforcement agencies, 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. The Research Integrity Officer is responsible for ensuring compliance with all notification requirements of funding agencies.

D. Transmittal of the Final Investigation Report to Funding Agency

After comments have been received and the necessary changes have been made to the draft report, the Investigation Committee should transmit the final report with attachments, including the respondent's and complainant's comments, to the Funding Agency, through the Research Integrity Officer.

E. Time Limit for Completing the Investigation Report

An investigation ordinarily should be completed within 120 calendar days of its initiation, with the initiation being defined as the first meeting of the Investigation Committee. This includes conducting the investigation, preparing the report of findings, making the draft report available to the subject of the investigation for comment, submitting the report to the Chancellor for approval, and submitting the report to the Funding Agency.

Requirements for Reporting to the Funding Agency

- A. The UA Little Rock's decision to initiate an investigation must be reported in writing to the Funding Agency, on or before the date the investigation begins. At a minimum, the notification should include the name of the person(s) against whom the allegations have been made, the general nature of the allegation as it relates to the funding agency definition of misconduct, and the application or grant number(s) involved. The Funding Agency must also be notified of the final outcome of the investigation and must be provided with a copy of the investigation report. Any significant variations from the provisions of the institutional policies and procedures should be explained in any reports submitted to the Funding Agency.
- B. If the UA Little Rock plans to terminate an inquiry or investigation for any reason without completing all relevant requirements of this policy, the Research Integrity

Officer will submit a report of the planned termination to the Funding Agency, including a description of the reasons for the proposed termination.

- C. If the UA Little Rock determines that it will not be able to complete the investigation in 120 calendar days, the Research Integrity Officer will submit a written explanation which describes reasons for the delay, reports on the progress to date, estimates the date of completion of the report, and describes other necessary steps to be taken.
- D. When Public Health Service (PHS) funding or applications for funding are involved, and an admission or finding of misconduct is made, the Research Integrity Officer will contact the Office of Research Integrity (ORI) for consultation and advice. Normally, the individual making the admission will be asked to sign a statement attesting to the occurrence and extent of misconduct. When the case involves PHS funds, the UA Little Rock cannot accept an admission of misconduct as a basis for closing a case or not undertaking an investigation without prior approval from the ORI.
- E. The Research Integrity Officer will notify the Funding Agency at any stage of the inquiry or investigation if:
 - there is an immediate health hazard involved;
 - there is an immediate need to protect external funds or equipment;
 - there is an immediate need to protect the interests of the person(s) making the allegations or of the individual(s) who is the subject of the allegations as well as his/her co-investigators and associates, if any;
 - it is probable that the alleged incident is going to be reported publicly;
 - the allegation involves a public health-sensitive issue, e.g. a clinical trial;
 - there is a reasonable indication of possible criminal violation. In this instance, the institution must inform the Funding Agency within 24 hours of obtaining that information.

Institutional Administrative Actions

The UA Little Rock will take appropriate administrative actions against individuals when an allegation of misconduct has been substantiated. If the Chancellor determines that the alleged misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken, after consultation with the Research Integrity Officer. The actions include:

- informing in writing the agency (if any) sponsoring the activity;
- informing in writing the University of Arkansas Board of Trustees;
- recommending to the President appropriate administrative action as provided for in the policies and procedures of the University;
- withdrawal or correction of all pending or published abstracts and papers emanating from the activity where misconduct was found;
- restitution of funds as appropriate; and

- other action deemed appropriate by the Chancellor.

Other Considerations

A. Termination of Institutional Employment or Resignation Prior to Completing Inquiry or Investigation

In the case of externally sponsored activities, the termination of the respondent's institutional employment, by resignation or otherwise, before or after an allegation of possible misconduct has been reported, will not preclude or terminate misconduct procedures outlined in this Policy. If the respondent without admitting to the misconduct, elects to resign his or her position prior to the initiation of an inquiry, but after an allegation has been reported, or during an inquiry or investigation, the inquiry or investigation will proceed. If the respondent refuses to participate in the process after resignation, the committee will use its best efforts to reach a conclusion concerning the allegations, noting in its report the respondent's failure to cooperate and its effect on the committee's review of all the evidence.

B. Restoration of the Respondent's Reputation

If the UA Little Rock finds no misconduct after consulting with the respondent, the Research Integrity Officer will undertake reasonable efforts to restore the respondent's reputation. Depending on the particular circumstances, the Research Integrity Officer should consider notifying those individuals aware of or involved in the investigation of the outcome, publicizing the final outcome in forums in which the allegation of misconduct was previously publicized, or expunging all reference to the misconduct allegation from the respondent's personnel file.

C. Protection of the Complainant and Others

Regardless of whether the institution determines that scientific misconduct occurred, the Research Integrity Officer will undertake reasonable efforts to protect complainants who made allegations of misconduct in good faith and others who cooperate in good faith with inquiries and investigations of such allegations. Upon completion of an investigation, the Chancellor will determine, after consulting with the complainant, what steps, if any, are needed to restore the position or reputation of the complainant. The Research Integrity Officer is responsible for implementing any steps the Chancellor approves. The Research Integrity Officer also will take appropriate steps during the inquiry and investigation to prevent any retaliation against the complainant. The University follows the Public Health Service Office of Research Integrity's "[Guidelines for Responding to Possible Retaliation Against Whistleblowers in Extramural Research](#)."

D. Allegations Not Made in Good Faith

If relevant, the Chancellor will determine whether the complainant's allegations of misconduct were made in good faith. If an allegation was not made in good faith, the Chancellor will determine whether any administrative action should be taken against the complainant as provided for in the policies and procedures of the University.

E. Interim Administrative Actions

Institutional officials will take interim administrative actions, as appropriate, to protect external funds and ensure that the purposes of the external financial assistance are carried out.

Record Retention

The Research Integrity Officer must maintain and provide to ORI, upon request, “records of research misconduct proceedings” as that term is defined by 42 CFR § 93.317. Unless custody has been transferred to HHS or ORI has advised in writing that the records no longer need to be retained, records of research misconduct proceedings must be maintained in a secure manner for 7 years after completion of the proceeding or the completion of any PHS proceeding involving the research misconduct allegation. The Research Integrity Officer is also responsible for providing any information, documentation, research records, evidence, or clarification requested by ORI to carry out its review of an allegation of research misconduct or of the institution’s handling of such an allegation.