To: Vice Presidents, Deans, Directors, Department Chairs, and Other Administrative Officials

From: Salme Harju Steinberg

Subject: Academic Research Misconduct (formerly Scientific Misconduct)

I. Introduction

A. General Policy

Northeastern Illinois University recognizes that integrity in research is an uncompromising component of academic life and therefore, adopts the following procedures for dealing with and reporting possible misconduct in science.

The University recognizes that cases of scientific misconduct are rare. Nevertheless, it is the intent of this policy to provide a basis for dealing with any alleged occurrences of academic scientific misconduct (as defined in our definitions section) at the University on a research, research-training or research-related grant or cooperative agreement. It is recognized that non-scientific issues are covered by other policies and are not intended to be part of these considerations.

B. Scope

This policy and the associated procedures apply to all individuals engaged in academic research at Northeastern Illinois University, including faculty members, professional staff, scientists, trainees, technicians and other staff members, students, fellows, volunteers, guest researchers, or collaborators. The policy and the associated procedures are derived from the Office of Research Integrity's Model Policy for Responding to Allegations of Academic Research Misconduct and as such are particularly appropriate for scientific research supported by, or for which support is requested from, the Public Health Service (PHS), the National Science Foundation (NSF), or any other Federal agency. The Office of Research Integrity (ORI) is an independent entity within the U.S. Department of Health and Human Services reporting directly to the Secretary of Health and Human Services. ORI is responsible for protecting the integrity of PHS extramural and intramural research programs. PHS regulations, at 42 CFR Part 50, Subpart A, apply to any research, research-training or research-related grant, or cooperative agreement with the PHS.

These procedures will normally be followed when a good faith allegation of possible misconduct in academic research is received by a University official. Particular circumstances in an individual case may dictate variation from normal procedure deemed in the best interests of Northeastern Illinois University and the PHS or other Federal agency. Such variations from normal procedure should be constructed to ensure
fair treatment to the subject of the inquiry or investigation. Any significant variation from normal procedure should be approved in advance by the Chief Academic Officer of Northeastern Illinois University.

II. Definitions

A. Academic research misconduct, herein sometimes referred to as "misconduct", means fabrication, falsification, plagiarism, undisclosed conflicts of interest, or other practices that seriously deviate from standards that are commonly accepted within the academic community for proposing, conducting, or reporting research. It does not include honest error or honest differences in interpretations or judgments of data.

B. Allegation means any written or oral statement or other indication of possible academic research misconduct made to an institutional official.

C. Complainant means a person who makes an allegation of academic research misconduct or inadequate institutional response thereto or who cooperates with an investigation of such allegation. There can be more than one complainant in any inquiry or investigation.

D. Conflict of interest means the real or apparent interference of one person's interest with another, where potential bias may occur due to prior or existing personal or professional relationships.

E. Deciding Official means the institutional official who makes final determinations on allegations of academic research misconduct and on any responsive institutional actions. At Northeastern Illinois University the Deciding Official is the Provost. F. Good faith allegation means an allegation of academic research misconduct made by a complainant who honestly believes that academic research misconduct may have occurred. A complainant who recklessly disregards evidence available to him or her that disproves an allegation has not made the allegation in good faith.

G. Inquiry means information gathering and initial fact-finding to determine whether an allegation or apparent instance of academic research misconduct warrants an investigation.

H. Investigation means the formal examination and evaluation of all relevant facts to determine if misconduct has occurred and, if so, to identify the responsible person and the seriousness of the misconduct.

I. ORI means the Office of Research Integrity, an independent entity within the U.S. Department of Health and Human Services reporting to the Secretary of Health and Human Services. The ORI is responsible for protecting the integrity of PHS extramural and intramural research programs.

J. PHS means the Public Health Service, part of the Department of Health and Human Services (DHHS) of the Federal government.

L. *PHS support* means PHS grants, contracts, or cooperative agreements, or applications therefore.

M. *Research Integrity Officer* means the institutional official responsible for assessing allegations of academic research misconduct and determining when such allegations warrant inquiries and for overseeing inquiries and investigations. At Northeastern Illinois University the Research Integrity Officer is the Director of Sponsored Programs.

N. *Research record* means any data, document, computer file, computer disk, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the subject of an allegation of scientific misconduct. A research record includes, but is not limited to: grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; correspondence; videos; photographs; 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; consent forms; medical charts; and patient research files.

O. *Respondent* means the person against whom an allegation of academic research misconduct is directed, or the person who is the subject of the inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

P. *Retaliation* means any deliberate response by Northeastern Illinois University, or an employee or officer of Northeastern Illinois University, that adversely affects the employment or other institutional status of a respondent to whom an allegation of misconduct has been directed but not proven or of a complainant who, in good faith, has made an allegation of academic research misconduct or inadequate institutional response thereto, or who has cooperated in good faith with an investigation of such allegation.

III. RIGHTS AND RESPONSIBILITIES

A. RESEARCH INTEGRITY OFFICER

All records related to a case shall be treated as confidential insofar as is permitted by the law of the State of Illinois and no materials associated with the case shall be placed in the respondent's personnel file prior to the final disposition of the matter.

The Research Integrity Officer will have primary responsibility for adherence to the procedural requirements set forth in this document and, therefore, must be sensitive to the varied demands made on those who conduct research, those who are accused of misconduct, and those who report in good faith apparent misconduct.

The Research Integrity Officer will attempt to resolve on an informal and confidential basis any reported misconduct. Should the Research Integrity Officer determine there is insufficient reason to pursue the matter, he/she shall notify the respondent of the complaint and its disposition.
Should such an informal review prove not to be successful in resolving the issue, the Research Integrity Officer has two options: (a) the Research Integrity Officer together with the respondent may decide to proceed directly to the Investigation phase or, (b) if either the Research Integrity Officer or the respondent so desires, the procedure will move to the Inquiry phase. In consultation with the Provost, Research Integrity Officer will appoint the inquiry and/or 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. It is the responsibility of the Research Integrity Officer to ensure that neither the Inquiry nor the Investigation Committee exceeds the scope of its charge. Moreover, the Research Integrity Officer along with appropriate administrators will ensure that interim administrative actions are taken to protect Federal funds.

The Research Integrity Officer will attempt to ensure that confidentiality is maintained throughout all of these proceedings.

The Research Integrity Officer will assist inquiry and investigation committees and all institutional personnel to comply with these procedures and with applicable standards imposed by the governmental or external funding sources. The Research Integrity Officer also is responsible for maintaining files of all documents and evidence as well as for the confidentiality, insofar as is permitted by the State of Illinois, and the security of the files.

The Research Integrity Officer will report to the ORI as required by regulation and keep the ORI apprised of any developments during the course of the investigation that may affect current or potential DHHS funding for the individual(s) under investigation or that the PHS needs to know to ensure appropriate use of Federal funds and otherwise protect the public interest.

B. COMPLAINANT

The complainant shall have an opportunity to testify before the inquiry and/or investigation committees, to review portions of the inquiry and/or investigation reports pertinent to that testimony, to be informed of the results of the inquiry and/or investigation, and to be protected from retaliation.

The complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with an inquiry or investigation. Allegations of academic research misconduct made in bad faith, having no basis in fact or put forth merely to discredit the respondent, will themselves constitute academic research misconduct, which will be subject to formal review by the Research Integrity Officer as well as the Provost and academic dean of the college wherein the faculty or staff member holds an institutional appointment.

C. RESPONDENT

The respondent shall be informed in writing of the allegations if and when a formal inquiry and/or investigation is initiated; shall be provided with a copy of this policy and informed of the composition of the Inquiry and/or Investigative Committee; and shall be notified in writing of the final determinations and resulting actions as soon as possible
following the conclusion of all formal actions. The Respondent shall also have the opportunity to be interviewed by and to present witnesses and evidence to the inquiry and investigation committees, to be present at an inquiry and/or investigative hearing, to review the inquiry and investigation reports, and to have the assistance of private legal counsel or another advisor during the inquiry and/or investigative hearing. Those serving as Counsel or advisor shall not participate directly in the hearing, but may advise the respondent. Further, the Respondent may write out questions to be asked of witnesses during an inquiry and/or investigation, hear the answer(s), and submit for response any follow-up questions.

The respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry or investigation.

D. INSTITUTIONAL OFFICIAL

In consultation with the Provost, the Research Integrity Officer will appoint inquiry and, if necessary, 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 also ensure that interim administrative actions are taken, as appropriate, to protect Federal funds and guarantee that the purposes of the Federal financial assistance are carried out. The Research Integrity Officer will receive the reports and written comments of the respondent and the complainant, if any are made. The Deciding Official will determine whether to conduct an investigation, or to recommend that sanctions be imposed, or to take appropriate administrative actions [see Section X].

IV. GENERAL POLICIES

A. RESPONSIBILITY TO REPORT MISCONDUCT

All employees or individuals associated with Northeastern Illinois University are required to report observed, suspected, or apparent academic research misconduct to the Research Integrity Officer. If an individual is uncertain whether a suspected incident of misconduct falls within the definition, he or she may call the Research Integrity Officer at (773) 442-4672 to discuss the suspected misconduct informally. If the circumstances described by the individual do not meet the definition of academic research misconduct, the Research Integrity Officer will refer the individual or allegation to other offices or officials with appropriate responsibility for resolving the problem in question.

B. PRELIMINARY ASSESSMENT

Upon receiving an allegation of academic research misconduct, the Research Integrity Officer shall immediately assess the information to determine whether there is sufficient evidence to warrant an inquiry. In assessing the allegation, the Research Integrity Officer also shall determine whether PHS support or PHS applications for funding are involved, and whether the allegation falls under the PHS definition of misconduct in science.

C. COOPERATION WITH INQUIRIES AND INVESTIGATIONS

All Northeastern Illinois University employees shall cooperate with the Research Integrity
Officer in the review of allegations and the conduct of inquiries and investigation. Employees have an obligation to provide relevant evidence to the Research Integrity Officer or other institutional officials on misconduct allegations.

D. PROTECTION OF RESPONDENTS

Inquiries and investigations will be conducted in a manner that will ensure fair treatment to the respondent(s) of the inquiry or investigation and confidentiality to the extent possible, insofar as is permitted by the laws of the State of Illinois, consistent with protecting public health and safety and with carrying out the inquiry or investigation. If the respondent is found not to have committed academic research misconduct and ORI concurs, or if after an allegation of academic research misconduct has been made, there is no inquiry and/or investigation because the Research Integrity Officer or the Deciding Official has determined that none is warranted, after consultation with the respondent the University shall undertake efforts, as it deems appropriate in its sole discretion, to restore the reputation of the respondent.

Institutional employees who are accused of academic research misconduct may at any time consult private legal counsel and/or another member of the university community for personal advice during interviews or meetings on the case, or private legal counsel for personal advice during investigative hearings.

E. PROTECTION OF COMPLAINANTS

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

The Research Integrity Officer and the Affirmative Action Officer will monitor the treatment of individuals who bring allegations of misconduct or inadequate institutional response thereto, or who cooperate in inquiries or investigations. The University is required to protect from retaliatory actions those persons who, in good faith, make allegations. The Research Integrity Officer and the Affirmative Action Officer will ensure that those making an allegation in good faith or cooperating with an inquiry or investigation into an allegation of academic research misconduct will not be retaliated against in the terms and conditions of their employment or other institutional status at Northeastern Illinois University. Instances of apparent retaliation will be reviewed by the Affirmative Action Officer for appropriate action.

If retaliation is confirmed, complainants will be consulted regarding appropriate corrective actions to be taken on their behalf to restore or protect their positions or reputations.

Employees should immediately report any alleged or apparent retaliation to the Affirmative Action Officer.

F. SECURING DATA AND EVIDENCE

The first step after determining that an allegation falls within the definition of academic research misconduct is to sequester all relevant research records and materials. The PHS Office of Research Integrity can provide advice and assistance in this regard. The
Research Integrity Officer must ensure immediate securing of all relevant materials.

Any such actions taken prior to a final determination should be devised and taken so as to create minimal interference with the regular research activities of the respondent and other involved parties.

V. INQUIRY

A. PURPOSE OF THE INQUIRY

Northeastern Illinois University must inquire immediately into an allegation or other evidence of possible academic research misconduct. The purpose of the inquiry is to evaluate the situation to determine whether there is sufficient evidence of possible academic research misconduct to warrant an investigation. The purpose of the inquiry is not to reach a final conclusion whether misconduct occurred or who was responsible.

The findings of the inquiry must be set forth in an inquiry report.

B. APPOINTMENT OF INQUIRY COMMITTEE If the Research Integrity Officer decides that an inquiry should be conducted, he/she shall initiate the process by consulting with the Provost appointing an inquiry committee within ten days of determining that an inquiry is necessary. The inquiry committee will consist of two or more individuals who have no real or apparent conflicts of interest in the case, are unbiased, and have appropriate qualifications to evaluate the issues raised and to interview the principals and the key witnesses as well as to conduct the inquiry. Individuals chosen to serve on the inquiry committee may be scientists, subject matter experts, or other qualified persons, and they may be from inside or outside the University.

The Research Integrity Officer will notify the respondent of the proposed committee membership within ten days of making the determination that an inquiry is required. If the respondent submits a written objection to any appointed member of the inquiry committee based on bias or conflict of interest within five working days of receiving the names of the inquiry committee members, the Research Integrity Officer will determine whether to replace the challenged member with a qualified substitute. The respondent retains the right to lodge a written objection to any substitute within two working days of receipt of notice.

C. CHARGE TO INQUIRY COMMITTEE

The charge to the inquiry committee should specifically limit its scope, as required by the PHS regulation, to evaluating the facts to determine only whether there is sufficient evidence of academic research misconduct to warrant an investigation.

The Research Integrity Officer will define the subject matter of the inquiry in a written charge to the inquiry committee that describes the allegations and any related issues identified during the allegation assessment, defines academic research misconduct, and identifies the name of the respondent. The charge will state that the purpose of the inquiry committee is to make a preliminary evaluation of the evidence and testimony of the respondent, complainant, and key witnesses to determine only whether there is sufficient evidence of academic research misconduct to warrant an investigation.
purpose is not to determine whether academic research misconduct definitely occurred or who was responsible.

A copy of the charge to the inquiry committee shall be sent to the respondent.

At the inquiry committee’s first meeting, the Research Integrity Officer will review the charge with the committee and will discuss the allegation(s), any related issues, and the appropriate procedures for conducting the inquiry. It is the responsibility of the Research Integrity Officer to assist the inquiry committee with plans for organizing the inquiry and to answer any questions raised by the inquiry committee members. The Research Integrity Officer and University Legal Counsel will be present or available throughout the inquiry process to advise the inquiry committee as needed. The committee also has the right to consult any additional experts it deems necessary.

During the inquiry, if additional information becomes available that substantially changes the subject matter of the inquiry or would suggest additional respondents or require a modification of the initial charge, the inquiry 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, to modify the original charge, or to initiate a new inquiry rather than continuing the one currently underway. The respondent must be notified of any significant change.

D. INQUIRY PROCESS

An inquiry normally will involve interviewing the complainant, the respondent, all the key witnesses, as well as examining relevant research records and materials. At the beginning of the inquiry process, the inquiry committee normally will invite the respondent to prepare a brief written response to the allegations received from the complainant. The scope of the inquiry does not include deciding whether misconduct occurred or conducting exhaustive interviews and analyses.

E. TIME LIMIT FOR COMPLETING INQUIRY REPORT

The inquiry committee normally will complete the inquiry and submit its report in writing to the Research Integrity Officer and the respondent no more than 60 calendar days following the initiation of the inquiry process, with the initiation being defined as the date upon which the committee first meets. If the Research Integrity Officer approves an extension of this time limit, the reason for the extension will be entered into the records of the case and the report. The respondent and complainant also will be notified of the extension and its justification.

F. INQUIRY REPORT CONTENTS

A written report shall be prepared that states: the name and title of each of the inquiry committee members and additional experts consulted, if any; the allegations; the PHS or other external support; the initial charge; a summary of the inquiry process used; a list of the research records reviewed; summaries of 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; the comments to the first draft from the complainant and respondent; and the final report. University legal counsel will review the report for legal sufficiency.
G. COMMENTS BY RESPONDENT AND COMPLAINANT

The individual(s) against whom the allegation was made is (are) to be given a copy of the report by the Research Integrity Officer. The person(s) who raised the allegation will be provided with only those sections of the report that address their role and opinions in the inquiry as well as a summary of the inquiry findings. Any comments that the complainant and/or the respondent submits on the report will become part of the inquiry record.

1. Confidentiality

The Research Integrity Officer may establish reasonable conditions for review to protect the confidentiality of the draft report insofar as is permitted by the laws of the State of Illinois.

2. Receipt of Comments

Within fourteen calendar days of their receipt of the draft report, the complainant and the respondent will provide their comments. Any comments that the complainant or respondent submit on the draft report will become part of the final inquiry report and record. Based on the comments received, the inquiry committee may revise the report as appropriate within ten days of receipt of comments.

H. INQUIRY DECISION AND NOTIFICATION

After receipt of both the final inquiry report and the written comments of the respondent and the complainant, if any are made, a determination shall be made whether to conduct an investigation, drop the matter, or to take some other appropriate action(s).

1. Decision by Deciding Official

The Research Integrity Officer will transmit the final report and any comments to the Deciding Official, who will make the determination of whether findings from the inquiry provide sufficient evidence of possible academic research misconduct to justify conducting an investigation. The inquiry process is completed when the Deciding Official makes this determination.

2. Notification

Within five (5) working days, the Research Integrity Officer will notify both the respondent and the complainant in writing of the Deciding Official's decision of whether to proceed to an investigation and will remind them of their obligation to cooperate in the event that an investigation is opened. The Research Integrity Officer will also notify all appropriate institutional officials of the Deciding Official's decision.
VI. 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 academic research misconduct has been committed, and if so, the responsible person and the seriousness of the misconduct. The investigation also will determine whether there are additional instances of possible academic research 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 subject or the general public policy, clinical practice, or public health practice. The findings of the investigation will be set forth in an investigation report.

B. SEQUESTRATION OF THE RESEARCH RECORDS

The Research Integrity Officer will immediately sequester any additional pertinent research records not previously sequestered during the inquiry process. This sequestration should occur before or at the time the respondent is notified that an investigation has begun. The need for additional sequestration of records may occur for any number or reasons; for example, the University's decision to investigate additional allegations not considered during the inquiry stage may require additional documentation contained within the research records, or the inquiry process may identify additional research records that will be needed during the investigation.

Any such administrative actions taken prior to a final determination should be devised and taken so as to create minimal interference with the regular research activities of the respondent and other involved parties.

C. APPOINTMENT OF THE INVESTIGATION COMMITTEE

Within ten days of the notification to the respondent that an investigation will be conducted, or as soon thereafter as practicable, the Research Integrity Officer, in consultation with other University officials, as appropriate, will appoint an investigation committee. The investigation committee should consist of at least three individuals who do not have any real or apparent conflicts of interest with the respondent or the case in question. The members of the investigation committee must have the necessary expertise to examine the evidence, interview the principals and key witnesses, and conduct the investigation. The investigation committee members may be scientists, subject matter experts, or other qualified persons, and they may be from inside or outside the University.

The Research Integrity Officer will notify the respondent of the proposed investigation committee membership within ten days of the time of the notification to the respondent that an investigation will be conducted. If within five working days of receiving the names of the investigation committee members, the respondent submits a written objection to any appointed member of the investigation committee based on bias or conflict of interest, the Research Integrity Officer will determine within five working days whether to replace the challenged member with a qualified substitute. Substitute members may also be challenged by the respondent within two working days.
D. CHARGE TO INVESTIGATION 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 allegation(s) and related issues identified during the inquiry, defines academic research misconduct, and identifies the complainant and the respondent. The charge will state that the committee is to evaluate the evidence and testimony of the respondent, the complainant, and key witnesses to determine whether there is clear and convincing evidence that academic research misconduct occurred and, if so, to what extent, who was responsible, and its seriousness.

During the investigation, if additional information becomes available that substantially changes the subject matter of the investigation or would suggest additional respondents or a modification of the original charge, 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, to modify the original charge, and to initiate a new inquiry or continue the investigation underway. The respondent must be notified immediately of any significant change.

A copy of the charge will be sent to the respondent.

2. First Meeting

The Research Integrity Officer, with the assistance of University Legal Counsel, will convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for conducting the investigation. It is the responsibility of the Research Integrity Officer to assist the investigation committee with plans for organizing the investigation and to answer any questions raised by the investigation committee members. The Research Integrity Officer and University Legal Counsel will be present or available throughout the investigation process to advise the investigation 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.

The investigation normally will include examination of all documentation including, but not necessarily limited to, relevant research data materials, proposals, publications, correspondence, memoranda, and notes of telephone calls. Whenever possible, interviews should be conducted of all individuals involved either in making the allegation or against whom the allegation is made, as well as other individuals who might have information regarding key aspects of the allegations. All interviews should be tape-recorded. Copies of these interview tapes should be prepared, provided to the respondent, and included as part of the investigatory file. A copy of the tape of his/her
interview may be provided to the interviewed party upon request.

F. TIME LIMIT FOR COMPLETING THE INVESTIGATION REPORT

An investigation should ordinarily be completed within 120 days of its initiation, with the initiation being defined as the date upon which the committee first meets. This includes time for conducting the investigation—including providing the respondent with the opportunity to confront and question all witnesses, preparing the report of findings, making the report available for comment by the subjects of the investigation, as well as submitting the report to the Research Integrity Officer and the ORI.

G. THE INVESTIGATION REPORT

The final report, if submitted to ORI, must state the policies and procedures under which the investigation was conducted, describe how and from whom information relevant to the investigation was obtained, state the findings, and explain the basis for the findings. Any final report will include the actual text or an accurate summary of the views of any individual(s) found to have engaged in misconduct, as well as a description of any intermediate administrative actions taken by the University.

H. COMMENTS ON THE DRAFT INVESTIGATION REPORT

1. Respondent

The Research Integrity Officer will provide the respondent with a copy of the draft investigation report for comment and rebuttal. The respondent will be allowed fourteen days to review and to comment on the draft report. The respondent's comments will be attached to the final report. In addition to all the other evidence, this report should take into account the respondent's comments.

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 report should be modified in its final version, as appropriate, based on the complainant's comments.

3. Confidentiality

In distributing the draft report, or portions thereof, to the respondent and the complainant, the Research Integrity Officer will inform the recipient of the confidentiality under which the draft report is made available. The Research Integrity Officer may establish reasonable conditions to ensure such confidentiality insofar as permitted by the law of the State of Illinois. For example, the Research Integrity Officer may request that the recipient sign a confidentiality statement or to come to his or her office to review the report.
I. TRANSMITTAL OF THE FINAL INVESTIGATION REPORT

After comments have been received and the necessary changes, if any, 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 Deciding Official, through the Research Integrity Officer.

J. DECISION BY INSTITUTIONAL OFFICIAL

Based on the findings presented in the final investigation report, the Deciding Official will determine whether misconduct has occurred, and what sanctions or administrative actions are to be undertaken [see Section X]. If this determination varies from that of the investigation committee, the Deciding Official will explain in detail the basis for rendering a decision different from that of the investigation committee in the University's letter transmitting the report to ORI. The Deciding Official's explanation should be consistent with the PHS definition of scientific misconduct, the institution's policies and procedures, and the evidence reviewed and analyzed by the investigation committee. The Deciding Official may also return the report to the investigation committee with a request for further fact-finding or analysis. The Deciding Official's determination, together with the investigation committee's report, constitutes the final investigation report for purposes of ORI review.

VII. NOTIFICATION AND REPORTING REQUIREMENTS

A. REPORTING TO ORI

1. The University's decision to initiate an investigation must be reported in writing to the Director of ORI where applicable, 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, and the PHS (or other Federal agency) applications or grant number(s) involved. ORI also must be notified of the final outcome of the investigation. Any significant variations from the provisions of these institutional policies and procedures should be explained in any reports submitted to the ORI.

2. If the University plans to terminate an inquiry or investigation for any reason without completing all relevant Federal requirements, the Research Integrity Officer shall submit a report of the planned termination to ORI, including a description of the reasons for the termination. ORI will then decide whether further investigation should be undertaken.

3. If the University determines that it will not be able to complete the investigation in 120 days, the Research Integrity Officer shall submit to the ORI a written request for an extension and an explanation for the delay that includes an interim report on the progress to date and an estimate for the date of completion of the report and other necessary steps. If the request is granted, the Research Integrity Officer will file periodic progress reports as requested by the ORI. If satisfactory progress is not made in the University's investigation, the ORI may undertake an investigation of its own or take other steps as appropriate.
4. When Public Health Service funding or applications for funding are involved and an admission of academic research misconduct is made, the Research Integrity Officer must notify the Office of Research Integrity immediately 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 University will not accept an admission of academic research misconduct as a basis for closing a case or not undertaking an investigation without prior approval by ORI.

5. The Research Integrity Officer shall keep ORI apprised of any developments during the course of the investigation that disclose facts possibly affecting current or potential Department of Health and Human Services (or other Federal agency) funding for the individual(s) under investigation or that the PHS (or other Federal agency) needs to know to ensure appropriate use of Federal funds and otherwise protect the public interest.

The Research Integrity Officer shall notify ORI at any stage of the inquiry or investigation when:

(a) there is an immediate health hazard involved;
(b) there is an immediate need to protect Federal funds or equipment
(c) there is an immediate need to protect the interests of the person(s) making the allegations or of the individual(s) who is(are) the subject of the allegations as well as his/her co-investigators and associates, if any;
(d) it is probable that the alleged incident is going to be reported publicly; or
(e) there is a reasonable indication of possible criminal violation.

In these instances, the Research Integrity Officer must inform ORI within 24 hours of obtaining that information.

B. NOTIFICATION OF OTHER INVOLVED INDIVIDUALS OR PARTIES

When a final decision on the case has been reached by the Deciding Official, the Research Integrity Officer will notify both the respondent and the complainant in writing. In addition, the Research Integrity Officer 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 concerned 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 or sponsoring agencies.

VIII. OTHER CONSIDERATIONS

A. TERMINATION OF INSTITUTIONAL EMPLOYMENT OR RESIGNATION PRIOR TO COMPLETING INQUIRY OR INVESTIGATION
The termination of employment at Northeastern Illinois University of the respondent, by resignation or otherwise, before or after an allegation of possible academic research misconduct has been reported, will not preclude or terminate the academic research misconduct procedures.

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 the resulting effect on its review of all the evidence.

B. RESTORATION OF REPUTATIONS

If the inquiry or investigation results in the conclusion that clear and convincing evidence of academic research misconduct has not been found, all persons who have been interviewed or otherwise informed of the charge will be notified in writing that the charges have been investigated and that the Committee has been unable to find clear and convincing evidence of academic research misconduct. Respondents in such cases should be consulted regarding other actions that might be taken on their behalf to restore their reputations.

C. INTERIM ADMINISTRATIVE ACTIONS

The Research Integrity Officer, will take interim administrative actions, as appropriate, to protect Federal funds and insure that the purposes of the Federal financial assistance are carried out.

IX. RETENTION OF RECORDS

Sufficiently detailed documentation of inquiries that do not proceed to an investigation shall be maintained for at least three years after the termination of the inquiry to permit later assessment of the case.

After completion of a case and all ensuing related actions, the Research Integrity Officer will prepare a complete file, including the original records of any inquiry or investigation, and copies of all documents and other materials furnished to the Research Integrity Officer or committees. The Research Integrity Officer will retain the file for three years from the date the University closed the case, or if the inquiry or investigation is reported to ORI, from the date that ORI completes its review of the case and all related actions. Access to materials in the file shall be available to the ORI or other authorized personnel upon request.

The respondent's permanent file shall contain a copy of the initial allegation and of the final report.

X. SANCTIONS AND ADMINISTRATIVE ACTIONS

When an allegation of misconduct has been substantiated, Northeastern Illinois University shall recommend appropriate sanctions through the procedures specified by
the collective bargaining agreement or, in the case of non-bargaining unit members, by
the applicable procedure.

If the Deciding Official determines that the alleged misconduct is substantiated by the
findings, the Deciding Official, after consultation with the Research Integrity Officer, will
decide on the appropriate sanctions to be recommended through the procedures
specified in the collective bargaining agreement. The possible actions may include:

1. Restitution of funds to any sponsoring agency as appropriate;

2. Withdrawal or correction of all pending or published abstracts and paper
emanating from the research in question;

3. Removal from the particular project, letter of reprimand, special
monitoring of future work, probation, suspension, salary reduction, or
initiation of steps leading to possible termination of employment.