



RULES AND PROCEDURES FOR RESPONDING TO ALLEGATIONS OF RESEARCH MISCONDUCT

RESPONSIBLE ADMINISTRATOR: OFFICE OF THE VICE PRESIDENT FOR RESEARCH
RESPONSIBLE OFFICE: OFFICE OF RESEARCH INTEGRITY
ORIGINALLY ISSUES: 2017
APPROVALS:

APPROVED BY:

1/24/2022

Vice President for Research

Date

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1. AUTHORITY

The Research Misconduct Policy establishes the authority of the University of Nevada, Las Vegas ("UNLV" or "University") to respond to allegations of research misconduct.

2. PURPOSE & APPLICATIONS

2.1 Purpose

The purpose of these Rules and Procedures is to (1) describe the procedures for responding to allegations of research misconduct, and (2) comply with federal requirements for responding to allegations of research misconduct. As required by 42 CFR § 93, UNLV must have written policies and procedures for responding to allegations of research misconduct and reporting information about that response to the U.S. Department of Health and Human Service's ("HHS") Office of Research Integrity ("ORI"). UNLV, in compliance with state and Nevada System of Higher Education policies, applies federal research misconduct policies to all research, whether funded or not.

2.2 Applicability

The UNLV Research Misconduct Policy and these Rules and Procedures apply to any individual paid by, holding appointment from, or affiliated with the University, such as faculty members, post-doctoral scholars, trainees, technicians and other professional staff members, guest researchers, and students who are engaged in the conduct of research, whether or not the Research is funded. These individuals are subject to this Policy regardless of whether their Research is conducted on the main University campus, at the Shadow Lane campus, at the Paradise campus or at any UNLV affiliated facilities and campuses located in Las Vegas U.S. or elsewhere in the U.S. or internationally. Research Misconduct of students shall be adjudicated through UNLV's Student Conduct Code process, unless they are paid on a federally funded project.

3. ROLES AND RESPONSIBILITIES

3.1 Administrative Officer

The University's Administrative Officer ("AO") as defined in the Nevada System of Higher Education (NSHE) Code is the Institutional Official responsible for receiving formal reports of research misconduct. At UNLV, the Vice President for Research and Economic Development ("VPRED") may be appointed to serve as the AO in relation to research misconduct allegations. If warranted, the VPRED is responsible for ensuring that Chapter 6 procedures under the NSHE Code will be adhered to.

3.2 Vice President for Research

The VPRED receives formal reports of allegations of research misconduct in writing. The VPRED appoints the Executive Director, Office of Research Integrity, or designee, as the Research Integrity Officer ("RIO") who will have primary responsibility for implementation of the institution's policies and procedures on research misconduct.

After the alleged misconduct is assessed by the RIO, the VPRED receives the inquiry report. If applicable, and after consulting with the RIO and/or other institutional officials, the VPRED decides whether an investigation is warranted under the criteria in 42 CFR Â§ 93.307(d). When federal funding is involved, any finding where an investigation is warranted must be made in writing by the VPRED and must be provided to ORI, together with a copy of the inquiry report meeting the requirements of 42 CFR Â§ 93.309, within 30 days of the finding. If it is found that an investigation is warranted, the VPRED will ensure that the matter is concurrently processed in accordance with Chapter 6.

If it is found that an investigation is not warranted, the VPRED and the RIO will ensure that detailed documentation of the inquiry is retained for at least 7 years after termination of the inquiry, so that ORI may assess the reasons why the institution decided not to conduct an investigation.

3.3 Research Integrity Officer

The responsibilities of the RIO include the following duties related to research misconduct proceedings:

- Consult confidentially with persons uncertain about whether to submit an allegation of research misconduct;
- Assess each allegation of research misconduct policy to determine whether it falls within the definition of research misconduct and warrants an inquiry;
- As necessary, take interim action and notify ORI of special circumstances;
- Sequester research data and evidence pertinent to the allegation of research misconduct and maintain it securely in accordance with this policy and applicable law and regulation;
- Provide confidentiality to those involved in the research misconduct proceeding as required by 42 CFR § 93.108, other applicable law, and institutional policy;
- Notify the respondent and provide opportunities for him/her to review/comment/respond to allegations, evidence, and committee reports;
- Inform respondents, complainants, and witnesses of the procedural steps in the research misconduct proceeding;
- Determine whether each person involved in handling an allegation of research misconduct has an unresolved personal, professional, or financial conflict of interest and take appropriate action, including recusal, to ensure that no person with such conflict is involved in the research misconduct proceeding;
- In cooperation with other institutional officials, take all reasonable and practical steps to protect or restore the positions and reputations of good faith complainants, witnesses, and committee members and counter potential or actual retaliation against them by respondents or other institutional members;
- Keep the VPRED, the President, and others who need to know apprised of the progress of the review of the allegation of research misconduct;
- Notify and make reports to ORI as required by 42 CFR § 93;
- Ensure that administrative actions taken by the institution and ORI are enforced and take appropriate action to notify other involved parties, such as sponsors, law enforcement agencies, professional societies, and licensing boards of those actions;
- Maintain records of the research misconduct proceeding and make them available to ORI.

3.4 Complainant

Formal reports of an allegation must be filed in writing with the Vice President for Research and Economic Development and must contain the elements of information as required in NSHE Code 6.8.1. The complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with the inquiry and

investigation. As a matter of good practice, the complainant should be interviewed at the inquiry stage and given the transcript or recording of the interview, if applicable, for correction. The complainant must be interviewed during an investigation, and be given the transcript or recording of the interview for correction.

If a complainant is unsure whether a suspected incident falls within the definition of research misconduct, he or she should contact the VPRED to discuss the suspected misconduct informally. If the circumstances described do not meet the definition of research misconduct, the VPRED may refer the complainant or allegation to other offices or officials with responsibility for resolving the matter.

3.5 Respondent

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

- A good faith effort from the RIO to notify the respondent in writing at the time of or before beginning an inquiry;
- An opportunity to comment on the inquiry report and have his/her comments attached to the report;
- Be notified of the outcome of the inquiry, and receive a copy of the inquiry report that includes a copy of, or refers to 42 CFR § 93 and the institution's policies and procedures on research misconduct;
- Be notified in writing of the allegations to be investigated within a reasonable time after the determination that an investigation is warranted, but before the investigation begins (within 30 days after the institution decides to begin an investigation), and be notified in writing of any new allegations, not addressed in the inquiry or in the initial notice of investigation, within a reasonable time after the determination to pursue those allegations;
- Be interviewed during the investigation, have the opportunity to correct the recording or transcript, if applicable, and have the corrected recording or transcript included in the record of the investigation;
- Have interviewed during the investigation any witness who has been reasonably identified by the respondent as having information on relevant aspects of the investigation, have the recording or transcript, if applicable, provided to the witness for correction, and have the corrected recording or transcript included in the record of investigation;
- Receive a copy of the draft investigation report and, concurrently, a copy of or supervised access to the evidence on which the report is based, and be notified that any comments must be submitted within 15 calendar days of the date on which the copy was received and that the comments will be considered by the institution and addressed in the final report.

3.6 Deciding Official

At UNLV, the Deciding Official ("DO") is the President. The President will receive the findings of facts and recommendations. The President then shall reach a written decision within a reasonable time.

4. PROCEDURES

4.1 General Principles

4.1.1 Responsibility to Report Misconduct

All institutional members will report observed, suspected, or apparent research misconduct to the VPRED. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may meet with or contact the VPRED or the RIO to discuss the suspected research misconduct informally, which may include discussing it anonymously and/or hypothetically. If the circumstances described by the individual do not meet the definition of research misconduct, the VPRED may refer the individual or allegation to other offices or officials with responsibility for resolving the matter.

At any time, an institutional member may have discussions and consultations about concerns of possible misconduct with the VPRED or the RIO and will be counseled about appropriate procedures for reporting allegations.

4.1.2 Cooperation with Research Misconduct Proceedings

Institutional members will cooperate with the RIO and other institutional officials in the review of allegations and the conduct of inquiries and investigations. Institutional members, including respondents, have an obligation to provide evidence relevant to research misconduct allegations to the RIO or other institutional officials.

4.1.3 Confidentiality

Allegations of research misconduct and proceedings conducted under the UNLV Research Misconduct Policy may be damaging to the professional reputations of persons involved. Accordingly, the maintenance of confidentiality is the guiding principle for this process, to protect both the complainant and the respondent. Persons subject to this policy who make, receive, or learn of an allegation of research misconduct shall protect, to the maximum extent possible, the confidentiality of information regarding the complainant, the respondent, and other affected individuals. The RIO shall, as required by 42 CFR Â§ 93.108: (1) limit disclosure of the identity of respondents and complainants to those who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding; and (2) except as otherwise prescribed by law, limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding.

All records dealing with an allegation, its review, and its disposition shall be treated in accordance with Sections 6.14 and 6.15 of the Nevada System of Higher Education Code.

The RIO should use written confidentiality agreements or other mechanisms to ensure that the recipient does not make any further disclosure of identifying information.

4.1.4 Protecting complainants, witnesses, and committee members

Institutional members may not retaliate in any way against complainants, witnesses, or committee members. Institutional members should immediately report any alleged or apparent retaliation against complainants, witnesses or committee members to the RIO, who shall review the matter and, as necessary, make all reasonable and practical efforts to counter any potential or actual retaliation and protect and restore the position and reputation of the person against whom the retaliation is directed.

4.1.5 Protecting the Respondent

As requested and as appropriate, the RIO and other institutional officials shall make all reasonable and practical efforts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct is made.

During the research misconduct inquiry and/or investigation, the RIO is responsible for ensuring that respondents receive all the notices and opportunities provided for in 42

CFR § 93 and/or the policies and procedures of the institution. Respondents may consult with a personal adviser (who is not a principal or witness in the case) to seek advice and may bring the counsel or personal adviser to interviews or meetings on the case.

4.1.6 Interim Administrative Actions and Notifying ORI of Special Circumstances.

Throughout the research misconduct proceeding, the RIO will review the situation to determine if there is any threat of harm to public health, federal funds and equipment, or the integrity of the Public Health Service ("PHS") supported research process. In the event of such a threat, the RIO will, in consultation with other institutional officials and ORI, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of federal

funds and equipment, reassignment of personnel or of the responsibility for the handling of federal funds and equipment, additional review of research data and results or delaying publication.

4.1.7 Interim Administrative Actions and Notifying ORI of Special Circumstances Continued

The RIO shall, at any time during a research misconduct proceeding, notify ORI immediately if he/she has reason to believe that any of the following conditions exist:

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

4.2 Conducting the Assessment, Inquiry, and Investigation

Allegations of misconduct shall be dealt with in strict accordance with the provisions of Chapter 6 of the NSHE Code.

The following procedural statements incorporate the appropriate sections of the NSHE Code in delineating the University's administrative process: for the reporting of allegations of research misconduct; for the fair, swift, and accurate consideration of such allegations; and for initiating the actions recommended after the consideration of allegations is complete. These statements further incorporate the practices and procedures required under the compliance rules issued by the applicable federal regulatory and federal funding agencies.

1. Assessment: Upon receiving an allegation of research misconduct, the RIO will immediately assess the allegation to determine whether there is credible and specific evidence to warrant an inquiry; whether federal support or applications for funding are involved; and whether the allegation falls within the definition of research misconduct in 42 CFR § 93 .103 or within the jurisdiction outlined in UNLV's Research Misconduct Policy. An inquiry must be conducted if these criteria are met. The assessment period should be brief, preferably concluded within 7 calendar days. In conducting the assessment, the RIO need not interview the complainant, respondent, or other witnesses, or gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified.

2. Inquiry: The inquiry is the initial step after the allegation has been assessed. An inquiry consists of preliminary information-gathering and preliminary fact-finding to determine whether the allegation or apparent instance of misconduct warrants an investigation. It is an informal process intended to assess the probable validity of the allegation. It is performed by the VPRED, or designee, including the RIO, to whom the allegation was made. He/she may seek the advice and assistance from UNLV's Office of Research Integrity, the RIO, subject matter experts, and/or scientific peers of the individual about whom the allegations are made. An inquiry does not require a full review of all the evidence related to the allegation. The RIO has the authority and obligation to sequester evidence that may be germane to an allegation of misconduct under review. The RIO, in consultation with other institutional officials as appropriate, may appoint an inquiry committee and committee chair ("Inquiry Committee"), as soon after the initiation of the inquiry as is practicable. At the time of or before beginning an inquiry, the RIO must make a good faith effort to notify the respondent in writing, if the respondent is known. If the inquiry subsequently identifies additional respondents, they must be notified in writing. On or before the date on which the respondent is notified, or the inquiry begins, whichever is earlier, the RIO must take all reasonable and practical steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding; inventory

the records and evidence and sequester them in a secure manner, except that where the research records or evidence encompass scientific instruments shared by a number of users. Custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. The RIO may consult with ORI for advice and assistance in this regard.

If an Inquiry Committee is convened then at the committee's first meeting, the RIO 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 RIO will be present or available throughout the inquiry to advise the committee as needed. The Inquiry Committee will normally interview the complainant, the respondent and key witnesses, as well as examine relevant research records and materials. The Inquiry Committee will then evaluate the evidence, including the testimony obtained during the inquiry. After consultation with the RIO, the committee members will decide whether an investigation is warranted based on the criteria in the institutional policy and 42 CFR Â§ 93.307(d). The scope of the inquiry is not required to, and does not normally include, deciding whether misconduct definitely occurred, determining definitely who committed the research misconduct or conducting exhaustive interviews and analyses. However, if a legally sufficient admission of research misconduct is made by the respondent, misconduct may be determined at the inquiry stage if all relevant issues are resolved. In that case, the institution shall promptly consult with ORI, if applicable, to determine the next steps that should be taken.

The inquiry, including preparation of the final inquiry report and the decision of the VPRED or his/her designee on whether an investigation is warranted, must be completed within 60 calendar days of initiation of the inquiry, unless the RIO determines that circumstances clearly warrant a longer period. If the RIO approves an extension, the inquiry record must include documentation of the reasons for exceeding the 60-day period.

A written inquiry report must be prepared that includes the following information: (1) the name and position of the respondent; (2) a description of the allegations of research misconduct; (3) the PHS support, including, for example, grant numbers, grant applications, contracts and publications listing PHS support if applicable; (4) the basis for recommending or not recommending that the allegations warrant an investigation; (5) any comments on the draft report by the respondent or complainant. If an Inquiry Committee has been utilized, the inquiry report should include the names and titles of the committee members and experts who conducted the inquiry; a summary of the inquiry process used; a list of the research records reviewed; summaries of any interviews; and whether any other actions should be taken if an investigation is not recommended.

The Office of General Counsel should review the report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the Inquiry Committee.

The RIO shall notify the respondent whether the inquiry found an investigation to be warranted, include a copy of the draft inquiry report for comment within 7 calendar days and include a copy of or refer to 42 CFR § 93 and the institution's policies and procedures on research misconduct.

Any comments that are submitted by the respondent or complainant will be attached to the final inquiry report. Based on the comments, the Inquiry Committee may revise the draft report as appropriate and prepare it in final form. The RIO and/or the committee will deliver the final report to the VPRED. In addition, the President, the Executive Vice President and Provost, General Counsel, and the respondent's supervisors will receive copies of the final inquiry report. A confidentiality statement must be included on the report.

The RIO will ensure that all reporting requirements to the federal Office of Research Integrity (ORI) are met, if applicable. The RIO will be responsible for maintaining files of all documents and evidence and for the confidentiality and security of the files.

3. Investigation: An investigation is a formal development, examination, and evaluation of a factual record to determine whether misconduct has occurred and, if so, its extent. If on the basis of the inquiry, it appears that an investigation is warranted, the VPRED will initiate a formal investigation. The following steps shall be undertaken:

The VPRED, as the Administrative Officer, shall initiate the investigation of the report of research misconduct pursuant to the provisions in NSHE Code 6.8.2, with the purpose of developing a factual record by exploring the allegations in detail and examining the evidence in depth. This applies only to allegations of research misconduct that occurred within six years of the date the institution or HHS received the allegation. The VPRED will recommend findings on whether research misconduct has been committed, by whom, and to what extent.

A finding of research misconduct requires that:

- The misconduct was committed intentionally, knowingly, or recklessly; and
- The allegation was proven by a preponderance of evidence; and,
- There was a significant departure from accepted practices of the relevant research community.

The findings of the investigation must be set forth in an investigation report. The RIO is 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, if applicable, including 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;
- 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.

The investigation shall be completed within 60 calendar days. On or before the date on which the investigation begins, the RIO must notify the respondent in writing of the allegations to be investigated. The RIO must also give the respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of the investigation.

The RIO will, prior to notifying the respondent of the allegations, take all reasonable and practical steps to obtain custody of, and sequester in a secure manner, all research records and evidence needed to conduct the research misconduct proceeding that were not previously sequestered during the inquiry. The need for additional sequestration of records for the investigation may occur for any number of reasons, including the institution's decision to investigate additional allegations not considered during the inquiry stage or the identification of records during the inquiry process that had not been previously secured. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

The RIO 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. If federally funded, the respondent will be allowed 7 calendar days from the date he/she received the draft report to submit comments to the RIO. The respondent's comments must be included and considered in the final report.

The RIO will finalize the draft investigation report, ensuring that the respondent's comments are included and considered, and transmit the final investigation report to the VPRED, who will determine in writing: (1) whether

he/she accepts the investigation report, and its findings, and (2) whether additional steps must be undertaken pursuant to NSHE Code Sections 6.8 - 6.13.

All procedures concerning investigation, findings, disposition, and appeal shall be in strict accordance with the appropriate provisions of Chapter 6 of the NSHE Code. The following is a summary of pertinent sections of Chapter 6 that may apply:

- a) If deemed appropriate to do so, the VPRED, with the approval of the President, may informally resolve the complaint. NSHE Code 6.8.2 (c).
- b) Within 5 calendar days of the completion of the investigation, and if the complaint is not informally resolved, the VPRED shall recommend to the President whether the complaint should proceed to a hearing and, if a hearing is recommended, the VPRED shall recommend whether a general or special hearing be held. NSHE Code 6.8.2 (d).
- c) A hearing shall be held whenever the President accepts the VPRED's recommendation to that effect, or does not accept a contrary recommendation from the VPRED. The President shall decide the kind of hearing to be held, as authorized under Section 6.8.3 of the Code. NSHE Code 6.8.2 (e).
- d) If the decision is made to proceed with a general or special hearing, the VPRED shall schedule the hearing in accordance with the NSHE Code section 6.9. The VPRED shall also notify the Office of Sponsored Programs of the pending action, so that any required notifications to funding agencies may be accomplished.
- e) In the case of a general hearing, a general hearing officer shall be appointed as specified in the NSHE Code 6.10. In the case of a special hearing, the hearing officer and committee shall be appointed as specified in the NSHE Code 6.11. For hearings dealing with allegations of research misconduct, the following special considerations shall be made concerning the selection of the hearing committee.
 - i. Care must be taken to ensure that there are no real or apparent personal, professional, or financial conflicts of interest on the part of the committee members.
 - ii. In the case of a special hearing, the special hearing committee should include individuals with the appropriate scientific expertise in the discipline in question in order to evaluate the evidence and issues related to the allegation.
- f) The President shall review the findings of facts and recommendations of the general hearing officer or special hearing officer and special hearing committee and may: (1) dismiss the allegation; (2) affirm the recommended sanction; (3) impose a lesser sanction than recommended; (4) impose a greater sanction than recommended; (5) order a new hearing. NSHE Code Section 6.13.1.

4.2.1 Appeals

Appeals from the decision of the President must be filed by the respondent with 7 calendar days of the receipt of the decision. The Appeal must be in writing and shall be directed to the administrative officer. Requirements for appeals and decisions for appeals are described in the NSHE Code Title 2, Chapter 6, sections 6.13.1 and 6.13.2.

4.2.2 Notice to ORI of Institutional Finding and Actions

Unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation submit the following to ORI: (1) a copy of the final investigation report with all attachments; (2) a statement of whether the institution accepts the findings of the investigation report; (3) a statement of whether the institution found misconduct and, if so, who committed the misconduct; and (4) a description of any pending or completed administrative actions against the respondent.

After informing ORI, the VPRED 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 RIO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

4.2.3 Maintaining Records for Review by ORI

The RIO 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 RIO 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.

4.3 Completion of Cases; Reporting Premature Closures to ORI

Generally, all inquiries and investigations will be carried through to completion and all significant issues will be pursued diligently. The RIO must notify ORI in advance if there are plans to close a case at the inquiry, investigation, or appeal stage on the basis that respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except: (1) closing of a case at the inquiry stage on the basis that an investigation is not warranted; or, (2) a finding of no misconduct at the investigation stage, which must be reported to ORI, as prescribed in this policy and 42 CFR § 93.315

4.4 Institutional Sanctions and Administrative Actions

Section 6.2.1 of the NSHE Code cites grounds for instituting disciplinary action against "all members of the faculty of the System." Specific to this policy is the prohibition against "acts of academic dishonesty, including but not limited to cheating, plagiarism, falsifying research data or results, or assisting others to do the same." The following sanctions are applicable to members of the community of the Nevada System of Higher Education for conduct prohibited by Section 6.2 of the NSHE Code. Depending on the seriousness of the research misconduct, these sanctions may be imposed in any order:

Warning: Notice, oral or written, that continuation or repetition of prohibited conduct may be the cause for more severe disciplinary action.

Reprimand: A formal censure or severe reproof administered in writing to a person engaging in prohibited conduct.

Restitution: The requirement to reimburse the legal owners for a loss due to defacement, damage, fraud, theft, or misappropriation of property. The failure to make restitution shall be the cause for more severe disciplinary action.

Reduction in pay: A reduction in pay may be imposed at any time during the term of an employment contract upon compliance with the procedures established in NSHE Code Chapter 6.

Suspension: Exclusion from assigned duties for one or more work weeks without pay, as set forth in a written notice to the employee.

Termination: Termination of employment for cause (NSHE Code Section 6.3).

If the President determines that research misconduct is substantiated by the findings of facts, the VPRED will decide on additional appropriate administrative actions to be taken, after consultation with the RIO. The administrative actions may include:

- Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;
- Removal of the responsible person from the particular project, additional mandatory training in responsible conduct of research for the respondent and any individuals supervised by the respondent, and special monitoring of future work;
- Restitution of funds to the grantor agency as appropriate; and
- Other action appropriate to the research misconduct.

4.5 Other Considerations

4.5.1 Termination or Resignation Prior to Completing Inquiry or Investigation

The termination of the respondent's institutional employment, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the research misconduct proceeding or otherwise limit any of the institution's responsibilities under 42 CFR § 93.

4.5.2 Restoration of the Respondent's Reputation

Following a final finding of no research misconduct, including ORI concurrence where required by 42 CFR § 93, the RIO must, at the request of the respondent, undertake all reasonable and practical efforts to restore the respondent's reputation. Depending on the particular circumstances and the views of the respondent, the RIO should consider notifying those individuals aware of or involved in the investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of research misconduct was previously publicized, and expunging all reference to the research misconduct allegation from the respondent's personnel file. Any institutional actions to restore the respondent's reputation should first be approved by the President.

4.5.3 Protection of the Complainant, Witnesses, and Committee Members

During the research misconduct proceeding and upon its completion, regardless of whether the institution or ORI determines that research misconduct occurred, the RIO must undertake all reasonable and practical efforts to protect the position, and reputation of, or to counter potential or actual retaliation against, any complainant who made allegations of research misconduct in good faith and of any witnesses and committee members who cooperate in good faith with the research misconduct proceeding. The VPRED will determine, after consulting with the RIO, and with the complainant, witnesses, or committee members, respectively, what steps, if any, are needed to restore their respective positions or reputations or to counter potential or actual retaliation against them. The RIO is responsible for implementing any steps VPRED approves.

4.5.4 Allegations Not Made in Good Faith

If relevant, the President will determine whether the complainant's allegations of research misconduct were made in good faith, or whether a witness or committee member acted in good faith. If the President determines that there was an absence of good faith he/she will determine whether any administrative action should be taken against the person who failed to act in good faith.

5. RECORDS

5.1 Maintaining Records for Review by ORI

The RIO 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 RIO 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.

5.2 Public Records

All reports and decisions reached after hearings or appeals held under Chapter 6 are declared to be public records subject to the provisions or exclusions of the public records laws of the Nevada Revised Statutes as they may be interpreted by the courts.

6. RELATED DOCUMENTS

[UNLV Research Misconduct Policy](#)

[Title 2 - Chapter 5 of the NSHE Code](#)

[Title 2 - Chapter 6 of the NSHE Code](#)

[42 CFR § 93](#)

[Student Conduct Code](#)

7. CONTACT INFORMATION

UNLV Office of Research Integrity

Phone: 702-895-5948

8. DEFINITIONS

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

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

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

Material Failure means any act or failure to act in a manner that has or may have an adverse effect on the reputation, good will or financial condition of the University, as well as any act or failure to act in a manner that has or may impair the right or ability of the University to carry on its mission, operations, business, research, education or other affairs.

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). Research, as used in this Policy, includes all basic, applied, and demonstration research in all fields of science, engineering, and mathematics. This includes, but is not limited to, research in economics, education, the humanities, linguistics and literary studies, medicine, psychology, social sciences, statistics, and research involving human subjects or animals.

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

Research Misconduct is defined in the UNLV Research Misconduct Policy.

Research Record means the record of data or results that embody the facts resulting from scientific inquiry, including but not limited to, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials that the Respondent provides to any institutional official, or federal agency in the course of an evaluation or a proceeding pursuant to Chapter 6 of the NSHE Code. The purpose of including documents provided by Respondent in the Research Record is to hold the respondent responsible for the integrity of those research documents regardless of when they were prepared or furnished to the institution or the cognizant federal agency.