

KANSAS STATE UNIVERSITY POLICY ON RESEARCH MISCONDUCT (Appendix O)

Prefatory Note: This policy is effective upon executive approval but shall supersede the existing Kansas State University policy on research misconduct (Appendix O) no later than January 1, 2026, in accordance with the 2024 Final Rule on Research Misconduct (42 CFR Part 93).

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1 Purpose

The purpose of this policy is to articulate Kansas State University's enduring commitment to research integrity and to establish a comprehensive and transparent framework for addressing allegations of research misconduct. As a public research institution, University recognizes its duty to uphold the credibility of the academic record, ensure accountability for federally and non-federally funded research, and maintain public trust in the research enterprise. The University affirms that all members of the research community must adhere to the highest standards of honesty, accuracy, efficiency, and objectivity in proposing, conducting, and reporting research.

This policy outlines the University procedures that will be followed upon receipt of an allegation of research misconduct, ensuring consistency with the 2024 Final Rule on Research Misconduct (42 CFR Part 93), the policies of federal research sponsors, and best practices in higher education. These procedures include the receipt and preliminary assessment of allegations, the conduct of inquiries and investigations, and University determinations and administrative actions.

2 General Policy

Research misconduct threatens the foundation of scholarly inquiry. It erodes public confidence, compromises future funding, and distorts the academic record. The University will not tolerate research misconduct. Allegations of misconduct will be taken seriously and addressed promptly, confidentially, and impartially. Individuals found to have committed misconduct will be subject to appropriate disciplinary and corrective actions, and the integrity of the scholarly record will be restored to the extent possible.

In implementing this policy, the University is committed to:

- Establishing a clear, accessible process for raising concerns and reporting suspected misconduct;
- Ensuring proceedings are conducted in accordance with principles of procedural fairness and due process;
- Maintaining confidentiality to the extent permissible, feasible, and consistent with a thorough, fair investigation;
- Complying with applicable legal and regulatory obligations, including those of federal funding agencies;
- Promoting education and prevention efforts to support a culture of responsible conduct of research.

3 Scope

This policy applies to all individuals engaged in research at the University (including but not limited to faculty, staff, students, postdoctoral fellows, visiting scholars, contractors, and others). Further, this policy applies to all research activities carried out at the University, on behalf of the University, under the auspices of the University, within employees' course and scope of employment at the University, within the scope of students' education program and activity, or in accordance with contractors or other agents' contractual obligations. This includes sponsored and non-sponsored research, whether internally funded or externally supported through federal, state, or private grants and contracts.

Subrecipients conducting research under the auspices of the University are required to file their own assurances with the Office of Research Integrity (ORI) regarding compliance with federal research misconduct regulations; however, the University is not responsible for ensuring compliance by subrecipients

The scope of this policy is limited to allegations that meet the federal definition of research misconduct—namely, fabrication, falsification, or plagiarism in proposing, performing, reviewing, or reporting research. The policy does not extend to allegations involving honest error, differences of scientific judgment, or disputes over authorship or intellectual property rights, except where such disputes involve acts of fabrication, falsification, or plagiarism. Other forms of misconduct, including violations of human subject or animal welfare regulations, fiscal mismanagement, or personal misconduct, are addressed under other applicable University policies.

This policy applies only to research misconduct occurring within six years of the date HHS or the University receives an allegation of research misconduct. Exceptions. (1) Subsequent use--when a respondent continues or renews an earlier incident through the use, republication, or citation of the affected portion(s) of the research record (e.g., processed data, journal articles, funding proposals, data repositories), including in submitted or published manuscripts, submitted PHS grant applications, progress reports to PHS components, posters, presentations, or other research records, within six years of receipt of the allegation by HHS or the University. For matters that appear subject to this exception, the University will document any determination that the exception does not apply and will retain that documentation as required. (2) Public health/safety--if ORI or the University, following consultation with ORI, determines the alleged misconduct, if it occurred, could have a substantial adverse effect on the health or safety of the public.

4 Definitions

Research Misconduct means fabrication, falsification, or plagiarism in proposing, per-

forming, reviewing, or reporting research. Research Misconduct does not include honest error or differences of opinion.

- **Fabrication** is defined as making up data or results and recording or reporting them as if they were real.
- **Falsification** involves manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research record is not accurately represented.
- **Plagiarism** is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

Intent and Culpability:

- **Intentionally** means to act with the aim of carrying out the act.
- **Knowingly** means to act with awareness of the act.
- **Recklessly** means to propose, perform, or review research, or report research results, with indifference to a known risk of fabrication, falsification, or plagiarism.

Other Definitions:

- **Aliases:** Alternative names or identifiers used by individuals involved in the research misconduct proceeding.
- **Allegation:** A disclosure of possible research misconduct through any means of communication. The disclosure may be oral or written, anonymous or attributed.
- **Assessment:** The initial review of an allegation by the RIO to determine whether it falls within the scope of this policy and warrants further review through an Inquiry.
- **Bad Faith:** Knowingly making an allegation or statement that is false or misleading, or acting with reckless disregard for the truth.
- **Complainant:** The individual or entity that submits an allegation of research misconduct. A complainant need not be affiliated with the University.
- **Deciding Official (DO):** The institutional official who makes final determinations regarding allegations of research misconduct and any resulting University actions is the Provost.
- **Good Faith:** Acting with an honest belief that the allegation or testimony is true, based on available evidence, without intent to deceive or cause harm.
- **Inquiry:** Preliminary information-gathering and fact-finding to determine whether an allegation has sufficient substance to warrant an Investigation.
- **Investigation:** The formal, thorough examination and evaluation of all relevant facts to determine whether research misconduct has occurred, by whom, and to what extent.

- **Preponderance of the Evidence:** The standard of proof by which research misconduct must be established. Preponderance of the evidence means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.
- **Research Integrity Assurance (RIA):** A formal commitment by the institution to adhere to federal research misconduct regulations, filed with the Office of Research Integrity (ORI).
- **Research Integrity Officer (RIO):** The University official responsible for coordinating the review of allegations of research misconduct and managing the Inquiry and Investigation processes.
- **Respondent:** The person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.
- **Sequestration:** The process of collecting, inventorying, and securing all relevant research data and materials to prevent loss, alteration, or compromise.

5 Rights and Responsibilities

The University affirms its commitment to safeguarding the rights of parties and participants in research misconduct proceedings. The University also holds individuals accountable for their conduct during these proceedings and expects full cooperation and integrity from all parties and participants.

5.1 Complainants

Complainants play a critical role in maintaining the integrity of the research environment. The University recognizes that raising concerns of misconduct can carry personal and professional risk, and therefore it will take reasonable measures to protect Complainants from retaliation resulting from the good faith reporting of misconduct.

Complainants are entitled to have their allegations reviewed promptly and fairly. Where possible and appropriate, they may be kept informed of the general progress of proceedings. In some instances, Complainants may be asked to provide testimony or documentation during an Inquiry or Investigation. While Complainants do not have the right to determine the course of an Inquiry or Investigation, their cooperation and candor are essential to a thorough review.

Complainants must act in good faith and are prohibited from making knowingly false or reckless allegations. Allegations made in bad faith may constitute a violation of University policy and result in disciplinary action.

5.2 Respondents

Respondents are entitled to a fair and impartial process, and the University affirms its commitment to protecting the due process rights of all individuals subject to misconduct proceedings. The Respondent will receive notice of the allegations and opportunity to respond as articulated within the procedures below.

If no finding of Research Misconduct is made, the University will take reasonable steps to restore the Respondent's reputation, as appropriate and in consultation with the Respondent. If a finding of misconduct is substantiated, the Respondent will be informed of the decision and any proposed administrative actions. The University determination of Research Misconduct is final, subject to any review by federal oversight agencies as required by applicable regulations. Respondents are required to cooperate fully with the review process, provide access to requested records and materials, and refrain from obstructing or interfering with proceedings. Failure to cooperate or attempts to retaliate against Complainants, witnesses, or other participants may be treated as separate violations of University policy.

5.3 Research Integrity Officer (RIO)

The RIO is the University official responsible for the day-to-day administration and implementation of this policy from initial receipt of an allegation through final resolution. Appointed by the VPR and operating with delegated authority, the RIO ensures that all actions taken under this policy comply with applicable University, state, and federal requirements; has access necessary to secure and review research records; and may implement interim measures needed to preserve evidence and protect the interests of participants and the University.

The RIO's responsibilities explicitly include receiving and logging allegations through any channel; conducting a preliminary assessment to confirm jurisdiction, timeliness, and sufficiency of information; determining whether an inquiry is warranted and, when warranted, initiating that inquiry; overseeing the sequestration and secure custody of relevant research records and evidence (including, but not limited to, lab notebooks, raw/source data, electronic files and emails, devices and media, physical specimens, and backups); coordinating the selection of qualified, unbiased individuals to serve on inquiry and investigation committees; issuing each committee a clear written charge that defines scope, questions to be addressed, applicable standards (definition of research misconduct, intent standard, and evidentiary standard), confidentiality expectations, and timelines; serving as a non-voting advisor to committees to ensure adherence to University policy and federal requirements without influencing factual findings or conclusions; communicating, when required or appropriate, with federal oversight agencies (e.g., the Office of Research Integrity, the National Science Foundation Office of Inspector General), sponsors, publishers/journal editors, and other external bodies; ensuring compliance with all reporting, notification, and timeline obligations (including requesting extensions from oversight agencies when necessary); maintaining the complete institutional record of each proceeding and managing record retention; and facilitating training, prevention, and education related to research integrity.

The RIO further ensures that respondents and complainants receive appropriate notifications at each stage, are afforded required opportunities to comment on draft reports (and, in the RIO's discretion, that a complainant may comment on portions of a draft informed by the complainant's allegations), and are provided copies of reports and relevant findings consistent with confidentiality and legal constraints. The RIO documents attempts to obtain cooperation, manages conflicts of interest, maintains chain-of-custody for sequestered materials, coordinates with the DO and the OGC, and, when cases involve other institutions, arranges inter-institutional coordination to ensure a complete and timely proceeding.

5.4 Deciding Official (DO)

After receiving the final report of an Investigation, the DO reviews all findings, including the

evidence and any responses from the Respondent. The DO then determines whether research misconduct occurred and what administrative actions, if any, are warranted. Such actions may include retraction or correction of published work, formal reprimand, suspension, termination, or referral to other authorities, depending on the nature and severity of the misconduct.

The DO may also consider University policy, applicable law, and input from relevant offices (e.g., human resources, legal counsel, the VPR's Office) in determining the appropriate course of action. The DO's decision is communicated in writing to the Respondent and RIO and, where appropriate, to the relevant federal agencies. The DO's determination is final, subject to federal agency review, as applicable.

5.5 General Counsel

The RIO or DO may seek to consult with the Office of General Counsel or other University-appointed legal counsel. Counsel may advise the RIO, DO, and other university officials regarding the research misconduct process. Counsel may review notices, committee charges, and Inquiry and Investigation reports to ensure that University actions are legally sound and consistent with due process. While legal counsel is not directly involved in the adjudication of allegations, their guidance helps to ensure that the institution meets its obligations under applicable laws.

5.6 Other Administrative Officials

Other administrative officials at the University may be involved as needed to implement this policy. For example, human resources may participate in employment-related actions, the Office of Sponsored Programs may manage communications with funding agencies, and department chairs or deans may provide relevant information and assist in restoring the professional standing of individuals affected by an allegation. These officials are required to cooperate fully with the RIO and DO, and ensure that University actions taken in response to Research Misconduct are consistent with applicable policies and procedures.

6 General Policies and Principles

The University affirms a set of core principles that govern all proceedings conducted under this policy. These principles provide the foundation for a fair, transparent, and rigorous process, and serve to protect the rights of all parties and participants while preserving the integrity of the research enterprise.

6.1 Confidentiality

To the extent permitted by applicable law, regulation, and University policy, the proceedings conducted under this policy shall be carried out with the highest degree of confidentiality feasible, consistent with a thorough and effective Inquiry and Investigation. The University recognizes that confidentiality can protect the reputations of all parties

encourage the reporting of misconduct, and preserve the integrity of the process.

To that end, information obtained during the Assessment, Inquiry, and Investigation phases shall be disclosed only to those who need to know in order to carry out a legitimate function under this policy, or as otherwise required by applicable law, regulation, or University policy. Members of committees, witnesses, and other participants will be advised of the confidentiality expectations. While the University will make every reasonable effort to maintain confidentiality, it may be necessary to share certain information with funding agencies, University officials, or others to fulfill legal, regulatory, or policy obligations, or to implement appropriate corrective actions. Additionally, the University may notify journal editors, publishers, or similar officials about potentially inaccurate data due to alleged Research Misconduct when deemed necessary to protect the integrity of the scholarly record.

6.2 Conflict of Interest

It is the responsibility of the University to ensure that all individuals involved in the Assessment, Inquiry, Investigation, and adjudication of research misconduct allegations are free from personal, professional, or financial conflicts of interest that could compromise their objectivity. Prior to appointing individuals to serve on Inquiry or Investigation committees, or assigning responsibilities to administrators, the RIO will make reasonable efforts to identify and avoid potential conflicts. Individuals with known or potential conflicts will be recused. All participants in the process, including committee members, administrators and consultants are expected to disclose any potential conflicts and recuse themselves when appropriate.

6.3 Protection Against Retaliation

The University strictly prohibits retaliation against any individual who, in good faith, makes an allegation of research misconduct or cooperates in a related proceeding. This includes, but is not limited to, retaliatory employment action, academic penalties, harassment, or other forms of adverse treatment. Any individual who believes they have been subject to retaliation in connection with a research misconduct proceeding may report such concerns to the RIO or the Vice President for Research. Allegations of retaliation will be addressed promptly and may result in disciplinary action, up to and including termination of employment or expulsion.

6.4 Interim Administrative Actions

At any point during the research misconduct proceedings, the University may take interim administrative actions to protect the health and safety of the public, research subjects, students, staff, or the University community. Interim actions may also be taken to safeguard the integrity of the research process and preserve evidence. These actions may include, but are not limited to, restriction of access to laboratory spaces or equipment, temporary suspension of research privileges, notification to collaborators or sponsors, or administrative leave. Interim actions are not a presumption of wrongdoing and will be taken only after careful consideration by appropriate University officials in consultation with the RIO and, where appropriate, the VPR, or DO. Interim actions will be reviewed periodically and may

be modified, continued, or lifted based on developments in the proceeding.

6.5 Cooperation with the Process

All members of the University community are expected or required where elsewhere noted, to cooperate fully with the research misconduct process. This includes providing truthful testimony, producing requested records, and participating in interviews or committee deliberations when asked. Failure to cooperate, interference with an Inquiry or Investigation, or the deliberate obstruction of the process may constitute grounds for disciplinary action. Individuals who knowingly make false statements or misrepresent information or otherwise act in bad faith, may also be subject to sanctions under applicable University policies.

6.6 Restoration of Reputation

Restoration of Respondent's Reputation. If an Inquiry or Investigation does not substantiate research misconduct, the University—at the Respondent's request and in consultation with the Respondent—will promptly take reasonable, diligent, and appropriate steps, proportionate to the scope and public nature of the allegation and consistent with confidentiality and legal requirements, to protect or restore the Respondent's reputation. Measures may include: notifying affected parties (e.g., collaborators, departments, sponsors, publishers/journals) that the Respondent has been cleared; issuing a public or confidential statement of exoneration, as appropriate; correcting internal University records (including personnel and academic files); and coordinating with external bodies (such as publishers or funding agencies) to correct the public record.

6.7 Special-Circumstance Reporting

In accordance with 42 CFR §93.305(g), the RIO shall immediately notify the Office of Research Integrity (ORI) if any of the following circumstances arise during the research misconduct proceeding:

- There is an immediate health hazard or danger to public health or safety;
- There is an immediate need to protect federal funds or equipment;
- There is an immediate need to protect the interests of the Complainant, Respondent, or witnesses;
- 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, requiring federal action to safeguard evidence or protect the rights of those involved; or
- The research community or public should be informed.

The RIO shall coordinate such notifications in consultation with the DO and, as needed, the Office of General Counsel.

7 Investigation

The Investigation follows a finding from the Inquiry phase that the allegation has sufficient merit to warrant a full review. The Investigation must be initiated within thirty (30) calendar days of the Deciding Official's (DO) determination that it is warranted.

7.1 Preliminary Assessment

Upon receipt of an allegation of research misconduct, the Research Integrity Officer (RIO) shall conduct a preliminary Assessment to determine whether the allegation falls within the scope of this policy and warrants further review through an Inquiry. The preliminary Assessment is an initial review and does not require a formal report.

The RIO will:

- Review the allegation to determine if it meets the definition of Research Misconduct.
- Assess whether the allegation is sufficiently credible and specific to identify potential evidence of misconduct.
- Consult with relevant parties, such as the Complainant, Respondent, or other knowledgeable individuals, as necessary, while maintaining confidentiality.

The preliminary Assessment shall be completed promptly, generally within thirty (30) calendar days of receiving the allegation. Based on the Assessment, the RIO will determine one of the following outcomes:

- If the allegation, if true, would not meet the definition of Research Misconduct or lacks sufficient credibility or specificity, the RIO may dismiss the allegation. The RIO will document the rationale for dismissal and notify the Complainant and Respondent, if appropriate.
- If the allegation, if true, would constitute Research Misconduct and is sufficiently credible, the RIO will proceed to initiate an Inquiry as described in Section 7.2.

The preliminary Assessment does not involve a full review of evidence or interviews, which are reserved for the Inquiry and Investigation phases. The purpose is solely to determine whether the allegation warrants further examination under this policy.

7.2 Inquiry

Once the RIO determines that an Inquiry is warranted following the preliminary Assessment, the University shall initiate the Inquiry phase promptly. The purpose of the Inquiry is to conduct a preliminary evaluation of the available evidence and testimony to determine whether there is sufficient basis to warrant a formal Investigation. An Inquiry does not reach a final determination of whether Research Misconduct occurred; rather, it assesses whether the allegation has substance and justifies moving to a comprehensive

Investigation.

During the Inquiry, the RIO shall ensure that all relevant research records and evidence are sequestered promptly upon receipt of the allegation or as soon as practicable. If original records cannot be obtained, copies that are substantially equivalent in evidentiary value may be sequestered. Subsequent or interim sequestration shall occur whenever new records or evidence become known during the Inquiry process.

The Inquiry shall be completed within ninety (90) calendar days of its initiation, unless the RIO determines that circumstances warrant a longer period. If the Inquiry takes longer than ninety (90) days, the RIO shall document the reasons for the delay and include this documentation in the Inquiry report.

7.2.1 Notification to Respondent

Prior to beginning the Inquiry, the RIO shall provide the Respondent with written notice including:

- A statement of the allegations;
- The definition of Research Misconduct;
- A description of the Inquiry process;
- The Respondent's rights and responsibilities;
- The composition of the Inquiry committee (once appointed);
- A copy of: (a) applicable federal regulations (as of January 1, 2026, 42 CFR Part 93); and, (b) this policy.

7.2.2 Notification to Complainant

Unless prohibited by law, regulation, policy, or the confidentiality obligations set forth herein, the RIO will inform the Complainant that an Inquiry has been initiated and that the matter is under review. Similarly, the RIO may keep the Complainant informed of general progress during the Inquiry and will notify them of the outcome once the Inquiry is complete. The Complainant may be asked to participate in interviews or provide further documentation during the course of the Inquiry.

7.2.3 Appointment of the Inquiry Committee

The RIO, in consultation with the VPR, shall appoint an Inquiry committee consisting of individuals with no conflicts of interest and with the necessary expertise to evaluate the evidence and issues related to the allegation. Committee members may be drawn from within or outside the University, depending on the nature of the case. All members will be required to disclose any potential conflicts of interest and will be briefed on their obligations, including confidentiality and the standard of proof. The RIO shall appoint a member of the

Inquiry committee to serve as its chair. The Chair is responsible for coordinating committee activities, drafting the Inquiry report, ensuring timelines, and facilitating communication with the RIO.

The default will be to use K-State faculty as committee chairs and members whenever feasible and conflict-free. The flexibility to use an external chair is reserved for circumstances where it is necessary to meet federal requirements for independence and expertise and to assure both the Respondent and the complainant that the process is fair and unbiased.

7.2.4 Charge to the Committee

The RIO shall provide the committee with a formal written charge, which includes a statement of the allegations, the definition of research misconduct, the standard of proof (preponderance of the evidence); the scope of the committee's responsibility, the committee's confidentiality obligations, the deadline for completion of the Inquiry, and reference to this policy.

The committee is instructed to determine whether there is sufficient credible evidence that supports proceeding to an Investigation, based on a review of research records, interviews with key individuals, and other relevant information.

7.2.5 Inquiry Process

The Inquiry shall involve review and preliminary evaluation of all relevant documentation, including but not limited to, research data, proposals, publications, correspondence, and records of interviews. The committee may conduct interviews with the Complainant, Respondent, and witnesses, and summarize the information gathered in its report.

If the committee determines that the criteria for research misconduct are not met or that there is insufficient basis to proceed, the Inquiry will be closed. If the committee determines that the criteria are met, the matter will advance to an Investigation.

7.2.6 Inquiry Report

The Inquiry committee shall prepare a written report that includes the following twelve elements:

1. The name and position of the Respondent, including any aliases or multiple names;
2. The name and title of the University official(s) or designees who conducted the Inquiry;
3. A description of the allegations of research misconduct;
4. If any, the PHS support involved, including grant numbers, grant applications, contracts, and publications listing PHS support;
5. The basis for recommending or not recommending that the allegations warrant an Investigation;

6. Any comments on the report by the Respondent or Complainant submitted after their review of the draft report, as further described below;
7. An inventory of all sequestered research records and evidence, along with a description of how sequestration was conducted;
8. Transcripts of any interviews conducted, if transcribed, or summaries of interviews if not transcribed;
9. A timeline and procedural history of the Inquiry process;
10. A description of any scientific or forensic analyses conducted, if applicable;
11. The rationale for dismissing any allegations that do not merit further Investigation;
12. Any University actions implemented, such as communications with journals or funding agencies.

The respondent will be provided the draft report and afforded ten (10) calendar days to submit written comments. In the RIO's discretion, the complainant may be invited to review and comment, within the same period, on those portions of the draft report that are informed by the complainant's allegations. All such comments will be appended to the final report.

If the Inquiry takes longer than ninety (90) calendar days, the report shall include documentation of the reasons for the delay.

7.2.7 Review and Determination

The final Inquiry report, along with the Respondent's comments, shall be submitted to the RIO and then to the DO. The DO shall review the report and determine, in writing, whether the Inquiry supports moving to a formal Investigation. The DO's written determination shall include a summary of the rationale, and a copy of such determination shall be provided to the RIO for retention in accordance with University policy. This determination must be made within a reasonable time, generally no more than ten (10) calendar days after receipt of the report.

7.2.8 Decision Not to Investigate

If the DO determines that the evidence is insufficient to proceed to an Investigation, the Inquiry will be formally closed. RIO will document the decision, including a summary of the rationale, and retain all records in accordance with the University's retention policy. The Respondent and, where appropriate (as determined by the RIO), the Complainant will be notified in writing. Reasonable efforts will be made to protect the reputations of those involved, and the matter will be considered closed unless new, substantive information is later received.

7.2.9 Notification to External Agencies

If the research in question is federally funded or subject to specific sponsor requirements, the University will provide notice to the applicable agency on or before the calendar date the Investigation commences. This notice will include the name of the Respondent, the general nature of the allegation, and the Public Health Service (PHS) or National Science Foundation support involved, if applicable.

Within thirty (30) calendar days of the DO's determination that an Investigation is warranted, the RIO shall transmit to ORI the complete Inquiry report and all attachments specified in 42 CFR §§93.307–93.309.

7.3 Notification of Investigation

Upon initiation of an Investigation, the RIO shall notify the Respondent in writing. This notification will include a summary of the allegations to be investigated, the procedures that will be followed, and the Respondent's rights and responsibilities. The Respondent shall also be advised of the composition of the Investigation committee and given the opportunity to raise objections to any committee member on the basis of conflict of interest.

The RIO shall also notify the Complainant, to the extent permitted by confidentiality and legal considerations, that an Investigation is being conducted.

If the research in question is supported by a federal agency that requires notification (e.g., ORI, NSF OIG), the RIO will provide written notice to that agency on or before the calendar date the Investigation commences. This notice will include the name of the respondent, the general nature of the allegation, and the PHS or NSF support involved, if applicable.

7.4 Sequestration of Additional Records

As necessary, the RIO will expand sequestration efforts to include additional records or evidence not identified during the Inquiry. This includes materials from the Respondent and any other individuals whose records may be relevant to the Investigation. If original records cannot be obtained, copies that are substantially equivalent in evidentiary value may be sequestered. Subsequent or interim sequestration shall occur whenever new records or evidence become known during the Investigation process. All such actions will be documented, and materials will be securely stored with access limited to authorized personnel.

7.5 Appointment of the Investigation Committee

The RIO will appoint an Investigation committee consisting of five (5) individuals with the appropriate scientific or scholarly expertise and professional judgment to evaluate the allegations and the relevant research record. The RIO will make every reasonable effort to constitute an Investigation Committee with at least three K-State faculty members to ensure institutional representation. The committee may include members of the Inquiry committee, provided they have no conflicts of interest and possess the necessary qualifications. At the discretion of the RIO, external experts may also be appointed to ensure objectivity or provide specialized knowledge.

Prior to making appointments, the RIO may consult with other university officials, such as department heads, deans, or faculty governance leaders, to obtain recommendations for qualified, impartial committee members. However, the final authority for appointment resides with the RIO.

The RIO shall not serve as a member of the Investigation committee but will provide administrative oversight and procedural guidance to the committee throughout its work. In addition, the RIO shall designate one member of the committee to serve as Chair. The Chair is responsible for coordinating committee activities, drafting the Investigation report, ensuring adherence to timelines, and facilitating communication with the RIO.

Each member of the committee will be required to confirm in writing that they have no unresolved personal, professional, or financial conflicts of interest with the case or any individuals involved. Members will also affirm their agreement to uphold confidentiality and adhere to the responsibilities of their role.

7.6 Charge to the Committee

The RIO shall issue a formal charge to the Investigation committee. This charge will: define the scope of the Investigation; identify the specific allegations to be examined; explain the requirement to determine whether misconduct occurred, by whom, and to what extent; instruct the committee to use the preponderance of the evidence as the standard of proof; emphasize the need for thorough documentation and timely completion of the Investigation; and refer the committee to this policy.

The committee will also be reminded of the definitions of fabrication, falsification, and plagiarism, and that a finding of misconduct requires that the act represents a significant departure from accepted practices, be committed intentionally, knowingly, or recklessly, and be proven by a preponderance of the evidence.

7.7 Conduct of the Investigation

The Investigation is a fact-finding process that must be comprehensive, objective, and timely. It begins with the committee reviewing the full scope of allegations referred from the Inquiry phase and confirming the relevance and completeness of sequestered research records. If new information arises suggesting the need to broaden the scope of the Investigation, the committee may, in consultation with the RIO, expand its review. The RIO shall document any such expansions and notify the Respondent accordingly.

The committee shall conduct interviews with all individuals who may have relevant knowledge of the research at issue. These interviews will include, at a minimum, the Respondent and the Complainant (if known), and may include collaborators, co-authors, trainees, and other witnesses. Interviews shall be recorded or documented through transcripts or signed summaries, which will be included in the investigatory file. If an interviewee declines to review or sign the transcript, the RIO will document the

opportunity provided and the refusal, and the uncorrected transcript will be included in the record

7.8 Addition of Respondents or Allegations

During the course of the Investigation, if the committee or the RIO identifies new evidence suggesting additional acts of potential Research Misconduct or implicating additional individuals, the RIO shall assess whether these matters fall within the scope of the ongoing Investigation or require separate proceedings.

If new Respondents are identified, the RIO shall provide them with written notification equivalent to that provided to the original Respondent, including a summary of the allegations, a description of their rights, and the procedural framework. Similarly, if new allegations arise, the RIO will notify the current Respondent(s) in writing, provide an updated charge to the committee, and ensure that all parties are afforded the opportunity to respond.

The committee must evaluate any newly added Respondents or allegations using the same standards and processes described in this policy, and document their consideration and findings in the final Investigation report.

7.9 Standards for a Finding of Research Misconduct

In accordance with federal regulations, a finding of research misconduct requires that the Investigation committee determine by a preponderance of the evidence that:

1. The conduct in question constitutes a significant departure from accepted practices of the relevant research community;
2. The conduct was committed intentionally, knowingly, or recklessly; and
3. The allegation has been proven by a preponderance of the evidence.

The committee must apply this three-part standard to each allegation under review. A finding of misconduct cannot be based solely on a failure to comply with University policy, federal regulations, or ethical norms unless such failure also meets the definition of fabrication, falsification, or plagiarism. The committee must distinguish research misconduct from honest error, authorship or collaboration disputes, or differences in interpretation or judgment.

If the committee determines that the evidence does not support a finding of misconduct under this standard, it must so state explicitly in the Investigation report and provide a rationale for that conclusion.

7.10 Timeline for Completion of the Investigation

The University is required to complete all aspects of the Investigation—including interviews,

data review, preparation of the report, review of comments, and submission of the final report to the DO—within one hundred eighty (180) calendar days of initiating the Investigation, unless extended as provided herein. For matters under PHS/ORI jurisdiction, if additional time is needed, the University will request an extension from ORI in writing, explaining the circumstances. For matters **not** under PHS/ORI jurisdiction, the Deciding Official, on the RIO's recommendation, may approve a reasonable extension for good cause.

7.11 Investigation Report

The Investigation committee, under the leadership of the Chair, is responsible for drafting and finalizing the written Investigation report. The Chair shall coordinate the contributions of all members and ensure that the report accurately reflects the committee's deliberations and conclusions. The draft Investigation report will be provided to the Respondent for comment. The Respondent will have ten (10) calendar days from receipt of the draft report to submit written comments. These comments will be considered by the committee and appended to the final report. The committee's report shall be submitted to the RIO for procedural and substantive review prior to transmittal to the DO.

The RIO may request clarifications, corrections, or additional documentation before accepting the final report for formal submission.

The committee shall prepare a written report of its findings, which must include:

- The composition of the Investigation committee, including the names and qualifications of its members;
- An inventory of all sequestered research records and evidence relied upon, along with a description of how sequestration was conducted, excluding records not relied upon in the findings;
- Transcripts of all interviews conducted during the Investigation;
- Identification of all publications, manuscripts, PHS funding applications, progress reports, presentations, research records, or other materials containing content linked to the alleged research misconduct;
- A description of any scientific or forensic analyses conducted, including methodologies and results;
- A description of the nature of the allegations of research misconduct;
- The specific PHS, NSF, or other support involved, including grant numbers and titles, if applicable;
- A description of the University policies and procedures followed;

- How and from whom information relevant to the Investigation was obtained;
- A thorough analysis of the evidence and interviews conducted;
- Findings as to whether research misconduct occurred, and if so, by whom and to what extent;
- Whether the alleged misconduct was intentional, knowing, or reckless;
- The basis for the findings and the application of the federal definition of research misconduct;
- Any comments provided by the Respondent and Complainant.

7.12 Decision and Notification

After receiving the final Investigation report from the RIO, the DO shall conduct an independent review of the findings, conclusions, and recommendations. The DO shall consult with the RIO and the Office of General Counsel to ensure that the process has been followed appropriately and that the evidence supports the findings.

The DO will make a final determination regarding whether research misconduct occurred, the severity of the misconduct, and the scope of responsibility. This determination is final, subject to review by federal oversight agencies where required by applicable regulations.

The DO may:

- Accept the findings of the Investigation committee in whole or in part;
- Return the report to the committee for further clarification, additional fact-finding, or reconsideration;
- Make a different determination based on the preponderance of the evidence, provided that a written explanation is included.

The DO's final decision shall be documented in writing and will include the basis for the decision and any proposed University administrative actions.

The RIO shall notify the Respondent in writing of the DO's determination. The notification will include a copy of the final report, the DO's decision, and any sanctions or corrective actions to be taken. To the extent permitted by law and consistent with privacy protections, the Complainant will also be informed of the outcome of the Investigation.

If the research is federally funded or otherwise subject to sponsor requirements, the RIO will transmit the final report, the DO's decision, and the Respondent's comments to the appropriate agency (e.g., ORI, NSF OIG) as required. The University will comply with all agency-specific procedures for final reporting and administrative follow-up.

If the DO finds that no research misconduct occurred, efforts shall be made to restore the reputation of the Respondent, and all parties will be informed that the matter is closed.

7.13 Record Retention

The University shall maintain all records related to allegations, Assessments, Inquiries, Investigations, and findings of research misconduct for a period of at least seven (7) years after completion of the proceedings or the completion of any federal agency proceeding involving the allegation, whichever is later. This includes all records transmitted to the Office of Research Integrity (ORI) or other federal agencies, which must also be retained for at least seven years.

Such records include, but are not limited to:

- Documentation of the Assessment and preliminary review;
- All materials sequestered or gathered during the Inquiry and Investigation phases;
- Interview transcripts or summaries and correspondence with parties involved;
- Draft and final versions of Inquiry and Investigation reports;
- All comments received from the Respondent and Complainant;
- Documentation of the Deciding Official's decision;
- Documentation of communications with sponsoring or oversight agencies.

These records will be maintained by the RIO in a secure, access-controlled environment to protect confidentiality. Upon request and in accordance with applicable regulations, the University will make such records available to authorized federal agencies or research sponsors for audit, oversight, or investigative purposes.

7.14 University Administrative Actions and Sanctions

When a final determination of research misconduct is made by the DO, the University shall take appropriate administrative actions to address the findings, safeguard the integrity of the research record, and prevent recurrence. The scope and severity of such actions shall correspond to the seriousness of the misconduct, the degree of intent, the extent of harm, and the Respondent's disciplinary history.

7.14.1 Types of Administrative Actions and Sanctions

Administrative actions may include, but are not limited to:

- Written reprimand or letter of censure, placed in the Respondent's personnel file, with or without required follow-up corrective action;
- Correction or retraction of affected publications, presentations, reports, or grant

applications, with written notification to publishers, sponsors, and collaborators;

- Restitution of misused funds to the University, granting agency, or other affected entity, when research misconduct results in financial loss or improper expenditure of funds;
- Restriction or supervision of future research activities, such as subjecting research to heightened review, oversight by a mentor, or loss of independent investigator status;
- Denial or suspension of eligibility for submitting proposals for internal or external research funding, including disqualification from Principal Investigator status for a defined period;
- Temporary or permanent removal from leadership positions, supervisory roles, or service on research-related committees, such as Institutional Review Boards or Institutional Animal Care and Use Committees;
- Suspension without pay, demotion, reassignment of duties, or, where warranted, termination of employment or appointment, ~~in accordance with applicable University policies. (In the event of termination of employment or appointment under this policy, the Respondent shall not be entitled to any further appeal within the University (including but not limited to an appeal otherwise available under Appendix G or M to the University Handbook):~~
- Revocation of academic credentials or honors, if misconduct is found to have undermined the legitimacy of a degree or other academic recognition;
- Referral for civil or criminal proceedings, to licensing boards, law enforcement, or other appropriate regulatory bodies, when warranted by the nature of the misconduct;
- Exclusion from graduate committees, advising roles, or teaching responsibilities in research-related coursework, when applicable.

These actions may be imposed individually or in combination depending on the severity, impact, and circumstances of the misconduct.

7.14.2 *Implementation of Administrative Actions and Sanctions*

The DO will determine the appropriate sanctions after consultation with relevant university offices. Sanctions shall be communicated in writing to the Respondent and documented in the University case file. In cases involving graduate students, the RIO will coordinate with the Graduate School to ensure appropriate follow-up and support.

7.14.3 *Notice to Funding Agencies and Journals*

Where research misconduct has resulted in the dissemination of false or misleading information through publications or grant submissions, the University will work with the Respondent and the relevant publishers or sponsors to issue retractions, errata, or other public corrections. The RIO will also ensure that federal agencies or sponsors are informed of any required funding adjustments, compliance concerns, or administrative actions taken.

7.14.4 Protection of the Research Environment

In conjunction with applying individual sanctions, the University may adopt measures to safeguard the broader research environment. These may include education programs, revisions to laboratory practices, department-wide training on responsible conduct of research, and improvements to compliance monitoring. These actions may be directed by the DO in consultation with the RIO and relevant academic leaders.

7.14.5 Remediation and Monitoring

Where appropriate, the DO may require the Respondent to participate in remediation efforts as a condition of continued research engagement. This may include training in responsible conduct of research, development of a remediation plan, or mentoring arrangements. The RIO may oversee the implementation of these plans and provide periodic reports to the DO.

All administrative actions will be implemented in a timely manner and monitored for effectiveness. Noncompliance with the terms of any imposed sanctions may result in additional disciplinary action.

7.14.6 Appeal

The University's determination that research misconduct has occurred is a final institutional finding and is not subject to appeal within Kansas State University. The Respondent may appeal the sanction(s) imposed against them by submitting a written appeal for consideration by the Research Misconduct Sanction Review Committee (RMSRC). The appeal must be based solely on the record of the final Investigation report and DO's written determination, and it may only assert that the sanction is clearly arbitrary, capricious, or substantially disproportionate to the severity of the research misconduct. This appeal procedure is the exclusive means of appeal available to Respondents within the University.

- **Deadline to File Appeal:** The Respondent must submit their full written appeal to the DO within 10 calendar days of the DO's written determination and notice of sanction(s).
- **Research Misconduct Sanction Review Committee Composition:**
 - If the Respondent is a member of the faculty, the RMSRC composition shall be:
 - Three tenured faculty members, appointed by the Faculty Senate Executive Committee; and
 - Two representatives from the Office of the Vice President for Research, appointed by the Vice President for Research.
 - If the Respondent is not a member of the faculty (e.g., research staff, postdoctoral scholars, research associates, or other non-faculty employees engaged in research), the RMSRC composition shall be:
 - One member who is a non-faculty employee with substantial research responsibilities or experience, appointed by the Vice President for Research;

- Two members that may be faculty or non-faculty, (provided that the RMSRC as a whole has sufficient expertise to understand the research context and the potential impact of the sanctions on the Respondent's position), appointed by the Faculty Senate Committee on Professional Staff Affairs; and
- Two representatives from the Office of Research, appointed by the Vice President for Research.
- For staff respondents, the Chief Human Resources Officer shall be consulted in selecting any non-faculty member(s) to ensure appropriate familiarity with staff roles and applicable employment policies.
- **Scope of Review:** The RMSRC does **not** have jurisdiction to review or overturn the Investigation Committee's finding of research misconduct. Its sole authority is to review the sanction and make a recommendation to the Provost.
- **Standard of Review:** The RMSRC shall consider whether the Respondent has established that the sanction is clearly arbitrary, capricious, or substantially disproportionate to the severity of the research misconduct.

Committee Process and Recommendation

- **Opportunity for Written Arguments:** The Respondent's written appeal and all supporting arguments must be submitted to the DO by the deadline set forth above.
- **Convening of the RMSRC:** Upon receipt of a written appeal, the DO, or their designee, shall provide written notice of such appeal to the Faculty Senate President, the Chief Human Resources Officer (if non-faculty), and the Vice President for Research. The appropriate Faculty Senate committee (defined above), the Vice President for Research, and the Chief Human Resources Officer (if applicable) shall select and provide written notice to the DO, or their designee, of their respective RMSRC member appointments within 5 calendar days.
- **Review Timeline and Recommendation:**
 - Upon written designation of all RMSRC members, the DO shall provide the members with a copy of the Respondent's written appeal, the Investigation Committee's final Investigation Report (with supporting materials), and the DO's final determination.
 - Following receipt of the above records, the RMSRC shall review the appeal and issue its written recommendation to the Provost within 20 calendar days, unless, for good cause and upon written request of the RMSRC Chair, an extension is granted by the DO. Any such extension and its justification shall be documented in the record.
 - The RMSRC's written recommendation shall explain whether the Respondent has established that the sanction is clearly arbitrary, capricious, or substantially disproportionate to the severity of the research misconduct. If the RMSRC finds the Respondent has established as much, it shall recommend what lesser sanction(s) should be imposed.
- **Decision on Appeal:**
 - The Provost shall issue their final written determination on appeal within 10 calendar days of receiving the RMSRC's recommendation.

- The Provost's decision on the sanction is final, and no further administrative review or appeal is permitted within Kansas State University.

7.15 RIO Protections and Independence

- The Research Integrity Officer (RIO) shall have the authority and resources necessary to carry out all duties under this policy without interference from any University official or administrative unit;
- The RIO may not be removed, demoted, suspended, or subjected to any other form of retaliation or penalty by the University for actions taken in good faith in the course of assessing, inquiring into, or investigating allegations of research misconduct;
- Any complaint of retaliation against the RIO shall be reported immediately to the Provost and to the Office of General Counsel, and will be addressed under the University's non-retaliation and whistleblower policies;
- This protection applies from the moment the RIO is designated and continues for seven (7) years following the final resolution of any matter the RIO handled.

7.16 Restoration of Reputation

In cases where the Respondent is found not to have committed research misconduct, the University will take reasonable, diligent, and appropriate steps to restore the Respondent's reputation, as requested and in consultation with the respondent.

These steps may include:

- Notification to relevant parties, including collaborators, sponsors, journals, and departments, that the Respondent has been cleared of research misconduct;
- Issuance of a public or confidential statement of exoneration, depending on the visibility of the original allegation;
- Correction of records within the University, including personnel files or academic documentation;
- Coordination with external bodies, such as publishers or funding agencies, to correct the public record.

The University will make these efforts promptly upon conclusion of the case and in a manner proportionate to the scope and public nature of the allegation. The RIO will work closely with the Respondent to tailor appropriate measures.

7.17 Policy Authority and Contact Information

This policy is issued under the authority of the Office of the Provost and the Vice President for Research, and is administered by the Research Integrity Officer.

For questions, reports, or guidance related to research misconduct, individuals should contact:

Research Integrity Officer
Office of the Vice President for Research
Kansas State University

This policy shall be reviewed and updated periodically to ensure alignment with federal regulations and evolving best practices. Significant revisions shall be submitted to University governance bodies and external agencies as required.