



Policy and Procedures for Handling Allegations of Misconduct in Research and other Scholarly Activities

UMBC Policy III-1.10.01

I. POLICY STATEMENT

It is the policy of UMBC that each individual faculty, staff member, and student is expected to maintain high ethical standards in the conduct and reporting of his/her research or other scholarly activities. Maintenance of public trust in these standards is the responsibility of all members of the university community. Faculty, staff, and students have responsibilities for ethical conduct not only to UMBC, but also to the community at large, to the academic community, and to private and public institutions sponsoring the scholarly activities.

II. PURPOSE FOR POLICY

Misconduct in research or other scholarly activity is prohibited and allegations of such misconduct shall be investigated thoroughly and resolved promptly. Should alleged incidents of misconduct in scholarly activity occur, reporting of such possible violations is a shared responsibility, and it is the duty of the faculty, staff members, and students to resolve issues arising from such alleged misconduct.

Furthermore, 42 C.F.R. Part 50, Subpart A defines the responsibility of institutions receiving federal grants for dealing with and reporting possible misconduct and states, in part, that each such institution shall "...establish uniform policies and procedures for investigating and reporting instances of alleged or apparent misconduct..."

Therefore, all faculty, staff, and students engaged in or assisting with the conduct of research or scholarly activity shall comply with this policy, as amended from time to time.

III. APPLICABILITY AND IMPACT STATEMENT

Faculty, staff, and students have responsibilities for ethical conduct not only to UMBC, but also to the community at large, to the academic community, and to private and public institutions sponsoring the scholarly activities.

IV. CONTACTS

Direct any general questions about this University Policy first to your department's administrative office. If you have specific questions, call the following offices:

Subject	Contact	Telephone	Email
Policy Clarification	OSP	410-455-3140	OSPA@umbc.edu

V. UNIVERSITY POLICY

General Policy Provisions

A. Obligations of the Campus Community

All university employees, resident visitors (e.g., exchange students, visiting faculty), and students are obliged to cooperate to the fullest extent in any and all proceedings and with the sequestration of evidence related to the case.

B. Interim Administrative Action

In some instances, the seriousness of the allegation may be such that interim administrative action must be taken concurrent with sequestration, or prior to completion of the inquiry or investigation. Interim administrative action (e.g., temporary replacement of a Principal Investigator or employment suspension with pay) will be taken when, based on actions taken by the Respondent, there is a possibility of adulteration or obfuscation of evidence, obstruction of the inquiry or investigation, or potential or actual harm to, or retaliation against, research subjects, employees, Complainants or other participants. Interim administrative action will require approval of the Provost in consultation with University Legal Counsel and the Research Ethics Review Officer (RERO). This order may remain in force until the completion of the inquiry and investigation or may be lifted at any time for good cause by the Provost.

C. Reporting Misconduct

Anyone having reason to believe that a member of the faculty, staff or student body has engaged in research or scholarly misconduct, should promptly consult with the RERO. The purpose of this consultation is to determine whether the person complaining will file a formal complaint. The institution will use due care to protect the privacy of the Complainant to the extent provided by law except insofar as information needs to be disclosed so that the University may effectively investigate the matter or take corrective measures.

If the complainant chooses not to file a formal complaint of research or scientific misconduct as provided for in this policy, the RERO shall consult with University Legal Counsel to determine if a misconduct inquiry is appropriate, and/or whether referral should be made to other

appropriate oversight agencies. If the RERO decides to initiate a misconduct inquiry, this will be reported by the RERO, in writing, to the Respondent's department head, his/her dean or equivalent supervisor, and the Provost. The RERO shall next provide written notification of the intent to proceed with an inquiry to the Respondent. The RERO or his/her designee shall personally deliver the notification to the Respondent at which time (or immediately subsequent to the provision of notice) relevant records will be sequestered in accordance with the procedures set forth in Appendix A (link to procedures)

VI. DEFINITIONS

1. **Allegation:** Any written or oral statement or other indication of possible misconduct made to an institutional official.
2. **Committee Advisor:** University Legal Counsel, or any person designated by the Research Ethics Review Officer (RERO) to advise the Inquiry or Investigation Committees about this Policy's requirements and procedures.
3. **Complainant:** The individual(s) alleging that an act of misconduct has occurred.
4. **Conflict of Interest:** 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.
5. **Day(s):** Throughout this document, the term "day" or "days" means calendar days.
6. **Deciding Official:** The institutional official making the final determination on allegations of misconduct and any responsive institutional actions.
7. **Dean:** College deans, the direct administrative reporting line for a center or institute, or dean equivalent. The Dean or dean equivalent serves as the chief administrative officer of his/her respective area.
8. **Good Faith Allegation:** An allegation made with the honest belief that misconduct may have occurred. An allegation is not made in good faith if it is false or if it was made with a reckless disregard for the truth.
9. **Inquiry:** Information-gathering and preliminary fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
10. **Inspector General:** The office in many federal agencies (e.g., National Science Foundation, NASA) that is responsible for the misconduct and research integrity activities.
11. **Investigation:** A formal examination and evaluation of relevant facts to determine whether misconduct has taken place and, if so, to determine the responsible person and the seriousness of the misconduct.
12. **Misconduct:** Misconduct is defined for the purposes of this Policy as fabrication, falsification, plagiarism or other serious deviation from accepted practices in proposing, carrying out, or reporting results from

research or other scholarly activities. The term “serious deviation from accepted practices,” as used herein, includes but is not limited to the following illustrative examples of prohibited conduct:

- a. Improper use or appropriation of information learned from reviewing the grant applications or manuscripts of others.
- b. Making a false or grossly negligent accusation of scholarly misconduct; withholding or destruction of information relevant to a claim of misconduct; obstruction of a misconduct inquiry or investigation; and retaliation against persons involved or perceived to be involved in the allegation or investigation.
- c. Material failure to comply with regulatory requirements affecting sponsored projects, including but not limited to substantial violations of federal or state regulations involving conflict of interest, the use of sponsored project funds, care of animals, human subjects, investigational drugs, recombinant products, new devices including engineering research materials, or radioactive, biological or chemical materials, or other environmental protection regulations.
- d. Deliberately misstating or misrepresenting the credentials (i.e., qualifications, experience, research accomplishments or racial/ethnic origin of the Principal Investigator or project staff) or material facts of a proposed or existing project in order to advance the research program, to obtain funding, or for other professional advancement.
- e. Deliberately sabotaging or physically damaging the laboratory research set up, equipment, or records.

Misconduct, as defined herein does not include honest error or honest differences in interpretation or judgments of data. Further, this document is not intended to relate to student conduct that is governed by student judicial policies, or to limit faculty in the exercise of legitimate academic freedom.

13. **Office of Research Integrity (ORI):** The office within the U.S. Department of Health and Human Services (DHHS) that is responsible for the misconduct and research integrity activities of the U.S. Public Health Service.
14. **Personal Advisor:** Any person (e.g., lawyer, colleague) chosen by the Respondent or another participant (e.g., witness) to accompany that participant and act as a personal advisor when the Participant is called to a meeting of the Inquiry or Investigation Committee.
15. **Public Health Service (PHS):** The U.S. Public Health Service, an operating component of the U.S. Department of Health and Human Services (DHHS).
16. **Respondent:** The individual(s) against whom an allegation of misconduct has been made.
17. **Research Ethics Review Officer (RERO):** The Vice Provost for Research will serve as the Research Ethics Review Officer RERO for the University. It will be the duty of the Research Ethics Review Officer to inform the Provost of the status of inquiries and investigations of misconduct and to be responsible for the security of all documents relating to allegations, inquiries, and investigations of misconduct.

18. **University Legal Counsel** means legal counsel who represents the institution during the misconduct inquiry and/or investigation and who is responsible for advising the (RERO), the inquiry and investigation committees, and the Deciding Official on relevant legal issues. University Legal Counsel may mean in-house counsel and/or the Office of the Attorney General of Maryland. The University Legal Counsel does not represent the Respondent, the Complainant, or any other person participating during the inquiry, investigation, or any follow-up action, except the institutional officials responsible for managing or conducting the institutional misconduct process as part of their official duties.
19. **Retaliation:** Any action that adversely affects the employment or other institutional status (e.g., course grades or academic progress of a student) of an individual that is taken by an employee because a Complainant or witness has made, or is perceived by the Respondent to have made an allegation of misconduct or cooperated with the inquiry or investigation.

VII. APPROVAL AND PROCEDURES

- A. Pre-approval is not applicable.
- B. Approval is not applicable.
- C. Procedures: [UMBC Procedures for Handling Allegations of Misconduct in Research and other Scholarly Activities](#)

VIII. DOCUMENTATION: NONE

IX. RESTRICTIONS AND EXCLUSIONS: NONE

X. RELATED ADMINISTRATIVE POLICIES AND PROCEDURES: UMBC III-1.10.02 and UMBC III 1.10.03

Administrator Use Only

Policy Number: 1.10.01

Policy Section: III Academic Affairs

Responsible Administrator: Vice Provost-Research and Planning

Responsible Office: Vice Provost Office for Research and Planning

Approved by President:

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