



**UNIVERSITY POLICY SR-01.04-12/23**

**TO:** The University of West Florida Community  
**FROM:** Dr. Martha D. Saunders, President  
**SUBJECT:** Responding to Allegations of Misconduct in Research  
**RESPONSIBLE OFFICE:** Research Administration and Engagement

**I. Purpose:**

The University of West Florida (the “University”) is committed to high quality research and scholarly activity as a means to enrich its learning environment and contribute to the community. As such, it is the policy of the University that all faculty members and researchers shall adhere to the highest standards of intellectual honesty and ethical conduct throughout the planning, performance, and reporting of their research.

University faculty, staff, students, and affiliates will not engage in Research Misconduct in proposing, performing, or reviewing research or in reporting research results. Such persons engaged in research activity will fully comply with federal agency regulations, state ethical statutes, and University policies and procedures in conducting research and will report allegations of Research Misconduct to the Associate Vice President for Research Administration & Engagement (“AVP-RAE”) for review. University faculty members, staff members, and students responsible for the design, conduct, or reporting of research must meet federal and University Research Misconduct training requirements. The University will foster research integrity by offering Research Misconduct training to faculty, staff, and students engaged in research activity and informing them of the University’s policies and procedures regarding responsible conduct in research.

This policy implements the University’s commitment to research integrity and is intended to satisfy the requirements of federal agencies that are funding or otherwise involved in University research.

**II. Definitions:**

Allegation – any written or oral statement or other communication of possible Research Misconduct made to a University official.

AVP-RAE – the Associate Vice President for Research Administration & Engagement who will oversee investigations into allegations of Research Misconduct or assign a designee.

Complainant – a person who makes an allegation of Research Misconduct.

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

Day – business days unless otherwise noted.

Fabrication – creation of false data or results and recording and reporting them.

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

Good Faith Allegation – an Allegation made with the honest belief that Research Misconduct may have occurred. An allegation is not in Good Faith if it is made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

Inquiry – gathering information and initial fact-finding to determine whether an allegation or apparent instance of Research Misconduct warrants an investigation.

Inquiry Committee – the panel tasked with conducting the preliminary review into allegations of Research Misconduct, as more fully described below.

Investigation – the formal examination and evaluation of all relevant facts to determine if Research Misconduct has occurred and, if so, to determine the responsible person and the seriousness of the Research Misconduct.

Investigation Committee – the panel tasked with conducting the investigation into allegations of Research Misconduct following a preliminary review, as more fully described below.

Plagiarism – the use of another person’s ideas, processes, results, or words without giving appropriate credit (excluding disputes among collaborators about authorship or credit).

Research Misconduct – Fabrication, Falsification, Plagiarism, or other practices that seriously deviate from those that are commonly accepted within the academic community for proposing, conducting, or reviewing research or in reporting research results. It does not include honest error or honest differences in interpretations or judgments of data.

Research Record – any data, document, computer file, electronic media, or any other written or non-written account or object that reasonably may be construed to be associated with the proposed, conducted, or reported research that is the subject of an allegation of Research Misconduct. A Research Record includes, but is not limited to: grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; correspondence; videos; photographs; x-ray film; slides; biological materials; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records;

animal facility records; human and animal subject protocols; consent forms; medical charts; and patient research files.

Respondent – the person against whom an Allegation of Research Misconduct is directed or the person whose actions are the subject of the Inquiry or investigation. There can be more than one Respondent in any Inquiry or investigation.

Retaliation – any action that adversely affects the employment or other institutional status of an individual that is taken by an institution or an employee because the individual has in Good Faith made an Allegation of Research Misconduct or of inadequate institutional response thereto or has cooperated in Good Faith with an investigation of such Allegation.

### **III. Policy:**

#### **A. Scope**

This policy and the associated procedures apply to any person paid by, under the control of, or affiliated with the University (such as, but not limited to, scientists, trainees, technicians and other staff members, students, fellows, guest researchers, or collaborators) who are engaged in research conducted at the University, regardless of the funding source.

While this policy and associated procedures will normally be followed whenever an Allegation of possible Research Misconduct is made, unique circumstances in an individual case may dictate variation from the normal procedure when deemed to be in the best interests of the University. A proposed variation from the normal procedures for responding to Allegations of Research Misconduct must be approved by the Provost and must ensure fair treatment to the subject of the Inquiry or investigation.

If the Allegations of Research Misconduct rise to the level of the conduct outlined in the Whistle-blower's Act, then the procedures set forth in Sections 112.3187-112.31895, Florida Statutes, will be employed in investigating the Allegations.

This statement of policy and procedures does not apply to authorship or collaboration disputes and applies only to Allegations of Research Misconduct that occurred within six years of the date the institution or the U.S. Department of Health and Human Services received the Allegation, subject to the subsequent use, health or safety of the public, and grandfather exceptions in 42 CFR § 93.105(b).

#### **B. Procedures**

##### **1. Reporting Suspected Research Misconduct**

All employees or individuals associated with the University should report observed, suspected, or apparent Research Misconduct in research to the AVP-RAE. Reports of suspected Research Misconduct can be oral or written.

If an individual is unsure whether a suspected incident falls within the definition of Research Misconduct, he or she should meet with or contact the AVP-RAE to informally discuss the suspected Research Misconduct. If the circumstances described by the individual do not meet the definition of Research Misconduct, the AVP-RAE will refer the individual or Allegation to other offices or officials with responsibility for resolving the problem. At any time, an employee may have discussions and consultations about concerns of possible Research Misconduct with the AVP-RAE and will be counseled about appropriate procedures for reporting Allegations.

## 2. Initial Assessment

Upon receiving an Allegation of Research Misconduct, the AVP-RAE will immediately assess the Allegation to determine whether there is sufficient evidence to warrant an Inquiry and whether the Allegation falls within the definition of Research Misconduct. In conducting the assessment, the AVP-RAE need not conduct interviews 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.

### a. Decision that Inquiry is Not Warranted

Upon deciding that an Inquiry is not warranted, the AVP-RAE will dismiss the Allegation. A record of the Allegation, the steps taken to review the Allegation, and the basis for the dismissal of the Allegation shall be maintained by the AVP-RAE.

### b. Decision that Inquiry is Warranted

Upon deciding that an Inquiry is warranted, the AVP-RAE will immediately initiate the Inquiry process.

The AVP-RAE will provide the Respondent with written notice of the Allegation and of the procedures noted in this policy. The notice to the Respondent shall be given no later than the date of the first Inquiry Committee meeting. The Respondent may consult with legal counsel or a personal advisor (who is not a principal or witness in the case) to seek advice and may bring legal counsel or a personal advisor to interviews or meetings on the case throughout the subsequent process.

Upon receiving notice of an Inquiry and throughout the remainder of the proceedings, the Respondent should be given the opportunity to admit that the Respondent committed Research Misconduct. With the advice of the AVP-RAE or other University officials, the Provost may terminate the University's review of an Allegation that has been admitted. However, in the case of externally funded research, the termination of a review must be first authorized by the external sponsor (refer to Section III(B)(6)).

### 3. Securing of Research Records

The AVP-RAE must take all reasonable and practical steps to obtain custody of all the Research Records and evidence needed to conduct the Research Misconduct proceeding upon deciding an Inquiry is warranted. All records shall be inventoried and sequestered in a secure manner. When the records or evidence include data on instruments shared by a number of users, the AVP-RAE may secure copies of that data or evidence, so long as those copies are substantially equivalent to the evidentiary value of the instruments.

### 4. Inquiry

The purpose of an Inquiry is to conduct an initial review of the available evidence to determine whether to conduct an Investigation. An Inquiry does not require a full review of all the evidence related to the Allegation.

#### a. Appointment of the Inquiry Committee

The AVP-RAE, in consultation with other University officials as appropriate, will appoint an Inquiry Committee and committee chair within ten (10) Days of deciding an Inquiry is warranted. The Inquiry Committee should consist of no more than three individuals who have no real or apparent personal, professional, or financial conflicts of interest with those involved with the Inquiry, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the Allegation. The individuals may be scientists, subject matter experts, administrators, lawyers, or other qualified persons, and they may be from inside or outside the University.

The AVP-RAE must also notify the Respondent of the proposed committee membership within ten (10) Days of deciding an Inquiry is warranted. If the Respondent submits a written objection to any appointed member of the Inquiry Committee or expert based on bias or a personal, professional, or financial Conflict of Interest within ten (10) Days after receiving notice of committee membership, the Provost will determine whether to replace the challenged member with a qualified substitute.

#### b. Charge to the Inquiry Committee and the First Meeting

The AVP-RAE will issue a charge to the Inquiry Committee at the first committee meeting. The charge will include the following: (i) a statement outlining the Allegation(s) against the Respondent, and (ii) a statement that the purpose of the Inquiry is to make a preliminary evaluation of the evidence and statements of those interviewed in order to determine whether there is sufficient evidence to warrant an Investigation. The AVP-RAE will also discuss procedures to be followed when conducting the Inquiry, assist the Committee with organizing plans for the Inquiry, answer any questions raised by the Committee, and inform the Committee that the

AVP-RAE and the University General Counsel will be available, as needed, to advise the Committee.

c. Inquiry Process

The Inquiry Committee will conduct preliminary information-gathering and fact-finding during the Inquiry process. This will usually include conducting interviews with the Complainant, the Respondent, and key witnesses, as well as an examination of relevant Research Records and materials. After consultation with the AVP-RAE and the General Counsel, committee members will decide whether there is sufficient evidence to warrant an Investigation. The scope of the Inquiry does not include deciding whether Research Misconduct occurred or conducting exhaustive interviews and analyses.

d. Inquiry Report

Following the determination of the Inquiry finding, the Inquiry Committee will prepare a written Inquiry report. The Inquiry report will include:

- The name and title of the Inquiry Committee members and experts, if any;
- The Allegations;
- The details of external support, if applicable, including grant numbers, grant applications, and contracts listing the external support;
- A summary of the Inquiry process used;
- A list of all items reviewed as part of the Research Record;
- Summaries of any interviews;
- A detailed description of the evidence; and
- The Committee's determination as to whether an Investigation is recommended or whether any other actions should be taken if an Investigation is not recommended.

The AVP-RAE will provide the Respondent with a copy of the draft Inquiry report for comment and rebuttal. The University may also provide the Complainant, if the identity is known, with portions of the draft Inquiry report that address the Complainant's role and opinions in the Investigation for comment. The Complainant should also be informed as to the Inquiry Committee's decision.

Within ten (10) Days of their receipt of the draft report, the Complainant and Respondent will provide their comments, if any, to the Inquiry Committee. Based on the comments, the Inquiry Committee may revise the report as appropriate. Furthermore, any comments submitted by the Complainant or Respondent will become part of the final Inquiry report and record. The Inquiry Committee will deliver the final report to the AVP-RAE.

e. Inquiry Decision and Notification

The final report of the Inquiry Committee shall be submitted by the AVP-RAE to the Provost. The Provost shall issue a written determination of whether findings from the Inquiry provide sufficient evidence of possible Research Misconduct to justify conducting an Investigation.

The determination as to whether an Investigation is warranted should be made within sixty (60) calendar days of initiation of the Inquiry, unless a request for an extension is approved by the AVP-RAE. Reasons for the extension should be included in the final Inquiry report.

f. Decision that Investigation is Not Warranted

Should the Provost decide that an Investigation is not warranted, the AVP-RAE shall notify all involved and maintain detailed documentation of the Inquiry and decision-making process for seven (7) years after the termination of the Inquiry.

g. Decision that Investigation is Warranted

Should the Provost decide that an Investigation is warranted, the AVP-RAE will notify both the Respondent and the Complainant, in writing, of the Provost's decision. Included in the written notice will be a copy of this University's procedures and statutes of the federal sponsor, if applicable. Additionally, the AVP-RAE will notify all appropriate University officials, in writing, that an Investigation will be conducted. The notification will include a copy of the Inquiry report and details of any federal support that may be associated with the Allegation.

5. Investigation

The purposes of the Investigation are to develop a factual record by exploring the Allegations in detail, to examine the evidence in depth, and to determine specifically whether Research Misconduct has been committed, by whom, and to what extent. The Investigation will begin within thirty (30) Days of the Provost's determination that an Investigation is warranted.

a. Securing Records

The AVP-RAE will secure any additional pertinent records that were not previously secured. The need for additional securing of records may occur for any number of reasons, including the University'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 securing records during the Investigation are the same procedures that apply during the Inquiry.

b. Appointment of the Investigation Committee

Within ten (10) Days of the notification to the Respondent that an Investigation is warranted, the AVP-RAE, in consultation with other University officials as appropriate, will appoint an Investigation Committee and the committee chair. The Investigation Committee must consist of at least three individuals who do not have unresolved personal, professional, or financial real or apparent conflicts of interest in the case, are unbiased, and have the necessary expertise to evaluate the evidence and issues related to the Allegations. Members of the Inquiry Committee may also be appointed to the Investigation Committee.

The AVP-RAE must also notify the Respondent of the proposed committee membership within ten (10) Days of the notification to the Respondent that an Investigation is warranted. If the Respondent submits a written objection to any appointed member of the Investigation Committee within ten (10) Days of receiving the membership notice, the Provost will determine whether to replace the challenged member or expert with a qualified substitute.

c. Charge to the Investigation Committee and the First Meeting

At its first meeting, the AVP-RAE will submit a written charge to the Investigation Committee. The charge will include: (i) a description of the Allegations and related issues identified during the Inquiry; (ii) a definition of Research Misconduct and criteria for a finding of Research Misconduct; (iii) identification of the name of the Respondent; (iv) a statement that the committee is to evaluate the evidence and testimony of the Respondent, Complainant, and key witnesses, and based on a preponderance of the evidence standard, determine whether Research Misconduct occurred and, if so, to what extent, who was responsible, and its seriousness. The first meeting of the Investigation Committee will occur within thirty (30) calendar days of the Provost's determination that an Investigation is warranted.

d. Investigation Process

The Investigation Committee and the AVP-RAE must use diligent efforts to ensure that the Investigation is thorough and sufficiently documented. The AVP-RAE will be present or available throughout the Investigation in order to provide advice to the Committee as needed.

The Investigation will normally involve examination of all documentation including, but not limited to, relevant Research Records, computer files, proposals, manuscripts, publications, correspondence, memoranda, and notes of telephone calls. The Committee should interview the Complainant, the Respondent, and other individuals who might have information regarding aspects of the Allegations. Interviews of the Complainant and Respondent should be audio-recorded, with or without video recording. All other interviews should be recorded at the discretion of the Investigation Committee. Summaries or transcripts of all interviews should



be prepared, provided to the interviewed party for comment or revision, and included as part of the investigatory file.

During the Investigation, if additional information becomes available that substantially changes the subject matter of the Investigation or suggests additional Respondents, the Investigation Committee will notify the AVP-RAE, who will determine whether it is necessary to notify the Respondent of the new subject matter or to provide notice to additional Respondents.

e. The Investigation Report

The Investigation Committee and the AVP-RAE are responsible for preparing a written draft report of the Investigation. The draft Investigation report will be reviewed by the Office of General Counsel for a determination of its legal sufficiency. The report must minimally:

- Describe the nature of the Allegation of Research Misconduct, including identification of the Respondent;
- Describe and document any external support, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing agency support;
- Describe the specific Allegations of Research Misconduct considered in the Investigation;
- Include the University policies and procedures under which the Investigation was conducted, unless those policies and procedures were provided previously;
- Identify and summarize the Research Records and evidence reviewed and identify any evidence taken into custody but not reviewed; and
- Include a statement of findings for each Allegation of Research Misconduct identified during the Investigation. Each statement of findings must:
  - Identify whether the alleged Research Misconduct was Falsification, Fabrication, or Plagiarism, and whether it was committed intentionally, knowingly, or recklessly;
  - 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 the Respondent did not engage in Research Misconduct because of honest error or a difference of opinion;
  - Identify whether any publications need correction or retraction;
  - Identify the person(s) responsible for the Research Misconduct; and
  - List any current support or known applications or proposals for support that the Respondent has pending with agencies; and
- Provide the committee's recommendations for disciplinary action and sanctions.

The AVP-RAE will provide the Respondent with a copy of the draft Investigation report and may also provide the Complainant, if the identity is known, with those

portions of the draft Investigation report that address the Complainant's role in the Investigation. The AVP-RAE shall inform the Respondent and the Complainant, as applicable, of the confidential nature of the draft report and may, at the discretion of the AVP-RAE, require a recipient of the draft report to sign a confidentiality agreement. The Respondent and Complainant will be allowed thirty (30) calendar days to review and provide comment on the draft report. All comments will be attached to the final report.

f. University Review and Decision

Upon finalization, the AVP-RAE will submit the Investigation report to the Provost. The Provost will make the final determination whether to accept the Investigation report, its findings, and the recommended disciplinary actions and sanctions. The Provost may elect to return the report to the Investigation Committee with a request for further fact-finding or analysis. The Provost's determination, together with the Investigation Committee's report, constitutes the final Investigation report for purposes hereof. Furthermore, the Provost may make a determination that varies from that of the Investigation Committee. Should this occur, the Provost shall explain in detail the basis for rendering a decision different from that of the Investigation Committee.

When a final decision on the case has been reached, the AVP-RAE will notify the Respondent of the decision, in writing. This should ordinarily be completed within 120 calendar days of its initiation first meeting of the Investigation Committee. If the Provost determines that the alleged Research Misconduct is substantiated by the findings, the Provost will decide on the appropriate administrative actions to be taken after consultation with the AVP-RAE. Such action will be taken in accordance with University regulations and policies or the applicable Collective Bargaining Agreement and may include:

- i. Withdrawal or correction of all pending or published abstracts and papers emanating from the research where Research Misconduct was found;
- ii. Removal of the responsible person from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction, demotion, or termination of employment; and/or
- iii. Restitution of funds as appropriate.

6. For Externally Funded Research Only – Requirements for Reporting to Agency Sponsors

The AVP-RAE is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies. University officials will also take

interim administrative actions, as appropriate, to protect state or federal funds and ensure that the purposes of the financial assistance are carried out.

a. Reporting Initiation of Proceedings

The AVP-RAE must report, in writing, the decision to initiate an Investigation to the appropriate agency director and compliance agency. The notification must be given upon the conclusion of the Inquiry process and no later than the beginning of the Investigation and, at a minimum, must include the general nature of the Allegation as it relates to the definition of Research Misconduct and outline all aspects of the agency's support (including grant numbers, grant applications, contracts, and publications listing the agency support).

b. Reporting Conclusion of Proceedings

The AVP-RAE must also notify the sponsor of the final outcome of the Investigation and provide the sponsor with a copy of the Investigation report within thirty (30) calendar days of issuance of the final report by the Provost. Any significant variations from the provisions of the University policies and procedures should be explained in any reports submitted to the sponsor. Upon request from the agency sponsor, the AVP-RAE must also provide the sponsor with the following information: (i) the University policies and procedures under which the Inquiry was conducted; (ii) the Research Records and evidence reviewed, including transcripts or recordings of any interviews and copies of all relevant documents; (iii) the Investigation Committee findings; and (iv) the final action of the University.

c. Additional Reporting Requirements

If the University plans to terminate an Inquiry or Investigation without completing all of the sponsor's policy requirements, the AVP-RAE will submit a report of the planned termination to the sponsor, including a description of the reasons for the proposed termination.

If the University determines that it will not be able to complete the Investigation in the amount of time prescribed by the sponsor's policy, the AVP-RAE will submit to the sponsor a written request for an extension that explains the delay, reports on the progress to date, estimates the date of completion of the report, and describes other necessary steps to be taken. If the request is granted, the AVP-RAE will file periodic progress reports as requested by the sponsor.

If an admission of Research Misconduct is made, the AVP-RAE will contact the sponsor. For cases involving externally funded research, the Provost must have prior approval from the agency sponsor before accepting the Respondent's admission of Research Misconduct as a basis for closing a case.

d. Reporting of Immediate Concerns

The AVP-RAE will notify the agency sponsor immediately at any stage of the Inquiry or Investigation if:

- i. There is an immediate health hazard involved;
- ii. There is an immediate need to protect Federal funds or equipment;
- iii. There is an immediate need to protect the interests of the person(s) making the Allegations or of the individual(s) who is the subject of the Allegations as well as any co-investigators and associates, if any;
- iv. It is probable that the alleged incident is going to be reported publicly;
- v. The Allegation involves a public health sensitive issue or a clinic trial; or
- vi. There is a reasonable indication of possible criminal violation.

7. General Standards for Inquiries and Investigations

a. Cooperation of University Employees

University employees will cooperate with the AVP-RAE and other University officials in the review of Allegations and the conduct of inquiries and Investigations. Employees have an obligation to provide relevant evidence to the AVP-RAE or other University officials on Research Misconduct Allegations.

If the Respondent refuses to participate in the process, while employed or after resignation/termination, the AVP-RAE and the applicable Committee will use their best efforts to reach a conclusion concerning the Allegations. Additionally, all reports should note the Respondent's failure to cooperate and its effect on the Committee's review of evidence.

b. Cooperation with the Office of Research Integrity

The University shall cooperate fully with Department of Health and Human Services, Office of Research Integrity, during its oversight review and any subsequent administrative hearings or appeals, including providing all Research Records and evidence under the University's control, custody, or possession and access to all persons within its authority necessary to develop a complete record of relevant evidence.

c. Fairness in Review of Allegations and Proceedings

Inquiries and Investigations will be conducted in a manner that will ensure fair treatment to the Respondent in the Inquiry or Investigation and confidentiality to the extent possible without compromising public health and safety or thoroughly carrying out the Inquiry or Investigation.

d. Protection of Confidentiality

The AVP-RAE may establish reasonable conditions for the handling of Allegations of Research Misconduct in order to protect the confidentiality of all involved parties to the greatest extent possible consistent with the laws of the State of Florida and federal law without compromising public health and safety and without impeding the Inquiry or Investigation. Disclosure of the identity of Respondent and Complainant will be limited to those who need to know in order to carry out a thorough, competent, objective, and fair proceeding. The Complainant will be advised that if the matter is referred to an Inquiry Committee and the Complainant's testimony is required, anonymity may not be guaranteed.

Except in unusual circumstances, the Complainant will not be informed of the final outcome of the Inquiry or Investigation. The Provost in consultation with the AVP-RAE shall determine what, if any, information to provide to the Complainant at various stages in the process, balancing the Complainant's legitimate interest in the proceeding, its progress, and its outcome, with the need to safeguard the integrity and confidentiality of the process.

Records maintained for the purpose of an Investigation of employee Research Misconduct shall be confidential to the extent permitted by Section 1012.91, Florida Statutes. Disclosure of records or evidence from which research subjects might be identified shall be limited to those who need to know in order to conduct the Inquiry, Investigation, and proceeding.

e. Protection Against Retaliation

Regardless of the final decision from the Provost, the AVP-RAE will undertake reasonable efforts to protect Complainants that made Allegations of Research Misconduct in Good Faith and others who cooperate in Good Faith from acts of Retaliation. Upon completion of an Investigation, the Provost will determine, after consulting with the Complainant, what steps, if any, are needed to restore the position or reputation of the Complainant. If an Allegation was not made in Good Faith, the Provost will determine whether any disciplinary action, up to and including termination, should be taken against the Complainant.

f. Restoration of the Respondent's Reputation

If the University determines that no instance of Research Misconduct has occurred, the AVP-RAE will consult with the Respondent and will undertake reasonable efforts to restore the Respondent's reputation. Depending on the particular circumstances, the AVP-RAE should, to the extent possible, publicize the final outcome in forums in which the Allegation of Research Misconduct was previously publicized. Any University actions to restore the Respondent's reputation must first be approved by the Provost.

8. Record Retention

After completion of a case and all ensuing related actions, the AVP-RAE will prepare a complete file, including the records of any Inquiry or Investigation and copies of all documents and other materials furnished to the AVP-RAE or Committees hereunder. The AVP-RAE is also responsible for maintaining files of all documents and evidence and for the confidentiality and the security of the files to the extent required by individual sponsor policy and Florida law. For externally funded research, the sponsor agency will be given access to the records upon request.

**IV. Relevant Laws, Regulations, and Policies**

A listing of laws, regulations, and policies that may be relevant are included below for convenience of reference. This list is not intended to be comprehensive.

A. University and State Regulations and Policies

1. Chapter 112, Part III, Florida Statutes, Code of Ethics for Public Officers and Employees
2. Section 112.3187-112.31895, Adverse action against employee for disclosing information of specified nature prohibited ("Whistle-blower's Act")
3. Section 1012.91, Florida Statutes, Confidentiality of Personnel Records
4. UWF Policy P-10, Detection, Reporting and Investigating Fraud and Misconduct, as it may be amended

B. Federal Regulations and Agency Policies

1. 42 CFR Part 50, Policies of General Applicability
2. 42 CFR Part 93, Department of Health and Human Services Public Health Service Policies on Research Misconduct
3. 45 CFR Part 689, National Science Foundation Research Misconduct

