Research Misconduct

Section 1: Introduction, Scope, and Definitions

Policy

As an organization dedicated to biomedical research in the public interest, the Howard Hughes Medical Institute (HHMI) expects that its scientists will conduct research and engage in related academic activities according to the highest research and ethical standards. HHMI’s commitment to these standards embraces the belief that integrity, responsibility, and accountability are part of the fabric of science. Scientific research is, ultimately, a cooperative endeavor based on the central principle of the pursuit of truth (see also HHMI’s policy on the Guidelines for Scientific Research).

The purpose of this policy is to establish procedures to address specific allegations or apparent instances of research misconduct. When this policy calls for HHMI to assume primary responsibility for resolving one or more allegations or apparent instances of research misconduct, HHMI will respond to each allegation or apparent instance of research misconduct in a thorough, competent, objective, and fair manner, including by taking precautions to ensure that individuals responsible for carrying out proceedings under this policy do not have unresolved personal, professional, or financial conflicts of interest with the complainant, respondent, or witnesses.

The Responsible Vice President has primary responsibility for implementing this policy and may consult with other senior HHMI staff in doing so. If, with respect to a particular allegation or apparent instance of research misconduct, the Responsible Vice President is unable to take on primary responsibility or has an unresolved conflict of interest, the President of HHMI will designate an alternate who is able to take on primary responsibility and is not conflicted. In this event, references in this policy to the Responsible Vice President will mean the designated alternate.

The procedures set forth in this policy are intended to be complementary to any procedures of host institutions, home institutions of Janelia visitors, professional societies, or journals that may also apply in a specific case.

Scope of Policy

This policy applies to HHMI employees at any location; researchers visiting Janelia; former HHMI employees and visitors at Janelia; and contractors working at Janelia, including personnel of companies providing services at Janelia.

For allegations of research misconduct at host-based sites, including any allegations against HHMI laboratory heads who are based at host institutions, HHMI will defer to the host institution to handle the allegations under the host institution’s policies and procedures, whether or not the alleged misconduct involves HHMI employees in the laboratory. HHMI may make an exception and
initiate its own proceedings under this policy to address allegations at a host-based site in the very unusual event that HHMI determines not to do so would put HHMI’s reputation in jeopardy.

HHMI will ordinarily assume primary responsibility for resolving allegations of research misconduct at Janelia, following this policy. However, an HHMI employee at Janelia who also has or had an appointment at or formal affiliation with another institution (including enrollment as a student at another institution) may also be subject to the policies of that institution with respect to allegations of research misconduct, and any proceedings under this policy may be coordinated with that institution at the discretion of the Responsible Vice President. Coordination with another institution may include deferring to the other institution to take primary responsibility for resolving the allegations, in which case there may not be separate proceedings under this policy.

If an allegation of research misconduct is made against a researcher who is or was visiting at Janelia, and relates to work done at Janelia, this policy may be applied at the discretion of the Responsible Vice President, and proceedings may be coordinated with the other institution(s) with which the researcher is affiliated.

If an allegation of research misconduct involves activities that occurred before or after a person’s HHMI employment or Janelia affiliation, this policy may be applied at the discretion of the Responsible Vice President.

In cases where proceedings, including securing of evidence and notifications, are being handled by another institution, the provisions of Section 2 of this policy (including, for example, requirements regarding confidentiality and cooperation) continue to apply to all HHMI personnel, and HHMI may impose sanctions based on the outcome of the other institution’s proceedings. In addition, the Responsible Vice President may, after consultation with HHMI’s President, commence separate proceedings under this policy at any time.

**Definitions**

**Research Misconduct** means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Fabrication is making up data or results and recording or reporting them. Falsification is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record. Plagiarism is the appropriation of another person’s ideas, processes, results, or words without giving appropriate credit. Research misconduct does not include honest error or differences of opinion within the research community. For clarification, authorship and other credit disputes are not covered by this policy unless they also involve good-faith allegations of plagiarism. A finding of research misconduct requires a conclusion that, based on the available evidence, it is more probably true than not that research misconduct occurred, the misconduct represents a significant departure from accepted practices of the relevant research community, and that the misconduct was committed intentionally, knowingly, or recklessly.

**Inquiry** means preliminary information gathering and preliminary fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
**Investigation** means the formal development of a factual record and the examination of that record leading to (a) a decision not to make a finding of research misconduct, or (b) a recommendation for a finding of research misconduct which may include a recommendation for other appropriate actions.

**Proceeding** means any actions taken under this policy relating to alleged or apparent research misconduct.

**Complainant** means a person who in good faith makes an allegation of research misconduct.

**Respondent** means the person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.

Unless an alternate is designated by the President of HHMI, **Responsible Vice President** means (1) for host based sites, the Vice President and Chief Scientific Officer of HHMI, and (2) for Janelia, the Vice President and Executive Director of Janelia. If an allegation of research misconduct is made that involves both one or more HHMI employees at a host-based site and one or more HHMI employees at Janelia, it is generally expected that the Responsible Vice President will be the Vice President with responsibility for the site at which the Respondent is located; however the Vice President and Chief Scientific Officer and the Vice President and Executive Director of Janelia may agree otherwise.

**Host-Based Sites** means HHMI sites at host institutions.

**Janelia** means the Janelia Research Campus.

**Section 2: Confidentiality, Cooperation, Retaliation, and Obstruction**

**Confidentiality**

Any inquiry into or investigation of alleged research misconduct has the potential to jeopardize the reputation of both the respondent and the complainant. For this reason, while these procedures are being followed and after their conclusion, great care should be taken to limit voluntary disclosure of information about an allegation of misconduct. To the extent possible, such information should be disclosed only to those within and outside HHMI who have a need to know the information, consistent with a thorough, competent, objective, and fair research misconduct proceeding.

Notwithstanding the foregoing, the Responsible Vice President may, at his or her discretion and at any time, report in writing the progress and/or the results of any proceeding to the complainant and any other appropriate persons. Other appropriate persons may include, but are not limited to, (1) others within HHMI or at another institution with responsibility for the research impacted by the allegations; (2) co-authors, co-investigators, or collaborators; (3) editors of journals in which work was published or to which work was submitted; (4) professional societies; (5) state professional licensing boards; (6) federal and state agencies with jurisdiction over the impacted research; and (7)
other institutions with which the respondent is or has been affiliated. Any written report provided pursuant to this paragraph may, where appropriate, also be sent to the respondent.

**Cooperation**

All HHMI employees and contractors, all researchers visiting Janelia, and all those who were employed or visiting at Janelia during the time in which the relevant incidents took place, are expected to cooperate fully with proceedings under this policy. If another institution is taking the lead on an inquiry or investigation into alleged misconduct involving an HHMI laboratory, current and former HHMI employees and contractors are expected to cooperate with those proceedings to the best of their ability as well. Cooperation includes, but is not limited to, providing information through written materials and interviews, research records, or other evidence.

**Retaliation Prohibited**

Any retaliation against a complainant who has made an allegation in good faith, or against a person who in good faith provides information about suspected or alleged misconduct, is a violation of this policy and will not be tolerated. HHMI will take reasonable and practical steps to protect the positions and reputations of complainants who have acted in good faith and protect them from retaliation by respondents and others within HHMI.

For clarification, it is not considered retaliation for the respondent, or another person, to make a good-faith allegation of research misconduct against the complainant, or for HHMI or another institution to make a decision to investigate such an allegation.

**Obstruction of Proceedings**

Obstruction of any proceedings under this policy, or of proceedings of another institution that is taking the lead on an inquiry or investigation into alleged research misconduct involving an HHMI laboratory, is a violation of this policy and may itself constitute research misconduct or evidence of research misconduct. Obstruction includes, but is not necessarily limited to, intentionally withholding or destroying evidence in violation of a duty to disclose or preserve; failing to maintain records as required; failing to produce existing records, data, or other evidence in a timely manner; falsifying evidence; encouraging, soliciting, or giving false testimony; and attempting to intimidate witnesses, potential witnesses, or potential leads to witnesses or evidence.

**Section 3: Reporting Misconduct**

**Reporting at Host Institutions**

HHMI employees at host-based sites who become aware of possible research misconduct must follow the host institution’s policies and procedures regarding research misconduct, whether or not the allegation involves one or more other HHMI employees. In addition, an HHMI laboratory head at a host-based site who becomes aware of an allegation of research misconduct relating to activities of his or her laboratory is expected to promptly inform HHMI’s Vice President and Chief Scientific Officer.
**Reporting at Janelia**

At Janelia, a person who believes that an act of research misconduct has occurred or is occurring is expected to take action to help ensure the integrity of Janelia research. The person may wish to begin by discussing his or her concerns with the individual whose work is in question or with the supervisor of the individual whose work is in question, to make sure that there is not just a misunderstanding of the work. If the person does not wish to do so, or has done so and still believes that an act of research misconduct has occurred or continues to occur, the person may wish to discuss his or her concerns with the Janelia Director of Student and Postdoc Programs or the Janelia Scientific Program Director. If the person does not wish to do so, or has done so and still believes that an act of research misconduct has occurred or continues to occur, the person is expected to make an allegation of research misconduct. The allegation may be directed to the Director of Student and Postdoc Programs; the Scientific Program Director; or the Responsible Vice President, preferably in writing.

If the Director of Student and Postdoc Programs or the Scientific Program Director receive an allegation of research misconduct, they may ask the complainant to put his or her concerns in writing, if that has not already been done, or may draft a summary of a verbal allegation for review and approval by the complainant. The Director of Student and Postdoc Programs or the Scientific Program Director must promptly forward the written allegation or approved summary to the Responsible Vice President.

If anyone involved in this process, including the complainant, believes that the Responsible Vice President has an unresolved personal, professional, or financial conflict of interest with respect to the matter, that person may direct the allegation to the President, who will typically designate an alternate member of HHMI’s senior staff to handle the matter. However, if the President determines that the Responsible Vice President does not have a conflict of interest, the President may allow the Responsible Vice President to carry out his or her responsibilities under this policy.

Janelia laboratory heads or senior members of Janelia management who become aware of possible research misconduct impacting Janelia research are expected to promptly inform the Vice President and Executive Director of Janelia.

**Section 4: Inquiries**

**Initiation of Inquiry**

When this policy calls for HHMI to assume primary responsibility for resolving an allegation of research misconduct, upon receiving such an allegation the Responsible Vice President must make a reasonable assessment to determine if the allegation meets the definition of research misconduct, is substantial, has a reasonable foundation, and is sufficiently credible and specific to permit identification of potential evidence of misconduct. If the Responsible Vice President determines that the allegation does not meet these criteria, he or she may dismiss the matter. If the Responsible Vice President determines that the allegation meets these criteria, he or she must promptly initiate an inquiry. To do this, the Responsible Vice President must arrange to preserve records, designate individuals to conduct the inquiry, and notify the respondent, all as described in more detail below.
The Responsible Vice President must also report the allegation to the President, whether or not an inquiry is initiated.

**Preserving Records**

The Responsible Vice President must promptly commence to (a) take all reasonable and practical steps to identify and obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, (b) inventory the records and evidence, and (c) sequester the records and evidence in a secure manner. Because it may not be apparent which records and evidence may be relevant and where these data may be found, the process of identifying and preserving records and evidence may take some time. The Responsible Vice President will generally need assistance from other staff, including for example lab and other research staff, scientific computing and other information technology staff, and facilities staff, in taking steps to identify, obtain custody of, inventory, and sequester records and evidence. Questions about documenting these steps and the chain of custody of any physical evidence that is sequestered may be directed to the Vice President and General Counsel or his or her designee within the Office of the General Counsel.

Those responsible for handling inquiries and investigations must also undertake all reasonable and practical efforts, with support from HHMI staff and others as needed, to take custody of, inventory, and sequester additional research records and evidence that are discovered during the course of a research misconduct proceeding and determined to be relevant to the matter.

Where the research records or evidence encompass scientific instruments, including computers, shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies have evidentiary value that is substantially equivalent to the evidentiary value of the instruments. For example, a mirror copy of a dataset may be taken and preserved, leaving the original dataset in place and accessible for ongoing research activity.

**Designation of Individuals to Conduct Inquiry**

After commencing the records preservation process, Responsible Vice President must promptly designate two or more individuals, chosen from among HHMI’s scientific personnel or other qualified scientists, to conduct the inquiry. These individuals should have scientific expertise relevant to the allegation, to the extent reasonably feasible, and should otherwise be qualified to conduct a thorough and authoritative evaluation of the relevant evidence. The selected individuals should not have any unresolved personal, professional, or financial conflict of interest with those involved in the matter. At the discretion of the Responsible Vice President, these individuals may be assisted by one or more professional advisors, including members of HHMI’s legal staff. The Responsible Vice President will not participate in the conduct of the inquiry.

**Notification of the Respondent**

After taking custody of, inventorying, and sequestering all the available records and evidence that can initially be identified as needed to conduct the research misconduct proceeding and designating individuals to conduct the inquiry, the Responsible Vice President must notify the respondent of the allegation, in writing. The notice should include sufficient information about the allegation to allow
the respondent to prepare to respond, and must include either a copy of this policy or a link to the hhmi.org webpage where this policy may be found. The respondent may submit one or more written responses to the allegation; any such responses will become part of the record of the proceeding. The respondent will also be provided the opportunity to speak with those conducting the inquiry.

The notice should also inform the respondent of the individuals designated to conduct the inquiry, and allow the respondent an opportunity to raise objections based on unresolved conflicts of interest of those individuals. Any written objection promptly made by the respondent to the Responsible Vice President that an individual designated to conduct the inquiry has a conflict of interest will be considered by the Responsible Vice President, but the Responsible Vice President’s evaluation of and decision concerning any such objection will be final. Once the Responsible Vice President has made a final decision regarding who should conduct the inquiry, he or she will charge those individuals with that responsibility.

Where appropriate and feasible, during the course of the proceedings the respondent should be given copies of, or reasonable, supervised access to, the relevant research records.

**Inquiry Proceedings**

Those conducting the inquiry should review all evidence that has already been sequestered, and should request, secure, and review all additional information or documentation they believe is directly relevant to the allegation. If possible, they should interview all complainants and respondents. They may interview others who may have knowledge that is directly relevant to the allegation.

Those conducting the inquiry should inform the Responsible Vice President immediately if they discover an immediate health hazard, an immediate need to protect human or animal research subjects, an immediate need to protect HHMI funds or equipment, an immediate need to protect the complainant or the respondent, a likelihood that the allegation will be reported or disclosed publicly, or evidence of a possible criminal violation. The Responsible Vice President may take such actions as he or she determines are necessary to address any of these circumstances.

Interviews may be videotaped if all those participating agree, and audiotaped at the discretion of those conducting the inquiry (if applicable state law permits). In lieu of videotaping or audiotaping interviews, those conducting the inquiry may have another member of HHMI staff attend the interviews to take notes and write up a summary, or may use a transcription service to transcribe the interviews.

Uncooperative behavior by the respondent may result in immediate implementation of the investigation phase of this procedure.

**Written Report**

A written report must be prepared by those conducting the inquiry that (a) describes the process used to conduct the inquiry, (b) states what evidence was reviewed, (c) summarizes relevant interviews, and (d) includes the conclusion of the inquiry. The conclusion of the inquiry shall be either (1) that there is no reasonable basis for believing that research misconduct occurred and no
further investigation is warranted, or (2) that there is a reasonable basis for believing that research misconduct occurred and further investigation is warranted.

If the conclusion of the inquiry is that no further investigation is warranted, the report of the inquiry must include sufficiently detailed documentation to permit a later assessment of the reasons for reaching that conclusion. If the conclusion of the inquiry is that further investigation is warranted, the report of the inquiry must include a specific articulation of the allegation(s) as to which further investigation should be pursued. Those conducting the inquiry will provide the respondent with a copy of the draft report and give the respondent 10 days to review the draft report and provide a written response for their consideration. If the respondent requests additional time to provide a response, those conducting the inquiry may at their discretion allow up to an additional 10 days. Those conducting the inquiry may also provide the complainant with a copy of the draft report, or relevant portions of the draft report, and give the complainant 10 days to provide a response. After receipt of any solicited responses, those conducting the inquiry will make any changes to the report that they deem necessary or appropriate, and will then finalize the report.

Those conducting the inquiry must then promptly submit the final written report to the Responsible Vice President, together with any response submitted by the respondent, for a decision as to whether further investigation is warranted. The Responsible Vice President must promptly review the report and other evidence and make his or her decision.

**Period for Completion**

The inquiry must be completed, and the final report submitted to the Responsible Vice President, within 60 calendar days after the individuals who are to conduct the inquiry have been designated and charged, unless circumstances clearly warrant a longer period. If an inquiry takes longer than 60 days, the record of the inquiry must include documentation of the reasons for exceeding the 60-day period.

**Decision to Dismiss**

If, after reviewing the written report and other evidence, the Responsible Vice President concludes that there is no reasonable basis for believing that research misconduct occurred and no further investigation is warranted, the Responsible Vice President will dismiss the matter.

If the matter is dismissed, the Responsible Vice President will determine what actions, if any, HHMI reasonably should take to help restore and protect the reputation of the respondent, and will see that those actions are taken. The Responsible Vice President will also determine what actions, if any, HHMI reasonably should take against any complainant employed by HHMI who is found to have knowingly or recklessly brought a false accusation of research misconduct, and will see that those actions are taken.

If the matter is dismissed but the Responsible Vice President believes that the conduct of any HHMI employee or Janelia visitor has not met the standards described in HHMI's policy on the Guidelines for Scientific Research or any other applicable HHMI policy, the Responsible Vice President will determine what actions should be taken by HHMI and will see that those actions are taken.
If Misconduct is Admitted

If the written report concludes that an investigation is warranted, but the respondent admits to the research misconduct that has been alleged, the Responsible Vice President may decide that an investigation is unnecessary and may determine and proceed with appropriate sanctions, as provided in Section 6.

Decision that an Investigation is Warranted

If, after reviewing the written report and other evidence, the Responsible Vice President concludes that there is a reasonable basis for believing that research misconduct occurred and further investigation is warranted, the Responsible Vice President will designate a panel of at least three individuals to conduct an investigation of the matter. The individuals designated may be past or present members of HHMI's Medical Advisory Board or Scientific Review Board or persons otherwise affiliated with HHMI. The panel will ordinarily not include any of the individuals responsible for conducting the inquiry.

The individuals who comprise the panel that will conduct an investigation should have scientific expertise relevant to the allegation, to the extent feasible, and should otherwise be qualified to conduct a thorough and authoritative evaluation of the relevant evidence. The selected individuals should not have any unresolved personal, professional, or financial conflict of interest with those involved in the matter. At the discretion of the Responsible Vice President, these individuals may be assisted by one or more professional advisors, including members of HHMI's legal staff. The Responsible Vice President will not participate in the conduct of the investigation.

Notification to Respondent and Complainant

The Responsible Vice President will promptly provide written notice of the conclusion of the inquiry, and of his or her decision as to whether an investigation is warranted, to each of the respondent and the complainant.

If there is to be an investigation, the respondent will also be provided with the final written report of the inquiry and will be notified of the membership of the panel that will conduct the investigation. If within 10 days of this notification the respondent provides a written objection to the Responsible Vice President on the grounds that one or more panel members have a conflict of interest, the Responsible Vice President will consider the objection, but the Responsible Vice President’s evaluation of and decision concerning any such objection will be final. Once the Responsible Vice President has made a final decision regarding membership of the panel that will conduct the investigation, he or she will charge those individuals with that responsibility.

Section 5: Investigations

Initiation of Investigation

When this policy calls for HHMI to assume primary responsibility for resolving an allegation of research misconduct, and it is decided that an investigation is warranted, the investigation should
normally begin within 30 days of that determination, unless additional time to constitute and charge
an appropriate investigation panel is clearly warranted and documented in the record of the
proceedings.

The Responsible Vice President will make available to the panel such professional staff support,
access to professional advisors, and other resources as the Responsible Vice President deems
reasonably necessary.

**Investigation Proceedings**

The investigation should include examination of all relevant documentation, including but not
necessarily limited to relevant research data and proposals, publications, paper and electronic
correspondence, and memoranda of telephone calls.

If possible, interviews should be conducted of all complainants and respondents, as well as others
who might have information regarding key aspects of the allegations. Interviews may be videotaped
if all those participating agree, and audiotaped at the discretion of those conducting the inquiry (if
applicable state law permits). Summaries of the interviews should be prepared, provided to the
interviewed party for comment or revision, and included as part of the investigatory file. In lieu of
videotaping or audiotaping interviews, the panel may have a member of HHMI staff attend
interviews to take notes and write up summaries, or may use a transcription service to transcribe the
interviews.

The panel should also provide the respondent with the opportunity to submit evidence and suggest
witnesses. The respondent is expected and required to provide evidence as requested by the panel.
The panel is expected to pursue diligently all significant issues, and to carry its investigation through
to completion. The panel is not bound by the conclusions of the prior inquiry and may reframe the
scope of investigation as appropriate based on its review of the evidence, with appropriate notice to
the respondent in the event of significant changes in the scope of the investigation.

The panel should inform the Responsible Vice President immediately if it discovers an immediate
health hazard, an immediate need to protect human or animal research subjects, an immediate need
to protect HHMI funds or equipment, an immediate need to protect the complainant or the
respondent, a likelihood that the allegation will be reported or disclosed publicly, or evidence of a
possible criminal violation. The Responsible Vice President may take such actions as he or she
determines are necessary to address any of these circumstances.

**Written Report**

A written report must be prepared by those conducting the investigation. The report must describe:

- the procedures used in the conduct of the investigation;
- how and from whom information relevant to the investigation was obtained;
- a summary of the substance of the documentary and other evidence on which the panel
  relied to reach its finding;
• the panel's finding with respect to each allegation of misconduct under investigation, which shall be based on the preponderance of the evidence and shall be either (1) a finding that no research misconduct was committed or (2) a finding of research misconduct including specifications of the precise nature of that conduct; and
• a recommendation for appropriate action. Appropriate action may include, for example, sanctions against the respondent, or steps that should be taken to restore the respondent's reputation if the finding is that no research misconduct was committed.

The panel will provide the respondent with a copy of the draft report and give the respondent 30 days to review the draft report, indicate in writing any clarifications or corrections he or she believes would be appropriate, and provide a statement. The panel may, in its discretion, provide the complainant with copy of the draft report and an opportunity to respond to those portions of the report that address his or her role in the matter. After receipt of any solicited responses or comments, the panel will make any changes to the report that it deems necessary or appropriate, and will then finalize the report, thereby completing the investigation.

The final written report must be submitted to the Responsible Vice President, together with any statement submitted by the respondent, for a decision as to whether any sanctions are warranted, and if so, what those sanctions should be.

**Time Period**

The investigation should ordinarily be completed, and the final report submitted to the Responsible Vice President, within 120 calendar days after the panel that is to conduct the investigation has been fully constituted and charged, unless circumstances warrant a longer period. If an investigation takes longer than 120 days, the record of the investigation should include documentation of the reasons for exceeding the 120-day period.

**Decision to Dismiss**

If the panel’s finding is that no research misconduct was committed, and after reviewing the written report and other evidence the Responsible Vice President concurs, the Responsible Vice President will dismiss the matter.

If the matter is dismissed, the Responsible Vice President will determine what actions, if any, HHMI reasonably should take to help restore and protect the reputation of the respondent, and will see that those actions are taken. The Responsible Vice President will also determine what actions, if any, HHMI reasonably should take against any complainant employed by HHMI who is found to have knowingly or recklessly brought a false accusation of research misconduct, and will see that those actions are taken.

If the matter is dismissed but the Responsible Vice President believes that the conduct of any HHMI employee or Janelia visitor has not met the standards described in HHMI's policy on the Guidelines for Scientific Research, the Responsible Vice President will determine what actions should be taken by HHMI and will see that those actions are taken.
**Request to Supplement Report**

The Responsible Vice President may, after reviewing the written report and other evidence, ask the panel to supplement its report before rendering a final decision.

**Section 6: Sanctions**

**Decision Regarding Sanctions**

If the finding is that research misconduct occurred, and after reviewing the written report and other evidence the Responsible Vice President concurs, the Responsible Vice President will determine appropriate sanctions.

Possible sanctions for a finding of research misconduct include, among others: removal from a project; a letter of reprimand; retraction or correction of publications; special monitoring of future work; and/or termination of HHMI employment.

The Responsible Vice President may proceed with the imposition of any sanction except for termination of HHMI employment, which is subject to the prior approval of the President.

**Notification to Respondent and Complainant**

The Responsible Vice President will promptly provide the respondent and complainant with written notice of the results of the investigation, and will promptly provide the respondent with written notice of any sanctions to be imposed on the respondent.

**Review by the President**

Any respondent who has been sanctioned under this policy may request to have the matter reviewed by the President of HHMI. The respondent must submit any such request in writing within 20 days of the date the written notice of the sanctions was sent to the respondent. The request may include any matter related to the investigation or resulting sanctions that the respondent desires the President to consider, and must include an explanation of why the review is warranted.

If the President does not accept the request, the President will so notify the respondent, in writing.

If the President accepts the request, the President will notify the respondent in writing of the results of the review, with a copy of the notification to the Responsible Vice President and, at the discretion of the President, to other appropriate persons.

**Section 7: Miscellaneous Provisions**

**Status of Complainant and Respondent during Proceedings**
Respondents must be presumed to be innocent of the alleged research misconduct unless found otherwise under the standards and procedures of this policy. However, HHMI reserves the right to address employment or other workplace issues that may arise while proceedings under this policy are being conducted. For example, if a complainant, respondent, or witness behaves in an uncivil or unprofessional way in an HHMI workplace, HHMI will address the situation consistent with its standard practices, notwithstanding the pendency of concurrent research misconduct proceedings. If evidence shows that a complainant, respondent or witness has engaged in behavior that, although not necessarily constituting research misconduct, is grounds for putting the individual on a paid or unpaid leave of absence or terminating his or her HHMI employment or visitor status at Janelia, HHMI may take these steps consistent with its usual policies and practices, which may lead to personnel or other actions occurring before the research misconduct proceedings are concluded.

In addition, it is a violation of this policy for a person to bring a false accusation of research misconduct against another person other than in good faith. The bringing of a false allegation, if not done in good faith (for example, if done with knowing or reckless disregard for information that would disprove the allegation), is a violation of HHMI policies and may result in disciplinary action, up to and including termination of employment or visitor status.

**Respondent’s Participation in Proceedings**

The respondent is expected and required to participate in the proceedings under this policy. During any interview of the respondent pursuant to any proceeding under this policy, the respondent may be accompanied by an advisor, such as a scientific colleague, another HHMI employee, or a lawyer. The respondent may consult with the advisor but the advisor may not direct questions or answers, offer argument, or participate directly in the proceedings unless asked to do so by the Responsible Vice President in his or her sole discretion. For clarification, HHMI does not provide or pay for legal counsel for the respondent or any others involved in research misconduct proceedings.

**Initial and Interim Reports to President**

The Responsible Vice President shall regularly report the progress, status, and results of any proceeding under this policy to the President.

**Notices and Recordkeeping**

Notices or communications are considered to be “in writing” or “written” if sent by email. Generally, notices and communications should be sent by email, in the interest of limiting delays in proceedings. Written reports may be provided in PDF or other electronic format and attached to email.

Written records generated or obtained as a result of any proceedings under this policy will be maintained by the Responsible Vice President’s office (or, at the request of the Responsible Vice President, HHMI’s Office of the General Counsel) for at least seven years after the termination of the last proceeding taken under this policy.

**Computation of Time Periods**
In computing any period of time prescribed or allowed by this policy, the day of the event from which the designated period of time begins to run shall not be included. The last day of the period shall be included, unless it is a Saturday, Sunday, or HHMI holiday, in which event the period runs until the end of the next business day which is not a Saturday, Sunday, or HHMI holiday.

Related Procedures, Forms and Policies

Guidelines for Scientific Research Policy

Issued by: Office of the President
Managed by: Office of the General Counsel
Issue Date: 03/28/2007
Last Updated: 11/01/2016