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MERCY UNIVERSITY
RESEARCH MISCONDUCT POLICY

Contents

1 GENERAL STATEMENT OF POLICY

A fundamental purpose of the University is to foster an environment that promotes the responsible conduct of research, discourages Research Misconduct, and deals promptly with any Allegations or Evidence of possible Research Misconduct. It is the University's basic expectation that all research conducted by members of the University community will adhere to the highest ethical and moral standards. This Policy describes the procedures to be followed by the University in connection with any Allegation that University faculty, staff, post-doctoral associates, research fellows, and/or students, whether paid by the University or through other funding sources, may have engaged in Research Misconduct. The University may develop procedural documents to facilitate the implementation of this Policy. This Policy is also intended to comply with the requirements of applicable regulatory agencies and the sponsors of research, including the Public Health Service Policies on Research Misconduct (42 CFR Part 93) and the National Science Foundation regulations (45 CFR Part 689), as applicable. In the event anything in this policy conflicts with applicable federal regulations, the federal regulations will prevail.

2 APPLICABILITY AND OVERSIGHT ROLES

This Policy applies to allegations of research misconduct involving fabrication, falsification, or plagiarism in proposing, performing, reviewing, or reporting research (or research training) in connection with all University research-related activities, regardless of funding source. When an allegation involves Public Health Service-supported biomedical or behavioral research, research training, or related activities, the University will conduct the proceeding in compliance with 42 CFR Part 93 and guidance issued by the US DHHS Office of Research Integrity.

For the purposes of this document, the Associate Provost for Faculty Affairs, Research, and Academic Initiatives serves as the University's Research Integrity Officer and the Provost serves as the University's Deciding Officer.

3 DEFINITIONS

3.1 *Allegation* means a disclosure of possible Research Misconduct through any means of communication. The disclosure may be by written or oral statement or other communication.

3.2 *Complainant* means a person who makes an Allegation of Research Misconduct.

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

3.4 *Evidence* means any document, tangible item, or testimony offered or obtained during a Research Misconduct Proceeding that tends to prove or disprove the existence of an alleged fact.

3.5 *Fabrication* means making up data or results and recording or reporting them.

3.6 *Falsification* means 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.

3.7 *Good faith allegation* means 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.

3.8 *Inquiry* means preliminary information-gathering and preliminary fact-finding to determine whether an Allegation has substance and if an Investigation is warranted. An Investigation must be undertaken if the Inquiry determines the Allegation has substance.

3.9 *Investigation* means the formal development, examination, and evaluation of a factual record to determine whether Research Misconduct has taken place, to assess its extent and consequences, and to evaluate appropriate action.

3.10 *Investigation Committee* means the committee consisting of at least three members of University staff or faculty who are appointed by the Research Integrity Officer or designee to investigate charges of Research Misconduct against faculty, staff, post-doctoral associates, and/or students.

3.11 *Plagiarism* means the appropriation of another person's ideas, processes, results, creative product, or words without giving appropriate credit.

3.12 *Policy* means this Policy regarding the Disposition of Allegations of Research Misconduct.

3.13 *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.

3.14 *Research Misconduct* means Fabrication, Falsification, and/or Plagiarism in proposing or performing research, reviewing research, or in reporting research results. Research Misconduct does not include honest error or differences of opinion.

3.15 *Research Misconduct Proceeding* means any action related to alleged Research Misconduct taken under this Policy, including but not limited to, determinations of whether or not an Inquiry is warranted, Inquiries, Investigations, and regulatory agency or research sponsor oversight reviews, hearings, and administrative appeals.

3.16 *Research Record* means the record of data or results that embody the facts resulting from a research inquiry, including, but not limited to, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided in the course of a Research Misconduct Proceeding.

3.17 *Respondent* means the person against whom an Allegation of Research Misconduct is directed or who is the subject of a Research Misconduct Proceeding.

3.18 *Retaliation* means an adverse action taken against a Complainant, witness, or other participant in a Research Misconduct Proceeding in response to (a) a good faith Allegation of Research Misconduct, or (b) good faith cooperation with a Research Misconduct Proceeding.

3.19 *University* means Mercy University.

4 REPORTING ALLEGATIONS OF RESEARCH MISCONDUCT

Allegations of Research Misconduct may be brought to the University's attention as follows:

4.1 Any individual, whether employee, student, research fellow, or postdoctoral associate may report an allegation of Research Misconduct by one or more persons orally or in writing. Such individual (the "Complainant") should address such Allegation to the Research Integrity Officer. If the Allegation is reported orally, the Research Integrity Officer will contemporaneously create a written record of the Allegation. If the Research Integrity Officer is the subject of an Allegation, the Allegation should be reported to the Deciding Officer.

4.2 If an Allegation is received by another University administrator or identified in the course of another University process, such as an internal audit, the responsible administrator must immediately notify the Research Integrity Officer of the Allegation in writing. The Research Integrity Officer may initiate a Research Misconduct Proceeding regardless of the conduct or outcome of the other University processes.

4.3 A regulatory agency, external funder, or research sponsor may forward an Allegation of Research Misconduct at the University to the Research Integrity Officer or designee who will then determine whether to accept the responsibility of an Inquiry or an Investigation of the Allegation on behalf of the University. If the regulatory agency, external funder, or research sponsor has conducted an Inquiry, the University's Research Misconduct Proceeding may begin at the Investigation stage. If the Allegation involves sponsored research, the Research Integrity Officer will contact the Senior Director of the Office of Sponsored Programs. The Research Integrity Officer will notify the Respondent of the Allegation.

5 INDIVIDUAL OBLIGATIONS REGARDING INVESTIGATIONS CONDUCTED BY A REGULATORY AGENCY OR RESEARCH SPONSOR

If a University faculty member, staff member, post-doctoral associate, research fellow, or student becomes the subject of an Investigation of any kind conducted by a regulatory agency or research sponsor concerning an Allegation of Research Misconduct, such individual must report the existence of the Investigation immediately in writing to the Research Integrity Officer. Failure to disclose a pending Investigation pursuant to this section may subject the University employee, research fellow, post-doctoral associate, or student to disciplinary or other appropriate action.

6 CONFIDENTIALITY

To protect the privacy and professional reputations of those involved, all Research Misconduct Proceedings will be conducted in a fashion designed to maintain confidentiality. Knowledge of the Research Misconduct Proceedings and the disclosure of the identity of the Respondents and the Complainants will be limited, to the extent possible, to those who need to know, consistent with a thorough, competent, objective, and fair Research Misconduct Proceeding, and as allowed by law. Those who need to know may include institutional review boards, journals, editors, publishers, co-authors, and collaborating institutions. Except as may otherwise be prescribed by applicable law, confidentiality of any Research Records or Evidence from which research subjects might be identified must be maintained. Disclosure of such Research Records or Evidence will be limited to those who have a need to know to

carry out a Research Misconduct Proceeding. All individuals having knowledge of the identity of the Respondents and the Complainants and access to information in any reports or drafts thereof prepared in connection with a Research Misconduct Proceeding must keep such knowledge and information confidential. This limitation on disclosure of the identity of respondents, complainants, and witnesses no longer applies once an institution has made a final determination of research misconduct findings. The institution must disclose the identity of respondents, complainants, or other relevant persons to ORI pursuant to an ORI review of research misconduct proceedings under this part. This section does not prohibit institutions from managing published data or acknowledging that data may be unreliable.

7 ASSESSMENT AND INQUIRY

7.1 Upon receipt of an Allegation of Research Misconduct, the Research Integrity Officer will promptly assess the Allegation to determine whether an Inquiry is warranted. The Research Integrity Officer will assess if the Allegation (a) falls within the definition of Research Misconduct in Section 3.14 above; (b) is made against a person to whom this Policy applies; and (c) is sufficiently credible and specific so that potential Evidence of Research Misconduct may be identified. An Inquiry is warranted if all these criteria are met. The purpose of an Inquiry is preliminary information-gathering and preliminary fact-finding to determine whether the Allegation warrants a formal Investigation, as described in Section 8 below. An Inquiry is not a formal hearing requiring a full review of all Research Records and Evidence related to the Allegation.

7.2 Promptly following the Research Integrity Officer's determination of whether or not an Inquiry is warranted, the Research Integrity Officer will consult the Deciding Officer regarding the determination and, if an Inquiry is warranted, regarding the appropriate scope of the Inquiry and the requirements and procedures for securing related Research Records and Evidence. If an Inquiry is warranted, either before or at the time the Research Integrity Officer notifies the Respondent of the Allegation as provided in Section 7.3 below, the Research Integrity Officer will secure the related Research Records and Evidence in accordance with Section 0 below. If the Research Integrity Officer determines that an Inquiry is not warranted, they will write a sufficiently detailed document to permit a later review of why the University did not proceed to an Inquiry. This documentation will be retained for seven (7) years.

7.3 Once the Research Integrity Officer determines that an Inquiry is warranted, the Research Integrity Officer will notify the Respondent and the Complainant in writing of the Allegation that has been filed and that an Inquiry will be conducted. If the Inquiry subsequently identifies additional Respondents, the Research Integrity Officer will also notify them in writing.

7.4 Promptly following the Research Integrity Officer's determination that an Inquiry is warranted, the securing of the related Research Records and Evidence, and the notifications required under Section 7.3 above, the Research Integrity Officer will conduct an Inquiry to determine whether an Investigation of the Allegation is warranted. An Investigation is warranted if (a) there is a reasonable basis for concluding that the Allegation falls within the definition of Research Misconduct under Section 3.15 above, and (b) preliminary information-gathering and

preliminary fact-finding from the Inquiry indicates that the Allegation may have substance.

7.5 Promptly following the completion of the Inquiry, the Research Integrity Officer will prepare a preliminary Inquiry report that will include the following information: (a) the name and position of the Respondent; (b) a description of each Allegation of Research Misconduct; (c) whether the Allegation is associated with sponsored research, and the related contract or grant number, if any; (d) a summary of the steps taken during the Inquiry; (e) a summary of the results of the Inquiry; (f) the basis for concluding that the Allegation falls within the definition of Research Misconduct; (g) a recommendation to the Deciding Officer as to whether or not an Investigation is warranted; and (h) attachments of any relevant materials used in the Inquiry.

7.6 The Research Integrity Officer will provide the Respondent an opportunity to review and comment on the preliminary Inquiry report. The comments of the Respondent on the preliminary Inquiry report, if any, must be submitted within 10 calendar days of the date on which the Respondent received the preliminary report. Upon receipt of the comments from the Respondent, the Research Integrity Officer will attach the Respondent's comments to the preliminary Inquiry report and submit this final Inquiry report to the Deciding Officer. Upon receipt of the final Inquiry report, the Deciding Officer, in consultation with the Research Integrity Officer, will make the decision as to whether to refer the case for an Investigation.

7.7 All efforts should be made to complete the Inquiry as expeditiously as possible, and within 60 calendar days of its initiation, unless circumstances clearly warrant a longer period. If the Inquiry takes longer than 60 calendar days to complete, the Inquiry record must include documentation of the reasons for exceeding the 60-day period.

7.8 If the Deciding Officer determines that an Investigation is not warranted, the Deciding Officer must consult with the Research Integrity Officer or designee prior to closing the case. If the Research Integrity Officer is in agreement with the Deciding Officer, the matter will be closed and all records of the proceedings will be treated as confidential pursuant to Section 6 to respect the rights and protect the reputations of all parties involved. All reasonable and practical efforts, if requested and as appropriate, will be undertaken to protect or restore the reputation of the Respondent. The Research Integrity Officer will notify the Respondent and the Complainant of this decision in writing.

7.9 If the Deciding Officer determines that an Investigation is warranted, the Research Integrity Officer will notify the Respondent and the Complainant in writing within a reasonable time after the Deciding Officer’s decision, but before the Investigation begins. The notice to the Respondent must include a copy of the final Inquiry report and include a copy of, or refer to, this Policy and the relevant regulations or policies of the applicable regulatory agency and/or research sponsor, if any.

7.10 If the Deciding Officer determines that an Investigation is warranted, the Deciding Officer will, within 14 calendar days of this determination, send the final Inquiry report to the Research Integrity Officer or designee for Investigation of the case. If the research involved in the Allegation is supported by a grant, contract, or other external funding from a research sponsor, the Research Integrity Officer for Research or designee will notify the Director of the Office of Sponsored Programs and the sponsor in accordance with sponsor requirements.

8 INVESTIGATION

8.1 Upon receipt of the final Inquiry Report, the Research Integrity Officer or designee will appoint an Investigation Committee and Chair as soon as is practical. The Investigation Committee will consist of at least three University employees.

8.2 The Investigation will begin within 30 calendar days after the Deciding Officer's referral of the case to the Research Integrity Officer. The Investigation Committee will give the Respondent written notice of any new Allegations of Research Misconduct not addressed during the Inquiry or in the initial notice of the Investigation within a reasonable amount of time after a determination to pursue any such new Allegations.

8.3 The University will take reasonable steps to ensure an impartial and unbiased Investigation to the maximum extent practicable, including participation of persons with appropriate expertise who do not have unresolved personal, professional, or financial conflicts of interest with, or biases against, those involved with the Inquiry or the Investigation.

8.4 The Investigation Committee will use diligent efforts to ensure that the Investigation is thorough and sufficiently documented and that it includes an examination of all Research Records and Evidence relevant to reaching a decision on the merits of the Allegations. If the Respondent refuses to make any such Research Records and Evidence available for the Investigation, the Investigation Committee may draw adverse inferences from such refusal.

8.5 The Investigation Committee will comply with the requirements of any applicable regulatory agency and/or research sponsor regarding the interviewing of individuals in connection with the Investigation, will use reasonable efforts to interview each Respondent, the Complainant, and any other available person whom the Investigation Committee has identified as having information regarding any relevant aspects of the Investigation, and will keep written records of each interview.

8.6 Upon completion of the Investigation, the Investigation Committee will prepare a draft Investigation report. The Investigation Committee will also provide the Respondent a copy of the draft Investigation report and, concurrently, provide the Respondent and/or the union representative and/or legal counsel, if any, a copy of, or supervised access to, the Evidence on which the draft Investigation report is based. The Respondent's comments on the draft Investigation report, if any, must be submitted within 30 calendar days of the date on which the Respondent received the draft report.

8.7 The Investigation Committee will promptly review any comments on the draft Investigation report by the Respondent and decide whether or not to make a finding of Research Misconduct in response to each specific Allegation of Research Misconduct. A finding of Research Misconduct made under this policy requires that: (a) there be a significant departure from accepted practices of the relevant research community; (b) the misconduct be committed intentionally, knowingly, or recklessly; and (c) the Allegation be proven by a Preponderance of the Evidence. The Investigation Committee will document its decision in the final Investigation report. The final Investigation report will be in writing and will:

a) Describe the nature of the Allegations of Research Misconduct;

b) Identify the research sponsor support, if any, and include any grant or contract numbers, grant or contract applications, grants or contracts, and publications or presentations listing the support;
c) Describe the specific Allegations of Research Misconduct for consideration in the Investigation;
d) Include the University policies and procedures under which the Investigation was conducted;
e) Identify and summarize the Research Records and Evidence reviewed, and identify any Evidence taken into custody but not reviewed;
f) For each separate Allegation of Research Misconduct identified during the Investigation, provide a finding as to whether Research Misconduct did or did not occur, and if Research Misconduct did occur:
    i. Identify whether the Research Misconduct was Falsification, Fabrication, or Plagiarism;
    ii. Identify whether the Research Misconduct was committed intentionally, knowingly, or recklessly;
    iii. Summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the Respondent;
    iv. Identify the specific research sponsor support, if any;
    v. Identify whether any publications need correction or retraction;
    vi. Identify the person(s) responsible for the Research Misconduct;
    vii. List any current support or known applications or proposals for support that the Respondent has pending with any research sponsors; and
    viii. Include and consider any comments made by the Respondent on the draft Investigation report.

8.8 The Investigation Committee will submit the final Investigation report to the Research Integrity Officer, who will then discuss the report with the Deciding Officer. The Deciding Officer will notify the Respondent and the Complainant of the Investigation Committee's finding as to whether Research Misconduct did or did not occur and, in the case of a finding of Research Misconduct, will decide whether any subsequent disciplinary actions by the University are warranted. If the Deciding Officer determines that subsequent disciplinary actions are warranted as a result of the finding of Research Misconduct, the University may conduct a disciplinary proceeding in connection with the finding of Research Misconduct in accordance with applicable collective bargaining agreements, handbooks, the University Bylaws, and/or other applicable policies of the University.

8.9 If the research involved in the Allegations is or was supported by a grant or a contract, the Research Integrity Officer or designee, in collaboration with the Office of Sponsored Programs, will report and respond to any applicable regulatory agency and/or research sponsor as outlined in Section 9 below and send a copy of any such communication to the Director of the Office of Sponsored Programs.

8.10 All aspects of the Investigation, including conducting the Investigation, preparing the draft Investigation report and providing it for comment, deciding whether or not to make a finding of Research Misconduct, preparing the final Investigation report, and notifying any applicable regulatory agency and/or research sponsor in accordance with its requirements, will be completed within 120 calendar days of the beginning

of the Investigation. If the Investigation takes longer than 120 calendar days to complete, the Research Integrity Officer will notify and obtain approval of an extension of the Investigation time period from any applicable regulatory agency or sponsor as needed, and the Investigation record must include documentation of the reasons for exceeding the 120-day period and any such extension approvals. If, upon the conclusion of an Investigation, it is determined that the Respondent has NOT committed any Research Misconduct, the matter will be closed, the Research Integrity Officer will notify in writing any applicable regulatory agency and/or research sponsor and, if the Allegation involves sponsored research, the Director of the Office of Sponsored Programs and all records of the proceedings will be treated as confidential pursuant to Section 6 above to respect the rights and protect the reputations of all parties involved. All reasonable and practical efforts, if requested and as appropriate, will be undertaken to protect or restore the reputation of persons alleged to have engaged in Research Misconduct but against whom no finding of Research Misconduct is made.

9 SECURING OF RESEARCH RECORDS AND EVIDENCE

9.1 Pursuant to section 7.2 above, the Research Integrity Officer will comply with the requirements and procedures for securing Research Records and Evidence based on consultation with the Office of Research. Either before or at the time the Research Integrity Officer notifies the Respondent of the Allegation and at any other time during the course of an Inquiry when additional Research Records or Evidence are discovered, the Research Integrity Officer, with any necessary assistance from General Counsel, will take all reasonable and practical steps to (a) obtain custody of all the Research Records and Evidence needed to conduct the Research Misconduct Proceeding, (b) inventory the Research Records and Evidence, and (c) sequester the Research Records and Evidence in a secure manner; except that where the Research Records or Evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the Research Records or Evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. To the extent that compliance with the requirements and procedures for securing Research Records and Evidence involves monitoring or inspecting the activity and accounts of individual users of the University's computer resources, the Research Integrity Officer and General Counsel will comply with the requirements of the University's Policy on Acceptable Use of Computer Resources.

9.1 The Research Integrity Officer will maintain the Research Records and Evidence as required under Section 12 below.

9.2 If, in accordance with Section 7.4 above, it is determined that an Investigation is warranted, the Research Integrity Officer, with assistance from General Counsel, will at the Investigation stage be responsible for the securing and maintenance of Research Records and Evidence as set forth in Sections 0 and 9.1 above.

9.3 Where appropriate, the Respondent will be given copies of, or reasonable supervised access to, the Research Records or Evidence to allow the Respondent to continue to do the Respondent's work during an Inquiry, Investigation, and/or any related

disciplinary proceedings.

10 REPORTING AND RESPONDING TO REGULATORY AGENCIES AND RESEARCH SPONSORS

10.1 The Research Integrity Officer, in collaboration with the Office of Sponsored Programs, will report and respond to all applicable regulatory agencies and research sponsors regarding Allegations of Research Misconduct in accordance with applicable regulations and sponsor policies. Depending on the regulatory agency or the research sponsor, reporting requirements may begin immediately upon receipt of an Allegation and continue during and after the Research Misconduct Proceedings. If the Allegation involves sponsored research, the Research Integrity Officer will send to the Director of the Office of Sponsored Programs a copy of all such reports and responses to the research sponsor, as well as a copy of any follow-up communications with the research sponsor.

10.2 Throughout the Research Misconduct Proceeding, the Research Integrity Officer will review the situation to determine if there is any threat of harm to public health, sponsor funds and equipment, or the integrity of the research process. In the event of such a threat, the Research Integrity Officer will, in consultation with other institutional officials and any applicable regulatory agency and/or research sponsor, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of sponsor funds and equipment, reassignment of personnel or of the responsibility for the handling of sponsor funds and equipment, additional review of research data and results or delaying publication. In addition, the Research Integrity Officer will immediately notify the applicable regulatory agency and/or research sponsor providing support for research that is the subject of an Allegation of Research Misconduct, as well as the Director of the Office of Sponsored Programs, if, at any time during any related Research Misconduct Proceeding, the University has reason to believe that any of the following conditions exist:

a) Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;
b) Research sponsor resources or interests are threatened;
c) Research activities and attendant compensation should be suspended;
d) There is reasonable indication of possible violations of civil or criminal law;
e) Governmental or other action is required to protect the interests of those involved in the Research Misconduct Proceeding;
f) The University believes the Research Misconduct Proceeding may be made public prematurely, so that the regulatory agency and/or research sponsor may take appropriate steps to safeguard Evidence and protect the rights of those involved; and
g) The research community or the public should be informed.

11 GENERAL CONSIDERATIONS

11.1 When being interviewed by the Research Integrity Officer or appearing before the Investigation Committee, the Respondent may be accompanied by a union representative or legal counsel. However, neither the Inquiry nor the Investigation is a trial-type proceeding, and the union representative or legal counsel may not actively participate in the proceeding, such as by directing questions or answers or offering argument on behalf of the Respondent.

11.2 The Respondent may be suspended or removed from work under a research grant or contract by the Deciding Officer, in consultation with the Research Integrity Officer, any time following the commencement of an Inquiry regarding an Allegation of Research Misconduct about such research if, in the judgment of the Deciding Officer, such suspension or removal is warranted by the circumstances. Depending on developments in the Inquiry or Investigation, the Deciding Officer may, in consultation with the Research Integrity Officer, restore the Respondent to the work under the research grant or contract. The Research Integrity Officer will notify any applicable regulatory agency and/or research sponsor of any suspension, removal, or restoration decision under this section, and will send the Director of the Office of Sponsored Programs a copy of any such notice and any follow-up communications with the regulatory agency or research sponsor.

11.3 If a Respondent admits the accuracy of an Allegation of Research Misconduct in the course of an Inquiry or Investigation, the matter will be directly forwarded to the Deciding Officer for appropriate action, which may include disciplinary action under applicable collective bargaining agreements, handbooks, the University Bylaws, or other applicable policies of the University.

11.4 Allegations that are brought in good faith may not be the basis of any Retaliation against the Complainant, even if the Allegations are not substantiated upon Inquiry or Investigation. All reasonable and practical efforts will be undertaken as appropriate, to protect or restore the position and reputation of any Complainant and any witness or other individual involved in a Research Misconduct Proceeding, and to counter potential or actual Retaliation against such individuals.

11.5 The Research Integrity Officer, members of the Investigation Committee, the Deciding Officer and all others responsible for carrying out any part of a Research Misconduct Proceeding:

a) will take precautions to ensure that they do not have real or apparent personal, professional, or financial conflicts of interest with, or biases against, any Respondent, any Complainant, or any witness in a Research Misconduct Proceeding;
b) will at all times conduct their activities related to the implementation of this Policy in a fashion that is consistent with their obligations under applicable federal, state, and local laws, rules, and regulations; and
c) may request the assistance of legal counsel from the University's Office of the General Counsel during the course of their activities related to the implementation of this Policy.

12 RECORD KEEPING

The University has a continuing obligation under this Policy to ensure that it maintains adequate records of a Research Misconduct Proceeding. The Research Integrity Officer will maintain in a secure manner sufficiently detailed documentation of each Inquiry, including related Research Records and Evidence and maintain in a secure manner sufficiently detailed documentation of each Investigation, including related Research Records and Evidence, for seven years after (a) the completion of the Research Misconduct Proceeding or (b) the completion of any regulatory agency or research sponsor proceeding involving the Allegations of Research Misconduct, whichever is later, in order to permit a later assessment by the regulatory agency or research sponsor or otherwise.