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UNIVERSITY OF PITTSBURGH
RESEARCH MISCONDUCT POLICY
POLICY RI 07

Implementing Executive: **Senior Vice Chancellor for Research**
Responsible Unit: **Office of Research Protections**
Category: **Research**
Effective Date: **January 1, 2026**

I. Purpose

This policy affirms the University of Pittsburgh's ("University") commitment to upholding Research integrity in all scholarly endeavors and outlines the University's process for handling allegations of Research Misconduct in accordance with the University's commitment to responsible conduct of Research, and Federal Agency[1] regulations, e.g., U.S. Department of Health and Human Services (HHS) regulations (42 C.F.R. §§ 93.25 – 93.511). It also establishes the rights and responsibilities of individuals involved in Research Misconduct proceedings. The conduct of proceedings under this policy will be overseen by the University Research Integrity Officer (RIO).

II. Scope

This Policy applies to all University Members who conduct Research at the University.

III. Definitions

A. Allegation: is a disclosure of potential Research Misconduct through any means of communication.

B. Complainant: is a person who, in good faith, makes an Allegation of Research Misconduct or raises an issue of concern that may meet the definition of Research Misconduct.

C. Days: refers to calendar days excluding weekends, state and federal holidays, and University holidays.

D. Deciding Official: is the Dean (or their designee) of the school where the Respondent is appointed or conducting research. The Provost may designate a deciding official who

[1] Federal Agencies include those that fund research as well as those that oversee Research Misconduct processes (e.g., Department of Health and Human Services or Office of Research Integrity (ORI))

holds a different position or title (e.g., a dean of a different school, in the case of joint appointment; a director, in the case of an institute; or vice president in the case of regional campuses) if they are convinced that doing so will better provide for a fair and competent proceeding. (Hereinafter referred to as the "Dean").

E. Fabrication: is making up data or results and recording or reporting them.

F. 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.

G. Good Faith: is having a reasonable belief in the truth of one's Allegation or testimony based on the information known to the individual (e.g., complainants and witnesses) at the time, or the impartial carrying out of duties by those involved in the misconduct proceedings (e.g., panel members).

H. Intentionally: means to act with the aim of carrying out the act.

I. Knowingly: means to act with awareness of the act.

J. Plagiarism is the appropriation of another person's ideas, processes, results, or words, without giving appropriate credit. (a) Plagiarism includes the unattributed verbatim or nearly verbatim copying of sentences and paragraphs from another's work that materially misleads the reader regarding the contributions of the author. It does not include the limited use of identical or nearly identical phrases that describe a commonly used methodology. (b) Plagiarism does not include self-plagiarism or authorship or credit disputes, including disputes among former collaborators who participated jointly in the development or conduct of a research project. Self-plagiarism and authorship disputes do not meet the definition of research misconduct.

K. Preponderance of the Evidence: proof by evidence that, compared with evidence opposing it, leads to the conclusion that the fact at issue is more likely true than not.

L. Recklessly: means to propose, perform, or review Research, or report Research results with indifference to a known risk of fabrication, falsification, or plagiarism.

M. Research: is a systematic planned study, experimentation, evaluation, demonstration, or survey designed to contribute to generalizable knowledge (basic Research) or specific knowledge (applied Research) by establishing, discovering, developing, elucidating, or confirming information or underlying mechanisms related to investigation in all fields.

N. Research Integrity Officer (RIO): is the person, appointed by the Chancellor, who receives an Allegation(s) of Research Misconduct or issue(s) of concern, conducts the assessment of Allegations or concerns, oversees the administration of the inquiry and investigation; and carries out governance and responsibilities as documented in

in this Policy and in **section XI** of Procedure RI 07.

O. Research Misconduct: is defined as Fabrication, Falsification, or Plagiarism in proposing, performing, or reviewing Research, or in reporting Research results done intentionally, knowingly, or recklessly. Research Misconduct does not include honest error, differences of opinion, or disputes over authorship or credit.

P. Research Record: means the record of data or results that embody the facts resulting from Research. Data or results may be in physical or electronic form and include, but are not limited to, research proposals, raw data, processed data, physical samples, clinical research records, laboratory records, study records, laboratory notebooks, progress reports, manuscripts, abstracts, theses, dissertations, records of oral presentations, online content, lab meeting reports, journal articles, instrument output, computer records, emails and text messages.

Q. Respondent: is a person against whom an Allegation of Research Misconduct is made or who is the subject of a Research Misconduct proceeding.

R. Retaliation**:** means an adverse action taken against a Complainant, witness, or panel or board member by an institution or one of its members in response to: (a) a good faith Allegation of Research Misconduct; or (b) good faith cooperation with a Research Misconduct proceeding.

S. University Member**:** All full-time and part-time faculty, staff, students, temporary employees, researchers, visitors, volunteers, postdocs, fellows, trainees, and interns at the University.

IV. Research Integrity and Misconduct

This Policy specifically addresses Research Misconduct, which is distinct from honest error and ambiguities inherent in the process of scholarly investigation. Research Misconduct carries the potential for serious harm to the University, to the integrity of Research, and to society.

This Policy and supporting Procedure RI 07 are grounded in principles of fairness, confidentiality, honesty, and the protection of academic freedom. The University is committed to maintaining high standards of Research integrity in accordance with applicable federal regulations and in cooperation with relevant Federal agencies. This commitment is supported through researcher training, clear communication of responsibilities, and maintaining policies and standards that are in compliance with federal regulations. Researchers are expected to abide by the University Guidance on Responsible Conduct of Research (RCR).

This Policy defines Research Misconduct and provides additional information that governs the process for determining whether Research Misconduct has occurred. In addition to the definition of this term provided above, the following situations are also evidence of Research Misconduct:

A. A Respondent's failure to retain data when obligated to do so.

B. A Respondent's willful destruction or modification of Research Records documenting the questioned research after being informed of the Research Misconduct Allegation and as established by a Preponderance of the Evidence.

C. A Respondent's failure to provide Research Records documenting the questioned research, where the Respondent claims to possess the records but refuses to provide them upon request.

V. Allegations of Research Misconduct

University Members must report Allegations, suspicions, or evidence of Research Misconduct and may do so by contacting the RIO or by using the Pitt Concern Connection. Anonymous allegations are acceptable; however, sufficient detail and/or corroborating evidence must be provided to initiate Research Misconduct Proceedings.

Allegations of Research Misconduct will not bring the questioned Research to a halt or be the basis for other disciplinary or adverse actions unless compelling reasons are found through the Research Misconduct proceedings, such as potential harm to human subjects, animal subjects, or society.

A. Acting in Good Faith, Safeguards, and Non-tolerance of Retaliation

Allegations or concerns, evidence of potential Research Misconduct, and testimonies must be provided in Good Faith and not capriciously. Good Faith, as applied to any University Member or a panel member (described below), means cooperating with the Research Misconduct proceedings by impartially carrying out the duties without influence by personal, professional, or financial conflicts of interest.

At any point in the Research Misconduct Proceedings when the RIO or the Dean involved in a proceeding believes an Allegation or evidence provided, or any testimony was not made in Good Faith, such Allegation, evidence, or testimony may be excluded from consideration, and the Dean may pursue these concerns under applicable University Policies.

Safeguards exist for all who act in Good Faith while making Allegations, giving testimony, or making evaluations**.** These safeguards include fair and objective procedures for examining and resolving Allegations and protection against retaliation and damage to reputation. The University will not tolerate or engage in retaliation. Anyone who believes that there has been retaliation against them for reporting in Good Faith under this policy may bring a grievance under the applicable University Policies to the appropriate responsible body, depending upon their status.

VI. Research Misconduct Proceedings

Misconduct Proceedings are used by the University to address Allegations of Research Misconduct and involve a three-stage process: assessment, inquiry, and investigation. The process is meant to be fair and result in fact-based decisions that meet the definition of

Preponderance of Evidence. The RIO carries out or facilitates the process as described in this Policy. The Dean and the Provost make decisions based on the activities facilitated by the RIO.

A. General

1. Timeliness
    a. Time Limitation on an Allegation

This Policy applies only to alleged Research Misconduct that occurred within six (6) years prior to the date the University or a Federal Agency receives an Allegation. Exceptions to the six (6) year limitation include public health and safety and subsequent use of the Research in question as described in section IV. A of Procedure RI 07. In addition, the RIO has the discretion to assess any Allegation regardless of this time limitation.

b. Timing Requirements for Misconduct Proceedings

Time periods allowed for Research Misconduct proceedings, as described in Section IV of Procedure RI 07, have been chosen based on overall time requirements imposed by Federal Agencies. A Respondent or other participants in the proceeding may request extensions. Such requests, when based on good cause, are facilitated by the RIO and may be granted by the Dean, in consultation with relevant Federal Agencies as applicable.

2. Confidentiality

Great care must be taken to preserve confidentiality in the handling and reporting of information gathered for Research Misconduct proceedings. All parties involved in a Research Misconduct proceeding are obligated to maintain confidentiality. However, this obligation will not prevent the University from notifying parties on a need-to-know basis at any time.

3. Disclosures and Notifications

a. Protective Measures for Human and Animal Research Subjects

The Federal Agency, the relevant institutional review boards, or other responsible oversight committees will be notified promptly, and at any time following receipt of an Allegation, if the Dean or RIO determines that there is an immediate need to protect human subjects or animals used in Research or there is otherwise a need-to-know through notifications described throughout the process of the misconduct proceedings found in Procedure RI 07. The relevant institutional review boards may take action to protect human subjects or animals independently of the inquiry and investigatory processes described below.

b. Disclosures on a need-to-know basis

Disclosures are limited to those who need-to-know to carry out a Research Misconduct

proceeding. Those who need to know may include, but are not limited to, representatives of institutional review panels and boards, journals, editors, publishers, co-authors, collaborating institutions, internal audit, employee relations, the Compliance Investigation and Ethics Office, Federal Agencies, or other relevant offices. The Dean may consider delaying a tenure or a promotion consideration of a Respondent until the Allegation has been adjudicated in order to avoid disclosing confidential information about ongoing Research Misconduct proceedings to faculty personnel committees, even if those Committees might be regarded as having a right to know.

4. Standards of Review and Burden of Proof
    a. During the investigation stage, the University has the burden to prove that the Respondent committed Research Misconduct by a Preponderance of the Evidence, such that:
        i. There was a significant departure from accepted practices of the relevant research community; and
        ii. The Research Misconduct was committed intentionally, knowingly, or recklessly.
    b. The Respondent has the burden to prove, by a Preponderance of the Evidence, any defense that the Respondent may raise, including honest error or difference of opinion. The Respondent also has the burden of proving, by a Preponderance of the Evidence, any mitigating factors that may be relevant to a decision to impose administrative actions after a Research Misconduct finding.

5. Admissions of Research Misconduct by the Respondent

At any time after becoming aware of an Allegation, the Respondent can admit to Research Misconduct. Admissions are documented and facilitated by the RIO and accepted by the Dean. The admission must include a written and signed statement specifying all of the falsification, fabrication, and/or plagiarism that occurred (which may include more than the initial Allegation) and which Research Records were affected, an acknowledgement that the admitted acts constitute Research Misconduct, and an acknowledgement by the Respondent of their rights under this Policy. The RIO will provide this written admission detailing the specifics of the Research Misconduct and any other relevant materials to the Dean to determine corrective actions and sanctions. If the underlying research was federally funded, the relevant Federal Agency will be notified, and a final resolution may not be reached until that agency's process is followed, and they agree to the proposed disposition of the case.

6. University Record and Sequestered Evidence Retention

The University record and all sequestered evidence must be assembled and maintained throughout the Research Misconduct proceedings by the RIO and shared as required by federal regulations, where applicable. See Section IV.2 of the Procedure RI 07 document for more detailed information.

The University record and all sequestered evidence (regardless of whether the evidence is part of the institutional record) must be maintained in a secure location for seven (7) years after completion of the University's Research Misconduct proceedings or the applicable Federal Agency proceedings, whichever is later, unless the Federal Agency advises otherwise in writing. Such records will include any comments from the Respondent and all other material collected or reviewed.

B. The Assessment

The assessment process, which is carried out by the RIO, determines whether Allegations or issues of concern fall within the definition of Research Misconduct, and whether they are sufficiently credible and specific so that evidence of potential Research Misconduct may ultimately be identified.

Assessment processes, as documented in IV.B of Procedure RI 07, include, but are not limited to, interviewing complainants, sequestering Research Records, formulating outcomes of the assessment, and providing notifications.

The assessment can result in an inquiry or no inquiry. When no inquiry is warranted, the matter can be closed. Allegations or concerns not meeting the definition of Research Misconduct that impact the integrity of research endeavors are referred to other responsible parties within the University by the RIO.

C. The Inquiry

If the RIO's assessment finds that an inquiry is warranted, this preliminary fact-finding process will determine whether the Allegation appears to have sufficient substance to warrant a formal investigation. Findings of Research Misconduct, including the determination of whether the alleged Research Misconduct was intentional, knowing, or reckless, cannot be made at the inquiry stage.

The Dean will appoint an inquiry panel or may elect to ask the RIO to complete the inquiry in place of a panel. At the end of the inquiry, the inquiry panel (or RIO) makes a recommendation to the Dean as to whether or not an investigation is warranted. In developing its recommendation, the inquiry panel or RIO may examine evidence, interview individuals, or consult with experts in the field. To facilitate this process, the RIO must secure additional evidence as needed. A formal decision is made by the Dean whether or not to accept the recommendation made by the inquiry panel. In the event the Dean's decision contradicts the recommendation of the inquiry panel, the RIO can request a review of the Dean's decision by the Provost. See Section IV. C. of Procedure RI 07.

Inquiry processes, as documented in section IV.C. of Procedure RI 07, include, but are not limited to, securing evidence, appointment of inquiry panel members, notification to the

Respondent, inquiry proceedings, inquiry timeline, inquiry reports, and Dean's decision.

D. The Investigation

The investigation determines whether Research Misconduct has occurred. In the investigation process, the Dean appoints an investigative panel that recommends whether or not Research Misconduct has occurred. The panel performs this duty by conducting interviews, consulting with experts who are knowledgeable in the field of research under investigation as needed, reviewing all relevant evidence, and drafting and submitting its findings and recommendations to the Dean. Based on the findings of the investigative panel's report, the Dean makes the formal decision regarding whether or not Research Misconduct has occurred and communicates that decision to relevant parties.

Investigation processes, as documented in **section IV.D** Procedure RI 07, include, but are not limited to, timeline determinations, appointment of the investigation panel members, communications with all relevant parties, notification of rights of the Respondent, execution of investigation proceedings, generation of the investigation report, Dean's decision, and determination of potential sanctions.

VII. Appeals

A Dean's determination of Research Misconduct or the sanctions imposed by the Dean may be appealed by a Respondent in writing to the Provost, with a copy provided to the RIO. Such an appeal will be restricted to the body of the evidence presented during the Research Misconduct proceedings. The grounds for reversing a finding of Research Misconduct or a sanction are: (a) established procedures were not followed in a way that materially affected the decision; (b) the findings lack a rational connection to the facts established; or (c) the sanctions imposed are substantially disproportionate to the severity of the finding of Research Misconduct. The Provost will render a final decision on the appeal and communicate that decision to the relevant parties. In the event the Provost determines there are sufficient grounds for reversing a finding of Research Misconduct, they may convene a new investigation panel to address all or part of the Allegations.

Appeal processes, as documented in Section VIII of the Procedure RI 07, include, but are not limited to, timeline determinations, notifications, including the notification of the Respondent's right to an appeal, execution of the appeal proceedings, and documentation.

VIII. Closing a Case of Research Misconduct

The University can close a case of Research Misconduct at any stage of the proceedings (based on the outcome of an assessment, inquiry, investigation, or appeal) or upon admission of Research Misconduct by the Respondent. For cases involving federal funding, case closure may

only occur if the Federal Agency agrees with the outcome of the University's Research Misconduct proceedings, accepts the Respondent's admission of Research Misconduct, or the Federal Agency reaches a settlement with the Respondent.

IX. Joint Proceedings

The RIO will coordinate Research Misconduct proceedings with the appropriate personnel at other institutions when Allegations and concerns occurred in part at the University, and in part at another institution, or when the Respondent has moved to a new institution after the Research was conducted at the University. In addition, the RIO may consult with Federal Agencies and other relevant parties to mutually define a process for thorough, competent, objective, and fair proceedings. See further details in Section X of Procedure RI 07.

X. Governance and Accountability

This section outlines the responsibilities of the various University officials and any party to the Research Misconduct proceedings. See further details in section XI of Procedure RI 07.

A. RIO

The RIO, who is appointed by the Chancellor, receives and assesses Allegations, facilitates the misconduct proceedings through scheduling meetings, gathering evidence, advising and guiding Respondents, Complainants, Witnesses, and panel members on policy and procedures, complies with established timelines, and communicates University findings as prescribed. The RIO also facilitates notifications throughout the process. The RIO is the Institutional Certifying Official responsible for the submission of all federal assurances.

When the RIO has a conflict of interest, the RIO will notify the Dean and recuse themselves from the proceedings. They will be replaced by the Associate or Deputy RIO and/or an appropriate University official designated by the Dean.

B. The Dean

As the deciding official, the Dean will receive the Assessment report and, when indicated, appoint a non-conflicted chair and members of the inquiry and investigation panels, and review the respective reports to determine the next steps in the Research Misconduct proceedings, including procedural timelines. The Dean determines whether Research Misconduct has occurred after reviewing the Investigation report, determines whether sanctions or other administrative actions are prescribed at any stage, ensures privacy within the Research Misconduct proceedings, and works to address allegations of retaliation or the restoration of reputations.

C. University Members

University Members are responsible for contributing to an organizational culture that establishes, maintains, and promotes Research integrity and the responsible conduct of Research. All University Members are required to report Allegations, suspicions, or evidence of Research Misconduct, University Members who conduct or participate in Research are expected to carry out that research with honesty, rigor, and transparency. University Members are also obligated to cooperate with the RIO and other University officials during Research Misconduct proceedings.

D. The Provost

The Provost is the deciding official on all appeals of Research Misconduct findings and sanctions imposed. The Provost also reviews any objections raised by the Respondent concerning the appointment or composition of the inquiry or investigation panels.

The Provost may also be asked by the RIO to review the Dean's decision if it contradicts the recommendation of the inquiry panel. The Provost will be the deciding official, in place of the Dean, in the event of a new investigation after an Appeal.

XI. Compliance with Government Regulations

This Policy will be administered in compliance with applicable regulations of all governmental entities with authority over the Research in question and may be subject to appropriate modifications to accommodate those regulations.

XII. Non-compliance

Noncompliance with the requirements found in this Policy may lead to sanctions as described in any applicable collective bargaining agreements, Faculty or Staff Handbooks, or the Student Code of Conduct, as applicable.

XIII. Contact Information

For questions on the Misconduct proceedings, contact research.integrity@pitt.edu.

XIV. Related Authorities

Policies

CS 03, Copying Copyrighted Material

RI 14, Research Data Management

RI 08, Responsibilities of Sponsored Research Investigators

AO 10, Access to and Use of University Computing Resources

RI 14 Research Data Management | Office of Policy Development and Management | University of Pittsburgh

Other Authorities

Guidelines on Academic Integrity

IRB Reference Policies & Procedures

Animal Research Protection