

UNIVERSITY OF PITTSBURGH POLICY 11-01-01

CATEGORY: RESEARCH ADMINISTRATION
SECTION: Research
SUBJECT: Research Integrity
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Preface

The University of Pittsburgh seeks excellence in the discovery and dissemination of knowledge. Excellence in scholarship requires all members of the University community to adhere to the highest standards of integrity with regard to research, instruction and evaluation. The principle of academic integrity is integral to membership in the University community. Each such member is deemed to recognize the value and special importance of this responsibility.^o

As scholars and citizens of the University community, all parties must be ever cognizant of the axiom that every increment of authority and discretion brings with it corollary responsibilities to colleagues, staff, students, the University as a whole, the community, and society at large. In addition, federal regulations impose policies and procedures on the University for dealing with possible misconduct in science.

All those engaged in research should be cognizant of the value to the University of calling attention to research misconduct, and of the importance of bona fide challenges in assuring and maintaining the integrity of scholarly investigation and of this institution.

Should the conduct of research or the collection or reporting of research data and information be challenged on the ground of misconduct, whether by a faculty member, student, staff member, research associate or fellow, or a person outside the University, the framework for resolution of the grievance shall involve a process of peer and administrative review. The procedures described below are steps in an academic peer review and fact-finding process and are not intended or designed to represent rules of a judiciary. Principles of basic fairness and confidentiality shall be observed in these peer-review procedures. Responsible and honest discourse, the protection of academic freedom, and protection of individuals against unnecessary public dissemination of unproven allegations and protection of whistleblowers against retaliation are essential ingredients in the process.

In judging whether misconduct has occurred, it is important to distinguish fraud from honest error and ambiguities that are inherent in the process of scholarly investigation and are normally corrected by further research. Research misconduct, as defined below, carries potential for serious harm to the University community, to the integrity of research, and to society as a whole. Accordingly, it is incumbent upon faculty members to exercise active leadership in their supervisory roles in mentoring, collaborating with, or directing junior colleagues, staff, or students. First, faculty must be fully cognizant of the quality of work being done for which they assume responsibility and, second, they must seek to avoid undue pressure placed upon more junior faculty, staff, or students which could lead to the publication or other report of any inaccurate, incomplete, or falsified data or information.

Safeguards give the individual accused of misconduct the confidence that his or her rights are protected and that the mere filing of an allegation of research misconduct will not bring the research to a halt or be the basis for other disciplinary or adverse action absent other compelling reasons. Safeguards for a complainant, a witness, or a member of a peer committee in any proceeding described in this document include protection against retaliation for making allegations or providing

^oTo inquire about this policy or to report suspected research misconduct, please contact the University Research Integrity Officer: Craig S. Wilcox, PhD; craig.wilcox@pitt.edu, 412-624-8270.

testimony, fair and objective procedures for the examination and resolution of the allegations, and diligence in protecting the position and reputation of one who makes allegations, gives testimony, or makes evaluations as a committee member in good faith.

A. Scope

This policy applies to all Allegations of Research Misconduct on the part of faculty, research associates, trainees, and staff alleged to have occurred while the Respondent conducted Research at the University. The conduct of proceedings under this policy shall be overseen by the University RIO. Where the matters complained of occurred in part at the University, and in part at another institution, the RIO shall coordinate with the appropriate personnel at the other institution on any investigation of the Allegations and consult with federal agencies and other relevant parties to mutually define a process for a thorough, competent, objective, and fair investigation of the Allegations.

This Policy shall apply to Allegations of Research Misconduct by students where the Research in question is supported by, or was proposed to be supported by, external funding, or when the student is one of a group of respondents that includes one or more non-students. Student matters not within the scope of this policy shall be handled under the relevant Academic Integrity Guidelines of the academic unit in which the student is enrolled.

To the extent that the subject matter of allegations falls within the scope of another University policy or falls under the jurisdiction of another University office or committee, such as, but not limited to, the Human Research Protection Office ("HRPO"), Institutional Animal Care and Use Committee ("IACUC") or the Conflict of Interest Committee ("COIC"), such matters may be referred at any time to those committees for audit or investigation.

This policy shall 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, if necessary, to accommodate those regulations.

B. Definitions

Capitalized terms used throughout this Policy shall have the meanings set forth below:

1. **Allegation** is a report of potential Research Misconduct, through any means of communication.
2. **Complainant** is a person who reports an Allegation of Research Misconduct.
3. **Days** refers to calendar days excluding weekends, state and federal holidays, and University holidays. Requests to extend the time allowed for any step in this policy, when based on good cause, may be granted by the Dean or the Research Integrity Officer.
4. **Dean** is the deciding official under this policy and is usually the dean of the school where the Respondent is appointed. The Provost may designate a deciding official who 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 branch campuses) if he/she is convinced that doing so will better provide for a fair and competent proceeding.
5. **Fabrication** is making up data or results and recording or reporting them.
6. **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.
7. **Good Faith** as applied to a Complainant or witness means having a belief in the truth of one's Allegation or testimony that a reasonable person in the Complainant's or witness's position would have, based on the information known to the Complainant or witness at the time. An Allegation or cooperation with a Research Misconduct matter is not undertaken in Good Faith if it is made/undertaken recklessly or with knowing disregard for information that would negate

the Allegation or testimony. Good Faith as applied to a committee member (of an inquiry or investigation panel under this Policy) means carrying out the duties of a committee member impartially and without influence by personal, professional or financial conflicts of interest.

8. **Plagiarism** is the unattributed copying or appropriation of another person's ideas, unique processes, results, or words without giving appropriate credit.
9. **Preponderance of the Evidence** is proof by evidence that, compared with evidence opposing the fact at issue, leads to the conclusion that the fact at issue is more probably true than not.
10. **Research** is a systematic study, experiment, evaluation, demonstration or survey designed to contribute to generalizable knowledge and includes all basic, applied, and demonstration research in all fields.
11. **Research Integrity Officer** ("RIO") is the person, appointed by the Chancellor, who receives Allegations of Research Misconduct, conducts the assessment of Allegations as set forth below, oversees the administration of Inquiries and Investigations; and carries out other responsibilities assigned to the Research Integrity Officer in this Policy.
12. **Research Misconduct** is defined as fabrication, falsification, or plagiarism, in proposing, performing, or reviewing research, or in reporting research results. Research Misconduct does not include honest error or differences of opinion, or disputes over authorship or credit.
13. **Research Record** is the record of data or results from Research and includes, for example, laboratory records, both physical and electronic, biological or physical samples, images, Research proposals, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and books.
14. **Respondent** is a person against whom an Allegation of Research Misconduct is made.
15. **Whistleblower** is a member of the University community (including faculty, staff, students, or trainees) who in Good Faith makes an Allegation or cooperates in the investigation of an Allegation.

C. Reporting

1. Obligation to Report
Reporting suspected Research Misconduct is a shared responsibility of all members of the academic community. Allegations shall not be made capriciously, but Good Faith suspicions or evidence of Research Misconduct shall be reported.
2. Confidentiality
Because of the potential jeopardy to the reputation and rights of the Respondent, great care must be taken to handle the reporting as well as the conduct of any inquiry and investigation so as to preserve confidentiality wherever reasonably possible, providing information only to those with a need to know, such as representatives of the HRPO, IACUC, Internal Audit, Employee Relations or other relevant offices. This obligation of confidentiality applies to the Complainant, the Respondent, and all participants in an inquiry or investigation, including panel members, witnesses and administrators. In order not to release confidential information about on-going research integrity proceedings to faculty personnel committees who might be regarded as having a right to know, a dean may consider delaying a tenure or promotion consideration of a Respondent until the allegation has been adjudicated. While confidentiality should be maintained during an assessment, inquiry or investigation, this obligation will not preclude the University from notifying parties with a need to know at any time.
3. Method of Reporting
Allegations of Research Misconduct and the basis for them shall be communicated confidentially to the Research Integrity Officer. Allegations may be submitted orally or in writing, but Complainants are encouraged to submit Allegations of Research Misconduct in writing so

as to assure a clear understanding of the issues. Anonymous allegations are acceptable; however, sufficient detail and/or corroborating evidence must be provided to determine whether an inquiry should be initiated. Allegations should provide specific information when possible.

4. Notifications

The sponsoring agency, the HRPO or IACUC (Institutional Animal Care and Use Committee) or other responsible oversight committees shall be notified promptly, and at any time following receipt of an Allegation, if the Dean or Research Integrity Officer determines that there is an immediate need to protect human subjects or animals used in research or that the alleged Misconduct is otherwise sufficiently serious to warrant early notification. The HRPO or IACUC may take action to protect human subjects or animals independently of the inquiry and investigatory processes described below.

D. Roles and Responsibilities

1. Research Integrity Officer ("RIO")

The Chancellor will appoint the RIO who will have primary responsibility for implementation of this policy, including the following duties related to Research Misconduct proceedings:

- a. Consult confidentially with persons uncertain about whether to submit an Allegation of Research Misconduct;
- b. Receive Allegations of Research Misconduct;
- c. Assess each Allegation of Research Misconduct in accordance with Section E.1 of this policy;
- d. As necessary, take interim action and notify cognizant federal agencies of special circumstances;
- e. Sequester Research data and evidence pertinent to the Allegation of Research Misconduct in accordance with Section F.1 of this policy;
- f. Notify the Respondent and provide opportunities for him/her to review/comment/respond to Allegations, evidence, and committee reports in accordance with this policy;
- g. Inform Respondents, Complainants, and witnesses of the procedural steps in the Research Misconduct proceeding;
- h. In cooperation with the Dean, take reasonable and practical steps to restore the reputations of Good Faith Complainants, witnesses, and committee members and address potential or actual retaliation against them by Respondents or other institutional members;
- i. Keep the Dean and others who need to know apprised of the progress of the review of the Allegation of Research Misconduct;
- j. In collaboration with other responsible persons at the University, ensure that administrative actions taken by the institution and cognizant federal agencies are enforced and assist the Dean in taking appropriate action to notify other involved parties, such as sponsors, editorial boards, professional societies, and licensing boards of those actions;
- k. In consultation with the Dean, extend the various time limits specified in the procedures; and
- l. The RIO shall ensure that the final investigation report, the findings of the Dean, and a description of any pending or completed administrative actions are provided to relevant governmental agencies and shall maintain records of the Research Misconduct proceeding for seven years and make them available to cognizant federal agencies as required.

2. Dean

The Dean is the deciding official under this Policy, and shall perform the following specific duties.[‡]

- a. Receive the results of the Assessment from the RIO and any Inquiry report and after consulting with the RIO, decide whether an Investigation is warranted;
- b. Appoint the chair and members of the Inquiry and Investigation committees, ensure that those committees are properly staffed and that there is expertise appropriate to carry out a thorough, competent, objective and fair evaluation of the evidence;
- c. Determine whether each proposed Inquiry or Investigation committee member has an unresolved personal, professional, or financial conflict of interest and take appropriate action, including naming replacement committee members, to ensure that no person with any such conflict is involved in the Research Misconduct proceeding;
- d. In consultation with the RIO, extend the various time limits specified in the procedures; and
- e. Receive the Investigation report and, after consulting with the RIO, decide whether to accept the findings of the Investigation and, if Research Misconduct is found, decide what, if any, sanctions or other actions are appropriate.

3. Faculty, Students, and Other Members of the University Community

Members of the University community must cooperate with the RIO and other institutional officials in the assessment of Allegations and the conduct of Inquiries and Investigations. Members of the University community, including Respondents, have an obligation to preserve and provide evidence relevant to Research Misconduct Allegations to the RIO or other institutional officials. This includes a responsibility to allow access to personal computers and data management and storage accounts that may hold data, or experimental records, or other documents that might provide evidence that could support or refute an Allegation.

4. Provost

The Provost shall hear objections by a Respondent to the composition of an Investigative Board, in accordance with Section G.1, and shall receive the Dean's determination of the outcome of an Investigation, and shall hear appeals as set forth in Section I.

E. The Assessment

1. Conduct of an Assessment

The RIO shall make a preliminary Assessment of the Allegation to determine whether it falls within the definition of Research Misconduct set forth in this policy, and if it is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. In conducting the assessment, the RIO may interview, but is not required to interview, the Complainant, Respondent, or other witnesses, and gather evidence beyond any that may have been submitted with the Allegation. If at any time the RIO notifies the Respondent of the Allegation, the RIO shall take all reasonable and practical steps to obtain custody of relevant research records, and inventory and sequester such records. The Assessment should be completed as promptly as reasonably possible.

2. Handling Admissions

At any time after the making of an Allegation, the Respondent shall have the opportunity to admit that Research Misconduct occurred and that he/she committed the Research Misconduct. The admission shall include a statement of the Allegations (which may include more than the initial Allegation), an acknowledgement that the admitted acts constitute Research Misconduct, an acknowledgement that the Respondent understands his/her rights under this Policy, and be signed by the Respondent. The RIO shall secure a written admission

[‡] In the event that the Dean is the person who brought forth the allegation, or in response to an appeal and in order to better provide for an objective investigation, the Provost may appoint another person to fulfill the responsibilities that would normally be carried out by the Dean under this policy.

detailing the specifics of the Research Misconduct and the matter will be sent to the responsible Dean to determine corrective actions and sanctions. If the underlying research was federally funded, a final resolution may not be reached until the Office of Research Integrity (or other relevant federal authority) has reviewed and agreed to the proposed disposition of the case.

3. Outcome of the Assessment

If the RIO determines that an Allegation is within the definition of Research Misconduct and is credible and sufficiently specific, and that potential evidence of Research Misconduct may be identified, the RIO shall notify the Dean in writing and shall commence an Inquiry.

If the RIO, in consultation with the Dean, concludes that the Allegation does not fall within the definition of Research Misconduct but otherwise evidences a failure to follow other University policies and procedures, or a failure to meet the ethical and professional standards of the applicable discipline, the RIO may refer the matter to the appropriate oversight committee, Internal Audit, or the responsible Dean in a written report for further investigation and resolution. If the RIO concludes that there are not credible and specific allegations of Research Misconduct, the matter will be considered closed under this Policy and the Dean and the parties will be notified, where possible.

F. The Inquiry

1. Securing of Evidence

When an Inquiry commences, if not sooner, the RIO shall take appropriate steps to locate and secure possibly relevant evidence so as to prevent loss or alteration of research records, which may include but are not limited to notes or notebooks, computer records, instrument output and electronic records, manuscripts, text messages, email, and chemical or biological samples. The RIO shall take custody of original records, providing copies to permit continued work during the Inquiry and any subsequent Investigation. The RIO may call on the Dean, department chair or director, and other employees for assistance in locating, retrieving, and storing such records.

2. Appointment of an Inquiry Panel and Notification of the Respondent

After receiving notification from the RIO that an Allegation has passed the Assessment review and an Inquiry is recommended, the Dean shall notify the Respondent of the specific allegations and of the intent to initiate an inquiry and provide the Respondent and the Complainant with a copy of the Research Integrity Policy. The Dean, in consultation with the RIO, shall select one or more objective, qualified persons from the University faculty to conduct the Inquiry. The Dean should be satisfied, on the basis of both her/his own information and signed statements from members of the panel, that they are free of any close personal or professional association with the Complainant or Respondent or of other conflicts of interest that could bias their judgment in the Inquiry. The Dean shall provide the Respondent with the names of proposed members of the panel. If the Respondent objects to the appointment of one or more of the proposed members, he or she shall state the objection(s) in writing to the Provost within 5 days[†], in which case the Provost shall review the proposed list of members within 5 days of receipt of such objection(s) and shall have authority to direct the Dean to replace one or more members of the panel. The Dean shall designate one member of the panel, if there is more than one member, to serve as chair.

3. Conduct of the Inquiry

The Inquiry shall consist of information-gathering and preliminary fact-finding to determine whether the Allegations appear to have sufficient substance to warrant a formal Investigation. The Inquiry is designed to provide a basis on which to proceed to an Investigation or to determine that an Investigation is not warranted. Therefore, an Inquiry does not require a full review of all the evidence related to the Allegation. The Inquiry Panel, in consultation with the

[†]Time periods allowed for the various steps in this policy have been chosen based on overall time requirements imposed by agency regulations. A Respondent or other participants in the proceeding may request extension of a time limit. Such requests, when based on good cause, may be granted by the Dean or the RIO.

RIO, may interview witnesses, examine relevant primary research records, publications and/or reports, and material, consult experts in the field if necessary, and/or take such other steps as are in their judgment appropriate to the Inquiry. The RIO shall collect factual documents and other materials requested by the panel and shall provide assistance to the panel during its meetings. The Respondent may elect whether to be interviewed or not during the Inquiry. If the Respondent is interviewed, he/she may be accompanied by an adviser, who may but need not be an attorney; but the adviser may not present the case or otherwise participate in the discussion. Any testimony given by each witness shall be recorded and a transcript provided to the witness for review and correction of factual errors.

4. Early Termination of the Inquiry

If the Respondent makes an admission of Research Misconduct at the Inquiry stage, Research Misconduct may be determined at this stage. The admission shall include a statement of the Allegations (which may include more than the initial Allegation), an acknowledgement that the admitted acts constitute Research Misconduct, an acknowledgement by the Respondent of his/her rights under this Policy, and be signed by the Respondent. The RIO shall secure a written admission acknowledging the specifics of the Research Misconduct and the matter will be sent to the responsible Dean to determine corrective actions and sanctions. If the underlying Research was federally funded, a final resolution may not be reached until the federal Office of Research Integrity (or other cognizant federal agency) has reviewed and agreed to accept the form and substance of the admission.

5. The Inquiry Report

The Inquiry Panel shall prepare a written report that states what evidence was reviewed, and includes the findings of the Inquiry and recommendations to the Dean. The report, which should be completed within 40 Days of receipt of the Dean's charge to the Inquiry Panel, shall be given to the Respondent, the RIO and the Dean. Extensions for good cause must be approved by the Dean, in consultation with the RIO acting on a request from the Inquiry Panel summarizing the reason for the delay, progress to date, and an estimate of the date of completion. The Respondent shall be given 5 Days after receipt of the report to submit any written comments on the report to the RIO and the Dean.

6. The Dean's Decision

After receiving the Inquiry Report and any comments by the Respondent, the Dean shall determine whether additional Investigation is warranted and shall, within 5 Days of the day Respondent's comments were due, inform the Respondent and the Provost of the Dean's decision, as well as the Senior Vice Chancellor for the Health Sciences if the case arises within the Health Sciences, and the RIO.

7. The Case in Which Further Investigation Is Not Warranted

If the decision is that additional Investigation is not warranted, the proceedings concerning Research Misconduct shall be terminated. The RIO and the Dean will make appropriate efforts to restore the reputation of the Respondent and to protect the position and reputation of any Complainant who brought Allegations in Good Faith. If the decision is that the Respondent's actions evidence a failure to follow other University policies and procedures, or a failure to meet the ethical and professional standards of the applicable discipline, the Dean may refer the matter to the appropriate oversight committee, or Internal Audit, or may take direct action.

8. The Case in Which Additional Investigation is Warranted

If the decision of the Dean is that additional investigation should be undertaken, the Dean shall so advise the Respondent and shall inform the Respondent of the commencement of a formal Investigation by a University Investigative Board. In the case of federally sponsored research, the relevant sponsoring agency or agencies shall also be notified by the RIO before the formal Investigation is initiated. The notification shall follow the requirements of the agency, and shall be subsequently supplemented by interim report(s) to the agency as may be required or requested. Other parties with a need to know shall be informed, subject to an obligation to maintain confidentiality, consistent with Section C.2.

9. Notification of the Complainant
Whether or not a formal investigation is warranted, the Complainant, if known, shall be informed by the RIO of the outcome of the Inquiry.
10. Records of the Inquiry
Records of the Inquiry shall be maintained by the RIO in a secure place for a period of at least seven years. Such records shall include any comments of the Respondent and all other materials collected or reviewed.

G. The Investigation

1. Appointment and Charge of the Investigative Board
Within 5 Days of the sending of notice to a Respondent that an Investigation is to be undertaken, an Investigative Board of at least five members shall be appointed by the Dean, in consultation with the RIO. The Board shall be composed of individuals with focused knowledge, experience, and expertise relevant to the issue(s) being examined and may include members of the Inquiry Panel. The Dean should be satisfied, on the basis of both, his or her own information and signed statements from members of the board, that they are free of any close personal or professional association with the Complainant or Respondent or of other conflicts of interest that could bias their judgment in the investigation. The Dean shall provide the names of proposed board members to the Respondent. If the Respondent objects to the appointment of one or more of the proposed board members, he or she shall state the objection(s) in writing to the Provost within 5 Days, in which case the Provost shall review the proposed list of members within 5 Days of receipt of such objection(s) and shall have authority to direct the Dean to replace one or more members of the Investigative Board and so notify the Respondent. The Investigative Board shall be given its charge within 15 Days of receipt by the Respondent of the initial list of proposed board members. The Investigation should be concluded and results be reported to relevant government agencies within 80 Days (about 120 calendar days) of the Board receiving its charge.
2. Composition of the Investigative Board
The Investigative Board normally will be selected from within the University and/or affiliated institutions to which this policy applies. Exceptions may be made by the Dean if needed to avoid conflicts of interest or to secure particular expertise. When the Respondent is a faculty member, research associate, resident, or fellow, the Investigative Board normally shall be composed of at least two tenured faculty members of the school in which the Respondent holds a primary appointment, and at least one tenured faculty member whose primary appointment is in a different school than that of the Respondent. No Investigative Board member shall have had direct responsibility for, or a role in the Research under investigation or have any other relevant conflict of interest. If two suitable tenured faculty members cannot be identified within the Respondent's school, additional members of the Investigative Board may be selected from other responsibility centers. When the Respondent is staff or a student, the Investigative Board shall include at least one staff or student member as appropriate to the particular case. The above limitations on the membership of the Investigative Board may be modified, and any or all members may be selected from outside the University, if the Dean deems it necessary in order to find expert, objective and otherwise qualified members. The Dean shall designate one member of the Investigative Board to serve as chair.
3. Nature of the Hearing
As part of its Investigation, the Investigative Board shall hold a hearing, at which oral testimony may be presented as requested by the Investigative Board and at which the Respondent may testify and offer evidence. The charge to the Investigative Board should be limited to investigation of the specific Allegations of Research Misconduct. However, the Investigative Board is required to extend the scope of the charge to any additional possible Research Misconduct that is uncovered during the course of the investigation.
4. Resources for the Board
The Investigative Board shall consult with the RIO as to policy and procedures and shall have the option to consult with and/or receive testimony from recognized experts who are

knowledgeable in the field of research under investigation. The Investigative Board may examine original records, or gather further records as necessary to carry out its charge.

5. Notification of the Respondent about the Hearing

Seven (7) days or more prior to the Investigative Board's hearing, the Respondent shall:

- a. be sent a notice stating the place, time and date of the hearing at which Respondent will be offered the opportunity to testify and offer evidence;
- b. be given notice that he/she shall have reasonable access to any relevant information in support of the Inquiry Report, with care to maintain confidentiality, if possible, with respect to sources of the information;
- c. be informed in writing of significant new directions of investigation undertaken as a result of the emergence of additional information that justifies broadening the scope of the Investigation beyond the initial Allegations;
- d. be advised that he/she shall be permitted to present materials in defense against the allegations and present for the Investigative Board's consideration names of witnesses to be called at the hearing;
- e. be sent a list of the witnesses (if any) expected to testify at the hearing; and be notified in a timely manner of any changes in the list.

6. Rights of the Respondent

The Respondent shall have the opportunity to:

- a. hear testimony at the hearing from the Complainant or other witnesses if the Investigative Board desires such testimony;
- b. submit questions, at or before the hearing, for the Investigative Board to pose to the witnesses appearing before the board on any relevant matter, including the Complainant if the Complainant's testimony is essential, subject to the procedural rulings provided for elsewhere in this policy. If the Complainant or anyone providing essential evidence cannot attend the hearing to offer oral testimony, written questions from the Respondent may be put to him/her by the RIO, and written responses shall be requested;
- c. receive transcripts of the hearing of the Investigative Board;
- d. testify and submit documentation and tangible evidence in defense against the allegations of Research Misconduct;
- e. be accompanied by one adviser of choice, who may but need not be an attorney. The adviser may consult with the Respondent but may not present the case to the Investigative Board, question witnesses or otherwise participate in the discussion and/or proceedings; and
- f. submit a written statement following the close of the hearing.

7. Hearing Procedures

The chair of the Investigative Board, in consultation with the RIO, shall make all required substantive and procedural rulings at the hearing, including, but not limited to, admissibility of evidence and order of procedure. The chair need not apply technical exclusionary rules of evidence followed in judicial proceedings, nor entertain technical legal motions. Technical legal rules pertaining to the wording of questions, hearsay and opinions need not be formally applied. Reasonable rules of relevancy shall guide the chair in ruling on the admissibility of evidence. Reasonable limits may be imposed on the number of factual witnesses and the amount of cumulative evidence that may be introduced. An audio recording or stenographic record shall be made of the proceedings, copies of which will be sent to the Respondent. Each witness shall have an opportunity to review and correct the tape or stenographic transcript of his or her testimony.

8. Required and Optional Testimony

The Board must interview Respondent, the Complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of the investigation. The Investigative Board may require any employee of the University or an employee of any other entity covered by this policy, such as the UPMC Health System, to participate in the proceedings.

9. Standards of Review and Burdens of Proof

In order to find that a Respondent has committed Research Misconduct, the Investigative Board must find by a Preponderance of the Evidence that: (a) there was a significant departure from accepted practices of the relevant research community; and (b) the Research Misconduct was committed intentionally, knowingly or recklessly. The University has the burden to prove that the Respondent committed Research Misconduct by a Preponderance of the Evidence. The destruction, absence of, or Respondent's failure to provide Research Records adequately documenting the questioned Research may be taken by the Investigative Board as evidence of Research Misconduct when the Investigative Board determines by a Preponderance of the Evidence that the Respondent intentionally, knowingly or recklessly had Research Records and destroyed them, had the opportunity to maintain the Research Records but did not do so, or maintained the Research Records and failed to produce them in a timely manner, and that the Respondent's conduct constitutes a significant departure from accepted practices of the relevant research community. The Respondent has the burden to prove, by a Preponderance of the Evidence, any affirmative defense that the Respondent may raise, including honest error or difference of opinion.
10. The Investigation Report

The Investigative Board should deliver a draft of its report to the Respondent within 60 Days of receiving the Provost's charge. Extensions for good cause must be approved by the RIO, or by the Dean acting on a request from the Investigative Board summarizing the reason for the delay, an interim report of progress to date, and an estimate of the date of completion. The Investigative Board shall strive to complete its report in a timely manner, in order to meet the requirements of applicable regulations. The RIO shall be responsible for informing any federal agency should the investigation be delayed beyond applicable deadlines. The report shall describe the evidence and testimony considered, including any evidence submitted by the Respondent, the policies under which the investigation was conducted, the funding that supported the research reviewed, the findings, the basis for the findings, and recommended sanctions. The Respondent shall be given 10 Days to submit to the Investigative Board his/her written comments on the report. The Investigative Board shall consider the comments of the Respondent and write its final report, which it shall submit to the Dean, the Respondent, and the RIO within 10 Days of the date by which the Respondent's comments were due.
11. The Dean's Decision

The Dean shall decide the case and any associated sanctions and communicate his or her decision to the Provost, and the Senior Vice Chancellor for the Health Sciences (if applicable) and the Chancellor in all cases, within 10 Days of receipt of the final report. If the Dean's decision disagrees in whole or in part with the recommendation of the Investigative Board, the Dean's communication to the Provost shall include a complete copy of the Investigative Board's report and a written explanation of the bases for his or her disagreement with that report.
12. A Finding of No Misconduct

If the Dean determines that the alleged Research Misconduct is not substantiated by the findings of the Investigative Board, the Respondent shall be so notified in writing within 5 Days of the Dean rendered the decision. If the Dean further decides that the report evidences a failure by the Respondent to follow other University policies and procedures, or a failure to meet the ethical and professional standards of the applicable discipline, the Dean may refer the matter to the appropriate oversight committee, or Internal Audit, or may take direct action. Otherwise, diligent efforts shall be undertaken, at the Respondent's request, by the RIO and the Dean, to restore the reputation of the Respondent and to close the matter. The Dean shall inform the Provost, the Senior Vice Chancellor for the Health Sciences in cases originating in the Health Sciences, the RIO, and the Chancellor, and shall provide the Complainant with at least those portions of the Investigative Board's report and the determination that address the Complainant's role and information given in connection with the investigation. The RIO shall give any federal sponsoring agency a report on the investigation in the form and within the time prescribed by any applicable regulations.

13. A Finding of Research Misconduct
If the Dean determines that the alleged Research Misconduct is substantiated by the findings of the Investigative Board, the Dean shall also decide on appropriate sanctions, after consultation with the RIO. These sanctions which shall be stayed pending the outcome of any appeal, may include, but are not limited to the following:
- a. notification and restitution of funding to any sponsoring agency as appropriate;
 - b. requirement for withdrawal or correction of all pending abstracts and papers emanating from the research in question, and, if appropriate, retraction or correction of previously published papers and abstracts;
 - c. removal of the Respondent from the particular project, letter of reprimand, requirement that letters of apology be written, or special monitoring of future work;
 - d. probation, suspension, salary adjustment, consideration of possible rank reduction or termination of employment or student status, repetition of designated student examinations, or revocation of a degree, provided that steps with a potential impact on the employment or student status of a Respondent should be taken in accordance with procedures described in the University of Pittsburgh Faculty or Staff Handbook or Guidelines on Academic Integrity, without the possibility of reopening the Investigation into the substance of the Research Misconduct;
 - e. notification, if appropriate, to the HRPO or IACUC chair on matters related to clinical or animal research, respectively so that those committees can take further action, if appropriate;
 - f. notifications to affected institutions of previous or current affiliation, co-authors and other affected third parties; and
 - g. notification of state licensing boards.
14. Notifications of a Misconduct Finding
The Respondent shall be notified within 5 Days of the Dean's decision in writing of the determination and the actions by the Dean by email, hand delivery or certified mail. The Complainant shall be provided within 5 Days with summaries of those portions of the Investigative Board report and the determination that address the Complainant's role and information given in connection with the investigation. In matters involving the use of human subjects or of animals in research, the HRPO or IACUC, as appropriate, shall also be informed.
15. Possible Sanctions from a Federal Agency
The RIO shall give any sponsoring agency a report on the investigation in the form and within the time prescribed by any applicable regulations. A federal sponsoring agency, if it concurs in a finding of Research Misconduct, may in addition apply its own administrative actions.
16. Public Release of Information
The Provost or Senior Vice Chancellor for the Health Sciences, as appropriate, shall, in consultation with the General Counsel, determine the manner in which information about the incident is released, with due consideration for confidentiality as well as possible danger to human health and welfare.

H. Whistleblowers

1. Non-Tolerance of Retaliation
Complainants and other witnesses to possible Research Misconduct have a responsibility to raise their concerns in Good Faith. The University has a duty not to tolerate or engage in retaliation against good-faith whistleblowers. This duty includes providing appropriate and timely relief to ameliorate the consequences of actual or threatened reprisals, and holding accountable those who retaliate. Any Complainant or witness who believes that there has been retaliation against them for a Good Faith allegation under this policy may bring a grievance under the applicable policy to the appropriate responsible body (depending upon their status as faculty, staff or student).
2. An Allegation Made Not in Good Faith
If after accepting an inquiry or investigative report a Dean believes that the initial allegation or any witness testimony was not in Good Faith, the Dean shall so notify the Complainant or

witness and provide the grounds for that belief, and the Complainant or witness shall be given an opportunity to reply in writing. If the Dean then makes a finding that indeed the Complainant or witness did not act in Good Faith, the Complainant or witness shall have the right to appeal that determination to the Provost. Where there has been a finding that a Complainant or witness did not act in Good Faith, the Dean will determine whether any administrative action should be taken against the person who failed to act in good faith.

I. Appeals

1. Nature of an Appeal

A Dean's determination of Research Misconduct by a Respondent, or the sanctions imposed by a Dean for Research Misconduct, may be appealed in writing to the Provost, with a copy to the RIO, within 5 Days of personal delivery or mailing of the determination, whichever occurs first. The grounds for the appeal shall be submitted in writing within 15 Days after filing the notice of appeal. Such an appeal shall be restricted to the body of the evidence already presented in the written record. The written record shall include all materials collected or reviewed at both the Inquiry and Investigation stages (including the Respondent's or Complainant's written comments), the written reports filed at both stages and the audio recording or stenographic record of the hearing.

2. Appointment and Charge of an Appeal Panel

In the case of an appeal, the Provost, in consultation with the RIO, shall form a five-person appeal panel to advise him or her on the merits of the case. The selection of the members of the appeal panel shall be in accord with the rules (under IV.B.3.) in Faculty Reviews and Appeals, University Procedure #02-02-10; however, the panel shall not otherwise be bound by the procedures described in that document. Names shall be drawn from the Central Appeals Pool or School Pools (e.g., for the School of Arts and Sciences and the School of Medicine), but no more than one panel member shall be from the unit (department) where the Respondent has his or her primary appointment, and no member of the appeal panel shall have been involved in the Inquiry or Investigation. The panel shall be formed and charged within 25 Days of the date of email, hand delivery or certified mailing of the dean's decision, and it shall render its report within 40 Days after receiving its charge.

3. Grounds for Appeal

The only grounds for recommendation of reversal by the appeal panel of a finding of Research Misconduct shall be failure to follow appropriate procedures by the Investigative Board, insufficiency of evidence, or arbitrary and capricious decision making. Sanctions may not be considered by the appeal panel, but may be considered on appeal by the Provost.

4. Outcome of an Appeal

The Provost shall decide, within 10 Days of receiving the report of the appeal panel, whether to accept or reject, in whole or in part, the appeal panel's recommendations. After the decision of the Provost, the dean and the RIO shall be informed and proceed accordingly. Unless the Provost recommends a new Investigation, which shall follow the procedures outlined in Section G, to address all or part of the Allegation, the Provost's determination shall conclude the University's proceedings with respect to the Misconduct Allegation.

J. Policy Changes

Changes in federal regulations or University policies could necessitate changes to this policy. Amendments to the policy shall be made only after consultation by the administration with the Senate. Appropriate notice of any such change shall be provided to the University community in writing.