

### **PROCEDURE NAME (R\*)**

Responding to Allegations of Questionable Research Practices

### **PROCEDURE NUMBER (O\*)**

RES 1.04c

### **EFFECTIVE DATE (R\*)**

[to be completed]

### **PROCEDURE APPLICABILITY (R\*)**

This procedure is applicable to:

- Research proposed, conducted or reported at the University of Louisville (University) by University-related individuals, i.e., those with an appointment or official affiliation with the University of Louisville, including faculty, academic staff, students, postdoctoral scholars, visiting scholars who make significant use of University Research resources (including participation in any sponsored project awarded to the University or associated organizations), and those with any other University teaching and/or Research titles such as adjunct or clinical;
- Research proposed, conducted or reported elsewhere by such University-related individuals as part of their University-related duties or activities; and
- at the discretion of the University, to Research proposed, conducted, or reported where such Research is claimed, cited, or implied to have been done at the University, or where a University appointment or official affiliation is claimed, cited, or implied in connection with the Research.

### **REASON FOR PROCEDURE (O\*)**

During the performance of Research, individuals may act in a manner inconsistent with the accepted practices of the discipline and expectations of the University. In instances where these actions fall outside the scope of the Research Misconduct Procedures, the procedures outlined in this document are to be utilized to review and address the Questionable Research Practices (QRPs).

### **PROCEDURE STATEMENT (R\*)**

The Research Integrity Officer (RIO) will oversee the review process to ensure that these procedures are followed in a manner that is fair and unbiased. The RIO will consult with University Counsel and the Deciding Official (DO), as needed, throughout the Proceedings should any procedural issues arise.

### **Access to Research Records**

In accordance with University policies, during its review of an Allegation of QRP, the University may access and take custody of all Research Records, in all formats, that are generated in the course of the Research or scholarship and that may be relevant to its review of the Allegation(s), regardless of where the records are stored. Initial Sequestration of Evidence may occur at any time after Allegations are received. When original research records cannot be obtained, copies of records that are substantially equivalent in evidentiary value will fulfill the sequestration requirement. The RIO will take all reasonable and practicable steps to obtain custody of relevant Research Records and Evidence, as soon as feasible and store them in a secure manner in accordance with the University. All data and records that could be relevant to the University's review of the Allegation(s) will be sequestered by the RIO. Sufficiently detailed documentation will be kept permitting later evaluation of the adequacy of the process by the RIO. The documentation will be kept in a secure manner.

If Research Records exist outside of the University, the RIO has the authority, in consultation with the DO, to contact the appropriate officials to locate and secure all Research Records relevant to the Complaint.

### **Scope of Proceedings**

The University will review all significant issues discovered throughout the case: the Preliminary Assessment and the QRP Review, including any Evidence of additional Allegations of possible QRP.

During any phase of a QRP Review, additional Allegations may arise related to an ongoing QRP Review which justifies expanding the scope beyond the initial Complaint.

If any new Allegations arise, the RIO will notify the Respondent, in writing, of the decision to review the new Allegation(s) with a description of the Allegation(s) and copies of all documentary Evidence regarding the new Allegation(s). If the Allegations involve a new Respondent, the RIO will inform the new Respondent, in writing, of the decision to review the Allegation(s) with a description of the Allegation(s) and copies of all documentary Evidence regarding the new Allegation(s).

### **Phases of Questionable Research Practice (QRP) Reviews**

#### **Preliminary Assessment**

**Receipt of Allegation.** Allegations of Questionable Research Practice (QRP) may be referred from Research Misconduct Proceedings or received directly by the Office of Research Integrity.

**Sequestration of Research Records.** The RIO has authority to promptly locate and secure the originals of all Research Records and other relevant materials if it is believed that such records may become relevant during a QRP Review. As soon as practicable upon initiating a Preliminary Assessment, the RIO shall inventory the records and Evidence and sequester them securely. Where appropriate, the RIO shall give the Respondent copies of, or reasonable, supervised access to the Research Records.

**Analysis of Allegation(s).** Every effort will be made to complete the Preliminary Assessment within thirty (30) Days, or as soon as practicable, depending on the complexity of the Complaint. If the Complaint does not name a specific Respondent, the RIO, in consultation with the others, as needed, will determine, to the extent possible, the roles and responsibilities of the individuals involved in the questioned Research to name one or more Respondents.

If the RIO determines that any Allegation fits within the definition of a QRP and is sufficiently credible and specific so that potential Evidence may be identified, the RIO will condense the Complaint to specific written Allegation(s). Any specific Allegation within a Complaint that does not fit within the definition of QRP or is not sufficiently credible or specific so that potential Evidence of QRP may be identified, will be dismissed under the Research Misconduct Policy.

For any issue within the Complaint that constitutes a valid issue under other University policies or rules, the RIO will recommend the relevant portions of the Complaint be referred to the appropriate university authority or direct the Complainant(s) to the appropriate university authority.

**Assessment Report.** Based upon the analysis of the Allegations, the RIO will issue an Assessment Report and submit it to the DO for review. Recommendations for dismissal of submitted Allegations by the RIO require the approval of the DO. Any Allegations found to be specific, credible and within the scope of QRP will be referred for Review. If known, the Complainant, will be notified of any Allegations that were dismissed and informed of alternate reporting pathways, if applicable.

**Appeals.** The Complainant may appeal the decision to dismiss the submitted Allegation to the DO within seven (7) Days of receiving the dismissal notification. An appeal of the dismissal of the Complaint must be based on new information provided by the Complainant(s) that was not already considered during the Preliminary Assessment, or on Evidence from the Complainant(s) that there was a substantial procedural irregularity during the Preliminary Assessment. The DO will decide as soon as possible after receipt of appeal whether to affirm the dismissal or to refer the Complaint, or any Allegations within the Complaint, to a Review. The decision of the DO is final.

### **Questionable Research Practice (QRP) Review**

If the Assessment indicates that an QRP Review is warranted and the DO agrees, the University will initiate the QRP Review.

**Initiation and Purpose of the QRP Review.** Within 30 Days of any determination by the DO that an QRP Review is warranted, the RIO shall appoint a Review Panel. The RIO may extend this time for good cause. The purpose of the QRP Review is to develop a factual record by exploring the Allegations in detail and examining the Evidence in depth, leading to recommended findings on whether Questionable Research Practices have been committed, by whom, and to what extent, and steps to be taken to correct the Research Record. The QRP Review will also determine whether additional instances of possible QRPs would justify broadening the scope beyond the initial Allegations.

**Sequestration of Research Records.** As soon as practicable upon the initiation of a QRP Review, the RIO shall take all reasonable and practical steps to obtain custody of all the Research Records and Evidence needed to conduct the QRP Review, that were not previously sequestered during the Preliminary Assessment. When original research records cannot be obtained, copies of records that are substantially equivalent in evidentiary value will fulfill the sequestration requirement. Institutions may also sequester research records and evidence whenever additional items become known or relevant to the QRP Review. Wherever possible, the RIO shall give the Respondent copies of the data or Evidence sequestered or reasonable, supervised access to the sequestered Research Records.

**Selection of the QRP Review Panel.** Upon determining that a formal QRP Review is warranted, the RIO will appoint a QRP Review Panel, the composition and size of which will be determined by the RIO. At a minimum, the QRP Review Panel will have five (5) members. The appointed committee must have the necessary and appropriate expertise to conduct a thorough, formal QRP Review and authoritative evaluation of the relevant Evidence. The Panel members must not have any personal, professional, or financial Conflicts of Interest with either the Respondent, the Complainant, or witnesses. The QRP Review Panel should include at least one faculty member who is an expert in the field of Research that gave rise to the Allegation and may, if necessary, include one or more such experts from outside the University. The RIO will consult with the University Counsel prior to consulting with an external expert.

**Notification to Respondent.** The RIO will inform the Respondent of the initiation of the formal QRP Review, the composition of the QRP Review Panel, and written notice of the Allegations to be investigated, including any new Allegations of Questionable Research Practices. If the Respondent has concerns that any panel member has a Conflict of Interest, the Respondent can identify the basis for those

concerns to the RIO in writing within seven (7) Days of notification of the QRP Review Panel's membership. The DO may extend this time for good cause. The DO will review the membership objection, and if it is reasonable, the DO shall replace the person with one who meets the stated criteria. The DO's decision on whether the challenge is reasonable shall be final.

**Charge to the QRP Review Panel.** At the first convened meeting, the RIO will provide the charge to the QRP Review Panel, which will include: (1) the purpose of the formal QRP Review, (2) copies of the Allegations and the final QRP Report, (3) responsibilities of the QRP Review Panel, as set forth below, (4) the requirements needed to support a determination that QRP occurred, and (5) the expected timeframe for formal QRP Review (consistent with applicable regulatory requirements, if any). The RIO will also provide copies of relevant University policies and federal regulations.

**Responsibilities of the QRP Review Panel.** The QRP Review Panel will use diligent efforts to ensure that the QRP Review is thorough, impartial, fair, and appropriately documented. The QRP Review will be completed within 120 Days of the initial meeting of the panel unless additional time is required. The panel's determination that a QRP occurred may include recommended actions to correct the Research Record. In fulfilling its responsibilities, the QRP Review Panel will:

- Examine all Research Records and other relevant Evidence relevant to reaching a decision on the merits of each Allegation;
- Interview each Respondent, Complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the QRP Review, including witnesses identified by the Respondent;
- 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 QRP Review; and
- Pursue diligently all significant issues discovered that are determined relevant to the QRP Review, including any Evidence of any additional instances of possible QRP, and
- Continue the QRP Review to completion.

**Review of the QRP Review Report and Actions.** The QRP Review Panel will prepare a draft written report that summarizes its conclusions regarding whether QRP occurred and that may recommend Corrective Actions to address the Research Record, as appropriate. The report will include: the identity of the Respondent; the nature of the Allegation(s); the specific Allegations; funding source(s); methods used to examine the Evidence; a list of Evidence reviewed; a statement of findings for each Allegation specifying whether QRP occurred and whether it was committed Intentionally, Knowingly, or Recklessly; the identity of the responsible individual for each determination of QRP; any publications that need correction or retraction; any

200 federally funded projects that may have been impacted by the QRP; any sanctions  
201 or remediation that the QRP Review Panel recommends.

202 The Respondent will be given a copy of the draft report to provide written  
203 comments. Concurrently with the draft report, the Respondent will receive a copy  
204 of, or supervised access to the Evidence on which the report is based. The  
205 comments of the Respondent on the report, if any, must be submitted to the RIO  
206 within 30 Days of the date on which the Respondent received the draft. The RIO  
207 will distribute the Respondent's comments to the QRP Review Panel and such  
208 comments will become part of the final report.

209 The QRP Review Panel will finalize the report after reviewing the Respondent's  
210 comments. The final report and, all supporting materials, will be sent to the DO.

211 **DO decision and documentation of decision.** The DO will review the final QRP  
212 Review report and all investigatory materials. Within fourteen (14) Days of  
213 receiving the report, the DO will provide a written decision regarding the  
214 Institutional determination of QRP. In the event the DO disagrees with any of the  
215 QRP Review Panel's recommendations, the DO may return the matter to the QRP  
216 Review Panel for further fact-finding or analysis or make an alternate  
217 determination. If the DO elects the latter, the DO will document the basis for the  
218 differing decision in writing. The QRP Review is completed when the DO makes this  
219 determination.

220 The RIO (or, in the case of federal agencies required to be notified, the DO), will  
221 notify the Respondent(s); the Complainant (if approved by the DO); the relevant  
222 Dean(s)/VP(s); the Provost; University Counsel; the members of the QRP Review  
223 Panel; and any government officials required to be notified of the DO's decision.

### 224 **Deadlines**

225 Due to the sensitive and complex nature of the Allegations of QRP, standard  
226 deadlines may be difficult to meet. If a procedural deadline cannot be met during  
227 the QRP Review, the RIO will review and approve, where appropriate, requests for  
228 additional time. If a regulatory deadline cannot be met, the RIO will file a written  
229 notice with the oversight agency or funding entity and the DO, setting out the  
230 reasons why the deadline cannot be met and requesting an extension.

231  
232 Additionally, the DO may grant deadline extensions to ensure a Respondent's right  
233 to due process or for other good cause.

234 The RIO shall document the reason for any extension, which shall be included in the  
235 Record of QRP Reviews.

236 In cases where federal agency approval is involved, deadline extensions granted by  
237 federal agencies will take priority to the extent permitted by law. The RIO will

238 ensure that periodic progress reports are filed with Federal ORI, if Federal ORI  
239 grants the request for an extension and directs the filing of such reports.

### 240 **Determination of Questionable Research Practices**

241 The University will consider, as appropriate and feasible, ways to restore the  
242 institutional reputations of individuals alleged to have engaged in QRPs when such  
243 Allegations are not substantiated. Individuals seeking such relief should submit a  
244 written request to UofL ORI within 30 Days of the final disposition of the QRP  
245 Review. Further, the University will consider, as appropriate and feasible, ways to  
246 protect the positions and reputations of those persons who, in Good Faith, made  
247 Allegations.

248 If the University determines that one or more QRP occurred, the next step(s)  
249 depends upon the type of appointment the Respondent holds, the seriousness of  
250 the QRP(s), and the sanctions recommended. However, the determination of the  
251 QRP occurrence will not be subject to challenge.

252 Regardless of whether a finding of QRP is made, the University may impose  
253 Corrective Actions and Sanctions on the Respondent consistent with applicable  
254 policies and practices. The nature of Corrective Actions and Sanctions shall  
255 correspond to the violation(s) of Research Integrity or determination of QRP(s).

256 If at any time a competent court or other government body determines that a  
257 determination of QRP was erroneous, the DO shall promptly make all reasonable  
258 and practical efforts to restore the reputation of the Respondent.

### 259 **Mandatory Reporting to Funding Agencies and Regulatory Agencies**

260 The University is responsible for reporting to the appropriate federal funding and  
261 regulatory agencies, as required, throughout the duration of the QRP review. In  
262 coordination with the UofL Office of Research Integrity, the RIO, and DO ensure the  
263 reporting milestones are met for each case.

### 264 **Corrective Actions and Sanctions**

265 Following the final determination, the DO will decide on what actions to take in light  
266 of any determination of QRP occurrence, approve the notification to the Respondent  
267 and the cognizant Dean/VP of the decision, decide whether or not the Complainant  
268 will be notified, and decide if and when external agencies or others, if any, are to  
269 be notified, what any such notification will include, and to whom it should be  
270 directed. Nothing in this policy is intended to inhibit Institutional Members from  
271 fulfilling mandated reporting requirements or otherwise reporting unethical or  
272 improper activities to appropriate authorities.

### **Record Retention**

Upon resolution of the Proceeding and all ensuing related actions, the RIO shall prepare a complete file, including the original records of the Assessment and QRP Review Panel and copies of all documents and other materials furnished to the RIO or the QRP Review Panel. The RIO shall seal the file and retain it for seven (7) years after the completion of the review. Access to the materials in the file during the retention period shall be available only upon authorization of the DO and for good cause.

At the end of the retention period, the RIO shall return all original documents and materials to the persons who furnished them, if feasible. Following the retention interval, the RIO will destroy the remaining portions of the file following established University procedure unless the RIO makes a written finding that there is reason to retain it. The finding will state explicitly the reasons why and the period during which the file is to be maintained and will be entered in the file. The RIO shall provide the Respondent either a notice that the file has been destroyed or a copy of the written finding that the file will be retained.

### **Proceedings Involving Special Circumstances**

**Administrative Actions During the Course of Proceedings.** The RIO should be alerted promptly if any of the following circumstances detailed below are discovered during any stage of the proceedings:

- An immediate health hazard;
- An impact on the fundamental fairness to the Respondent or other parties to the QRP Review;
- Preserve the integrity of the Research;
- An immediate need to protect federal, state, local, or UofL interests, funds or equipment;
- An immediate need to protect the Complainant, the Respondent, their associates, or a witness;
- Likelihood that an alleged incident of QRP will be reported publicly;
- Allegation involves a public health-sensitive issue (e.g., clinical trial); or
- A reasonable indication of a possible civil or criminal violation.

If these above situations arise in connection with a scholarly activity that is externally sponsored, UofL may, and in some cases must, notify sponsoring agencies directly and immediately. Such administrative actions will not be deemed disciplinary in nature. The DO will determine the appropriate actions to take depending on the prevailing circumstances. The DO may consult with the Panel members, RIO, University Counsel and other Institutional Officials in making these determinations.

Administrative actions can include: a temporary suspension of Research, additional monitoring of the Research process and the handling of federal funds and



equipment, reassignment of personnel or the responsibility for the handling of federal funds and equipment, additional review of Research data and results, delaying publication, or informing the Research community or the public.

**Allegations against Complainants.** If at any point during a QRP Review there is an Allegation or a reasonable basis for believing that a Complainant may bear any responsibility for the alleged QRP, the RIO shall inform the Complainant promptly of that Allegation or reasonable basis; and provide the Complainant all Respondent protections. Upon the request of any Complainant receiving such notification, the DO may approve a reasonable delay in any review necessary to protect the Complainant's interests, but the process shall not commence anew.

**Reopened Complaints.** Any Proceeding that has been closed without a determination of QRP may be reopened only if, in the opinion of the RIO in consultation with the DO, new and potentially significant information of QRP, not previously considered, has been presented.

**Suspected Criminal Activity.** During the QRP Review, should suspected criminal activity be revealed, notification will be made to the appropriate University Officials. Every attempt will be made to keep the resulting activities separated. Should either office exert authority over an active proceeding, the RIO will suspend the active proceedings, make all appropriate notifications, and fully cooperate as needed.

**Admissions by Respondents.** At any stage of the Review under this procedure, the RIO may attempt to resolve a Complaint. At the initiation of the resolution process, the University and the Respondent will agree to terminate the QRP review with a full written admission to all Allegations pending, or the Respondent will accept the University's findings and actions without an admission.

When entering a resolution, the University will take all actions it deems appropriate due to the QRP, including but not limited to referral to other University disciplinary processes, or correction or retraction of published papers.

The RIO will work with the Respondent and/or the supervisor of the Respondent to thoroughly review the Respondent's Research Record to identify any other potential QRP.

The RIO will provide the Respondent with a written document listing the full scope of QRP determination. A resolution with the Respondent may be reached only if the Respondent admits to, or accepts the findings of, the full scope of the QRP.

The RIO will prepare a written document including the admission or the resolution with the Respondent, the QRP determination, any known federal funding, the procedures that occurred up to the point of resolution, and any recommended

actions the university deems appropriate. The written document will be provided to the DO for concurrence.

In instances where the DO and/or the oversight agency does not approve the resolution, the QRP Review will resume.

### **Proceedings Involving Special Populations**

**Institutional Officials.** Allegations concerning an Institutional Official should be communicated to the Director, UofL ORI or the Executive Vice President, Research and Innovation. The Executive Vice President, Research and Innovation will assign responsibility for managing the Allegation to a RIO with no Conflicts of Interests and who does not directly or indirectly report to the Respondent. The Provost will serve as the DO for Allegations involving Institutional Officials. If the Allegation involves the Provost, then the President is the DO. The Board of Trustees will appoint a DO if the Allegation involves the President.

**Statutory Affiliates.** If the QRP Review involves one or more of the University's Statutory Affiliates, UofL ORI will coordinate data collection and communications through a single point of contact to minimize the potential for violations of the confidentiality provisions. Following the completion of the review, UofL ORI will collaborate with the DO to determine the appropriate final communication to the provide back to the Statutory Affiliate point of contact.

**Affiliated Research Organizations.** If the QRP Review involves one or more of the University's Affiliated Research Organizations, a Memorandum of Understanding (MOU) will be developed between the organizations. The MOU will outline the expectations for data Sequestration and preservation, panel composition (including cross population should both organizations seat panels) and identification of the Deciding Official(s) as well as point of contact for each organization involved. Presence of the MOU will be communicated to the sponsoring agency, if required. If the Affiliated Research Organization(s) do not operate under a federal assurance or have a formal review policy, the MOU will be utilized to flow across regulatory provisions. In instances where the Affiliated Research Organization is also a federal agency (e.g. Veteran's Administration) this procedure does not preclude that agency from fulfilling its regulatory obligations.

**Students.** The RIO evaluates Allegations of QRPs when a student's work has been published—such as a dissertation or article—or has been used in a grant proposal. However, student academic misconduct involves work completed as part of a degree program—such as a master's thesis—or academic work published in Blackboard. If the RIO determines that the allegation reside solely within the academic environment, the matter will be referred to the Dean of Students or Designee (undergraduate) or Graduate Dean or Designee (graduate or professional).

### **Modifications to Procedures**

In appropriate cases, including those in which the Respondent admits responsibility, the DO, in consultation with the appropriate University officials and, if needed, federal oversight agencies, may consider whether to modify or eliminate any of the procedural stages of the procedures set forth in this document. The DO may approve departures from these procedures as required by law or as necessary to protect public health or safety, the integrity of Research, fundamental fairness to the Respondent or other parties, or an overriding interest of the University. The RIO shall document any approved significant departures in writing and include the documentation in the case file.

### **STANDARDS (O\*)**

**Allegations Not Made in Good Faith.** If the DO determines that the Complainant's Allegation of QRP was made with knowledge that the Allegation was false, or with reckless disregard for or willful ignorance of facts that would disprove the Allegation, or that any member of the University community acted in violation of this procedure, the DO will determine whether any administrative action should be taken against such person.

**Conflicts of Interest.** All parties involved in a QRP Review must disclose potential or actual unresolved personal, professional, or financial Conflicts of Interest with a Complainant, Respondent, or witness to the RIO. If the RIO has such a conflict, the RIO will inform the DO. The DO will have the discretion to handle Conflicts of Interest identified under this policy, and the decision will be final. Should the DO have a conflict, the decision will rest with the Provost.

Conflicts of Interest in QRP Reviews exist when the financial, personal, or professional relationships of an individual involved in the Proceedings may affect the Review or the resolution of the Allegations. Perceived or actual Conflicts of Interest are treated identically under this policy. Possible Conflicts of Interest may include, but are not limited to, co-authorship of work with the Respondent or Complainant, or professional or personal relationship with the Respondent or Complainant beyond that of mere friends or colleagues (e.g., current or former student or mentor relationship, direct supervisory or subordinate job relationship, or marital/partner relationship). The subordinate relationship of a Respondent or Complainant to their dean or chair alone does not constitute a perceived or actual Conflict of Interest under this procedure.

**Confidentiality.** All persons involved in Reviews under this procedure shall keep confidential, to the extent legal and practicable, the identities of Complainants, witnesses, and Respondents, limiting any disclosures to those who have a need to

know and as allowed by applicable law or as provided in this policy, including Respondent's right of consultation.

Except as may otherwise be prescribed by applicable law, confidentiality must be maintained for any records or Evidence from which Research subjects may be identified. Disclosure of any such records or Evidence from which these persons may be identified is limited to those who have a need to know to carry out a QRP Review, Interim Actions, Sanctions, or Corrective Actions.

The RIO informs all parties of the confidentiality policy at the beginning of each phase of the case.

Despite the University's general commitment to preserving confidentiality noted above, there may be cases in which the University may need – at any stage of the process, including before the University's review has concluded – to notify and/or consult with external entities about the Allegation or aspects thereof. In any cases involving potential external notification, the Executive Vice President, Research and Innovation, in consultation with University Counsel, will decide when a notification should occur, what any such notification will include, and to whom it should be directed.

**Research Integrity Panel.** The University will utilize a Research Integrity Panel (RIP) to ensure that the University's policy and procedures for dealing with QRPs are consistent with the emerging best practices. The RIP will consist of a pool of Institutional Members to serve as experts for the QRP Review Panel, with expertise and training to participate in QRP proceedings. The membership will be drawn from all units and campuses within the University and will provide expertise in a variety of disciplines as well as linguistics, statistics, and institutional culture. The RIP will also include at least three members to represent the interests of the Graduate School. The RIP will fulfill the following functions:

- Serve as the pool from which members of QRP Review Panels are drawn; and
- Assist the Director, UORI in evaluating reports of QRPs; and
- Advise the DO and the Director, UofL ORI on the implementation and revision of this Policy and Procedures.

**Retaliation.** The University will not tolerate Retaliation in any form against any individual who participates in a Research Misconduct Proceeding. Retaliation is a serious violation that can subject the offender to disciplinary action under appropriate University rules or policies. All parties to Research Misconduct Proceedings, including Respondents, Complainants, Witnesses, Panel Members, the RIO, DO, and staff, are entitled to be treated respectfully.

### **DEFINITIONS (O\*)**

Definitions for these procedures are located [here](#).

### **RESPONSIBILITIES (O\*)**

The roles and responsibilities matrix is located [here](#).

### **FORMS/ONLINE PROCESSES (O\*)**

[to be completed]

### **RESPONSIBLE AUTHORITY (R\*)**

Executive Vice President, Research and Innovation

### **RESPONSIBLE UNIVERSITY DEPARTMENT/DIVISION (R\*)**

Office of Research Integrity  
300 E Market, Suite 300  
502-852-2454  
ori@louisville.edu

### **HISTORY (R\*)**

Revision Date(s): October 2023

Reviewed Date(s): N/A

The University Policy and Procedure Library is updated regularly. To ensure a printed copy of this document is current, please access it online at <http://louisville.edu/policies>.

### **ACKNOWLEDGEMENTS**

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**R\* = Required    O\* = Optional**