WSU Responsible Research Practices and Research Misconduct

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Research Misconduct
Presentation Roadmap

- Define Research Misconduct
- Process
- Best Practice and Avoidance
- Case Studies
- Other tips for successful a research career
WSU Executive Policy 33

Executive Policy Manual

EP33 – Responding to Allegations of Research Misconduct

Revision Approved November 2, 2022

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   A. General Policy
   B. Scope
   C. Procedural Variations
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III. Rights and Responsibilities
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Research Misconduct

Applicable to research; not applicable to academic classes or supervisor/employee disputes.

https://research.wsu.edu/office-research/research-misconduct/

Academic Misconduct

Student Handbook for Community Standards

https://www.communitystandards.wsu.edu/home/

Professional Misconduct

Human Resource Services applicable policies

https://hrs.wsu.edu/
What is Research Misconduct?

Research misconduct is defined as **fabrication, falsification, plagiarism**, or **other serious deviation** from commonly accepted practices in the relevant scientific community for proposing, performing or reviewing research, or in reporting research results.

| F | Falsification | “.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” |
| F | Fabrication | “.making up data or results and recording or reporting them “ |
| P | Plagiarism | “.appropriation of another person’s ideas, processes, results, or words without giving appropriate credit” |

Does not include honest error, difference of opinion, or authorship disputes

Serious deviation from accepted practices includes but is not limited to:

- Abusing confidentiality, including the use of ideas and preliminary data gained from:
  - Access to privileged information through the opportunity for editorial review of manuscripts submitted to journals; and
  - Peer review of proposals being considered for funding by agency panels or by internal committees, such as the Institutional Review Board (IRB), the Institutional Animal Care and Use Committee (IACUC), and the University Research Grants Committee.
- Stealing, destroying, or damaging the research property of others with the intent to alter the research record; and
- Directing, encouraging, or knowingly allowing others to engage in fabrication, falsification, or plagiarism.
RM is a serious issue

- Inquiries and investigations are handled with *extreme* confidentiality. This is to protect both the complainant(s) and the respondent.
- When research misconduct is committed it:
  - Wastes public resources
  - Taints the University’s reputation
  - Decreases public support of academic research
  - Potentially threatens public health and welfare
Each institution which receives or applies for a PHS research, research-training or research-related grant or cooperative agreement must have established an administrative policy for responding to allegations of research misconduct that complies with the PHS regulation (42 CFR Part 93) and certify that it will comply with that policy.”
RESEARCH MISCONDUCT
Process for Reviewing Alleged Research Misconduct

1. **Allegation Reported**
   - Director, ORI makes assessment of allegation
   - Allegation Dismissed
   - Proceed to inquiry

2. **Sequestration of evidence and notification to respondent**
   - Inquiry committee convened
   - Recommendations to VPR

3. **VPR decision**
   - Allegation Dismissed
   - Investigation committee convened
   - Notify applicable federal agencies
   - Recommendations to VPR

4. **VPR makes recommendations to Provost**
   - Institutional decision by Provost, including sanctions

[Link: https://research.wsu.edu/office-research/research-misconduct/]
RM Process

- There be a significant departure from accepted practices of the relevant research community; and
- The misconduct be committed intentionally, or knowingly, or recklessly; and
- The allegation be proven by a preponderance of evidence.

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<th>STAGE</th>
<th>ASSESSMENT</th>
<th>INQUIRY</th>
<th>INVESTIGATION</th>
<th>ACTION</th>
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<tbody>
<tr>
<td>Who</td>
<td>Research Integrity Office</td>
<td>Panel of Faculty/RIO</td>
<td>Faculty Committee (3 to 5)</td>
<td>Respondents, Dean, Chair, PI</td>
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<td>What</td>
<td>Initial Evaluation</td>
<td>Preliminary information gathering and fact finding</td>
<td>Formal development of a factual record</td>
<td>Retractions, Corrections, Revocations, Termination</td>
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<td>Needed to move to next stage</td>
<td>Allegation must be: • credible • specific enough to identify evidence</td>
<td>• Allegation falls within definition • Allegation may have merit</td>
<td>• One or more findings of research misconduct • Identification of responsible party</td>
<td>• Extra Reviews • Supplemental Assurances • Debarments</td>
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</table>
Allegations of Research Misconduct

Duty to report

Complainant = witness

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research.misconduct@wsu.edu
Allegation from Office of Research Integrity (ORI)

CONFIDENTIAL/SENSITIVE

March 26, 2021

Matthew Ronning
Assistant Vice President for Responsible Research Practices
Office of Research
University of Alabama at Birmingham
720 Administration Building
701 20th Street South
Birmingham, AL 35233

TRANSMITTED VIA EMAIL TO: mronning@uab.edu

RE: DIO 7.

Dear Mr. Ronning:

The Division of Investigative Oversight (DIO), Office of Research Integrity (ORI), has received an allegation of possible research misconduct against Dr. ________, Ph.D., Associate Professor, Department of ________, School of ________, University of Alabama at Birmingham (UAB).1 The questioned research was supported by U.S. Public Health Service (PHS) funds, specifically National Institute of ________, National Institutes of Health (NIH), grants R01 ________, F31 ________, and P20 ________.2,3

An anonymous complaint was made via an email to ORI reporting concerns raised in PubPeer.7 The allegation involved possible falsification and/or fabrication of Western blot panels reported in:

- ________.

DIO identified additional concerns in three (3) other papers in which Dr. ________, is either the corresponding author or a coauthor. Specifically, there is a possible relabeling and reuse of Western blots, immunohistochemistry, and immunofluorescence images in:

Enclosed is an image analysis conducted by DIO. The specific concerns are summarized below (including the corresponding slide number in the image analysis):

- In ________:
  - Figure 1B: Duplicative Western blot panels appear to represent ________, in both the ________ (Slide 3).
Assessment

Research data manipulation and research misconduct in a large scale. Every research article published/intend to publish by them should be thoroughly investigated by the UAB research integrity office. To my knowledge they don’t have any proper raw data.

He has not manipulated images such as immuno fluorescence or western blots. He knows image manipulation will be easily identified. But he get those images using tricks: manipulation in samples, antibodies, swapping control and samples, imaging biased sections, etc,... But he has not analyzed those data and the reported measurements are his made-up numbers.

So they have the data, but if you analyze them the numbers will not match. In fact, he or PI do not know how to analyze the data. He was never seen the analysis facility. Moreover, the graphs were not plotted using excel or graph pad prism or graph software, they were made in PowerPoint using lines and rectangle tools. How can you do that?

Credible

• Is the allegation credible?

Specific

• Is the allegation specific – ask more questions.

Research

• Is the allegation about research – or is it clinical or academic

Evidence

• Is there evidence that can corroborate?
The purpose of the inquiry is to make a **preliminary evaluation** of the available evidence and testimony of the respondent, whistleblower, and key witnesses to determine **whether there is sufficient evidence of possible research misconduct to warrant an investigation**. The purpose of the inquiry is not to reach a final conclusion about whether misconduct definitely occurred or who was responsible. The findings of the inquiry should be set forth in an inquiry report.

**Leadership**
1. Report to RIO
2. RIO decides to investigate
3. Notify ORI
4. Notify Sponsors

**Respondents**
1. Send Report to Respondents
2. Counsel
3. Comment

10 days (~90)

**Inquiry Committee**
1. Notify
2. Sequester Data
3. Responses
4. Interviews
5. Deliberate
6. Draft Report

60 days
A formal examination and evaluation of facts conducted by a committee for the purpose of determining if Research Misconduct has occurred and, if Misconduct is established, to identify the person(s) responsible.

Investigation Committee

1. Examine evidence collected at assessment and inquiry.
2. Identify and sequester additional evidence.
3. Interview all respondents, witnesses, and others with information.
4. Carefully evaluate the evidence.
5. Make a finding (or no finding) of Research Misconduct
6. Prepare an exhaustive report of the facts.

120 days

Standard for Findings

1. There be a significant departure from accepted practices of the relevant research community; and
2. The misconduct be committed intentionally, or knowingly, or recklessly; and
3. The allegation be proven by a preponderance of evidence.

PROVOST

1. Determines and effects all Necessary Actions

Actions

1. Retractions
2. Corrections
3. Return sponsorship
4. Suspension
5. Debarment
6. Other
Best Practices: Where are the problems

- Lack of communication
  - Documentation
  - Protocol
- Lack of caring
- Pressure to finish
- Missing leadership

It doesn’t matter if you’re an undergraduate researcher, a graduate student, a post-doc, or a principal investigator who is performing federally funded research, writing a research paper, or leading a research program; research integrity matters at every level.

Small lapses in judgment could lead to a slippery slope ending in research misconduct.

Be vigilant against these common lapses:

1. **TAKING SHORTCUTS**
   Lack of care in experimentation that might impact reproducibility

2. **CHEATING**
   Such as puffery, which is inflating your resume, can establish dangerous behavior patterns

3. **“BEAUTIFICATION” OF IMAGES**
   Removing an unwanted feature, even if unrelated to the result, could be scientifically significant

4. **LACK OF APPROPRIATE CONTROLS**
   Failure to perform a control with the experimental sample could affect result interpretation

5. **COMPOSITE IMAGES**
   Assemblies of images that are not clearly labeled, such as a montage of cell images from the same experiment but not labeled as such.

6. **OUTLIERS**
   Omitting outlier data without appropriate pre-experiment justification which alters the overall conclusion of the analysis

7. **IMAGE MANIPULATION**
   Splicing, cutting, or cropping images; without properly documenting changes, that alters the results or falsely claims a result which was not obtained.

Questionable or Detrimental Research Practices may be considered research misconduct in some cases, but the facts of each case differ and must be individually evaluated.
Best Practices

- Be available and approachable
- Review raw data carefully
- Communicate expectations clearly
- Provide training and guidance
Fraud Detectives & PubPeer/Retraction Watch

- Fraud Detection

- ORI - The art of detecting data and image manipulation
  - [https://www.elsevier.com/connec
t/editors-update/the-art-of-
detecting-data-and-image-
manipulation](https://www.elsevier.com/connec
t/editors-update/the-art-of-
detecting-data-and-image-
manipulation)

- Elizabeth Bik – Science Integrity Digest
  - [https://www.newyorker.com/scie
ce/elements/how-a-sharp-eyed-
scientist-became-biologys-image-
detective](https://www.newyorker.com/sci
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scientist-became-biologys-image-
detective)

- PubPeer.com / RetractionWatch.com

[https://pubpeer.com/publications/97F92EF6F0E3C0525ADF4C8E59E3EF](https://pubpeer.com/publications/97F92EF6F0E3C0525ADF4C8E59E3EF)
Plagiarism Avoidance - Turnitin® (WSU Sponsored)

Private: Turnitin

Turnitin Originality software has replaced iThenticate. iThenticate is owned by Turnitin and both systems check the same databases for originality. Graduate and Professional Students, Undergraduate Students, and Faculty who wish to check their work may self-enroll in a Canvas course by following this link: Turnitin Self-Enroll link. You will be presented with this screen:

Turnitin for Student, Grad student, and Faculty Research

Successful self-enrollment will show this screen:

Turnitin for Student, Grad student, and Faculty Research
Plagiarism Avoidance - iThenticate®

- Plagiarism is avoidable
- Most plagiarism can be attributed to carelessness
  - Forgotten place holders for later rework
  - Failure to cite ideas/quotes as you include
  - Recklessly copying from the internet
- Self-plagiarism violates copyright
- Journals, sponsors, pundits, and vigilantes are all using tools like iThenticate
- Not 100% reliable – e.g. code sets

https://www.plagiarismtoday.com/2022/03/14/unc-chapel-hill-vice-chancellor-resigns-after-admitting-plagiarism/

Writing in a Cleanroom
To be clear, I have no way of knowing what Magnuson’s normal practice is for writing grant applications, nor do I know what others at his school and lab do. Furthermore, I am not a grant writer.

However, that doesn’t change one simple fact: As a writer, I know that this kind of authorship routinely leads to plagiarism, whether it is intended or not.

For years, I’ve been touting the idea of writing in a cleanroom. It’s a very simple idea, but the basics are that your notes and outside materials are never placed in the same document that you are actively writing in. Anything you do bring in is immediately cited, even if it is just a rough draft.

That is very much the opposite of the approach Magnuson took. His approach was to paste everything and edit out the plagiarism later. However, that relies on the author remembering what is and is not original and being perfectly thorough in their edits. As Magnuson has shown us, you cannot count on that, no matter how experienced you are.

Takeaway – avoid rookie practices from the start.
Documentation – LabArchives®

- Securely store research data – meets federal expectations
- Eliminate loss or mishandling of research data
- Preserves data entries and retains version histories for all entries and pages
- Gives PI control to help prevent unauthorized access or export of research data
- Equips researchers for IP disclosure and prosecution
- Offers plethora of tools, integrations, and functionalities such as meeting notes, chemical/reagent inventories, etc.
- Gives researchers 24/7 access to research data
Image Authenticity - Proofig®

Getting into trouble with image data

• Relying on peer-review for critical analysis of data.
• Failure to disclose image adjustments (brightness, etc.).
• Lack of catalogue of all data used in a document (production folder) that can be readily tied back to the original data with an index.
• Data stored on jump/thumb/USB drives, personal laptops, or now resigned equipment rather than stored on laboratory equipment that does not leave the institution – and backed-up on UAB servers.

Note: Merge multiple documents to compare across publications and proposals. Many journals and sponsors are now using AI tools, either Proofig or others, to analyze your work. This results in costly delays in publishing, rejection, or allegations of misconduct.

https://www.proofig.com/
# WSU Cloud Acceptable Use Matrix

<table>
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<tr>
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<th>Human Subjects De-Identified</th>
<th>Internal</th>
<th>Student Education Records (FERPA)</th>
<th>Personal Information (RCW 42.56.500)</th>
<th>Human Subjects Identifiable (Non-Regulated)</th>
<th>Student Loan Application Date (GLBA)</th>
<th>Protected Health Information (HIPAA)*</th>
<th>Payment Card Information (PCI)</th>
<th>Export Controlled Research (ITAR/EAR)</th>
<th>Federal Information Security Management Act (FISMA)</th>
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**De minimis Use Rule:**

Appropriate use of state-provided resources for personal use is defined in WSU Executive Policy Manual: HIPAA – University Privacy Policy.

Institutional data is not permitted to be stored on individual or personal cloud services.

**Legend:**

- ● Permitted (Must comply with all applicable laws, regulations and WSU policy)
- ● Permitted with contract and must comply with all applicable laws, regulations and WSU policy
- △ Not Permitted

*WSU Internal to WSU Internal Only

**Enterprise level BAA exists** (3rd parties that create, receive, maintain, or transmit HIPAA data on behalf of, or for the benefit of, WSU, whether directly or through another business associate, are required to include a Business Associates Agreement as part of the contract agreement.)

[https://its.wsu.edu/information-security.wsu-cloud-acceptable-use-matrix/]
WSU Caseload

• Current
  • 2023 (3)
    • Assessment did not result in RM case opening (2)
    • Assessment nearing closure (1)
  • Continuation of outstanding cases (4)
    • ORI Inquiries (2)
    • Inquiry (2)
    • Investigation (2)

• Historic
  • 2022 (5)
  • 2021 (5)
  • 2020 (3)
  • 2019 (3)
Case Studies

Allegation: Postdoctoral researcher was not included as an author in manuscript.

Finding: Not research misconduct; authorship dispute.

Action: Referred to appropriate department administration for authorship dispute resolution.
Case Studies

Allegation: PubPeer/RetractionWatch revealed alleged fabrication in articles by faculty member.

Finding: Fabrication occurred.

Action: Faculty member was released from employment.
Case Studies

Allegation: Collaborating co-author notified institution of plagiarism in manuscript.

Finding: Plagiarism occurred.

Action: Faculty member was required to assess all further manuscripts with software (e.g., iThenticate, Turnitin) assessing inadvertent plagiarism.
Responsible Conduct of Research

• **CITI RCR Modules**
  - Set of online modules
  - Each module has a quiz; must achieve 80% accuracy
  - Renew every 5 years

• **In-Person Training Faculty & Staff Course**
  - CHEM 398
  - PHIL 365, 530, 540
  - NEP 520
  - iPBS August Orientation and Leadership Retreat
  - ED RES 563
  - PharmSci 577
  - ESFCM Training in RCR Series
  - On Demand

https://research.wsu.edu/2019/03/28/responsible-conduct-of-research/rcr/
Responsible Conduct of Research

RCR training is available on MyResearch for Faculty, staff, & students (anyone credited on a grant must have current training).

Retraining is required every 5 years, which covers:

1. Data Acquisition, Management, Sharing and Ownership
2. Use of Humans
3. Conflict of Interest and Commitment
4. Use of Animals
5. Research Misconduct
6. Publishing Practices and Authorship
7. Mentor/Trainee Relationships and Responsibilities
8. Peer Review
9. Collaborations

[myresearch.wsu.edu](https://myresearch.wsu.edu)
FAQs: Responding to Concerns...

- “Why do I need to do this?”
- “Do I have to pay for this?”
- “I can’t register with CITI”
- “I’ve already completed IRB training – isn’t that the same?”
- “I’ve already completed this training at a previous institution – do I have to do this again?”
Oversight Plan: Support for Faculty & Staff RCR Training Engagement

- Notify Faculty/Staff
  - Responsible Personnel lists, IRB, IACUC, IBC
  - Funding recipients

- RCR Training Incentive
  - Upon submission of proposal & prior to Notice of Award
  - Prior to approval of IRB/IACUC/IBC Protocols
  - Upon hire / built into annual reviews

- RCR Training Completion
  - Successful completion of RCR training requirements reported via dashboards
  - Renewal compliance in 5 years – perpetual program refresher and refinement (sustaining ethical scientists)
Authorship

Every field of study experiences conflicts with determining authorship on published papers

Implementing the following suggestions may help avoid potential authorship disputes:

**ACKNOWLEDGEMENTS**
Those who assisted with a manuscript but did not provide substantial contributions can be given acknowledgement.

**BE PREPARED**
Establish written authorship agreements with all members of the lab and other collaborators before preparing a manuscript or before starting a project.

**DOCUMENT CONTRIBUTIONS**
Authors should list their substantial contributions to the design of the study; the acquisition, analysis, or interpretation of data; and the contribution to the writing of the final paper.

**BE CONSISTENT**
Have clearly written expectations for authorship on publications and follow them.

**COMMUNICATE OFTEN**
As the project progresses, the authorship agreement may need to be revisited.

**APPROVE THE MANUSCRIPT**
All authors should review manuscripts and approve the final version.

*This may include people who provide support such as: editorial assistance (e.g., proofreading), limited data collection, supervision of research tasks without contribution to the collection, analysis, or interpretation of data, or the writing of the publication, and technical support.*

- International Committee of Medical Journal Editors (ICMJE) roles and responsibilities
- Dispute resolution
- Authorship vs. acknowledgement
- Resources

https://research.wsu.edu/office-research/policies/authorship/
Public Records and State Ethics

Open Government:

"Government accountability means that public officials — elected and un-elected — have an obligation to explain their decisions and actions to the citizens. Government accountability is achieved through the use of a variety of mechanisms — political, legal and administrative — designed to prevent corruption and ensure that public officials remain answerable and accessible to the people they serve. In the absence of such mechanisms, corruption may thrive."

Thus, all data including communication is the property of the state and therefore the residents have a legal right to review Public Records (e.g., hard drives, emails, texts, voicemails, notes)

State Ethics:

Addresses conflicts of interest, improper use of state resources, compensation for outside activities, and gifts.

https://public-records.wsu.edu/
Training

Discrimination/Sexual Harassment and Sexual Misconduct Prevention

Effective March 1, 2021 WSU is moving to an annual training requirement for all current faculty, administrative professional, civil service, and bargaining unit employees. New employees are still required to take the 90 minute Discrimination, Sexual Harassment, Sexual Misconduct Prevention course within six months of hire. The new annual training requirement will be met by taking the 20 minute Employee Annual Refresher: Discrimination and Harassment online training.

Frequently Asked Questions

1. Which course do I have to complete?
2. How long do I have to complete Discrimination, Sexual Harassment, Sexual Misconduct Prevention - Online Overview?
3. I am a new employee. When I try to launch the course I receive the message that I am not an authorized user. What do I do?
4. How often do I need to complete the courses?
5. How long are the online training courses?
6. Can I take the courses anytime I like?
7. I do not have access to a computer at work. How will I complete the courses?
8. Will live sessions also be available?
9. How do I access the required courses?
10. How can I review my learning records and learn when I last completed the courses?
11. I am having trouble accessing the courses. What should I do?

https://hrs.wsu.edu/training/discrimination-sexual-harassment-prevention/

https://hrs.wsu.edu/training/
Nothing is perfect. Life is messy. Relationships are complex. Outcomes are uncertain. People are irrational. – Hugh Mackay