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**Subject:** Monitoring of Required Research Compliance Training

**ORGS Office:** Office of Sponsored Programs (**OSP**)

**CMU Partner Office (if applicable):** N/A

**Originator & Original Date:** Sarah Hall 6/4/2026

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**Purpose:**

This policy establishes the institutional approach for ensuring that all required research compliance trainings (e.g., Responsible Conduct of Research (RCR), Good Clinical Practice (GCP), Conflict of Interest (COI), and Research Security training, etc.) are completed, current, and appropriately monitored. Personnel may not engage in research activities on sponsored projects while a required training is expired.

This policy applies to:

- All investigators, key personnel, and research staff engaged in sponsored projects
- All proposals submitted through the Office of Sponsored Programs (OSP)
- All active externally funded research awards

The following trainings must be completed, as applicable:

- Responsible and Ethical Conduct of Research (RECR)
- Good Clinical Practice (GCP)
- Conflict of Interest (COI) training
- Research Security training
- Any sponsor-specific or project-specific training requirements

All required training must:

- Be completed in alignment with sponsor and institutional policies
- After completion, remain valid throughout the duration of the individual's work on/participation in the project

**General Background Information:**

- **Procedure #10,023** – Procedure for the Administrative Management of Allowable Costs for Sponsored Projects
- **Policy #11,030** – Research Security Training Requirements
- **Policy #11,031** – Other Support Disclosure Training Requirements

## Narrative/Details:

1. The institution maintains a multi-layered compliance control framework:
  - a. Centralized Training System
    - i. The institution utilizes the CITI Program as the official training platform, though additional options may be available in certain instances. The CITI Program serves as the institution's system of record for training completion and expiration tracking.
      1. CITI maintains official records of completion, tracks training expiration dates, and provides automated notifications to individuals in advance of expiration.
  - b. Automated Expiration Management
    - i. Individuals receive system-generated reminders prior to training expiration.
    - ii. Training records remain accessible to OSP for verification purposes.
  - c. Proposal Compliance Verification
    - i. Prior to proposal submission, OSP ensures:
      1. Required research security training is completed
      2. Any sponsor specific training conditions are fulfilled as required
  - d. Documentation Retention
    - i. OSP maintains access to training completion records via CITI and institutional systems as applicable.
2. Continuous Monitoring Model
  - a. The institution employs a continuous monitoring framework consisting of:
    - i. Automated system controls (CITI)
    - ii. Event-based verification (proposal submission)
    - iii. Periodic oversight review

This approach ensures training compliance is actively managed without reliance on solely manual processes.

3. Exception-Based Review Process
  - a. Because the institution utilizes automated tracking of expiration dates, system-generated reminders, and proposal compliance verification regular review of all training records is not necessary and would duplicate existing controls.
  - b. Exceptions may include:
    - i. Individuals with expired training
    - ii. Individuals with training nearing expiration who have not responded to reminders
    - iii. Missing or incomplete training documentation
    - iv. Noncompliance identified during proposal review or award setup
    - v. Sponsor-specific training requirements not fulfilled
  - c. OSP will, when defined risk conditions occur, review reports from CITI or institutional systems to identify expired training and outstanding requirements. Defined risk conditions include, but are not limited to:
    - i. Identification of expired or soon-to-expire training
    - ii. Proposal submission or award setup
    - iii. Addition of personnel to a project
    - iv. Notification of noncompliance or incomplete training
    - v. Failure to respond to automated training reminders
  - d. OSP may also conduct periodic (e.g., quarterly) reviews to ensure system effectiveness.
  - e. Targeted follow-up will be conducted with individuals, departments, and applicable administrative units as needed.

- f. When an exception is identified: the individual and/or PI will be notified, a defined timeframe for completion will be communicated, and escalation may occur if the issue is not resolved in a timely manner.
  - i. Potential enforcement actions may include:
    1. Delays in proposal submission
    2. Restrictions on participation in research activities
    3. The removal of expenses from the project
    4. Additional oversight requirements
- g. OSP will maintain documentation of exception reports reviewed, follow-up actions taken, and resolution of identified issues. This documentation serves as evidence of institutional oversight for audit purposes.

#### 4. Roles and Responsibilities

- a. Investigators and research personnel will complete required training prior to engaging in research, maintaining training compliance through the project's duration, and responding to automated notifications and institutional communications.
- b. OSP maintains institutional responsibility for oversight of training compliance monitoring. OSP will verify compliance at proposal submission, conduct periodic exception-based monitoring, and maintain documentation of oversight activities.

The institution employs a risk-based, continuous monitoring approach to training compliance that integrates:

- Automated tracking and notifications through CITI
- Pre-submission compliance verification
- Periodic exception-based review

This framework ensures timely identification and resolution of noncompliance while avoiding redundant manual review processes, such as universal monthly checks.

#### **Remedies**

Failure to comply with required training or monitoring requirements will result in corrective action, including notification, required remediation within a defined timeframe, and possible administrative restrictions such as delayed proposal submission, restricted research participation, removal of expenses, or escalation to institutional leadership. Standard remediation timeframe is 30 days unless a shorter period is required due to sponsor or project risk. All instances of noncompliance will be documented. Repeated or systemic issues will prompt process review and implementation of additional controls.

#### **Exceptions**

Exceptions to this policy will only be warranted in cases involving unusual and extenuating circumstances, including unforeseen issues within OSP. The VPRI or EDRI are the only authorized officials to grant exceptions.

#### **Key Systems for Procedures**

- CITI Program
- Microsoft Outlook