UNIVERSITY OF PORTSMOUTH

PROCEDURE FOR THE INVESTIGATION OF ALLEGATIONS (CONCERNS) OF MISCONDUCT IN RESEARCH

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Procedure for the Investigation of Allegations (Concerns) of Misconduct in Research

1.0 Introduction

1.1 Ensuring and sustaining integrity in all aspects of research is a core aspect of the University's commitment to the advancement of knowledge. Misconduct in research damages the integrity of research, brings both the individual and the institution into disrepute and can, in extreme circumstances, cause harm to those involved in research. This Procedure has been approved by the Board of Governors of the University to provide a framework for investigating allegations/concerns of misconduct in research conducted under the auspices of the University.

1.2 Research misconduct is an extremely serious matter and, therefore, the University has a duty to ensure that such individuals receive appropriate training in the relevant ethical, legal and other conventions. The University seeks to sustain this approach by providing an environment that fosters all aspects of integrity and supports honesty in research, while discouraging unacceptable behaviour, by dealing seriously and sensitively with all allegations/concerns of misconduct in research.

1.3 It is a condition of conducting research under the auspices of the University and/or on university premises that practice conforms to the UK Research Integrity Office Code of Practice for Research (2025). Failure by a researcher to comply with the provisions of that Code will be grounds for action to be taken under this Procedure.

1.4 Staff, research students and all others conducting or involved in research under the auspices of the University are required to report concerns relating to misconduct in research where they have good reason to believe it is occurring. The University will investigate all concerns or complaints about research misconduct in a sensitive and impartial way. Those making an allegation, or raising a concern or complaint will not be penalised if it is done without malice and in good faith, reasonably believing it to be true.

1.5 When a concern potentially relating to research misconduct is raised under the University's Whistleblowing Policy, the Responsible Officer (the designated Whistleblowing Officer) will decide whether the concern will be dealt with under this or other procedure(s).

1.6 This Procedure is compatible with the principles of the Universities UK Concordat to support research integrity (2025), the UKRI Policy and Guidelines on the Governance of Good Research Conduct (2022) and the UK Research Integrity Office's Procedure for the Investigation of Misconduct in Research (2025).

2.0 Scope

2.1 This Procedure applies to any person conducting research under the auspices of the University, whether solely or in conjunction with others in the University, or with other organisations, including, but not limited to:

a. a member of staff or former member of staff (where the research in question is linked or can be attributed to the University)

b. a research student (including visiting students registered elsewhere who are conducting research at the University)

c. an independent contractor or consultant

d. a person with visiting or emeritus status

e. a member of staff on a clinical, honorary or secondment contract

2.2 This Procedure recognises that the investigation of concerns relating to research misconduct can involve complex issues and seeks to discharge the University's responsibilities in a sensitive and fair manner. It outlines the process to be followed when concerns relating to misconduct in research are brought against a researcher in relation to research conducted under the auspices of the University.

2.3 The Procedure will be carried out in accordance with the Principles of Fairness, Confidentiality, Integrity and Prevention of Detriment, as set out in Annex 1, and the Standards set out in Annex 2. Those responsible for carrying out this Procedure must ensure they are familiar with these Principles and Standards.

2.4 This Procedure will apply to research students who are registered for an MRes, MPhil, MD, PhD or a Professional Doctorate, but not normally to undergraduate or taught postgraduate students. Taught student misconduct is normally dealt with under the University's Code of Student Behaviour or other relevant policy, although in exceptional circumstances where concerns relating to research are raised, this Procedure may be used.

2.5 The University will follow this Procedure even if the individual(s) concerned has left or leaves the jurisdiction of the University, either before the operation of this Procedure is concluded, or before the concern(s) of research misconduct was made.

2.6 Nothing in this Procedure shall limit the right of the University or a member of staff or a student of the University to exercise their rights under any University policies concerning discipline and grievance.

2.7 Proven research misconduct may result in action being taken under the University's disciplinary procedures for staff or research students, or other relevant process where appropriate, and may be considered good cause for: dismissal in the case of members of staff; programme termination in the case of registered students; and rescission of award in the case of graduates of the University. Reports generated by this Procedure may be used in evidence by the University's disciplinary procedures and other processes and may be released in reporting the matter to any appropriate external organisation.

2.8 Research misconduct concerns relating to a thesis that has been submitted for examination (often raised in examiners reports) will be investigated under this Procedure.

2.9 Any concerns of financial fraud or other misuse of research funds, or research equipment, will be addressed under the University's Procedure for the Investigation of Alleged Financial and other Irregularities instead of this Procedure.

2.10 For the avoidance of doubt, misconduct in research includes acts of omission, as well as acts of commission. As well as complying with accepted procedures, researchers must comply with all legislation that applies to the conduct of research. The standards by which concerns of

misconduct in research should be judged should be those prevailing at the date that the behaviour under investigation took place. Misconduct in research does not include unintentional error or professional differences in interpretation or judgement of data.

3.0 Definitions

3.1 **Accepted procedures** include but are not limited to the following:

a) gaining informed consent where required

b) gaining formal approval from relevant organisations where required

c) any protocols for research contained in any formal approval that has been given for the research including submitting research for ethical review when required or appropriate and abiding by the terms of all ethical approvals for the research

d) any protocols for research as defined in contracts or agreements with funding bodies and sponsors

e) any protocols approved by the Medicines and Healthcare Products Regulatory Authority (MHRA) for a trial of medicinal products

f) any protocols for research set out in the guidelines of the employing institution and other relevant partner organisations

g) any protocols for research set out in the guidelines of appropriate recognised professional, academic, scientific, governmental, national and international bodies

h) any procedures, including ethical reviews, that are aimed at avoiding unreasonable risk or harm to humans, animals or the environment

i) good practice for the proper preservation and management of primary data, artefacts and materials

j) any existing guidance on good practice on research

3.1 **Code:** the UK Research Integrity Office (2025) Code of Practice for Research: Promoting good practice and preventing misconduct.

3.2 **Complainant:** the person raising a concern relating to misconduct in research, who need not be a member of staff or student of the University.

3.3 **Concern:** An issue relating to research misconduct or breach of good research practice. In previous policies “concerns” were referred to as “allegations”.

3.4 **Formal Investigation:** an inquiry to review all the relevant evidence and conclude whether a concern relating to misconduct in research is upheld in full, upheld in part or not upheld.

3.5 **Formal Investigation Panel/the Panel:** the persons appointed under this Procedure to conduct a Formal Investigation. The Panel does not have disciplinary powers, but will make recommendations regarding further action necessary to rectify any misconduct it has found, correct the record of research and to preserve the academic reputation of the University.

3.6 **Investigator:** the person(s) appointed under this Procedure to conduct a Preliminary Investigation of a concern relating to misconduct in research.

3.7 **Research misconduct:** As defined in the Concordat to Support Research Integrity:

'is characterised as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. It can cause harm to people and the environment, waste resources, undermines the research record, or damages the credibility of research. The Concordat recognises that academic freedom is fundamental to the production of excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily with individual researchers.

Research misconduct can take many forms, including but not limited to:

a. fabrication: making up results, other outputs (for example, artefacts) or aspects of research, including documentation and participant consent, and presenting and/or recording them as if they were real

b. falsification: inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents

c. plagiarism: using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission

d. failure to meet legal, ethical and professional obligations, for example:

    i. not observing legal, ethical and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment

    ii. breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent

    iii. misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality

    iv. improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest; inadequate disclosure of clearly limited competence; misappropriation of the content of material; and breach of confidentiality or abuse of material provided in confidence for the purposes of peer review

e. misrepresentation of:

    i. data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data

    ii. involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution

    iii. interests, including failure to declare competing interests of researchers or funders of a study

iv. qualifications, experience and/or credentials

v. publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication

f. improper dealing with concerns of misconduct: failing to address possible infringements, such as attempts to cover up misconduct and reprisals against whistle-blowers, or failing to adhere appropriately to agreed procedures in the investigation of alleged research misconduct accepted as a condition of funding. Improper dealing with concerns of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.

3.8 **Preliminary Investigation:** an initial assessment of a concern relating to misconduct in research to determine whether there is sufficient evidence to warrant a Formal Investigation of the concern.

3.9 **Procedure:** the University's Procedure for the Investigation of Allegations (Concerns) of Misconduct in Research.

3.10 **Research:** for the purposes of this Procedure, 'research' is defined as, *inter alia*, original investigation undertaken to gain knowledge and understanding, and the application of that knowledge and understanding.

3.11 **Researcher:** any person conducting research under the auspices of the University, whether solely or in conjunction with others in the University or with other organisations, including but not limited to: a member of staff; a research student; an independent contractor or consultant; a person with visiting or emeritus status; and a member of staff on a clinical, honorary or secondment contract.

3.12 **Research student:** for the purposes of this Procedure, 'research student' shall mean those registered for an MRes, MPhil, MD, PhD or a Professional Doctorate.

3.13 **Respondent:** the person against whom a concern relating to misconduct in research is made.

3.14 **Responsible Officer:** Executive Director of Corporate Governance or other senior representative of the University who also may act as 'Designated Whistleblowing Officer' in accordance with the University's Whistleblowing policy.

3.15 **Screening Panel:** at the discretion of the Responsible Officer, a Screening Panel may be appointed to conduct a Preliminary Investigation.

3.16 **The University:** The University of Portsmouth.

4.0 Receipt of concerns

4.1 In accordance with the Whistleblowing Policy, all initial concerns of misconduct in research should be made (or referred) to the Responsible Officer, irrespective of whether the Complainant is, or is not, a member of the University. The Complainant must provide as detailed a statement as possible in writing in support of the concern.

4.2 It is important to report alleged or suspected misconduct in research (henceforth referred to as "concerns") as it can have wide-ranging and damaging consequences, harming the integrity of research, bringing both the individuals involved and the University into disrepute and, in extreme

circumstances, causing harm to those involved in or who make use of the research. Those raising concerns (i.e. making a concern or complaint) will not be penalised, if they have reasonable grounds for believing there may be serious malpractice that has (or is) taking place.

4.3 While this Procedure encourages persons with concerns about the conduct of research to raise them with the University Executive Director of Corporate Governance (acting in this case as the Responsible Officer) directly, it is recognised that members of staff or students may fear that their own position could be jeopardised if they raise a particular concern. In accordance with the Whistleblowing Policy, a member of staff or a student may, therefore, choose to raise a concern in the first instance with a Head of School or Department, or their line manager, or a Research Ethics Committee chair, and ask that person to bring the matter forward on his/her behalf.

4.4 This Procedure asks persons to put their name to any concerns they make. Concerns that are anonymous, or where there is no specific Complainant, will only be considered at the discretion of the Responsible Officer considering the seriousness of the concerns raised, the credibility of the concerns, and the likelihood of confirming the concerns from alternative and credible sources. Such concerns will also be recorded to determine whether any broader concerns (such as malicious activity) are occurring.

4.5 If the Executive Director of Corporate Governance (or Responsible Officer) is the Complainant, or is the Respondent associated with the work to which the concern relates, or has any other conflict of interest, he/she will instead refer the concern to the Chair of the Audit and Quality Committee in writing and notify the Complainant accordingly. The Chair of the Audit and Quality Committee will then take on the role of the Responsible Officer as regards the conduct of this Procedure, and he/she will be responsible for fulfilling all the duties allocated to that role by this Procedure.

4.6 The Responsible Officer will review the concerns with reference to the definition of misconduct in research described above, and the status of the Respondent. The Responsible Officer shall be free to seek confidential advice from persons with relevant expertise, both within the University and outside.

4.7 Where a concern falls under these definitions, the Responsible Officer will acknowledge receipt of a concern by the Complainant in writing, informing him/her that the concern will be investigated under this Procedure. A copy of the Procedure will be provided to the Complainant on request, and the concern will be formally logged.

4.8 If the concerns relate to research conducted as part of a MRes degree, the Responsible Officer will discuss with the relevant Head of School as to whether an investigation under this procedure would be helpful to inform the normal academic misconduct procedure(s). This might be helpful if the concern is specifically linked to research processes or analysis, external publications, involves a member of staff, or has a technical research element that would benefit from an expert opinion.

4.9 If the Responsible Officer determines that the concerns fall outside either of the definitions, he/she will inform the Complainant in writing:

a. the reasons why the concern cannot be investigated using this Procedure

b. which process for dealing with complaints might be appropriate for handling the concern (if any) and/or,

c. which external body to whom the concern should be reported.

4.10 In cases where a concern is of a serious nature but does not fall under the definition of research misconduct, the Responsible Officer may choose to initiate an appropriate University procedure to address the concern or inform an appropriate external body, such as a statutory regulator or professional body. The latter may be particularly appropriate if concerns relate to Fitness to Practise. It should be made clear that any actions that might be taken by the Responsible Officer in response to the notification of a concern relating to misconduct in research are not to be regarded as a disciplinary action and do not in themselves indicate that the concerns are believed to be true by the University. Those conducting this Procedure will take steps to make it clear to the Respondent, Complainant and any other involved parties that these actions are necessary to prevent further risk or harm to any persons involved in the research and that the concerns of misconduct in research can be properly investigated and to meet contractual and other obligations of the University.

4.11 Where a concern does fall under the definition of research misconduct, and where it concerns situations that require immediate action to prevent further risk or harm to staff, participants or other persons, suffering to animals or negative environmental consequences (where this might contravene the law or fall below good practice), then the Responsible Officer will take immediate appropriate action to ensure that any such potential or actual danger/illegal activity/risk is prevented/eliminated. It may be necessary to notify legal or regulatory authorities or relevant professional bodies. A concern which does not require notification to legal or regulatory bodies will proceed to the next step of the Procedure.

4.12 The Responsible Officer will investigate whether the research project to which the concern relates includes contractual obligations that require the University to undertake prescribed steps in the event of a concern relating to misconduct in research being made and take any actions that may be necessary to meet such obligations. Such obligations might be in:

a. a contract/agreement or guidance on research conduct from a funding organisation

b. a partnership contract/agreement/Memorandum of Understanding; or

c. an agreement to sponsor the research.

4.13 The actions in this section above should take place as soon as is practicable upon receipt of a concern, normally within ten working days. The Responsible Officer may identify suitable administrative and other support to assist him/her in carrying out the above actions.

5.0 Preliminary Investigation

5.1 As soon as is practicable upon receipt of a concern, normally within ten working days, the Responsible Officer will notify the relevant Executive Dean(s) and Head of the School, Department, or equivalent in which the misconduct is alleged to have occurred that a Preliminary Investigation into the concern will be required.

5.2 In consultation with the relevant Executive Dean(s), Head(s) (or alternates), a senior member of staff with relevant experience will be appointed to conduct a preliminary investigation ('the Investigator'). The appointment will be made in writing, and any potential conflicts of interest recorded by the Responsible Officer.

5.3 The purpose of the Preliminary Investigation is to determine whether there is sufficient evidence of research misconduct to warrant a formal investigation of the concern.

5.4 The Responsible Officer will identify suitable administrative and other support to assist the Investigator. Those selected to provide such support will confirm to the Responsible Officer in writing that their participation involves no conflict of interest.

5.5 The Investigator will collaborate with the Responsible Officer to ensure that the Respondent has been informed in writing that: a concern relating to misconduct in research has been made against him/her; it will be investigated under this Procedure; and that the Respondent will be given the opportunity to respond to the concern and set out his/her case. A written summary of the concern will be provided to the Respondent together with a copy of this Procedure and the contact of any relevant support services that may be available within the University. The identity of the Complainant will normally be kept confidential until a Formal Investigation is launched, unless this is incompatible with a fair and thorough investigation and/or there is an overriding reason for disclosure. Consideration should be taken to appropriately redact identifiable (or irrelevant) information in the original written complaint/allegation/concern.

5.6 If a concern is made against more than one Respondent, the Investigator will inform each individual separately and not divulge the identity of any other Respondent unless this is relevant to the case. Where multiple Respondents are involved they will be asked to respect each other's confidentiality as appropriate.

5.7 The Investigator will also inform the Complainant that he/she is to conduct a Preliminary Investigation into the concern.

5.8 When writing to the Respondent and Complainant, the Investigator will inform them that they may raise with the Responsible Officer in writing any concerns that they may have about the person(s) chosen to conduct the Preliminary Investigation. The Responsible Officer will decide if any concerns raised by the Respondent and/or the Complainant warrant the exclusion of the person(s) concerned from involvement in the investigation, recording the reasons for the decision in writing. He/she will inform the person(s) concerned and the Respondent and/or the Complainant, as appropriate, of his/her decision in writing.

5.9 The Investigator will consider the evidence available concerning the concern, including: the concern and any supporting evidence from the Complainant; any comment and supporting evidence from the Respondent; and any other documentation and background information relevant to the concern.

5.10 The Investigator will have the option to interview the Complainant, the Respondent and any other persons considered appropriate. If the Investigator interviews the Respondent, he/she shall be given the opportunity to formally respond to the concern made against him/ her, set out his/her case and to present evidence. The Complainant and Respondent may be accompanied at meetings (e.g. by a union representative).

5.11 If the Investigator considers that there is insufficient information to decide on how to proceed, or requires additional expertise to carry out the Preliminary Investigation, he/she will be free to seek confidential advice from persons with relevant expertise, both within the University and outside it.

5.12 The Investigator will normally aim to complete the Preliminary Investigation within 30 working days following instruction from the Responsible Officer provided this does not compromise the Principles and Standards of the Procedure (see Annexes 1 and 2) and the full and fair investigation

of the concern. Any delays to this timescale will be explained to the Complainant, the Respondent and the Responsible Officer in writing, presenting an estimated revised date of completion.

5.13 The Investigator and the Responsible Officer will coordinate to ensure that consistent and timely information is provided to all those involved.

5.14 If the concern was raised in an examiners report (e.g. UP7A form), this should not be directly forwarded to the Respondent. Instead, a redacted or summarised version should be prepared that highlights any specific concerns that the Respondent is being asked to address.

6.0 Preliminary Investigation: Findings and subsequent actions

6.1 At the conclusion of the Preliminary Investigation, the Investigator will determine whether the concern relating to misconduct in research:

a. is unfounded and will be dismissed because it is mistaken, is frivolous and/or is otherwise without substance

b. is unfounded and will be dismissed because it is vexatious and/or malicious and is otherwise without substance

c. warrants referral directly to the University's disciplinary procedures, another relevant University process, or to an external organisation including but not limited to statutory regulators or professional bodies (the latter being particularly relevant where there are concerns relating to Fitness to Practise)

d. has some substance but due to a lack of intent to deceive, or due to its relatively minor nature, could be addressed through education and training or other non-disciplinary approach, such as mediation, rather than through the next stage of the Procedure or other formal processes

e. is sufficiently serious and has sufficient substance to warrant a Formal Investigation of the complaint

6.2 The Investigator will make a confidential written record of his/her investigation, including any response from the Respondent, and the Investigator's conclusions (see template in Annex 4). They may provide an opinion as to subsequent steps they think could be pursued for consideration by the Responsible Officer.

6.3 The Investigator will make the draft report available to the Responsible Officer for comment prior to its formal submission, although the Investigator will not be obliged to edit the report if they disagree with feedback from the Responsible Officer.

6.4 The formal submission of the Investigator's report will also include any documentation (often as appendices) referred to by the report.

6.5 The Responsible officer will confirm receipt of the report and then decide whether it is appropriate to forward the report, or a redacted/summarised version, to the Complainant, Respondent and/or other involved parties (e.g. supervisory teams if a student). The Responsible Officer may delegate this task along with responding directly to any subsequent questions or

comments to the Investigator, but only if the Investigator agrees.

6.6 The work of the Investigator is then concluded, although he/she may be asked by the Responsible Officer to:

a. clarify any points in writing/email to those conducting subsequent investigations/procedures

b. called as a witness by any subsequent Formal Investigation or appeal

c. consulted by the Responsible Officer regarding any subsequent actions taken under this Procedure or other University processes

d. provide subsequent evidence or a witness statement if subsequent legal proceedings (including fitness to practice investigations) are pursued.

6.7 The Investigator will not make any further comment on the concern or its investigation unless formally requested by the Responsible Officer or otherwise required to by law. They will treat all information regarding the concern and its investigation as confidential.

6.8 When concerns are considered mistaken, frivolous, vexatious and/or malicious, and are otherwise without substance, they will be dismissed. The Responsible Officer will then take such steps, as are appropriate in the light of seriousness of the concerns, to sustain the reputation of the Respondent and the relevant research project(s) and, provided the concern is considered to have been made in good faith, the Complainant. When a Preliminary Investigation has concluded that a concern is vexatious and/or malicious, the Responsible Officer will consider whether disciplinary proceedings should be initiated against the Complainant, if they are a member of staff or a student of the University, or legal action if the Complainant is not a member of the University.

6.9 In cases where it is concluded that a concern warrants referral directly to the University's disciplinary procedures or other relevant process or to an external organisation, the Responsible Officer will initiate the appropriate University procedure(s) or inform the appropriate external organisation(s). Appropriate external organisations may include, but are not limited to, statutory regulators or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise.

6.10 In cases where it is concluded that the concern will be addressed through education and training, or other non-disciplinary approach, such as mediation, rather than through the next stage of the Procedure or other formal processes, the Responsible Officer will work with relevant University staff to establish a programme of training or supervision in conjunction with the Respondent and his/her line manager. This programme will include measures to address the needs of staff and students working with the Respondent. The use of this Procedure will then conclude at this point. When the Preliminary Investigation concludes that a concern is sufficiently serious and has sufficient substance to warrant a formal investigation of the complaint, the Responsible Officer will take immediate steps to set up a Formal Investigation.

7.0 Formal Investigation

7.1 The purpose of the Formal Investigation is to review all the relevant evidence including the Preliminary report, and any recommendations made during the preliminary investigation stage and:

a. conclude whether a concern relating to misconduct in research is upheld in full, upheld in part or not upheld and;

b. make recommendations, for consideration by the appropriate University authorities, regarding any further action the Formal Investigation Panel ('the Panel') deems necessary to address any misconduct it may have found, correct the record of research, and/or preserve the academic reputation of the University.

7.2 If a Formal Investigation is considered necessary, the Responsible Officer will inform the Complainant and Respondent that a Formal Investigation of the concern is to take place and appoint a Formal Investigation Panel alongside sources of support that may be available to them during a potentially stressful process. The Panel will normally be appointed within 21 working days of the completion of the Preliminary Investigation stage. Any delays to this timescale will be explained to the Complainant, the Respondent and other relevant parties in writing, presenting an estimated revised date of appointment.

7.3 Where a regulatory body, including statutory bodies regulating professions, or grant- or contract-awarding body or partner organisation requires to be informed about such a Formal Investigation, the Responsible Officer will provide the necessary confidential information to that body.

7.4 The Responsible Officer will consider whether, without prejudice to the proper conduct of the investigation, any other action should be taken at this stage pending the outcome of the investigation. It should be made clear that any actions that might be taken by the Responsible Officer in response to the notification of a concern relating to misconduct in research are not to be regarded as a disciplinary action and do not in themselves indicate that the concerns are believed to be true by the University. Those conducting this Procedure will take steps to make it clear to the Respondent, Complainant and any other involved parties that these actions are necessary to prevent further risk or harm to any persons involved in the research and that the concerns of misconduct in research can be properly investigated and to meet contractual and other obligations of the University.

7.5 The Panel should consist of a minimum of three impartial investigators, of which at least one will be from outside the University. Two members of the Panel will be academic specialists in the discipline(s) in which the misconduct is alleged to have taken place. Such persons may include the Panel member(s) from outside the University. Where a concern involves research being conducted in conjunction with a partner organisation, then it may be advisable for a representative of that organisation to be a member of the panel. Similarly, when a concern involves a researcher on a clinical, honorary or secondment contract, it may be advisable for a representative of the other employing organisation to be a member of the Panel. Members of the Panel will not have previously been involved in the investigation of the concern.

7.6 When the research to which the concern relates is deemed to be commercially sensitive, it may be appropriate for members of the Panel to sign a Non-Disclosure Agreement. However, the terms of any such Non-Disclosure Agreement must not compromise the ability of the Panel to conduct a full and fair investigation of the concern, including its ability to seek confidential advice

from persons with relevant expertise and make recommendations regarding any further action necessary by the University and/or other bodies to address any misconduct it has found, correct the record of research and to preserve the academic reputation of the University.

7.7 The Responsible Officer will select the Chair of the Panel from its members. The Chair will normally be a senior member of the University from outside the discipline in which the misconduct is alleged to have taken place. At the discretion of the University, the Chair may be selected from the member(s) of the Panel from outside the University and this may be advantageous if a concern is complex. In a case which involves complex legal issues, the Responsible Officer may appoint an external lawyer or other suitably qualified person to act as adviser to the Panel.

7.8 Each member of the Panel, including the Chair, will confirm in writing to the Responsible Officer that their participation involves no conflict of interest. They should seek advice from the Responsible Officer if unsure.

7.9 The Responsible Officer will give the Respondent and Complainant the opportunity to raise in writing any concerns that they may have about the persons chosen to conduct the Formal Investigation. The Responsible Officer will decide if any concerns raised by the Respondent and/or the Complainant warrant the exclusion of the person(s) concerned from involvement in the Formal Investigation, recording the reasons for the decision in writing. He/she will inform the person(s) concerned and the Respondent and/or the Complainant, as appropriate, of his/her decision in writing.

7.10 The Chair of the Panel will be responsible for the conduct of the Panel under this Procedure and will determine its own procedure in the conduct of the investigation. The Panel does not have any disciplinary powers.

7.11 The Responsible Officer will identify suitable administrative and other support to assist the Investigator. Those selected to provide such support will confirm to the Responsible Officer in writing that their participation involves no conflict of interest, seeking advice from the University if unsure.

7.12 Both the Complainant and the Respondent will have the right to submit evidence to the Panel orally and in writing. In the case of the Respondent, this includes the right to formally respond to the concern made against him/her and set out his/her case. Both the Complainant and the Respondent will have the right to be accompanied at meetings by another person if they so desire.

7.13 The Panel shall be free to seek confidential advice from persons with relevant expertise, both within the University and outside it.

7.14 In carrying out the Formal Investigation the Panel will conduct the Formal Investigation as quickly as possible without compromising the Principles and Standards of the Procedure (see Annexes 1 and 2) and the full and fair investigation of the concern.

7.15 The Chair will report the progress made by the Investigation Panel, by reference to criteria agreed by the Panel in advance, to the Responsible Officer monthly. The Responsible Officer will then provide appropriate information on the progress of the investigation, in confidence, to the Complainant and the Respondent, and to other interested parties as appropriate.

8.0 Formal Investigation: Findings and subsequent actions

8.1 At the conclusion of the Formal Investigation, the Panel will conclude, giving the reasons for its decision and recording any differing views, whether the concern relating to misconduct in research is:

a. upheld in full

b. upheld in part

c. not upheld and will be dismissed

8.2 When concluding whether a concern is upheld in full, upheld in part or not upheld, the standard of proof used by the Panel will be that of 'on the balance of probability'.

8.3 The Panel may determine that a concern is not upheld because it is mistaken or is frivolous or is otherwise without substance or is vexatious and/or malicious. The Panel may also determine that a concern is not upheld because of a lack of intent to deceive or due to its relatively minor nature and will therefore be addressed through education and training or other non-disciplinary approach, such as mediation.

8.4 The Panel may also make recommendations, for consideration by the appropriate University authorities, regarding any further action necessary by the University and/or other bodies needed to address any the misconduct it has found, correct the record of research, and/or preserve the academic reputation of the University. Such recommendations might include but are not limited to:

a. whether the concern should be referred to the University's relevant disciplinary procedure

b. whether the concern should be referred to another relevant University process or the University's Procedure for the Investigation of Alleged Financial and other Irregularities

c. what external organisations should be informed of the findings of the investigation, with appropriate confidentiality, including but not limited to statutory regulators, relevant funding bodies, partner organisations and professional bodies, the latter being particularly relevant if concerns relate to Fitness to Practise

d. whether any action will be required to correct the record of research, including but not limited to informing the editors of any journals that have published articles concerning research linked to an upheld concern relating to misconduct in research and/or by a person against whom a concern relating to misconduct in research has been upheld

e. whether procedural or organisational matters should be addressed by the University or other relevant bodies through a review of the management of research or additional/amended training in research ethics and integrity.

f. informing research participants

g. other matters that should be investigated, including concerns of misconduct in research which are either unrelated to the concern in question or alleged to have been

committed by persons other than the Respondent and/or other forms of alleged misconduct.

8.5 The Panel will make a confidential written record of its investigation, including any response from the Respondent, and the Panel's conclusions and recommendations.

8.6 The Panel will make its draft report available to the Responsible Officer, Respondent and the Complainant, in confidence, for comment on its factual accuracy. Any concerns about errors of fact need to be submitted to the Panel in writing within a one-week period. The Panel will decide if any concerns raised by the Respondent and/or the Complainant in particular warrant the revision of the draft report and inform the Respondent and/or the Complainant, as appropriate, of its decision in writing.

8.7 The Chair will then forward the final report to the Responsible Officer, together with any documentation used in the investigation.

8.8 The work of the Panel is then concluded and it should be disbanded, although its members may be asked by the Responsible Officer to clarify any points in the final report of the Formal Investigation and/or be consulted by the Responsible Officer regarding any subsequent actions taken under this Procedure or other University processes, or during any subsequent appeal. Members of a disbanded Panel will not make any comment on the concern or its investigation unless formally requested by the University or otherwise required to by law. They will treat all information concerning the concern and its investigation as confidential.

8.9 The Responsible Officer will then:

a. notify the Complainant and the Respondent in writing of the outcome of the investigation

b. where appropriate, notify the outcome of the investigation in writing to any relevant regulatory or professional bodies, any relevant partner organisations, and any other persons or bodies as he/she deems appropriate, including but not limited to the editors of any journals which have published articles concerning research linked to an upheld concern relating to misconduct in research and/or by a person against whom a concern relating to misconduct in research has been upheld

c. take any administrative actions that may be necessary to meet all legal and ethical requirements, protect the funds and/or other interests of grant- or contract-awarding bodies, and meet all contractual commitments, including any relating to disclosure of the outcome of the Formal Investigation.

8.10 When a concern is not upheld, for whatever reason, the Responsible Officer will then take such steps as are appropriate in the light of seriousness of the concern to sustain the reputation of the Respondent, and the relevant research project(s) and, provided the concern is considered to have been made in good faith, the Complainant. If the case has received any publicity the Respondent shall be offered the possibility of having an official statement released to the media.

a. When a Formal Investigation has concluded that a concern is not upheld because it is vexatious and/or malicious, the Responsible Officer will consider whether disciplinary proceedings should be initiated against the Complainant if they are a member of staff or student of the University.

b. When it is concluded that the concern is not upheld or not serious, and will instead be addressed through education and training or other non-disciplinary approaches such as mediation, the Responsible Officer will work with relevant University staff to establish a programme of training or supervision in conjunction with the Respondent and his/her line manager. This programme will include measures to address the needs of staff and students working with the Respondent. The use of this Procedure will then conclude at this point.

8.11 When a concern relating to misconduct in research is upheld, the Responsible Officer will decide what action needs to be taken under the University's relevant disciplinary procedure and/or otherwise.

a. In making this decision, the Responsible Officer will consider any recommendations made by the Panel, namely any further action it would consider necessary by the University and/or other bodies to address any misconduct it has found, correct the record of research, and preserve the academic reputation of the University.

b. Particular attention will be paid to any recommendations concerning research participants.

8.12 The Responsible Officer will liaise, as appropriate, with relevant committees and officers of the University and with other bodies to ensure any necessary courses of action are taken.

8.13 In addition, when a concern is upheld the Responsible Officer will take such steps, as are appropriate in the light of seriousness of the concern, to sustain the reputation of the Complainant. If the case has received any publicity the Complainant shall be offered the possibility of having an official statement released to the media. Care may need to be taken, and appropriate advice sought, regarding the wording of any such statement and the timing of its release to avoid prejudicing actions being taken by the University and/or other bodies subsequent to the concern being upheld.

8.14 In carrying out any of the above actions, the Responsible Officer will be free to seek confidential advice from persons with relevant expertise, both within the University and outside it.

9.0 Reporting to the University Research, Enterprise and Innovation Committee

9.1 Summaries of reports generated by Preliminary and Formal Investigations of concerns addressed under this Procedure will be circulated, in confidence, on an annual basis to the University Research Enterprise and Innovation Committees and will summarise follow-up reports relating to any actions taken following the conclusion of such Investigations. All such summaries will be anonymised and/or have content redacted if deemed appropriate by the Responsible Officer in consultation with any other relevant officers of the University.

9.2 Records of investigations under this Procedure shall be held by Corporate Governance. In the case that a concern is dismissed, addressed informally, or is not upheld after a Preliminary or Formal Investigation, on closure of the investigation a summary will be prepared (which could be the preliminary or final investigation report(s)) and the original records destroyed. The summary will be retained for a period of six years. In the case that a concern is upheld (in full or in part) after Formal Investigation, original records will be retained for a period of six years from the date of closure of the investigation under this Procedure.

9.3 The outcome of investigations (no matter the stage) will be reported, anonymously, in the annual research integrity statement, and to any external body (generally funding or licensing) requiring this information.

10.0 Appeals

10.1 Appeals (from any party) should normally be heard within one month of the outcome of the investigation. Acceptance of an appeal outside of this time frame will be at the discretion of the Responsible Officer.

10.2 Appeals may be permitted on any or all the following grounds:

a. Procedural irregularity in the conduct of the investigation that could have had a material impact on the outcome

b. Discovery of fresh evidence that was not available to the Investigator and/or the Full Investigation Panel

c. Evidence of bias or unfairness in the process or decisions taken by the Responsible Officer, Investigator and/or the Full Investigation Panel

d. If recommendations made as part of an outcome of the Procedure/ subsequent actions taken are either excessive or inadequate concerning the misconduct found by the investigation

10.3 Any appeal shall be made in writing to the Responsible Officer. The written notice of appeal shall set out the grounds of appeal and be accompanied wherever possible by supporting documentation.

10.4 The Responsible Officer will then assess the appeal to determine whether it falls within one or more of the grounds for appeal set out above, seeking clarification from the person(s) submitting the appeal as necessary.

10.5 An Appeals Panel will then be set up, normally consisting of three people. Depending on the circumstances of the investigation, and at the discretion of the Responsible Officer, the Appeals Panel may include a greater number of people to ensure that it contains sufficient expertise or diverse perspectives to reach a thorough and fair conclusion on the appeal. No individual involved in the Appeals Panel will have been involved at any stage previously as an Investigator or as a member of a Full Investigation Panel.

10.6 The Appeals Panel will review the conduct of the investigation, and any evidence submitted in support of the appeals(s) in question, rather than carry out a re-investigation of the concern(s) in question. It may, optionally, interview anyone involved in the original investigation if clarification of any written records is required.

10.7 The Appeals Panel will decide whether it upholds, reverses or modifies the outcome in question, including the decisions and/or recommendations associated with it. The decision of the Appeal Panel is final.

10.8 A summary of the conclusions will be sent to the Complainant and the Respondent for comment on matters of factual accuracy. The Appeals Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.

10.9 The Appeals Panel will submit their final report to the Responsible Officer. The Chair and Appeals Panel will also hand over to the Responsible Officer, or their nominated representative all records/ material relating to the Full Investigation. On acceptance of the report the appeals panel will then be disbanded and take no further part in the investigation.

10.10 The Responsible Officer shall convey the substance of the Appeals Panel's findings and recommendations to the Complainant, the Respondent and such other persons or bodies as they deem appropriate.

10.11 The Responsible Officer will then undertake the actions necessary to implement the conclusions of the Appeals Panel, following relevant provisions of the Outcomes and Reporting stage and liaising with any Research Integrity Officer and others, within and/or external to the University, as necessary.

Annex 1 Principles

A1.1 Misconduct in research is a serious matter. The investigation of concerns of misconduct in research must be conducted by the highest standards of integrity, accuracy, and fairness.

A1.2 Those responsible for carrying out investigations of alleged misconduct in research should always act with integrity and sensitivity.

A1.3 The following principles of Data Protection, Fairness, Confidentiality, Integrity, Prevention of Detriment, and Balance as defined below must inform the use of this Procedure for the investigation of concerns of misconduct in research.

A1.4 Those responsible for carrying out this Procedure must be aware that there may be occasions when a balance has to be struck in the application of the Principles. This is discussed under 'Balance' at the end of this Annex

Data Protection

A1.5 The use of this Procedure to investigate or otherwise respond to any concern will constitute the processing of the personal data of living individuals. Such processing is regulated by the Data Protection Act 2018 and the UK General Data Protection Regulation ("Data Protection Legislation"). The University must comply with the Data Protection Legislation and accordingly any investigation or use of this Procedure will be carried out in accordance with it.

A1.6 The University recognises that it may process special category data while carrying out the Procedure and it will do so in accordance with the Data Protection Legislation.

Fairness

A1.7 The investigation of any concerns of misconduct in research must be carried out fairly and in accordance with the statutory human rights of all parties involved.

A1.8 Matters should be dealt with promptly - without unreasonable delay of meetings, decisions or outcomes. Respondents should be dealt with consistently - dealing with similar cases in different ways or by delivering very different outcomes creates a risk of unfair outcomes, claims and reputational damage for the University.

A1.9 Those responsible for carrying out this Procedure should do so with knowledge of:

a. the statutory obligations of the University and the rights of employees according to current law;

b. any additional rights and obligations particular to the institution and/or its employees and/or its students - for example, those bestowed by university statutes and ordinances.

A1.10 Those responsible for carrying out this Procedure should be mindful of equality, diversity and inclusion, and also ensure that all related obligations are met. Where the concerns concern any equality, diversity or inclusion issues, those carrying out the Procedure will be appropriately trained or have relevant experience in dealing with equality, diversity and inclusion matters.

A1.11 Where anyone is formally accused of misconduct in research, that person must be given full details of the concerns in writing at the appropriate stage.

A1.12 When someone is investigated for alleged misconduct in research under this Procedure, they must be given a reasonable opportunity to set out their case and respond to the concerns against them. They must also be allowed to:

a. ask questions

b. submit evidence in their defence

c. suggest witnesses for the Investigator and/or Full Investigation Panel to interview. The Investigator and/or Full Investigation Panel may then choose to invite the suggested witnesses to interview.

d. raise points with the Investigator and/or Full Investigation Panel, as appropriate, about any information given by any witness (regardless of who has called the witness in question).

A1.13 The Respondent, Complainant and any witnesses involved in the Initial investigation stage or the Full Investigation stage may:

a. If they are staff or students of the University, be accompanied to interviews by a colleague, trade union or student union representative, or whoever else is specified in any additional contractual rights (such as by university statutes and ordinances) when they are required or invited to attend interviews or meetings relating to this Procedure;

b. If they are external to the University, while they will not have a contractual right to be accompanied when they are required or invited to attend interviews or meetings relating to this Procedure, it is strongly advised that they be offered the right to be accompanied by a friend.

c. seek advice and assistance from anyone of their choosing.

Confidentiality

A1.14 The Procedure should be conducted as confidentially as is reasonably practicable. The confidential nature of the proceedings should be maintained provided this does not compromise either the investigation of the misconduct concerns, any requirements of health and safety or any issue related to the safety of research participants.

A1.15 The confidential nature of the proceedings is essential to protect the Complainant, the Respondent and others involved in the Procedure.

A1.16 Nothing in this Procedure prevents anyone from making a disclosure under whistleblowing law (the Public Interest Disclosure Act).

A1.17 It is important that in the conduct of an investigation using this Procedure that the principles of confidentiality and fairness are applied with appropriate balance for both the Respondent and the Complainant,

A1.18 The identity of the Complainant or the Respondent should not be made known to any third party unless:

a. it has been deemed necessary (by those conducting the investigation) to carry out the investigation and/or to carry out required/ necessary actions or disclosures following the outcome of the investigation

b. it is necessary as part of the action taken against the Respondent if (at the end of the Procedure and/or any subsequent process, such as a disciplinary process, and after any appeals processes) the concerns have been upheld

c. it is necessary as part of the action taken against a person who has been found to have made malicious, vexatious or frivolous concerns

d. it is the stated policy of the employer/ funder/ other national body that the identity of individuals proved through appropriate disciplinary and appeals processes to have committed misconduct in research should be made public

e. any party to the Procedure is seeking legal advice or other advice from another third party who owes them a duty of confidentiality

f. it is already in the public domain

g. it is required by law or by the University's regulator

A1.19 Any disclosure to a third party of the identity of the Complainant or Respondent, or of any other details of the investigation, should be made on a confidential basis. The third-party should understand this, and that they must respect the confidentiality of any information received.

A1.20 The University and/or its staff may have contractual/legal obligations to inform third parties, such as funding bodies or collaborating organisation(s), of concerns of misconduct in research. In such cases, those responsible for carrying this Procedure out should ensure that any such obligations are fulfilled at the appropriate time through the correct mechanisms, always keeping in mind the legal rights of the employees, students and others involved in the concerns.

A1.21 While the concerns are under investigation using this Procedure (and/or the University's disciplinary process), the Complainant, the Respondent, witnesses or any other persons involved in this Procedure should not make any statements about the concerns to any third parties, unless formally sanctioned by the University or otherwise required to by law.

A1.22 Breaching confidentiality may lead to disciplinary action unless covered by the Public Interest Disclosure Act and/or the University's grievance or whistleblowing procedures.

A1.23 In the event of any conflict between the principle of confidentiality and any of the other principles of this Procedure, those conducting the Procedure should consider the balance of probability and use their judgement to choose the appropriate solution.

Integrity

A1.24 An investigation into concerns of misconduct in research using the processes of Initial Investigation or Full Investigation of the Procedure must be fair and comprehensive. The

investigation should be conducted expeditiously although without compromising the fairness and thoroughness of the process.

A1.25 Anyone asked to take part in the processes as an Investigator or a member of a Panel must make sure that the investigation is impartial and extensive enough to reach a reasoned judgement on the matter(s) raised.

A1.26 Those who give evidence to the investigation should do so honestly and objectively following the Principles of the Procedure and should be provided with relevant sections of the Procedure before giving evidence.

A1.27 All parties involved must inform the Responsible Officer immediately of any interests that they have which might constitute a conflict of interest as regards any aspect of the concerns, the investigation, the area(s) of research in question, or any of the persons concerned. Where the Responsible Officer has any interest which might constitute a conflict, they should declare any such conflicts and refer the investigation to their nominated alternate, who should decide if they should be excluded from involvement in the investigation, recording the reasons for the decision.

A1.28 In the interests of openness and transparency, inviting at least one member from outside the University to join the Full Investigation Panel of the Procedure is required. When concerns are deemed to be particularly complex or contentious, multiple external members may be invited to join Full Investigation Panels, and likewise to use Initial Investigation Panels to undertake the Initial Investigation stage.

A1.29 Confidential records should be maintained on all aspects and during all stages, of the Procedure. It is the responsibility of the Responsible Officer to see that such records are maintained and made available at all stages for any use of the University's Disciplinary Processes or any other proceedings or actions which might follow the conclusion of the Procedure.

A1.30 After the proceedings, all records should be retained by the University in line with the provisions given earlier in this Procedure.

A1.31 To preserve the integrity of this Procedure, great care must be taken to ensure that all relevant information is transferred to those involved in the various stages of the Procedure, such as between the Initial Investigation stage and any Full Investigation stage or between the Full Investigation stage and any Disciplinary Processes or any other proceedings or actions which might follow the conclusion of the Procedure.

A1.32 Those responsible for carrying out the Procedure should recognise that failure to transfer information could lead to the process being unfair to the Respondent and/or the Complainant. It could also lead to an appeal being made on the grounds of a failure to observe the Procedure or to the collapse of the investigation. It could also be considered as improper dealing with a concern, and so another instance of research misconduct.

Prevention of Detriment

A1.33 In using this Procedure, and in any action taken as a result of using the Procedure, care must be taken to protect:

a. individuals against frivolous, vexatious and/or malicious concerns of misconduct in research

b. the position and reputation of those suspected of, or alleged to have engaged in, misconduct, when the concerns or suspicions are not confirmed

c. the position and reputation of those who make concerns of misconduct in research in good faith, i.e., in the reasonable belief and/or based on supporting evidence that misconduct in research may have occurred.

A1.34 It is acknowledged that concerns may be made for what appear to be malicious reasons. The Procedure should still be used where the Complainant makes a formal complaint, to establish whether the concerns are of sufficient substance to warrant investigation.

A1.35 Anyone accused of misconduct in research is entitled to the presumption of innocence.

A1.36 A full Investigation should establish, on the balance of probabilities, the truth of any concerns.

A1.37 Any formal steps taken to discipline or otherwise reprimand the Respondent, or take steps which might undermine their good name or reputation (or that of any other party), must be taken through the University's disciplinary process which provides the Respondent with the right of appeal. Only when concerns have been upheld through the University's disciplinary process and, where called upon, the appeals process, may it be appropriate to apply any sanctions to the Respondent.

A1.38 The University must take all reasonable steps to ensure that the Respondent (or any other party) does not suffer because of unconfirmed or unproven concerns.

A1.39 Involvement of the Respondent in the Procedure should not prevent the Respondent from being considered:

a. for promotion

b. or the completion of probation

c. or other steps related to their professional development.

A1.40 The University may choose to suspend the implementation of any promotion, completion of probation or any similar step, for the period that concerns are investigated using the Procedure, rather than delay the actual consideration of such matters.

A1.41 If the concerns are upheld at the end of the Procedure, subject to the University's disciplinary process and/or appeals process, the University's normal rules concerning steps related to professional development, such as those detailed above, should apply.

A1.42 It should be made clear that any actions that might be taken by the Responsible Officer in response to the notification of concerns of misconduct in research are not to be regarded as a disciplinary action and do not in themselves indicate that the concerns are believed to be true by the University. The Responsible Officer and any Investigators and members of any Full Investigation Panels should take steps to make it clear to the Respondent, Complainant and any other involved parties that these actions are necessary to ensure that the concerns of misconduct in research can be properly investigated.

A1.43 Appropriate action should be taken against:

a. Respondents where the concerns of misconduct in research have been upheld, in full or in part, under this Procedure; and

b. anyone who is found to have raised frivolous, vexatious and/or malicious concerns of misconduct in research.

Balance

A1.44 Those responsible for carrying out this Procedure must be aware that there may be occasions when a balance has to be struck in the application of the Principles and/or its Standards. For example, it may, in certain circumstances prove to be impracticable to undertake a thorough and fair Initial Investigation of the concerns without releasing the Complainant's identity to the Respondent.

A1.45 The Responsible Officer should be responsible for resolving any such conflicts between the Principles, between the Standards, and/or between the Principles and the Standards, keeping in mind at all times that the primary goal of this Procedure is to determine the truth of the concerns via a thorough and fair investigation, conducted in a timely and transparent manner, and with appropriate confidentiality. The Responsible Officer can seek guidance from UKRIO and other bodies, as well as seeking legal advice.

A1.46 In addition, the Responsible Officer should be responsible for ensuring the integrity of this Procedure and any actions taken. The Responsible Officer should decide the course of action to be taken in cases of doubt.

A1.47 The Responsible Officer should keep a written record of all decisions taken throughout all the steps of the Procedure. The Responsible Officer should liaise closely with the Investigator and the Chair of the Full Investigation panel to ensure that a proper record is maintained throughout the Procedure.

Annex 2: Standards for the Conduct of this Procedure

A2.1 Those conducting this Procedure will endeavour to do so as to retain the confidence of both the Complainant and the Respondent.

A2.2 Every effort will be made to investigate concerns of research misconduct in the shortest possible timescale necessary to ensure a full and fair investigation. This will vary according to the time required to investigate a specific case.

A2.3 Once initiated the Procedure should progress to the natural end-point irrespective of such developments as:

a. the Complainant withdrawing the concerns at any stage

b. the Respondent admitting, or having admitted, the alleged misconduct, in full or in part

c. the Respondent or the Complainant resigning, or having already resigned, his/her post or otherwise leaving, or having already left, the University.

A2.4 After an investigation into alleged misconduct by any person who is not a current or former member of staff or student of the University, the Responsible Officer will determine the nature of any further action to be taken in relation to the misconduct.

A2.5 If at any stage of this Procedure, a Respondent or other person raises a counter-concern relating to misconduct in research or a concern relating to misconduct in research unrelated to the matter under investigation, such concerns will be addressed under this Procedure as separate matters and will be forwarded to the Responsible Officer for consideration. If at any stage of this Procedure, a Respondent or other person raises a complaint about the use or operation of this Procedure or any decision or action proposed or taken under this Procedure, or raises any other grievance, then the Responsible Officer will seek advice to determine an appropriate course of action. Reports generated by an investigation under this Procedure may be used in evidence by subsequent investigations under this Procedure or by other University processes.

A2.6 If required to facilitate a full and fair investigation and/or the operation of any aspect of this Procedure, the Responsible Officer, those persons conducting Preliminary Investigations, and Panels conducting Formal Investigations, shall be free to seek confidential advice from persons with relevant expertise both within the University and outside it. Those seeking advice will, so far as is possible, make no information available which could lead to the identification of the Complainant, Respondent or other individuals involved in the case. Persons who might be consulted include but are not limited to:

a. experts in particular disciplines of research

b. experts in particular aspects of the conduct of research, such as statisticians or editors of academic journals, and/or in addressing misconduct in research and poor practice

c. representatives of University departments such as Finance, the Health and Safety Office, Human Resources, Information Services, Research and Innovation Services, Office of Governance and Secretariat, or Student Services;

d. legal advisers

A2.7 Detailed and confidential records will be maintained on all aspects, and during all stages, of the Procedure, and minutes of all formal meetings convened under the Procedure will be taken. These minutes will be agreed by all parties.

A2.8 All reports, correspondence, minutes of meetings and other documentation relating to the operation of this Procedure will be retained for a period of at least ten years after the conclusion of the Procedure.

A2.9 The Responsible Officer will identify suitable administrative and other support to assist him/her and other persons responsible for the operation of this Procedure. In particular, support from Human Resources may be appropriate. Those selected to provide such support will confirm to the Responsible Officer in writing that their participation involves no conflict of interest.

Annex 3: Resolution using informal measures

A3.1 One potential outcome of the use of this Procedure is a conclusion that the concern(s) under investigation has some substance but, due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training or another non-disciplinary approach. This annex provides general guidance on the implementation of this type of outcome. They may be used after the initial investigation or full investigation stage. It is not recommended that they are used after the receipt of concern stage, as an assessment of the substance of the concern has not taken place at this point.

A3.2 Resolution through such measures - called 'informal' as opposed to resolution through a formal process of the University, such as a disciplinary process or academic regulations - can be challenging. There are many types of informal measures and they can be applied to many potential situations. Those operating this Procedure will need to determine what informal measures follow the outcome of a particular investigation.

a. The Responsible Officer and/or Research Integrity Officer may need to seek advice from colleagues to determine the best course of action and can also contact UKRIO.

b. Decisions made concerning the implementation of informal measures, and the reasoning behind those decisions, should be recorded in a brief format, in case they need to be referred to at a later date.

A3.3 Informal measures can take many forms and some examples are given below. This list should not be taken as exhaustive:

a. Education, training and other development activities.

b. Enhanced supervision/ oversight of research activities.

c. Restriction of research activities.

d. Mentoring.

e. Mediation between involved parties.

f. Awareness-raising of relevant issues of good research practice.

g. Pastoral care and support.

h. Revision of relevant research practices, systems and/or policies relating to the concern(s) in question. Such revision may be limited to a particular team or have a wider scope, covering a department or the entire organisation, and should be supported by appropriate training and awareness-raising.

A3.4 Key features of an effective system of resolution using informal measures are:

a. The nature and scope of the informal measures should be clearly defined.

b. A designated person should be responsible for carrying out the agreed measures.

c. Their duration should be clearly set out.

d. The Responsible Officer, working with the Research Integrity Officer and others, should ensure that the informal measures are delivered.

e. Appropriate documentation should record the delivery and outcomes of the informal measures, and any next steps.

f. Once completed, there should be discussion about any learning points for the University.

A3.5 When informal measures are concluded, involved parties (e.g., Complainant and/or Respondent; Responsible Officer and/or Research Integrity Officer; line managers/ supervisors; Human Resources or Student Services) should be informed in writing, summarising the delivery and outcome(s) of the informal measures and any next steps.

Annex 4 Template for Preliminary Report

(N.B. no template is provided for the Formal Investigation or Appeal reports as these may require different formats depending on the investigation/panel)

Investigation Report:
[NAME OF RESPONDENT AND/OR TITLE OF RESEARCH]

Investigation commissioned by: *[NAME OF RESPONSIBLE OFFICER]*
Investigator: *[NAME OF INVESTIGATOR]*
Date Investigation began: *[DATE]*
Date of report: *[DATE]*

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1.0 Key Points (Executive Summary)

1.1 Findings

[SUMMARISE RESEARCH MISCONDUCT CONCERNS AND THE OUTCOME OF THIS PRELIMINARY INVESTIGATION IN RELATION TO EACH CONCERN]

1.2 Conclusion and Recommendation

2.0 Schedule of Documents Reviewed

Ref	Details	Date

[ADD LINES AS NEEDED]

3.0 Introduction:

This report was commissioned by *[NAME OF RESPONSIBLE OFFICER]* on *[DATE].*

[ADD ANY RELEVANT INTRODUCTORY INFORMATION. IF A FORMAL COMMISSIONING DOCUMENT WAS PROVIDED IT SHOULD BE INCLUDED HERE]

3.1 First Concern

3.2 Second Concern

[ADD ANY FURTHER CONCERNS]

3.4 Background to the Investigation & timelines

[DESCRIBE INVESTIGATION PROCESS – WHICH DOCUMENTS WERE RECEIVED, WHEN INTERVIEWS OCCURRED ETC.]

3.5 Investigator

[PROVIDE BRIEF BACKGROUND OF THE INVESTIGATOR TO DEMONSTRATE WHY THEY ARE SUITABLE]

3.6 How the investigation has been conducted

This investigation will be conducted in a fair, impartial and timely manner to establish the facts.

Given the potential sensitivities inherent in investigations, it is important that everybody involved respects confidentiality and acts with discretion. The Investigating Officer is responsible for role modelling these behaviours and ensuring that any witnesses interviewed understand that they also need to respect the confidentiality of this investigation.

The outcome will be a formal report submitted to *[NAME OF RESPONSIBLE OFFICER]*

4.0 Persons involved and Chronology of Events

4.1 Persons involved

Abbreviation	Person	Role

[ADD LINES AS NEEDED]

4.2 Chronology of events

Date	Details	Source

[ADD LINES AS NEEDED. NOTE EVENTS INCLUDE BOTH THE RESEARCH THAT LED TO THE CONCERNS, AND ALSO THE STEPS OF THE INVESTIGATION]

5.0 Process of the Investigation and Findings

5.1 Process of Investigation

This investigation has been conducted pursuant to the Procedure for the Investigation of Allegations (Concerns) of Misconduct in Research *[DATE].*

5.2 Findings

[PROVIDE A NARRATIVE OF THE INVESTIGATION INCLUDING ANY RELEVANT QUOTES AND REFERENCES]

[ENSURE EACH CONCERN IS ADDRESSED IN TURN]

6.0 Conclusions

[THIS SECTION SHOULD BE AN EXPANDED VERSION OF THE EXECUTIVE SUMMARY]