THE INVESTIGATION OF ALLEGATIONS OF RESEARCH MISCONDUCT

PREAMBLE

1. This Regulation constitutes the College's policy on, and procedures for the investigation of, allegations of research misconduct. It is intended to satisfy the requirement of the Research Councils and Charities who fund research at Imperial that the College has proper mechanisms for the management of complaints of research fraud or misconduct.

2. The College has high standards of professional integrity and its policy on appropriate research conduct is set out in the policy document entitled "Research Governance Framework". It is recognised that instances of misconduct are rare and the procedures set out in this Regulation will consequently only be implemented in exceptional circumstances.

POLICY ON RESEARCH MISCONDUCT

3. The College considers any allegation of research misconduct to be a matter of great concern and will investigate any such allegation fully. Given its international reputation and status, the College has a responsibility to the research community and to the public at large and therefore, where appropriate, will make public the outcome of any such investigation.

DEFINITIONS

4. The College has adopted the Royal College of Physicians’ definitions of research misconduct as including piracy, plagiarism and fraud. The following definitions give indicative descriptions of the types of activity covered by this Regulation. These descriptions are neither exclusive nor exhaustive:

   a. Piracy is the deliberate exploitation of ideas and concepts from others without acknowledgement.

   b. Plagiarism is the copying of ideas, data or text (or a combination of these) without permission or acknowledgement.

   c. Fraud involves deception - usually, but not exclusively, the invention of data. This could also include the omission from analysis and publication of inconvenient components of a data set.

   d. Gift authorship is the practice of arranging to credit someone with authorship or co-authorship in such a way that deliberately exaggerates or gives a misleading impression of their actual contribution.

5. Other types of research misconduct may be separately defined, but the College views them as combinations or sub-types of those defined above. In addition to research misconduct, these
procedures will also apply to cases of scientific negligence or conflicts of interest where these lead to research misconduct.

**PROCEDURES FOR THE INVESTIGATION OF ALLEGATIONS OF RESEARCH MISCONDUCT**

**GENERAL PRINCIPLES**

6. Allegations of research misconduct may be brought to the attention of the College internally or externally by an individual or by an organisation. Whatever the source of the allegation, the College will endeavour to ensure that justice is done, and also is seen to be done, to both the complaining and the accused parties. Bona fide complaints are to be pursued with integrity and confidentiality and every attempt is to be made to ensure that the investigation proceeds without detriment to the complainant or the accused. Staff and students are entitled to expect that their research work will be regarded as being honest, until shown to be otherwise, and that they will be protected against ill-founded, frivolous, mischievous or malicious complaints; this principle will guide the College's procedures.

7. The College will ensure that, as far as possible, the proceedings of any investigation are treated as confidential. However, where there is a conflict between the need for confidentiality and the need to seek the truth, the latter must prevail.

8. Investigations are to be carried out as expeditiously as possible, where this is consonant with the utmost degree of thoroughness.

9. Where an individual against whom a complaint has been made resigns from, or otherwise leaves, the College, the complaint is nevertheless to be investigated, as far as possible, according to the procedures laid down below.

10. The College's mission is to maintain the highest standards of research integrity and adherence to this is an implied condition of service or enrolment for its staff and students; consequently, appropriate action must be taken against staff and students who are found guilty of research misconduct as the result of a full investigation. Research misconduct committed by staff members is a disciplinary offence and disciplinary sanctions can range from a formal warning to dismissal. For students, penalties may include resubmission of work, suspension from the College for a period of time, withdrawal of degree or withdrawal from the College.

11. Frivolous, mischievous or malicious accusations of misconduct by members of the College's staff and/or students will also constitute a disciplinary offence.

12. Where an allegation is dismissed, the College will take reasonable steps to ensure that the reputation of the researcher involved is preserved. Where an allegation has received publicity, the College will offer to release to the media an official statement which has been agreed with the researcher concerned.

13. Similarly, where a complaint which has been dismissed was made in good faith, the College will take all necessary steps to protect the position of the complainant.
14. The College may at any stage seek legal or other professional advice on any aspect of the proceedings.

15. A record of all documentation relating to an allegation of research misconduct, whether substantiated or frivolous, is to be kept by the College Secretary & Registrar. Such records are to be stored separately from an employee’s personnel file or a student’s record; a note will be placed on the relevant file or record stating that the College Secretary & Registrar should be contacted for further details about the case.

16. Apart from exceptional circumstances, this Procedure is to be used in conjunction with the College’s existing Disciplinary Procedures and will apply to all categories of staff and students.

**PRE-SCREENING STAGE**

17. However an allegation is made, formal notification of an allegation must be made in strict confidence to the Chair of the Research Misconduct Response Group (RMRG), who will acknowledge receipt. It is the responsibility of any employee or student of the College, who receives or is informed of any allegation of research misconduct by another member of staff or a student, to ensure that the complaint is made formally in this manner.

18. For the purposes of this Procedure the RMRG consists of the following individuals, using properly appointed deputies where necessary, and may be augmented by other members as appropriate: the College Secretary & Registrar, who acts as the Group’s Chair; and the Vice Provost (Research). Where a perspective from the Research Office would be useful, the Director of the Research Office should join the RMRG. For allegations involving staff members the Director of Human Resources should join; for allegations involving students the Vice Provost (Education) should join.

19. The Chair of the RMRG should, as soon as possible (and with the aim of acting within two working days), convene a meeting of the RMRG, or correspond with members, to decide on the initial response. Should the incident concern or implicate any other member of the RMRG, the College Secretary & Registrar will appoint a suitable substitute. If the incident concerns or implicates the College Secretary & Registrar, the Provost shall appoint an appropriate substitute to act as Chair.

20. Members of the RMRG will review the allegation to determine whether it conforms to Paragraph 14(1) of the Appendix to the College’s Statutes since it constitutes ‘an allegation that conduct or performance may constitute good cause for dismissal or removal from office’ and if it should be investigated under the terms of the procedure for the Investigation of Allegations of Research Misconduct. The RMRG will consider if allegations made against students are of equivalent seriousness and if they should be investigated under the terms of the procedure for the Investigation of Allegations of Research Misconduct.

21. Where the allegations do not fall under the terms of the procedure the Chair of the RMRG shall notify the complainant of this, the reasons why, which processes might be appropriate for dealing with the allegation and how the complainant may wish to proceed.

22. Where an allegation is made in respect of a student’s conduct which would constitute an examination offence as defined in Paragraph 14.7 of the College's Academic Regulations and the
Plagiarism and Examination Offences Policy and Procedures in the College’s Examination Regulations, the Vice Provost (Education) and the Chair of the RMRG are to decide if it is appropriate to refer the case to the Academic Registrar forthwith for consideration in accordance with the procedures described in the aforementioned Plagiarism and Examination Offences Policy and Procedures in the College’s Examination Regulations.

23. The RMRG will consider whether the nature of the allegations is such that immediate preventative action is necessary, normally (but not exclusively) to prevent any harm to individuals, animals or property as well as potential contraventions of the law or safety requirements. In such cases the Chair of the RMRG will ensure appropriate action is taken.

24. Where the allegations are within the definition of research misconduct the RMRG will decide on the action to be taken. This will normally involve progressing the matter to a Screening Investigation. The Chair of the RMRG will confidentially inform the Provost and whichever other senior members of staff as appropriate of the identities of the respondent and complainant, details of funding sources, research collaborators and any other appropriate details.

25. The RMRG will also consider whether the nature of the allegations necessitates the notification of any external organisations, such as legal or regulatory authorities, at this stage. The Chair of the RMRG will then action any such notifications and be responsible for any further liaison required.

26. The RMRG will work with Research Office staff to investigate potential contractual issues around the Respondent’s work, including any obligations on Imperial’s part to notify a Sponsor, funding organisation, collaborator or similar of the allegations.

27. When notifying anyone of the allegations or investigation the Chair of the RMRG shall be mindful of the respondent’s and complainant’s rights and the integrity of the investigation, and shall always emphasise that the allegation is unproved and yet to be investigated.

SCREENING INVESTIGATION

28. Where the allegation is to be progressed to screening investigation stage the Chair of the RMRG will bring the allegation to the attention of the appropriate Head of Faculty/ Department/ Centre or other unit who will be responsible for arranging a screening investigation of the matter. The Head will inform the accused that an allegation has been made and will instruct the individual not to alter or delete any relevant records for the duration of the investigation.

29. The Head will have the option of investigating the allegation themselves, or may otherwise appoint an independent and appropriately qualified nominee, taking into account the interests of both the complainant and the accused.

30. If the complainant does not wish to bring the matter to the Head of Faculty/ Department/ Centre or other unit for any reason, then the Chair of the RMRG will consult with the Vice Provost (Research) within the RMRG to determine who should investigate the allegation during the screening stage.
31. Similarly, if the Chair of the RMRG feels it is not appropriate to bring the matter to the attention of the Head for any reason then they will consult with the Vice Provost (Research) to determine who should investigate the allegation during the screening stage.

32. Where an allegation of research misconduct is made against a Head of Faculty/Department/Centre or other unit, the Chair of the RMRG will report the matter directly to the Provost. If a complaint is made against the Provost, the complaint is to be referred to the President. If the complaint is made against the President, the complaint is to be referred to the Chair of the Council.

33. All parties must inform the Chair of the RMRG immediately of anything that might constitute a conflict of interest concerning any aspect of the allegations, the investigation, the people involved or the research area itself.

34. The screening investigation should normally be completed within 30 working days of the initial complaint. Otherwise, all the members of the RMRG are to be advised of the delay in completing this stage of the investigation.

35. Following the investigation the Head (where they have been the Investigator) will decide whether evidence of a prima facie case has been established. If so consideration will be given to informal resolution or full investigation. Where the Head has nominated an investigator they will discuss their findings with the Head to consider whether the allegations warrant dismissal of the complaint, informal resolution or full investigation.

36. The Head of Faculty/Department/Centre or other unit will communicate their findings, or those of the Investigator, to the Respondent and the Complainant. This shall include a written investigation report summarising the nature of their screening investigation, the investigation's findings and their recommendation of either dismissal, informal resolution or full investigation. The Head/Investigating Officer shall forward the report to the Respondent and Complainant, inviting comments on the factual accuracy of the Report and deciding whether suggested factual amendments are appropriate. They will then forward the final version of the report to the RMRG, the Respondent and the Complainant, including any representatives.

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37. Where the Report finds that the allegation of research misconduct has not been established, it is the responsibility of the Chair of the RMRG to inform the complainant and the accused of this finding.

38. Where the finding is that the allegation should be dismissed but additional misconduct has been established, appropriate action will be taken. If the allegation involves a member of staff and contravenes the Discipline Code, the Director of HR will ensure that HR manages the case under the relevant disciplinary proceedings. If the allegation involves a student and contravenes the Discipline Code, the Vice Provost (Education) will ensure that the case is managed under the relevant student disciplinary proceedings. Otherwise this should be considered only at the end of the Research Misconduct procedure.
INFORMAL RESOLUTION

39. Where the Head or their nominee has found some substance to the allegations but judged that they are minor or there is lack of intention to deceive then the allegation may be dealt with through informal resolution. This may involve mediation, with the consent of both complainant and respondent. The matter may also be resolved by ensuring appropriate training and supervision for the respondent, devised by the Head and agreed by the respondent’s line manager or supervisor. It is recognised that genuine mistakes in the preparation, presentation or interpretation of data can be made and these cases should be distinguished from serious or intentional misconduct.

FULL INVESTIGATION

40. If the Head of Faculty/ Department/ Centre or other unit finds that there is a prima facie case for further investigation, the Chair of the RMRG will bring the complaint to the attention of the Provost. The Head of Faculty/ Department/ Centre or other unit is not required to determine whether research misconduct has actually occurred.

41. The Provost will first consider whether primary responsibility for resolving the allegation rests with the College or with another institution. For example, if the allegation involves patient care, the matter will be referred to the Chief Executive of the relevant NHS Trust for investigation. If a member of staff or student has collaborated with members of staff or students from another institution on the matter in question, the Provost will inform the head of that other institution of the College’s investigation and, later, its findings. Similarly the Provost will consider whether any regulatory bodies should be informed at this stage.

42. Where the allegation is to be investigated by the College, the Provost will convene an Investigation Panel. Panel members will be familiar with the Panel’s Terms of Reference, the Misconduct Procedure, and have appropriate experience/ expertise and declare any conflicts of interest. They must not sit on any Disciplinary Panel or similar charged with dealing with matters arising from the investigation. The Panel’s duties will include:

a. Taking evidence and explanations, in an independent manner, from all parties necessary to ensure a reasonable investigation. Both parties will be expected to produce such evidence as they have, in whatever form it might exist. Where certain evidence or witness information proves impossible to obtain it is expected that the Investigation Panel will consider whether the existing materials remain sufficient to continue a reasonable investigation.

b. Extending the scope of its enquiries as far as appears necessary or desirable; this might include the commissioning of further experimental or clinical work;

c. Examining any witnesses who are considered necessary to the investigation;

d. Making an assessment of the veracity of each piece of evidence; and

e. Forming conclusions on the substance of the allegation, putting these to the complainant and respondent with supporting evidence and then considering such further evidence or explanations as may be forthcoming.
43. The Investigation Panel will be convened to meet within two months of the date of the initial complaint. If this is not possible, it will meet as soon as is practicable, and the RMRG will be advised of the reasons for the delay.

44. The deliberations of the Panel will reach a conclusion on whether the allegations are founded, based on the balance of probabilities. Where an accused individual admits research misconduct, the investigation process may, at the discretion of the Panel, be discontinued or modified.

45. At the completion of the investigation and deliberations the Chair of the Panel will provide a draft report to the Complainant and Respondent (and their representatives, by arrangement) to allow for comment on the factual accuracy of the report or on any perceived procedural errors during the investigation. This Report will normally have been completed within two weeks of the completion of the investigation. The Investigation Panel (or only its Chair, if appropriate) shall assess the validity of these suggestions but the Panel will only accept corrections to errors of facts, or matters with a bearing on facts. Should the case later be dealt with under the Disciplinary Procedure the Respondent will have the opportunity to appeal the decision of a Disciplinary Hearing Panel, in line with that Procedure. The Respondent should note that once the RMRG has made a decision it cannot be overturned at the Disciplinary Hearing Panel; the sole purpose of the Disciplinary Hearing Panel is to make a decision on the sanction.

46. The Panel will then produce a final report, summarising the conduct of the investigation, whether the allegations are upheld or upheld in part, any findings related to any other matters for investigation and any issues it considers the College (and/or partners) should address. The Chair of the RMRG shall forward the final report to the Complainant, the Respondent and their representatives.

47. Where an allegation against a staff member is found to be proven and all investigations have been exhausted, in addition to any normal disciplinary consequences, the Provost, supported by the RMRG, may recommend further action including:

   a. Informing the editors of all journals in which the respondent has published articles, the status of such articles depending on the outcome of the investigation and, where appropriate, providing notices of retraction or confirmation;

   b. Where appropriate, in the case of a clinically-qualified individual, informing the General Medical Council or other interested bodies;

   c. Where the member of staff is supported by outside funds, informing the sponsoring organisation.

48. Where an allegation against a student is found to be proven, the Vice-Provost (Education), the Director of Student Support and the Academic Registrar will determine an appropriate penalty, in consultation with the student’s Head of Faculty if relevant. The College will then issue the student with a Completion of Procedures Letter. If the student is dissatisfied, the student may direct their complaint to the Office of the Independent Adjudicator within three months of the date on which the Completion of Procedures Letter was issued. Information on the complaints covered by the Office of the Independent Adjudicator and the review procedures is available at: http://www.oiahe.org.uk/making-a-complaint-to-the-oia.aspx.
49. The Provost, supported by the RMRG, may also recommend further action including:
   
   a. Informing the editors of all journals in which the respondent has published articles, the status of such articles depending on the outcome of the investigation and, where appropriate, providing notices of retraction or confirmation;
   
   b. Where appropriate, in the case of a clinically-qualified individual, informing the General Medical Council or other interested bodies;
   
   c. Where the student is supported by outside funds, informing the sponsoring organisation.

50. Where the Panel finds that the allegation is not proven and is of a frivolous, mischievous or malicious nature, its findings are to be reported to the Director of HR or to the Vice Provost (Education) for action under the normal disciplinary procedures.

51. Consideration of cases raised on the basis of genuine concern about the legitimacy of research will not result in disciplinary action against the Complainant.

52. On the conclusion of the investigation, a closure meeting should by the RMRG be held to document lessons learned.

53. The Vice Provost (Research) Office should receive a summary report from the RMRG by 31st July each year.

**RECORDING ALLEGATIONS OF RESEARCH MISCONDUCT**

65. The Chair of the RMRG will maintain a register of all Research Misconduct cases. The Register is to include the following information:

   a. The file reference number;
   
   b. The type of allegation made;
   
   c. The CID number, grade [or status] and Department of the Respondent;
   
   d. The name of any Funder
   
   e. The outcome of the Investigation.

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Revisions approved by the Council: 7 February 2014
A. **TERMS OF REFERENCE FOR THE SCREENING STAGE INVESTIGATOR**

1. The Screening Stage Investigator will determine whether there is prima facie evidence of research misconduct. They will have considered that the allegations:
   - Constitute research activity where the College has primary responsibility
   - Involve a Respondent where the College is the primary employer or for whom it has primary responsibility
   - Do not encompass breaches of the law or under those areas in the domain of the relevant regulatory authority
   - Do not encompass breaches of the organisation's Regulations which should be dealt with under the Disciplinary Procedure
   - Are not mistaken, frivolous, vexatious or malicious

2. The Screening Stage Investigator will be either the Head of Faculty/ Department/ Centre or other unit or an independent and appropriately qualified nominee. In certain circumstances it will be more appropriate for the Chair of the RMRG to consult with the Vice Provost (Research) to determine who should investigate the allegation.

3. The Screening Stage Investigator shall normally:
   - Maintain a record of evidence sought and received, and conclusions reached
   - Conduct an assessment of the evidence including interviewing the Respondent and Complainant and other staff considered relevant to the investigation
   - Utilise guidance from the UKRIO where needed
   - Provide a draft report to the RMRG, who's Chair will forward it to the Respondent and Complainant for comment limited to the accuracy of facts within the Report.
   - The Investigator shall assess the validity of any suggested factual amendments and amend accordingly
   - Produce a final report within 30 working days

B. **TERMS OF REFERENCE FOR THE FULL INVESTIGATION PANEL**

4. The Investigation Panel shall be convened by the Provost to investigate allegations of research misconduct which the Screening Investigator has deemed to have sufficient substance to warrant a full investigation.
5. The Panel shall consist of a College Consul of the relevant Faculty. The rest of the panel shall consist of three other members of academic staff from the College, appointed by the Provost. Alternatively one of the three further Panel members may be selected from the UKRIO’s Register of Advisors, at the discretion of the Provost in consultation with the RMRG and the UKRIO.

6. The Panel shall:

- Receive all relevant information from the Screening Panel as background for the investigation,
- Set a date for the investigation, which shall be conducted as reasonably expeditiously as possible,
- Maintain a record of evidence sought and received, and conclusions reached,
- Conduct an assessment of the evidence,
- Hear the Complainant and such other individuals as the Panel consider relevant to the investigation,
- Hold a Formal hearing, to hear the Respondent’s response to the allegations made.
- Consider the allegations of misconduct in research and reach a conclusion on the allegations with the standard of proof used to reach that decision being ‘on the balance of probabilities’,
- Provide a draft report to the RMRG, who’s Chair should forward it to the Respondent and the Complainant (and their representatives by agreement) for comment only on the factual accuracy of the Report,
- Shall assess the validity of any suggested factual amendments and amend accordingly,
- Report any further or distinct incidents of Research Misconduct encountered, which warrant separate investigation,
- Aim to reach a unanimous decision, failing which a majority decision will be acceptable.

7. The Investigation Panel should then produce a final report that:

- Summarises the conduct of the investigation,
- States whether the allegation of misconduct in research have been upheld in whole or in part, giving the reasons for its decision and recording any different views;
- Makes recommendations in relation to any matters relating to any other misconduct identified during the investigation;
- Addresses any procedural matters that the investigation has brought to light within the College and relevant partner organisations or funding bodies.
Appendix 2:

**FORMS FOR TRACKING A CASE’S PROGRESS**

**Initial Report**
To be used by the Chair of the RMG

**Information**

1. Department

   

2. Source of allegations: Internal [ ] external [ ]

3. Details of allegations:

   

4. External funding involved: Yes [ ] No [ ]

5. If yes to question 5 does it include:

   i) funding from a UK Research Council: Yes [ ] No [ ]
   ii) funding from a DH or NHS scheme: Yes [ ] No [ ]
   iii) funding from a Charitable body: Yes [ ] No [ ]
   iv) funding from a Commercial body: Yes [ ] No [ ]
   v) funding from a Overseas body: Yes [ ] No [ ]

6. Date formal allegations received: Day____ Month____

7. Does the project have an external Sponsor: Yes [ ] No [ ]

8. Does the project have an external partner(s): Yes [ ] No [ ]

9. Does the project involve an international partner(s): Yes [ ] No [ ]

10. Has the Organisation taken any action(s) to contact any regulatory or professional bodies: Yes [ ] No [ ]

11. Has the Organisation taken action(s) to use its disciplinary process: Yes [ ] No [ ]

12. Has the Organisation taken action(s) to bar the Respondent from relevant parts of the workplace: Yes [ ] No [ ]

13. Date on which the Screening Panel start/started work: Day___ Month___

14. Are external nominations to the Panel required: Yes [ ] No [ ]
15. Does the Screening Panel include members external to the Organisation:
   Yes ☐ No ☐

16. Other Details (optional):

Conclusion of the Screening Panel

To be used by the Chair of the RMRG to record the conclusions reached by the Screening Panel.

Information

1. Date the report submitted:   Day_________ Month_________

2. The allegations reviewed by the Screening Panel were considered:
   i) to be mistaken, frivolous, vexatious and/or malicious;   Yes☐ No☐
   ii) to need to be referred to the Organisation’s disciplinary or other internal process;   Yes☐ No☐
   iii) to have some substance but due to a lack of intent or motivation to deceive or due to their relatively minor nature, they should be addressed through education and training, or other non-disciplinary route, rather than through the next stage of the Procedure or other Formal Proceedings;
    Yes☐ No☐
   iv) be sufficiently serious and of sufficient substance to justify a Formal Investigation.   Yes☐ No☐

3. If the Screening Panel found the allegations to be mistaken, frivolous, vexatious and/or malicious, please outline any actions taken to support the Respondent and, if found frivolous, vexatious and/or malicious, whether any actions considered against the Complainant.

4. If the matter does not require formal procedures but rather should be addressed through a different route, please outline steps taken.
5. If to be taken to a Formal Investigation, please specify date planned to start the investigation:
   Day______ Month______

6. If to be taken to a Formal Investigation, are external nominations to the Investigation Panel required? Yes _____ No_______

7. Any other comments:

   

Conclusion of the Investigation Panel

To be used by the Chair of the RMRG to record the outcome of the Investigation Panel to UKRIO (and others).

Information

1. Date the report issued: Day______ Month______

2. Allegations not upheld: Yes No
   Allegations upheld: Yes No
   Allegations upheld in part: Yes No

3. If not upheld, please indicate whether any action should be taken to support the Respondent:

   

4. If the allegations were upheld in full or in part, whether the allegations will be referred to the Organisation's disciplinary process:
   Yes No

5. If yes to question 6, whether a date has been set to start the disciplinary process.
   Yes (Day____ Month____) No

6. Whether action to correct the record of evidence is considered necessary.
   Yes No

7. Whether there may be organisational issues that the Organisation should address in the management of research. Yes No
8. Has the outcome of the investigation been communicated to all other interested parties:
   Yes ☐   No ☐

9. Any other comments: