

IMPERIAL COLLEGE LONDON

RESEARCH MISCONDUCT POLICY AND PROCEDURES (REGULATION 21)

PREAMBLE

1. This Regulation constitutes the University's policy on, and procedures for the investigation of, allegations of research misconduct. It satisfies the requirements of the Research Councils, Charities and others who fund research at Imperial, and demonstrates that the University has proper mechanisms for the management of complaints of research fraud or misconduct. It also meets the University's commitments under the UK Concordat to support research integrity and is consistent with the procedures for the investigation of misconduct in research set out by the UK Research Integrity Office and UKCDR guidance on safeguarding responsibilities in research.

2. Imperial College London is a signatory to the UK Concordat to support research integrity and is committed to maintaining the highest standards of rigour and integrity in all aspects of research. It expects that all researchers will conduct their research according to these standards in the interests of maintaining public trust and transparency. To this end the University provides training and guidance on research integrity for all researchers. Imperial College London also adheres to the Russell Group Statement of Cooperation of May 2018 in respect of cross-institutional research misconduct allegations (Annex 2). The University is committed to using transparent, timely, robust and fair processes to deal with allegations of research misconduct when they arise.

3. This Procedure applies to any person conducting research at the University or under the University's auspices, whether solely or in conjunction with others, or in conjunction with other bodies, including but not limited to:

- a. members of staff;
- b. research students;
- c. independent contractors or consultants;
- d. persons with visiting or emeritus status; and
- e. members of staff holding joint clinical or honorary contracts.

4. This Procedure will apply to research students who are registered for an MPhil by research, a DPhil or a Professional Doctorate, but not normally to undergraduate, taught postgraduate and other types of students.

POLICY ON RESEARCH MISCONDUCT

5. Imperial College London 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 university 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. The university will also inform other relevant bodies, including research funders, journals, institutional partners, and other interested third parties, of the outcome of its investigations when it is appropriate to do so.

DEFINITIONS

6. Imperial College London has adopted the definitions of research misconduct set out in the UK Concordat to support research integrity. These definitions give indicative descriptions of the types of activity covered by this Ordinance and are neither exclusive nor exhaustive. Interpretation of these terms will involve judgements, which will be guided by previous experience and decisions made on matters of misconduct in research.

7. **Questionable research practices (QRPs):** QRPs refer to minor infractions or research practices, including avoidable errors, which fall short of the definition of intentional research misconduct. They may arise due to a lack of knowledge or attention to detail, negligence, or deliberate action, and may occur where there is no evident intention to deceive.

8. **Research misconduct:** Research misconduct may be 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, wastes resources, undermines the research record and damages the credibility of research. Research misconduct can take many forms, including:

- 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:
 - 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.
 - breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent.
 - misuse of personal data, including inappropriate disclosures of the identity of

research participants and other breaches of confidentiality.

- 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:**

- data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data.
- involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution.
- interests, including failure to declare competing interests of researchers or funders of a study.
- qualifications, experience and/or credentials
- publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication.

f. **improper dealing with allegations 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 allegations of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.

9. It may sometimes be difficult to tell the difference between questionable research practices and research misconduct, and this will often need to be determined through an investigation. Improving the understanding and management of questionable research practices, and the handling of allegations of research misconduct, are necessary to safeguard the quality and integrity of the university's research.

10. The standard of proof used by investigations under this procedure is that of "on the balance of probabilities". This means that the activity was more likely than not to have occurred. The university recognises that honest errors and differences in, for example, research methodology or interpretations, do not constitute research misconduct and that minor infractions, including honest errors, particularly by less experienced researchers or where there is no evident intention to deceive, may more appropriately be addressed informally through mentoring, education and guidance. Consequently, the basis for reaching a conclusion that an individual is responsible for research misconduct relies on a judgement that there was an intention to commit misconduct and/or recklessness or gross negligence in the conduct of any aspect of a research project. Where allegations concern an intentional and/or reckless or negligent departure from accepted procedures in the conduct of research that may not fall

directly within the terms detailed above, a judgement will be made by the Research Misconduct Response Group as to whether the matter should be investigated using this Procedure. The standards by which allegations of misconduct in research are judged will be those prevailing in the country in question and at the date that the behaviour under investigation took place.

11. In addition to research misconduct and questionable research practices, these procedures will also apply to cases of conflicts of interest where these lead to research misconduct, and to the investigation of safeguarding complaints raised in a research context.

PROCEDURES FOR THE INVESTIGATION OF ALLEGATIONS OF RESEARCH MISCONDUCT

GENERAL PRINCIPLES

12. Allegations of research misconduct may be brought to the attention of the university internally or externally by an individual or by an organisation. Whatever the source of the allegation, the university will endeavour to ensure that justice is done, and also is seen to be done, to both the complaining and the respondent 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 either the complainant or the respondent.

13. Staff and students are entitled to expect that their research work will be regarded as being honest, unless and until shown to be otherwise, and that they will be protected against ill-founded, frivolous, mischievous or malicious complaints; this principle will underpin the university's procedures. The university will also take concerns seriously and provide support for complainants who may have been exploited, abused or harmed as a result of unacceptable research conduct.

14. The respondent has the right to be accompanied or represented by a colleague or a trade union representative at any meeting held as part of the investigation process. Internal complainants may also be accompanied by a colleague at any meeting held as part of the investigation process.

15. The university will ensure that, as far as possible, the proceedings of any investigation are treated as confidential. However, there may be occasions when a balance has to be struck between the need for confidentiality and the requirement to carry out a full and fair investigation. Where these principles and standards are in conflict, the need to carry out a thorough investigation must prevail.

16. In cases involving allegations of criminal activity or abuse, the university will notify the police and/or Local Authority Designated Officers prior to commencing any investigation. Investigations are to be carried out in as timely a manner as possible, but always with the aim of carrying out a thorough, transparent and fair investigation of the allegations. Where allegations concern cross-institutional research misconduct, including cases where individuals are employed by more than one institution, the university will endeavour to work with the other institution(s) involved in the research to agree how best to investigate the allegations so as to provide an efficient and effective conclusion of the matter. In those cases where the university takes the lead in investigating an allegation, it will provide regular reports on progress with the investigation to the other interested parties. Where another institution takes the lead in investigating an allegation, the university will similarly expect to be kept informed of all

developments, findings and conclusions at a minimum.

17. Where an individual against whom a complaint has been made resigns from, or otherwise leaves, the university, the complaint will still be investigated and, as far as possible, a conclusion reached, according to the procedures laid down below.

18. This procedure is not intended to form any part of the university's disciplinary processes for staff or students, but is rather intended to provide for the full and fair investigation of research-related issues so that a conclusion can be reached on the balance of probabilities on the truth of any allegations prior to the consideration of any disciplinary or other non-disciplinary steps that might be required or recommended following the conclusion of an investigation. However, the university's mission is to maintain the highest standards of research integrity and adherence to this is an implied condition of service for its staff and of registration and enrolment for its students; consequently, appropriate action will be taken against any staff or students who are found to have committed, or who have admitted to, research misconduct. Research misconduct committed by staff members is a serious disciplinary offence and disciplinary sanctions can range from a formal warning to dismissal for gross misconduct. For students, penalties may include resubmission of work, suspension from the university for a period of time, or expulsion from the university, and in the case of former students, revocation of a degree or other award.

19. Where an allegation is upheld, the University will take such steps as may be necessary to correct the public research record, and may also inform other relevant bodies, including research funders, journals, institutional partners, and other interested third parties, of the outcome of its investigations.

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

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

22. Similarly, where an allegation which has been dismissed was made in good faith, the university will take all necessary steps to protect the position of the complainant.

23. The university may at any stage seek legal or other professional advice on any aspect of the proceedings.

24. A record of all documentation relating to an allegation of research misconduct, whether substantiated or frivolous, is to be kept by the Research Integrity Office. 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 Research Integrity Office should be contacted for further details about the case.

ALLEGATIONS

25. Allegations of potential research misconduct may be made in writing to researchmisconduct@imperial.ac.uk or to the Vice-Provost (Research and Enterprise), the Registrar and University Secretary or the Director of Research Integrity Investigations. Complainants submitting an allegation should provide as much detail about the allegation as possible in writing together with any evidence in support of their allegation. Staff or students concerned about issues of potential research misconduct may also raise their concerns or seek advice about their concerns using the same email address. Any member of staff or student of the University, who receives or is made aware of any allegation of research misconduct, either by another member of staff or a student, or by an external person or organization, should ensure that the complaint is submitted using this email address or to one of the named officers above. All allegations submitted in this manner will be acknowledged and considered in accordance with these procedures.

26. Allegations which are made anonymously or where there is no specific complainant will only be considered at the discretion of the University's Research Misconduct Response Group (RMRG), taking into account the seriousness of the concerns raised, the likelihood of confirming the concerns from alternative and credible sources/ evidence, and the need to ensure a fair process for the respondent.

PRE-SCREENING STAGE

27. However an allegation is made, formal notification of the allegation will be submitted in confidence to the RMRG for consideration.

28. For the purposes of this Procedure the RMRG consists of the following individuals: the Registrar and University Secretary, who acts as the Group's Chair; the Vice Provost (Research and Enterprise); the Director of the Research Office; and the Chief People Officer. For allegations involving students, the Vice Provost (Education and Student Experience) will be invited to join the RMRG. For safeguarding complaints, the Director of Safeguarding will be invited to join. With the agreement of the Chair, the RMRG may also be augmented by other members as appropriate. The Director of Research Integrity Investigations acts as secretary to the RMRG.

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

30. The RMRG will review the allegation to determine whether it falls within the definition of questionable research practices or research misconduct given in paragraphs 7 – 10 above, and if so, whether it should be investigated under the terms of this procedure.

31. As part of its consideration, the RMRG will also determine whether the allegation concerns research conducted primarily at the university, or if it concerns cross-institutional research. Where the allegation concerns cross-institutional research, the University will inform the other 'partner' institution(s) and will agree with them how the allegation should be progressed, and which party would

be more appropriate to lead the investigation. As part of this process, the University and the other 'partner' institution(s) will agree respective points of contact, timescales and additional responsibilities in accordance with the Russell Group Statement of Cooperation in respect of cross-institutional research misconduct allegations. For safeguarding allegations, the Director of Safeguarding will be the liaison point with the Local Authority Designated Officer in line with statutory responsibilities.

32. If the allegation concerns a member of staff with a clinical contract with an NHS Trust, or a member of NHS staff with an Honorary position at the University, or if the allegation involves patient care issues, the RMRG will liaise with the Medical Director of the relevant NHS Trust to agree how the allegation should be progressed, and which party would be more appropriate to lead the investigation.

33. Where the allegations do not fall under the terms of this 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 ascertain how the complainant may wish to proceed. In accordance with University policy, any complaints of harassment or bullying should be referred for consideration under the University's Report and Support procedure.

34. Allegations or concerns should be raised with the University as soon as possible after the complainant becomes aware of the substantive incident which has given rise to the complaint. However, the University recognises that in some cases allegations may be raised in relation to historical incidents or research that was carried out or published many years ago. Although the RMRG considers all cases on their individual merits, in such cases the RMRG will have to balance the University's responsibility to ensure that research carried out at the University meets the required standards and to correct the public research record, with the likelihood of finding sufficient evidence to establish the truth of a matter if a significant amount of time has passed since the research was conducted.

35. Where an allegation is made about a student's conduct which would constitute an offence under the University's Academic Regulations and/or its academic misconduct or student disciplinary procedures, the Vice Provost (Education and Student Experience) and the Chair of the RMRG will decide if it would be more appropriate to refer the case to the Academic Registrar for consideration in accordance with those procedures.

36. 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 potential 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 that appropriate action is taken.

37. Where the allegations fall within the definition of questionable research practices or 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 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.

38. 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 notify those bodies and be responsible for any further liaison required. The investigation process may be amended if the Police or Local Authority Designated Officer determines that further

action by the University could be prejudicial to any criminal investigation or if there is a risk of harm to an individual.

39. The RMRG will work with Research Office staff to identify any potential contractual issues around the Respondent's work, including any obligations on Imperial's part to notify any sponsors, funding organisations, collaborators or other third parties of the allegations.

40. When notifying anyone of the allegations or investigation at this stage the Chair of the RMRG shall be mindful of the respondent's and complainant's rights and of the integrity of the investigation, and shall always emphasise that the allegation is unproven, is still to be investigated and that information about the allegation and investigation is confidential.

SCREENING INVESTIGATION

41. 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 ("Head") and invite them to arrange for a screening investigation to take place.

42. The Head will have the option of investigating the allegation themselves, or of appointing an independent and appropriately qualified nominee to act as the investigating officer, taking into account the interests of both the complainant and the respondent.

43. 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 RMRG will determine who should be appointed as the investigating officer to conduct the Screening Investigation.

44. Similarly, if the Chair of the RMRG considers it is not appropriate to bring the matter to the attention of the Head for any reason then the RMRG will determine who should be appointed as the investigating officer to conduct the Screening Investigation.

45. 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 Council.

46. 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.

47. The screening investigation should normally be completed within three months of the initial complaint provided this does not compromise the principles set out in this procedure and is consistent with the need to carry out a thorough and fair investigation. This indicative timetable may be reduced in cases where there is a risk of harm. The RMRG should be kept informed of any delays in completing this stage of the investigation.

48. As part of the investigation, the investigating officer will interview both the person making the

allegation and the respondent, as well as any other persons who may be regarded as witnesses and will consider other relevant evidence before reaching a decision on the case. A record of all evidence, including interviews with the Respondent, Complainant, and other relevant members of staff, will be maintained.

49. At the conclusion of the Screening Investigation the investigating officer will decide upon the balance of probabilities whether the allegation of misconduct in research is sufficiently serious and has sufficient substance to warrant a Full Investigation of the complaint or if it can be dismissed or resolved informally.

50. For safeguarding complaints, the potential outcomes are that the complaint is a) substantiated, b) malicious, c) false, d) unsubstantiated or e) unfounded. Consequently, in the case of safeguarding complaints the Screening Investigation must determine if there is sufficient evidence to determine whether, on the balance of probabilities, the allegation has sufficient substance to suggest it may be substantiated, in which case it should be referred for full investigation. Where the investigation has established that the allegations are malicious, false, unsubstantiated or unfounded the case should be dismissed. Advice on the potential outcome of safeguarding investigations should be sought from the Director of Safeguarding.

51. At the conclusion of the Screening Investigation the investigating officer will provide the RMRG with a draft Report of their investigation setting out their conclusions and recommendations and the reasons for these. The RMRG will review these and may propose such revisions to the Report as it sees fit in the interests of ensuring that similar cases and offences are treated consistently across the University. Following this review by the RMRG, the investigating officer will finalise the Report of their investigation and present this to the RMRG.

52. In cases involving cross-institutional research misconduct allegations where Imperial College London is leading the investigation, the University will inform the 'partner' institution(s), of the outcome of the Screening Investigation.

CASE DISMISSED

53. Where the investigating officer has determined that the allegation is unfounded either because it is mistaken or is frivolous or is otherwise without substance, or because it is vexatious or malicious, it will be dismissed.

QUESTIONABLE RESEARCH PRACTICES AND INFORMAL RESOLUTION

54. Where the investigating officer has found that the allegations have some substance but has judged that they are minor in nature, relate to questionable research practices rather than misconduct or are the result of honest errors, or where there is no evidence of an intention to deceive or of recklessness, then the allegation may be dealt with through informal resolution. Such cases may be resolved by the provision of appropriate training and guidance and in some cases a period of enhanced 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.

55. The investigating officer may also make recommendations regarding any further action(s) which should be taken by the University and/or the respondent to address any issues uncovered during the investigation. This may include recommendations to correct errors in published papers, to correct the research record, and/or address any other matters uncovered during the investigation.

56. Where the investigation has found evidence of other forms of misconduct, appropriate action will be taken. If the allegation involves a member of staff and potentially contravenes the University's disciplinary procedures, the case will be referred to HR for consideration under those procedures. If the allegation involves a student and contravenes the student discipline or academic misconduct procedures, the case will be referred to the Academic Registrar for consideration under those Procedures. Otherwise, referral for disciplinary action should be considered only at the conclusion of the Research Misconduct procedure.

FULL INVESTIGATION

57. If the investigating officer finds that the allegation of misconduct in research is sufficiently serious and has sufficient substance to warrant further investigation, the case should be referred for Full Investigation by an Investigation Panel. The investigating officer is not at this stage required to determine whether research misconduct has occurred. Where the respondent admits the allegation of research misconduct during the Screening Stage Investigation, the investigation process may be discontinued at that point, and the case referred for disciplinary action without the need for a further investigation.

58. Once a case for Full Investigation has been established the RMRG will consider whether any regulatory or other bodies, including research funders, journals, institutional partners, the GMC and or any other interested third parties, should be informed of the University's findings at this stage. The Chair of the RMRG will inform other senior members of staff as appropriate of the recommendations agreed by the RMRG.

59. Where the allegation is to be investigated by the University, a Full Investigation Panel will be convened. The Panel shall consist of a University Consul of the relevant Faculty, one other member of the academic staff from the University and must also include at least one external member (usually a member of academic staff from another university with suitable and relevant expertise). Panel members will be familiar with the Panel's Terms of Reference, the Research Misconduct Procedure, and have appropriate experience/ expertise and declare any potential conflicts of interest. They must not sit on any Disciplinary Panel or similar charged with dealing with any matters arising from the investigation.

60. The Panel shall review and assess the evidence provided and any additional information they require. The work of the Panel will include:

- a. determination of whether the allegation is made in good faith;
- b. a confidential review and assessment of the evidence provided;
- c. reaching a conclusion on the allegation(s) in line with the following possible outcomes:

- (i) That the allegation is upheld in full;
- (ii) That the allegation is upheld in part;
- (iii) That the allegation has some substance but due to its relatively minor nature or because it relates to questionable research practice rather than to misconduct, may be addressed through informal resolution;
- (iv) is unfounded and may be dismissed.

61. The Panel may also make recommendations regarding any further action(s) which should be taken by the University and/or other bodies to address any misconduct the Full Investigation may have found; correct the research record, and/or address any other matters uncovered during the investigation.

62. The Investigation Panel will be convened to meet as soon as is practicable following the decision that a Full Investigation should be conducted. The Full Investigation should normally be completed within three months of the decision to refer a case for full investigation provided this does not compromise the principles set out in this procedure and is consistent with the need to carry out a thorough and fair investigation. The RMRG should be kept informed of any delays in completing this stage of the investigation.

63. The Panel will reach a conclusion on whether the allegations of research misconduct are upheld, based on the balance of probabilities. The Panel should aim to reach a unanimous decision, failing which a majority decision will be acceptable. Where the respondent admits to the allegation of research misconduct during the investigation, the investigation process may be discontinued or modified at that point.

64. At the completion of the investigation the Panel will provide a Report and recommendations to the RMRG for consideration. The Report should summarise the conduct of the investigation, confirm whether the allegations are upheld or upheld in part, or can be resolved through informal resolution or should be dismissed. The Report should also set out any findings related to any other matters for investigation and any issues it considers the University (and/ or partners) should address. The RMRG will review the recommendations and may propose such revisions to the recommendations as it sees fit in the interests of ensuring that similar cases and offences are treated consistently across the University. Any further incidents of potential research misconduct discovered during the investigation which might warrant separate investigation should also be reported at this stage.

65. Once the Panel's Report has been finalised, the Chair of the RMRG will inform other senior members of staff as appropriate of the outcome of the investigation and recommendations and will forward a copy of the final report to the Complainant and the Respondent.

66. In cases involving cross-institutional research misconduct allegations where the University is leading the investigation, the University will inform the 'partner' institution(s), of the outcome of the Full Investigation.

67. Where an allegation against a staff member is upheld, the case should be reported to the Council.

68. Where an allegation against a member of staff or a student is upheld and all investigations have been exhausted, in addition to any normal disciplinary consequences, the RMRG, may also recommend further action including but not limited to:

- 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 Medical Director of the relevant NHS Trust, the General Medical Council and/or other interested bodies;
- c. Where the member of staff is supported by outside funds, informing the sponsoring organisation;
- d. Informing other interested third parties, such as institutions where the staff member was previously employed or is soon to be employed. In cases where a student is involved, the University may also inform institutions the student has applied to for further study or employment. Any future references provided by the University for either members of staff or students may refer to the finding of intentional research misconduct,

69. 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 Chief People Officer or to the Vice Provost (Education and Student Experience) for consideration as to whether it is appropriate to take action against the complainant under the normal disciplinary procedures (where the complainant is a member of the University).

71. Allegations that have been made in good faith on the basis of genuine concern about the legitimacy and integrity of the University's research will not result in disciplinary action against the Complainant.

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

APPEALS

73. A complainant or respondent has a right of appeal against the final outcome of the research misconduct investigation process on the following grounds:

- a. That there was a procedural irregularity in the conduct of the research misconduct procedure that could have had a material impact on the outcome; or
- b. That there is relevant new evidence which could not reasonably have been presented during either the screening investigation stage or the full investigation and which is likely to have had a material impact on the outcome; or

c. That there was evidence of bias or unfairness in the process or decisions taken by the RMRG, Investigating Officer and/or the Full Investigation Panel; or

d. That the recommendations for further action are excessive in the circumstances of the case.

74. An application, including a statement of the grounds on which the application is made, must be submitted to the Provost in writing within ten working days of the date on which the written notification of the decision was provided to complainant or respondent. The written notice of appeal must set out the grounds of appeal, and be accompanied, wherever possible, by supporting documentation. An application received after the time stipulated above will be considered only where the appellant is able to demonstrate good reason for being unable to meet the deadline.

75. An initial evaluation of the application will be made by the Provost within five working days to determine if the grounds for appeal are met. The appellant will be advised in writing of the decision on whether leave to appeal is granted within ten days of the application being received by the Provost.

76. If the appellant has established valid grounds for an appeal, an Appeals Panel will be convened by the Provost as soon as is practicable to consider the appeal. The Appeals Panel will consist of two members of the University and one external member not previously involved in the case.

77. Any appeal should normally be heard within two months of the outcome of the investigation. The Appeals Panel will have the authority to uphold, set aside, or amend the decisions and recommendations made by the investigating officer or the Full Investigation Panel. If the Appeal Panel decides to set aside the original findings, the case may be referred back for reconsideration by the original or by a newly appointed investigating officer or Investigation Panel. The Appeal Panel may alternatively substitute a finding that the allegations are not upheld and that the appellant is therefore cleared of the allegation.

78. The decision of the Appeal Panel shall be final and there shall be no further opportunity for appeal against that decision within the University.

REPORTING

79. The RMRG will provide an annual report on research misconduct for the University's Risk, Ethics and Compliance Committee and the Research Committee, summarising the cases considered during the year, including any lessons learned. A high-level statement on the cases which have been referred for full investigations should also be reported to the Council as part of the University's annual Research Integrity Report, a copy of which will also be published on the University website.

RECORDING ALLEGATIONS OF RESEARCH MISCONDUCT

80. 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 the other institutions involved in cross-institutional research misconduct investigations;
- e. The name of any Funder;
- f. The outcome of the Investigation.

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A TERMS OF REFERENCE FOR THE SCREENING STAGE INVESTIGATOR

1. The Screening Stage Investigator will determine whether the allegation of misconduct should be referred for Full Investigation or if it can be dismissed or resolved informally. They will have considered that the allegations:
 - a. Constitute research activity where the University has primary responsibility.
 - b. Involve a Respondent where the University is the primary employer or for whom it has primary responsibility.
 - c. Do not encompass breaches of the law or under those areas in the domain of the relevant regulatory authority.
 - d. Do not encompass breaches of the University's regulations or procedures which should be dealt with under the relevant disciplinary procedures.
 - e. Are not mistaken, frivolous, vexatious or malicious.
2. At the conclusion of the Screening Investigation the Investigating Officer will determine whether the allegation of misconduct in research:
 - a. is sufficiently serious and has sufficient substance to warrant a Full Investigation of the complaint; or
 - b. has some substance but due to its relatively minor nature or because it relates to questionable research practices rather than to misconduct, may be addressed through education and training or another non-disciplinary approach, such as mediation, rather than through the next stage of the Procedure or other formal processes; or
 - c. is unfounded, because it is mistaken or is frivolous or is otherwise without substance, or because it is vexatious and/or malicious, and will be dismissed; or
 - d. warrants referral directly to another formal process of the University, including but not limited to examination regulations, academic misconduct processes or equivalent; bullying/harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary procedure.
3. 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 may be more appropriate for the Chair of the RMRG to consult with the Vice Provost (Research) to determine who should investigate the allegation.
4. The Screening Stage Investigator must:

- a. Maintain a record of evidence sought and received, and conclusions reached
- b. Conduct an assessment of the evidence including interviewing the Respondent and Complainant and other staff considered relevant to the investigation
- c. Produce a report within 3 months wherever possible or earlier if there is a risk of harm provided this does not compromise the Principles set out in this procedure and is consistent with the need to carry out a thorough and fair investigation. The report should summarise the conduct of the investigation and set out the Investigating Officer's conclusions and recommendations. It should also include recommendations in relation to any matters relating to any other misconduct that might have been identified during the investigation.

B. TERMS OF REFERENCE FOR THE FULL INVESTIGATION PANEL

1. The Investigation Panel shall be convened to investigate allegations of research misconduct which the Screening Investigator has deemed to have sufficient substance to warrant a full investigation.
2. The Panel shall consist of a University Consul of the relevant Faculty, two other members of academic staff from the University, and an external member (usually a member of academic staff from another university with suitable and relevant expertise). The Panel may seek specialist advice during the course of the investigation.
3. The Panel shall:
 - a. Receive, review and assess all relevant information obtained during the Screening Investigation and any additional information they require,
 - b. Set a date for the investigation, which shall be conducted as expeditiously as possible and normally completed within three months provided this does not compromise the Principles set out in this procedure and is consistent with the need to carry out a full and fair investigation of the allegations,
 - c. Maintain a record of evidence sought and received, and conclusions reached,
 - d. Conduct an assessment of the evidence,
 - e. Interview the Complainant and Respondent and such other individuals as the Panel consider relevant to the investigation.
 - f. Consider the allegations of misconduct in research and reach a conclusion on whether the allegations under investigation.
 - g. Make recommendations on any subsequent actions which should be taken by the university and/or other relevant bodies.
 - g. Report any further or distinct incidents of Research Misconduct encountered, which warrant separate investigation,
 - h. Aim to reach a unanimous decision, failing which a majority decision will be acceptable.
4. On completion of the investigation the Panel will reach a conclusion, on the balance of probabilities, on whether the allegation of research misconduct is:
 - a. upheld in full or in part.
 - b. has some substance but due to its relatively minor nature or because it relates to questionable research practices rather than to misconduct, may be addressed through the provision of additional education, training or mentoring, or through another non-disciplinary

approach.

c. is unfounded, because it is mistaken or is frivolous or is otherwise without substance and may be dismissed.

5. The Panel may also make recommendations regarding any further action(s) which should be taken by the university and/or other bodies to address any misconduct the Full Investigation may have found; correct the record of research, and/or address other matters uncovered

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

a. Summarises the conduct of the investigation,

b. States whether the allegation of misconduct in research has been upheld in whole or in part and makes recommendations on any further action required as a result of its findings, giving the reasons for its decisions and recording any different views;

c. For safeguarding investigations, state whether the complaint is substantiated (there is sufficient evidence to prove the allegation), malicious (there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive), false (there is sufficient evidence to disprove the allegation), unsubstantiated (there is insufficient evidence either to prove or disprove the allegation), or unfounded (there is no evidence or proper basis which supports the allegation being made).

d. Makes recommendations in relation to any matters relating to any other misconduct identified during the investigation;

e. Addresses any procedural matters that the investigation has brought to light within the University and relevant partner organisations or funding bodies.

C. TERMS OF REFERENCE FOR THE APPEALS PANEL

1. The Appeal Panel shall be convened by the Provost to consider appeals from the complainant or respondent which have met at least one of the following grounds for appeal:
 - a. That there was a procedural irregularity in the conduct of the research misconduct procedure that could have had a material impact on the outcome; or
 - b. That there is new material evidence which could not reasonably have been expected to be presented prior to the conclusion of the investigation; or
 - c. That there was evidence of bias or unfairness in the process or decisions taken by the RMRG, Investigating Officer and/or the Full Investigation Panel; or
 - d. That the recommendations for further action are outside the authority of the RMRG, or are otherwise unfair or disproportionate to the findings of the investigation.
2. The Appeal Panel shall consist of two members of academic staff from the University, one of whom will be appointed as the Chair of the Panel, and an external member (usually a member of academic staff from another university with suitable and relevant expertise). No member of the Panel shall have had any involvement in the case prior to the establishment of the Panel. The Appeal Panel has the power to uphold, reverse or modify the outcomes of the Screening or Full Investigation, including any or all of the decisions or recommendations associated with it.
3. The Appeal Panel will not carry out a re-investigation of the allegation(s) in question but will rather review the conduct of the investigation in accordance with the established grounds of appeal cited in the appeal and will consider any evidence submitted in support of the appeal including any new material evidence. The Appeal Panel will then decide whether it upholds, reverses or modifies the outcome of the Screening or Full Investigation, including the decisions and/or recommendations associated with it. The decision of the Appeal Panel is final.
4. The Appeals Panel shall write a report setting out its conclusions, giving the reasons for its decision and recording any differing views and will submit the report to the Provost. The Provost will confirm the Appeals Panel's findings and recommendations to the Complainant, the Respondent and such other persons or bodies as they deem appropriate and will ensure that the conclusions of the Appeals Panel are implemented.