



RESEARCH INTEGRITY OFFICE

Promoting integrity and high ethical standards in research  
Providing confidential, independent and expert support

# Procedure for the Investigation of Misconduct in Research

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**Version No.:** 2.0

**Publication Date:** 10/03/2023

**DOI:** <https://doi.org/10.37672/UKRIO.2023.01.misconduct>

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## Introduction

*The Procedure for the Investigation of Misconduct in Research* is at the heart of, and crucial to, the aims of our charity, the UK Research Integrity Office (UKRIO). Two of the missions central to the vision and purpose of UKRIO are ‘to champion the good governance, management and good conduct essential for high quality research’ and to ‘create and share knowledge of best practice and positive research cultures and conduct’. We have produced this Procedure to help fulfil those two roles.

Misconduct in research can have wide-ranging and damaging consequences, harming the integrity of research, bringing the individuals involved and the organisation into disrepute and causing harm to those involved. It can also damage public confidence in research. It is therefore vitally important that organisations have robust procedures to investigate alleged misconduct fully and fairly.

The Procedure described here is designed as a model for research organisations to follow for the investigation of allegations of misconduct in research. Such allegations might be brought to an organisation as the employer of the individual(s) against whom the allegations are made, or brought to them in another capacity, such as the host, funder or sponsor of the research.

Research is a complex and increasingly specialised activity. The Procedure is designed to be used by any research organisation to investigate all types of alleged misconduct and to be adapted for use by any research organisation. Applicable to all types of research, organisations can use the Procedure as a benchmark when creating or revising institutional processes to investigate allegations of research misconduct or adopt it in full or in part.

Use of the Procedure can assist researchers and organisations in fulfilling the requirements of *The Concordat to Support Research Integrity* and of regulatory, funding and other bodies, and help ensure that important issues have not been overlooked.

This is the second iteration of the Procedure. We are very grateful to those who responded to the draft revised Procedure and believe it is much stronger as a result. We hope that you find it useful and interesting and very much welcome feedback.

Please contact [info@ukrio.org](mailto:info@ukrio.org) if you have any comments or questions.

## Objectives

The objectives of the Procedure are to:

- ensure that an investigation is thorough and fair, conducted in a timely and transparent manner, and with appropriate confidentiality;
- demonstrate that, by using an agreed standard process, there should be fewer errors in the conduct of investigations; and
- reassure those raising concerns, those who are under investigation and other involved parties, that the process of investigation will follow a template procedure adopted nationally by research organisations.

By adopting and following the Procedure it should be possible to:

- establish the ethos and mechanisms by which misconduct in research may be addressed appropriately, investigated effectively, and handled fairly, in a timely manner and with an appropriate balance of confidentiality and transparency;
- assess whether the allegations have substance and should proceed to a full investigation, be addressed through other means, or be dismissed;
- conclude through a full investigation whether, on the balance of probabilities, the evidence upholds the allegations of misconduct in research (either intentional or reckless in nature); and
- produce a report to initiate appropriate actions following the conclusion of the process.

UKRIO is committed to promoting good conduct in research by providing the research community with practical guidance on the issues which need to be addressed and facilitating the sharing of existing good practices. The Procedure is a vital part of our continuing work to encourage good conduct in research and to help to prevent misconduct, setting out the responsibilities and values critical to research, as well as providing practical guidance for researchers and their employers.

This guidance reflects and is in accord with other relevant initiatives, guidance from UKRIO and other bodies, and the expectations of funding bodies. It has been produced to harmonise with broader research integrity expectations, such as *The Concordat to Support Research Integrity*.

Please note that it is a template for the development and adaptation of institutional procedures rather than a standard that institutions are expected to implement in full. Matters under investigation are often complex and the Procedure aims to reach a well-founded conclusion on what has happened, following which disciplinary and other actions to correct the record can take place depending on the outcome. Information gathered during an investigation may become relevant to, and disclosed in, any such disciplinary or regulatory process. This document provides a

blueprint for the conduct of the stages of an investigation and how appropriate investigators and investigation panels might be organised.

## DISCLAIMER

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*UKRIO is an independent charity providing impartial advice on research conduct. UKRIO does not have regulatory powers. This document is intended as guidance only and its contents do not constitute and should not act as a replacement to legal advice. It is not mandatory for organisations to follow the procedure set out in this document and organisations are strongly encouraged to take independent legal advice on the application and use of this procedure. UKRIO accepts no liability for any loss or damage caused or occasioned as a result of advice given by in this document. This document should not be used for court proceedings within any jurisdiction and may not be cited or relied upon for this purpose. Organisations should consider their obligations in responding to allegations of misconduct in research, including but not limited to employment law, contract law and data protection law, as well as any duty of care it might owe to staff and students.*

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### **A 'living document'**

As the research community and other bodies further develop practices in this area, we expect this Procedure to evolve. The intention is that it will be a 'living document', subject to periodic review and revision to reflect emerging best practices in this area. UKRIO welcomes feedback on the content and use of this document.

Please submit any comments or suggestions via our website [www.ukrio.org](http://www.ukrio.org)

## How to use this document

### Structure of the Template Procedure

The **Template Procedure for the Investigation of Misconduct in Research**, the next part of this document, contains UKRIO's Procedure for the Investigation of Misconduct in Research. It consists of six stages and three annexes:

1. Scope, Purpose and Standards
  2. Receipt of Allegations
  3. Initial Investigation
  4. Full Investigation
  5. Outcomes and Reporting
  6. Appeals
- A. Annex 1: Principles
  - B. Annex 2: Definitions
  - C. Annex 3: Resolution using informal measures

Each section of the Template Procedure (apart from Scope and Purpose and the Annexes) begins with a description of the purpose of that section; who will carry it out; the potential outcomes; and the timescale for completion of that section. They then set out the process for that stage of the Template Procedure followed by information on what steps to take next.

As noted earlier, Organisations can use this Template Procedure as a benchmark when creating or revising institutional processes to investigate allegations of research misconduct. Alternatively, they can adopt the Template Procedure as it is set out in this document.

If used as a benchmark for the creation or revision of an institutional process, this will naturally lead to the text of the Template Procedure being adapted or otherwise modified. If adopted, the Template Procedure contains some optional provisions, which Organisations may or may not choose to incorporate when adopting it.

Accordingly, individual institutional processes may be worded and/or ordered differently to the Template Procedure, while still aligned with its provisions and principles.

Dealing with research misconduct cases can be complex and difficult. Whilst the intention is for the Procedure to be as comprehensive as possible, it cannot cover all scenarios that will occur in course of any specific case. Integral to running an investigation well is the need, on occasion, to make informed judgements in difficult situations and have confidence in those judgements. Organisations with a robust, well-run and regularly reviewed procedure in which all concerned are treated fairly and receive regular communication, can be sure that they are making and applying judgements backed up by a rigorous and consistent procedure.

## Text boxes

Throughout this document are three types of text boxes. Each type has a specific purpose:

- Reminders of key actions, processes or issues.
- Optional steps and/or modifications to the Procedure that organisations may wish to consider.
- Discussion giving clarification or additional commentary on stages of the Procedure; issues which may be encountered during an investigation; or why UKRIO has taken a certain approach in this document.

*Examples of the three types of text boxes are given below:*



### **Reminder**

The Named Person should take great care to ensure that all information on the investigation is fully and accurately transferred to the next stage of the procedure.



### **Optional**

If an Organisation wishes to publish separate Terms of Reference for the Initial Investigation, Full Investigation and Appeals stages, these can be created from the sections in those stages marked 'Purpose', 'Conducted by', 'Potential outcomes' and 'Timescale'.



### **Discussion**

This provision allows an Organisation to use this Procedure to investigate matters of concern that are not formally lodged with it but which are highlighted via other means.

# Template Procedure for the Investigation of Misconduct in Research

## Purpose, Scope and Standards

1. **PURPOSE:** This Procedure recognises that the investigation of allegations of research misconduct can involve complex issues and seeks to discharge the Organisation’s responsibilities sensitively and fairly. It outlines the process to be followed when allegations of misconduct in research are brought against a researcher about research conducted under the auspices of the Organisation.



### Reminder: Opening policy statement on research misconduct

When adopting this Template Procedure or creating their own, Organisations should begin this section by setting out their views/ethos on the importance of good research practice and the safeguarding of quality and ethical standards in research, and briefly describe the importance of addressing research misconduct.

Organisations should briefly set out how their Procedure relates to other Organisational research policies (e.g., Code of Good Practice for Research) and other relevant processes (e.g., Whistleblowing Policy, Anti-Harassment Policy, Disciplinary Process), and include similar references to their Procedure in those policies/ processes. They should also note that it helps fulfil key Organisational responsibilities for research, such as conditions of research funding and the *Commitments of The Concordat to Support Research Integrity*.

It is important to ensure that the relationship between procedures is clear and cross-referenced.

2. The definition of research misconduct used throughout this document has been taken from the Concordat to support Research Integrity, namely: *'research misconduct 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, wastes resources, undermines the research record and 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.'* This is set out in full in [paragraphs 229-235](#) below).
3. **If the Organisation is a higher education institution:** Organisation Statute(s) take precedence over anything set out in this Procedure. Notwithstanding the arrangements which follow, the Head of the Organisation or their nominee has the right to suspend a member of staff and the right to suspend a student in accordance with the relevant Organisation Statute(s).



4. The Procedure will be carried out in accordance with the Standards set out later in this section (see [paragraphs 18-30](#)) and the Principles set out in [Annex 1](#). Those responsible for the operation of this Procedure must ensure that they are familiar with the Standards and Principles and refer to them with respect to all decisions and interpretations.
5. *If the Organisation is a higher education institution:* Nothing in this Procedure shall limit the right of the Organisation or a member of staff of the Organisation or a student of the Organisation to exercise their rights under any Statutes and Ordinances concerning discipline and grievance.
6. When allegations of research misconduct are upheld, in full or in part, this may result in action being taken under the Organisation's disciplinary procedures as appropriate, or under another relevant process.



### Reminder

Advice should be sought from relevant departments (e.g., Human Resources) on how the Procedure will relate to other relevant Organisational procedures (e.g., disciplinary procedure) and the process for moving from this Procedure to another Organisation procedure or vice versa. The Procedure and other relevant Organisational procedures should include such information on how they relate to each other and processes for moving between them.

7. Reports generated by this Procedure may be used in evidence by the Organisation's disciplinary procedures, by subsequent investigations under this Procedure and by other Organisational processes. In addition, subject to data protection considerations, they may be released, in full or in part or summary form, in reporting the matter to any appropriate external organisation.
8. **SCOPE:** This Procedure applies to any person conducting research under the auspices of the Organisation (please see [paragraphs 243-246](#) for a definition). The Organisation should define what it means by research. This includes research conducted solely or in conjunction with others in the Organisation or other bodies or in conjunction with other bodies, including but not limited to:
  - a. a member of staff or former member of staff;
  - b. a research student (including visiting students registered elsewhere who are conducting research at the Organisation);
  - c. an independent contractor or consultant;
  - d. a person with visiting or emeritus status; and
  - e. a member of staff on a joint clinical or honorary contract.
9. A key role in the Procedure is that of the **Named Person**. This is the individual nominated by the Organisation (see [paragraphs 236-237](#)) to have responsibility for receiving any allegations of misconduct in research; initiating and

supervising the Procedure for investigating allegations of misconduct in research; maintaining the record of information during the investigation and subsequently reporting on the investigation to internal contacts and external organisations; and taking decisions at key stages of the Procedure.

10. The Named Person should have a nominated alternate who should carry out the role in their absence or in the case of any potential or actual conflict of interest. The Named Person and the nominated alternate should not be the Organisation's Principal or equivalent, or Head of Human Resources.
11. *If the Organisation is a higher education institution:* This Procedure will normally apply to research students, who are registered for an MPhil, a DPhil or a Professional Doctorate, but not normally to undergraduate, taught postgraduate and other types of students (they will usually be subject to the appropriate academic misconduct regulations).
12. Alleged misconduct in research relating specifically to the assessed element of a research degree, i.e., to a thesis which has been submitted for examination may be investigated under the Organisation's examination regulations, academic misconduct process or equivalent, instead of under this Procedure. However, at the discretion of the Organisation, related allegations of misconduct in research may be dealt with under this Procedure (see **discussion box** below). Organisations need to be clear on the status of research students and degrees and how they fit into the procedure, including for example students who are also staff members.



### **Discussion: Allegations involving research students**

The decision on which process to use to investigate allegations of misconduct involving students should take account of the nature of the allegation and which process would be most suitable to carry out a full, fair and transparent investigation of the allegation(s) in question, in a timely manner and with appropriate confidentiality. Organisations should also be mindful of legal and other obligations regarding investigations relating to students, including those set by external bodies (e.g., the Office for Students).

For example, an Organisation's examination regulations/ academic misconduct process/ equivalent may be viewed as a more suitable process to investigate an allegation relating to work submitted as part of the assessment process (including but not limited to a thesis), while the misconduct investigation procedure may be viewed as a more suitable process to investigate allegations relating to the conduct of the research itself.

If the student has an employer relationship with the organisation, then they should be dealt with under employee procedures.

Advice should be sought from the Research Integrity Officer, Student Services, Human Resources and Legal Services (or equivalents), as necessary, and can also be sought from UKRIO.

13. When allegations of misconduct in research are raised that include/relate to allegations of bullying/ harassment, the Organisation will determine whether those allegations are investigated under this Procedure and/or another Organisational process, for example, the bullying/ harassment procedure or disciplinary process.
14. Financial fraud or other misuses of research funds or research equipment may be addressed under the Organisation's financial fraud investigation process or equivalent, instead of under this Procedure.
15. The Organisation will follow this Procedure through to its natural end point as far as possible even in the event that:
  - a. any individual(s) concerned leave or has left the jurisdiction of the Organisation, either before the operation of this Procedure is concluded or before the allegation(s) of research misconduct was made; or
  - b. the **Complainant(s)** withdrawing the allegation at any stage; or
  - c. the **Respondent(s)** admitting, or having admitted, the allegation in full or in part; or
  - d. the Respondent(s) admitting, or having admitted, other forms of misconduct, whether research misconduct or otherwise; and/or
  - e. the Complainant(s) and/or the Respondent(s) withdrawing from the Procedure.
16. After an investigation into alleged misconduct when a Respondent is not a current member of staff/ student of the Organisation (such as former staff or students, visiting staff, those on honorary contracts and students from other institutions conducting research on the Organisation's premises), the Named Person will determine the nature of any further action to be taken in relation to the investigation and its outcome. Similarly, after an investigation when a Respondent is deceased, the Named Person will determine the nature of any further action to be taken in relation to the investigation and its outcome.



### Reminder

All roles set out in this Procedure (such as Complainant, Respondent and Named Person) are defined in [Annex 2: Definitions](#).

17. The Organisation will need to ensure that they have arrangements in place for collaboration with other organisations over investigations where appropriate. This could include when an individual has moved during the course of the matter being investigated, where the Respondents are based in more than one institution, or when individuals fall under the auspices of the Organisation and another body (e.g., persons with visiting status who are employed by another

body or members of staff on a joint clinical or honorary contract). Matters for investigation can also be across national boundaries. The references below include further information:

- a. *Montreal Statement on Research Integrity in Cross-Boundary Research Collaborations* <https://wcrif.org/documents/354-montreal-statement-english/file>
- b. *Russell Group Statement of Cooperation in Respect of Cross-Institutional Research Misconduct Allegations* <https://russellgroup.ac.uk/media/5708/russell-group-research-integrity-forum-statement-of-cooperation-may-2018.pdf>

18. **STANDARDS FOR THE CONDUCT OF THIS PROCEDURE:** the Procedure will be carried out by the following Standards. Those responsible for the operation of this Procedure must ensure that they are familiar with these Standards, as well as the Principles set out in [Annex 1](#), and will refer to them with respect of all decisions and interpretations.
19. Those conducting this Procedure will endeavour to do so in a way that retains the confidence of both the Complainant(s) and the Respondent(s). Every effort will be made to investigate allegations of research misconduct in the shortest possible timescale necessary to ensure a full and fair investigation.



### Discussion

Organisations should bear in mind that there will not normally be any independent adjudication of matters considered under this procedure and that Complainants and Respondents have limited options available once an investigation is concluded. It is therefore important to act in a way that retains the confidence of involved parties and to ensure that relevant information on the reasoning behind decisions is provided to all parties, particularly where matters are closed at an early stage. Please also see the guidance note at [paragraph 35](#).

20. If at any stage of this Procedure, a Respondent or anyone else whether involved in the matter or not raises a counter-allegation of misconduct in research or an allegation of misconduct in research unrelated to the matter under investigation, these allegations will be addressed under this Procedure as separate matters and will be forwarded to the Named Person for consideration.
21. If at any stage of this Procedure, a Complainant, 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 Named Person will seek the advice of Human Resources, Student Services and other relevant departments, in confidence, to determine an appropriate course of action.

22. Where a Complainant, Respondent or other person involved in the investigation has difficulties at any stage of the procedure due to a disability, they should discuss this with the Named Person as soon as possible and reasonable adjustments will be made to ensure they are able to fully participate in the procedure.
23. However well managed, research misconduct matters can be difficult for all parties involved, including the complainant, respondent and those managing and running investigations. The Organisation should consider how best to support all parties in terms of their health and well-being at all stages of the procedure.
24. Reports generated by an investigation under this Procedure may be used in evidence by subsequent investigations under this Procedure, where a related matter is raised, or by other Organisational processes (such as a disciplinary process).
25. If required to facilitate a full and fair investigation and/or the operation of any aspect of this Procedure, the Named Person, those persons and panels conducting and supporting [Initial Investigations](#) and [Full Investigations](#) shall be free to seek confidential advice from persons with relevant expertise, both within the Organisation and outside it. To address technical aspects raised by a matter, they may also employ relevant expertise and use of tools or computer software for assessing different forms of misconduct such as plagiarism, data manipulation and fabrication. Those seeking advice will, so far as is possible, anonymise the information provided to make no information available which could lead to the identification of the Complainant, Respondent or other individuals involved in the case. Persons consulted will be subject to the same requirements on confidentiality as others involved in the process. Persons who might be consulted include but are not limited to:
  - a. experts in particular disciplines of research; or
  - b. experts in particular aspects of the conduct of research, such as members of research ethics committees, statisticians, editors of academic journals or equivalent persons from relevant areas of dissemination in research; and/or experts in addressing misconduct in research and poor practice; or
  - c. representatives of Organisational departments such as: Legal Services, Human Resources, Student Services, Finance; Governance/Registry, Research Office, Health and Safety Office, Library Services, Information and Technology Services or the equivalents; or
  - d. the [Advisory Service](#) of the UK Research Integrity Office; or
  - e. legal advisers.
26. Confidential records will be maintained on all aspects, and during all stages, of the Procedure and notes will be made of all meetings convened under the Procedure.
27. The Named Person will retain all reports, correspondence, transcripts of meetings and other documentation relating to the operation of this Procedure.

Advice should be sought from the relevant department on the Organisation's records retention policy for enquiries involving staff and/or students. In the absence of Organisational standards, the normal retention period for such records will be 6 years plus current (also known as 6 years +1), defined as 6 years after the last entry in a record, then followed by first review or destruction to be carried out in the additional current (+1) year. After the retention period, organisations must retain anonymised summary information of investigations (i.e., of the sort which is reported in annual statements required by *The Concordat to Support Research Integrity*).

- 28.** Records must only be retained beyond the normal retention period if:
  - a.** their retention can be justified for statutory, regulatory, or legal reasons; and/or
  - b.** the research project to which the records relate is still ongoing; and/or
  - c.** the retention period of the research project to which the records relate is longer.
  
- 29.** The Named Person will identify suitable administrative and other support to assist them and other persons responsible for the operation of this Procedure. In particular, support from Human Resources and Student Services may be appropriate. Those selected to provide such support will confirm to the Named Person that their participation involves no conflict of interest and that they will respect the confidentiality of the proceedings.
  
- 30.** In addition to the administrative and other support identified by the Named Person, as [paragraph 29](#) above, the Research Integrity Manager/Officer or the equivalent role may also advise and assist the Named Person and other persons responsible for the operation of this Procedure. The Research Integrity Officer or alternate as described above will confirm to the Named Person if their participation involves a conflict of interest (see [paragraph 196](#)).

## Receipt of Allegations stage

31. **PURPOSE:** the purpose of the Receipt of Allegations Stage is to assess an allegation of research misconduct that has been received by an Organisation, to determine the most appropriate process to investigate or otherwise address it. The primary aim is to determine whether the matter falls under the institutional procedure for investigating misconduct in research (in terms of both the matter raised and the individuals identified). Its aim is **NOT** to investigate the substance of the matter raised.
32. **CONDUCTED BY:** the Named Person will carry out this stage of the Procedure, supported by the Research Integrity Officer.
33. The Named Person may identify suitable professional, administrative, and other support to assist them in carrying out the above actions, (please see [paragraph 29](#) above.)
34. The Named Person shall be free to seek confidential advice from persons with relevant expertise, both within the Organisation and outside it, as described in [paragraph 25](#), above.



### Discussion

Allegations of research misconduct can be complex, even when they initially present as straightforward situations, and all humans can be subject to biases and gaps in expertise. As this stage of the Procedure puts a large amount of responsibility on the Named Person role, **it is advised that the Named Person seeks confidential advice** from persons with relevant expertise **before making any decisions** on the outcome of this stage.

35. **POSSIBLE OUTCOMES:** at the conclusion of the Receipt of Allegations stage, the Named Person will determine whether the allegation of misconduct in research (it may be the case that more than one course of action needs to be followed):
  - a. falls under the definition of research misconduct and the scope of the Procedure and should advance to the Initial Investigation Stage of this Procedure;
  - b. falls within the scope of another formal process of the Organisation and warrants referral directly to it, including but not limited to examination regulations, academic misconduct process or equivalent; bullying/harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary process; or
  - c. warrants referral directly to an external organisation, including but not limited to the research organisation(s) under whose auspices the research in question took place; statutory regulators; or professional bodies, the latter



being particularly relevant where there are concerns relating to Fitness to Practise; or

- d. presents as being related to potential poor practice rather than to misconduct, and therefore the initial approach to addressing the matter will be via informal measures, such as education and training, mediation or other non-disciplinary approach, rather than through the next stage of the Procedure or other formal processes; or
- e. should be dismissed because it does not fall under the remit of the Procedure and does not need to be referred elsewhere. When taking this decision, please see [paragraph 19](#) above and the discussion note below.



### Discussion

Care should be taken with option (e) above because for the Complainant this is their only opportunity to raise the matter with the Organisation and if it is dismissed at this stage there will be no investigation into the matter raised.

Whilst it may be clear to the Organisation that a concern does not fall under the Procedure and does not need to be referred further elsewhere, this might not be equally clear to the Complainant, who may have raised their concerns after considerable thought and have strongly held views on the substance of the matter.

Extra care should be taken also if this decision is being taken by one person. All people have their unconscious biases and gaps in expertise. Care must be taken not to dismiss due to bias, because of the way the matter has been presented, or because it appears to resemble previously seen matters.

An appropriate explanation of the reasoning behind the matter not proceeding further should be provided to the Complainant, especially if it is not being referred elsewhere. UKRIO receives enquiries from many unhappy complainants, and without taking a view on the substance of their complaints, there are occasions where an individual has not received sufficient or satisfactory justification for the decision taken.

Organisations should also consider the potential reputational consequences of dismissing a concern at this stage, should the matter later turn out to have substance or even if it doesn't - it can appear from the outside to be brushing the matter under the carpet.

36. **TIMESCALE:** this stage of the Procedure should be completed as soon as is practicable upon receipt of an allegation, if possible within ten working days, provided this does not compromise the Standards (see [paragraphs 18-30](#)) and Principles (see [Annex 1](#)) of this Procedure and the full and fair assessment of the allegation. The Named Person will explain any delays to this timescale to the Complainant in writing, presenting an estimated revised date of completion.



37. **PROCESS:** Initial allegations of misconduct in research should be made as set out in the procedure or on the Organisation's website. The Complainant should provide as detailed a statement as possible in writing in support of the allegation.



### **Discussion: 'Historic' allegations**

Allegations may be raised relating to research that was carried out many years previously. The institution may consider imposing a time limit on allegations raised, or to consider each case on its merits, including the likelihood of finding sufficient evidence to establish the truth of the matter a significant time afterward, balanced with the responsibility to correct the record of research if appropriate.

A key principle of research integrity and research governance is that organisations have both a responsibility to ensure that any research conducted under their auspices meets required standards and a responsibility to respond appropriately when concerns are raised about research which has been conducted under their auspices.

Imposing a time limit will have an impact on the ability of organisations to discharge these responsibilities. It also could be viewed as failing to recognise that those raising concerns can have valid reasons for not raising concerns at the time. In addition, such time limits can be viewed by the public and by policy makers as being somewhat arbitrary, and institutions can often find that exceptions need to be made for certain allegations, which then cause procedural challenges.

Advice should be sought from the Research Integrity Officer, Student Services, Human Resources and Legal Services (or equivalents), as necessary, and can also be sought from UKRIO.

**Please note** that the standards by which allegations of misconduct in research should be judged should be those prevailing at the date that the behaviour under investigation took place.

38. A person making an allegation or complaint will not be penalised, provided that it is done without malice and in good faith, reasonably believing it to be true.
39. Anyone may raise a concern relating to research misconduct; it is not limited to members of the organisation. The complainant may, in the first instance and where appropriate, attempt to address the issue with either the individual concerned or an appropriate senior colleague rather than raising a concern via this Procedure; they may also wish to seek advice from the confidential liaison point within the institution. Where the complainant is not satisfied with the outcome of an informal approach, or if they do not consider such an approach appropriate, then they should raise concerns via this Procedure as set out below.

- 40.** While this Procedure encourages persons with concerns about the conduct of research to raise them with the Named Person 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 directly. Depending on what is stated in an Organisation's Whistleblowing Procedure, a member of staff or a student may choose to raise a concern in the first instance with the confidential liaison point within their institution or other appropriate points referenced in the Whistleblowing Procedure and ask that person to bring the matter forward on their behalf.
- 41.** When raising concerns, complainants should provide a summary of the allegation along with any other information and enclose any evidence to support their concerns.
- a.** It is helpful if allegations are made in a single submission on a single occasion, as this facilitates a thorough assessment of the complainant's concerns and reduces procedural challenges that can arise from additional allegations being made during subsequent stages of this procedure.
  - b.** However, the Named Person should recognise that complainants may understandably be unfamiliar with the requirements of this Procedure and/or nervous about raising concerns. The priority should be a thorough and fair assessment of the complainant's concerns and at the discretion of the Named Person the timescale of this stage of the Procedure can be extended if necessary to gather more information from the Complainant. If this takes place, care should be taken to stay within the scope of this stage and not undertake actions which fall within the scope of subsequent stages of this Procedure, such as the Initial Investigation stage.
- 42.** Complainants will normally put their name to any allegations they make. However, it is recognised that complainants can be concerned about revealing their identity. Allegations raised which are anonymous, or matters identified where there is no specific complainant, will be considered at the discretion of the Named Person, taking account of the seriousness of the concerns raised and the likelihood of confirming the concerns from alternative sources/ evidence. Where appropriate, advice will be sought, and consideration given to whether the respondent will be able to defend themselves.



### *Discussion*

This provision allows an Organisation to use this Procedure, (at their discretion and using their judgement), to investigate matters of concern that are not formally raised with the Organisation but which are highlighted via other means such as in a report or noted in published material.

- 43.** If the Named Person is the Complainant or the Respondent or is personally associated with the work to which the allegation relates or has any other

conflict of interest, they will instead refer the allegation to their nominated alternate who will notify the Complainant accordingly. The nominated alternate will then take on the role of the Named Person as regards the conduct of this Procedure and will be responsible for fulfilling the duties allocated to that role by this Procedure.

44. The Named Person will inform the Research Integrity Officer in confidence that an allegation of misconduct in research has been received and, where appropriate, will seek the advice of Human Resources and/or Student Services regarding the use of this Procedure.
45. The Named Person will acknowledge receipt at an early stage of an allegation by the Complainant in writing, informing them that the allegation will be considered initially under the 'Receipt of Allegations' stage of the Procedure. A copy of the Procedure will be provided to the Complainant.
46. The Named Person will assess the allegation(s) to determine whether they fall within the Organisation's responsibility to address and, if so, what would be the most appropriate process to investigate or otherwise address them, concerning the following criteria:
  - a. Whether the Respondent (or Respondents) is/was conducting research under the auspices of the Organisation, whether solely or in conjunction with others in the Organisation or externally;
  - b. Whether the research project(s) to which the allegation relates are being or were conducted under the auspices of the Organisation, whether solely or in conjunction with other bodies; and
  - c. Whether the allegation(s) potentially fall within the definition of misconduct in research described in [Annex 2](#) (see [paragraphs 229-235](#)).
47. In carrying out the assessment, the Named Person shall consider the information provided and any additional information they require to form a conclusion. The purpose of the assessment is solely to determine the most appropriate course of action for dealing with the allegation, as set out in [paragraph 31](#).
48. The Named Person may decide that it is necessary to contact the Complainant and/or the Respondent to seek information or ask questions to carry out the above review. Such contact should be in writing; the Complainant and Respondent would not normally be interviewed at this stage. If it is necessary to contact the Respondent, they should first be informed that allegation(s) of research misconduct have been made concerning them and that the allegation(s) is being assessed to determine what if any action should be taken.
49. The Named Person will also determine whether the allegation(s) and/or the research project(s) in question concern situations that require immediate action to prevent further risk or harm to staff, research participants or other persons, suffering of animals or negative environmental consequences (where this might contravene the law or fall below good practice). If so, then the Named Person 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, and/or relevant partner organisations, publishers and funders. The Respondent may also need to be informed when carrying out any such actions whether because they will be involved in some or all the actions and/or because they will become aware of them. If this is the case, please refer to the [previous paragraph](#).



### Reminder

At all times, the Named Person should emphasise to all parties that the allegation is as yet unproven, is being addressed under this Procedure and that the information is confidential.

50. The Named Person will also determine whether the research project(s) to which the allegation relates includes legal or contractual obligations that require the Organisation to undertake prescribed steps in the event of an allegation(s) of misconduct in research being made, such as making reports to a regulatory or a funding body and take any actions necessary. Such obligations might be in:
  - a. a contract/agreement or guidance on research conduct from a regulator or a funding body;
  - b. a partnership contract/ agreement/ Memorandum of Understanding; or
  - c. an agreement to sponsor the research.
51. The Named Person will then ensure that all legal or contractual obligations are carried out by the Organisation, seeking advice from human resources and/or student services, the research office, legal and other sources within the Organisation as necessary. It may be necessary to inform the Respondent when carrying out any such legal or contractual obligations. If this is the case, please refer to [paragraph 48](#) above.
52. **CONCLUSION OF THIS STAGE AND NEXT STEPS:** The Named Person shall write a note summarising their assessment of the allegation(s) and inform other organisational contacts as appropriate of the next steps from the outcomes listed in [paragraph 35](#).
53. Where the outcome determined is [35\(a\)](#), that it should proceed to the initial investigation, the Named Person will inform the Respondent of the following, formally and in writing:
  - a. An allegation of misconduct in research has been made which involves them.
  - b. A summary of the allegation(s) and a copy of the Procedure.

- c. That it has been determined at the Receipt of Allegations stage that the matter has sufficient substance and falls under this procedure and therefore will proceed to the 'Initial Investigation' stage.
  - d. That they will be allowed to respond to the allegation(s) and set out their case.
  - e. The conclusions of the initial assessment of the allegation(s), an outline of the next steps and approximate timescales. Where possible, this may include the identity of the investigator and an indication of when they will be in contact to gain the Respondent's version of events.
  - f. When allegations have been made against more than one Respondent, the Named Person should inform each individual separately and not divulge the identity of any other Respondent.
54. For all other outcomes, the Procedure reaches its endpoint. Please refer to the [Outcomes and reporting](#) stage [paragraphs 124-132](#) for follow-up action.



### Reminder

The Respondent is informed earlier in the Receipt of Allegations stage if any actions are taken that require their involvement or would otherwise make them aware of the allegation(s) or the investigation. See [paragraphs 48-51](#) for further details.

55. The Named Person will then inform the Complainant, formally and in writing, of the conclusions of the review of the allegation(s) and an outline of the next steps.
56. The Receipt of Allegations stage now ends.



### Reminder

The Named Person should take great care to ensure that all information on the investigation is fully and accurately transferred to the next stage of the procedure.

## Initial Investigation stage

- 57. **PURPOSE:** the purpose of the Initial Investigation Stage is to determine whether there is sufficient evidence of research misconduct to warrant a Full Investigation of the allegation or whether alternative action(s) should be taken.
- 58. **CONDUCTED BY:** this stage will normally be conducted by an Investigator, whose appointment is discussed under 'Process' (see [paragraphs 64-66](#)).



### *Optional*

The Named Person can decide that an Initial Investigation may instead be conducted by an Initial Investigation Panel consisting of two or three persons, which may include external members or an external Chair. The process for the appointment and way of working of an Initial Investigation Panel is given in a text box under [paragraph 66](#). Use of an Initial Investigation Panel may be advantageous when allegations involve multiple disciplines of research and/or are especially complex, or where there are significant potential conflicts of interest within the Organisation.

The decision by the Named Person to use an Initial Investigation Panel will normally be made on a case-by-case basis. However, some Organisations may choose for an Initial Investigation Panel to be the default method to conduct the Initial Investigation stage; this is entirely acceptable under this Template Procedure and the chosen method should be set out in that Organisation's Procedure.

- 59. The Named Person will identify suitable administrative and other support to assist the Investigator (see [paragraph 29](#) above).
- 60. The Investigator shall be free to seek confidential advice from persons with relevant expertise, both within the Organisation and outside it, as described in [paragraph 25](#), above.
- 61. **POSSIBLE OUTCOMES:** after the Initial Investigation Stage, the Investigator 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 poor practice rather than to misconduct, will 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. warrants referral directly to another formal process of the Organisation, including but not limited to examination regulations, academic misconduct

- process or equivalent; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary procedure; or
- d. warrants referral directly 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; or
  - e. is unfounded, because it is mistaken or is frivolous or is otherwise without substance (this could include difference of opinion on methodology), and will be dismissed; or
  - f. is unfounded, because it is vexatious and/or malicious, and will be dismissed.
- 62. **TIMESCALE:**** The Investigator will normally aim to complete the Initial Investigation Stage within 30 working days following instruction from the Named Person provided this does not compromise the Standards (see [paragraphs 18-30](#)) and Principles (see [Annex 1](#)) of this Procedure and the full and fair investigation of the allegation. Any delays to this timescale will be explained to the Complainant, the Respondent and the Named Person in writing, presenting an estimated revised date of completion.
- 63. **PROCESS:**** the Initial Investigation Stage will commence following instruction to that effect from the Named Person (see [paragraph 53](#)) after the Receipt of Allegations stage.
- 64.** The Named Person will as soon as is practicable, appoint an individual ('the Investigator') to undertake an Initial Investigation into the allegation(s). The Investigator will normally be an experienced member of academic staff from within the Organisation and may be from within or outside the department concerned, depending on the circumstances of the investigation and at the discretion of the Named Person.
- 65.** All persons appointed to carry out the Initial Investigation will confirm to the Named Person in writing that:
- a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure (see [paragraphs 196](#));
  - b. They will abide by the Procedure;
  - c. They will respect the confidentiality of the proceedings; and
  - d. They will adhere to the Principles and Standards of the Procedure.
- 66.** The Respondent and Complainant may raise with the Named Person concerns that they may have about the person chosen to carry out the Initial Investigation but neither has a right of veto over those nominated. The Named Person will consider any concerns raised and whether new persons should be selected to carry out the Initial Investigation Stage.





*Optional*

At the discretion of the Named Person, they may instead appoint an Initial Investigation Panel to carry out the Initial Investigation, consisting of two or three persons. At least one of these should be a senior member of academic staff from within the Organisation and may be from within or outside the department concerned, depending on the circumstances of the investigation and at the discretion of the Named Person.

For the purposes of this Template Procedure, any reference to, or use of, the term 'Investigator' shall be taken as referring to the Initial Investigation Panel if one is appointed to conduct the Initial Investigation.

Also at the discretion of the Named Person, the Initial Investigation Panel may include one or more members from outside the Organisation. The use of an external member may be advantageous when allegations involve multiple disciplines of research and/or are especially complex and can help reassure involved parties that the investigation process will be transparent, rigorous and fair. There would also be advantage in the review of allegations that involve staff on joint clinical/honorary contracts for there to be on the Initial Investigation Panel an appropriate member of staff from the other employing organisation(s).

The Named Person will select one of the members of the Initial Investigation Panel to act as its Chair. The Chair may be selected from the Initial Investigation Panel's external members if the Named Person wishes; as above, this can help reassure involved parties that the investigation process will be transparent, rigorous and fair.

Panel decisions will normally be made by consensus following discussion.

67. In the event of the Investigator becoming unable to participate in the Initial Investigation Stage once it is underway, the Named Person will determine whether a new person should be selected to take on the role of the Investigator and continue the investigation from its current point or if the Initial Investigation Stage should be restarted.
68. The Named Person will provide the Investigator with all relevant information including any correspondence and information already provided in support of the allegation(s). The Investigator will keep a full record of the evidence received and of the proceedings and should be supported in this by the administrative and other support identified.
69. The Investigator will then contact the Complainant and the Respondent to gather information in support of their investigation.
70. The Investigator shall assess the information obtained and any additional information they require. The work of the Investigator will include the determination of whether the allegation is made in good faith; a confidential



review and assessment of the evidence provided; and reaching a conclusion on the allegation(s) in line with the possible outcomes set out in [paragraph 61](#).

- a. As part of the process, in the interests of fairness and impartiality and to help ensure confidence in the process, both parties should have the opportunity to provide input into the investigation whether in writing or by interview.
- b. Organisations should consider whether Complainants and Respondents can 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).
- c. When interviewed, the Respondent will be allowed to respond to the allegations made against them.



### Reminder

When conducting any interviews, the Investigator should be mindful of the Standards of this Procedure (see [paragraph 18-30](#)), including those relating to record keeping, and any Organisational requirements for the conduct and recording of interviews in staff/student conduct enquiries.

71. The Investigator may also contact relevant witnesses suggested by the Complainant or Respondent. Care should be taken not to miss opportunities to gather relevant evidence.
72. Where the Complainant has raised an allegation relating to a large body of work, or work carried out over a significant period, the Investigator will need to carry out a sufficient investigation to reach a robust conclusion on the allegation(s). This can take time and resources, and advice should be sought from the Named Person on how to best approach this.
73. **CONCLUSION OF THIS STAGE AND NEXT STEPS:** The Investigator shall write a report of (where relevant, for each allegation) the outcome as set out in [paragraph 59](#) above (possible outcomes.)
74. The standard of proof used by the Initial Investigation is that of "*on the balance of probabilities*". This means that the activity was more likely than not to have occurred.
75. A summary of the findings will be sent to the Complainant and the Respondent for comment on matters of factual accuracy. The Investigator will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.
76. The Investigator will then submit their final report and records/material relating to the investigation to the Named Person, setting out the conclusions of the

- Initial Investigation stage on the allegation(s) under investigation and any other matters they wish to draw to the attention of the Organisation.
- 77.** The Named Person shall convey the substance of the Investigator's findings to the Complainant, the Respondent and such other persons or bodies as they deem appropriate.
  - 78.** The Named Person will then undertake the following actions depending on the conclusions of the Initial Investigation stage on the allegation(s) under investigation:
    - a.** If it is concluded that the allegation(s) is sufficiently serious and has sufficient substance to warrant a [Full Investigation](#) of the complaint, then the investigation moves to the [Full Investigation](#) stage (see [paragraph 82](#)).
    - b.** For all other outcomes, the investigation moves to the [Outcomes and reporting](#) stage (see [paragraphs 124-132](#)).
  - 79.** The work of the Investigator is then concluded and they play no further role in the Procedure or any subsequent disciplinary procedure, apart from clarifying any points in their report. As the matter may then give rise to disciplinary or other action, a former Investigator should not make any comment on the matter in question, unless formally permitted by the Organisation or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.
  - 80.** Any queries or requests for comment addressed to the Investigator should be referred to the Named Person.
  - 81.** The Initial Investigation stage now ends.



### **Reminder**

The Named Person, working with the Investigator as necessary, should take great care to ensure that all information on the investigation is fully and accurately transferred to the next stage of the procedure.

## Full Investigation stage

- 82. PURPOSE:** The purpose of the Full Investigation is to review all the relevant evidence and:
- a. conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld; **and**
  - b. make recommendations as appropriate, for consideration by the appropriate Organisational authorities, regarding any further action the Full Investigation Panel ("the **Panel**") deems necessary to address any misconduct it may have found; correct the record of research, and/or address other matters uncovered during its work.
- 83. CONDUCTED BY:** The Named Person will establish a Full Investigation Panel, whose appointment is discussed under 'Process' below. At least one member of the Panel must be from outside the Organisation.



### Reminder

*The Concordat to Support Research Integrity* requires external membership on Full Investigation Panels or their equivalents, as do the terms and conditions of some research funders.

- 84.** The Named Person will identify suitable administrative and other support to assist the Panel (see [paragraph 29](#)).
- 85.** The Panel shall be free to seek confidential advice from persons with relevant expertise, both within the Organisation and outside it, as described in [paragraph 25](#).
- 86. POSSIBLE OUTCOMES:** the Panel will reach a conclusion on the allegation(s) under investigation and may also make recommendations on subsequent actions which should be taken by the Organisation and/or other bodies.
- 87.** After the Full Investigation, the Panel will conclude, giving the reasons for its decision and recording any differing views, whether the allegation of misconduct in research is:
- a. is upheld in full; **or**
  - b. is upheld in part; **or**
  - c. 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, such as mediation, rather than through the next stage of the Procedure or other formal processes; **or**
  - d. warrants referral directly to another formal process of the Organisation, including but not limited to examination regulations, academic misconduct

- process or equivalent; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary procedure; **or**
- e. warrants referral directly to an external organisation, including but not limited to the current employer, statutory regulators or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise; **or**
  - f. is unfounded, because it is mistaken or is frivolous or is otherwise without substance and will be dismissed.
  - g. is unfounded, because it is vexatious and/or malicious, and will be dismissed; **or**
- 88.** The Panel may also make recommendations, for consideration by the Named Person and/or appropriate Organisational authorities, regarding any further action(s) which should be taken by the Organisation 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. Such recommendations might include but are not limited to:
- a. whether the matter should be referred to the Organisation's relevant disciplinary procedure; **and/or**
  - b. whether the matter should be referred to another relevant Organisational process, such as the examination regulations, academic misconduct process or equivalent or the Organisation's financial fraud investigation process; **and/or**
  - c. what external organisations should be informed of the findings of the investigation, with appropriate confidentiality, including statutory regulators, relevant funding bodies, partner organisations and professional bodies, the latter being particularly relevant if concerns relate to Fitness to Practise; **and/or**
  - d. whether any action will be required to correct the record of research, including informing the publishers and editors of any journals that have published articles concerning research linked to an upheld allegation of misconduct in research or to correct honest errors; **and/or**
  - e. whether procedural or organisational matters should be addressed by the Organisation or other relevant bodies through a review of the management of research; **and/or**
  - f. informing research participants or patients or their doctors; **and/or**
  - g. other matters that should be investigated, including allegations of misconduct in research which are either unrelated to the allegation in question or alleged to have been committed by persons other than the Respondent and/or other forms of alleged misconduct.



## Reminder

*The potential outcomes listed above reflect the dual purpose of the Full Investigation stage: the Panel must reach a conclusion on the allegation(s) under investigation and may also choose to make recommendations on further actions which might be necessary for the Named Person and/or the Organisation to take in order to address what the Full Investigation discovers.*

*Whether the Panel makes such recommendations or not, these issues should be considered by the Named Person working with the Research Integrity Officer, and with others as necessary, during the [Outcomes and reporting](#) stage.*

- 89. [TIMESCALE:](#)** The Panel will normally reach its conclusions within three months of being established, provided this does not compromise the Standards (see [paragraphs 18-30](#)) and Principles (see [Annex 1](#)) of this Procedure and the full and fair investigation of the allegation. This is indicated as it will depend on the number and complexity of the allegations under investigation. The aim throughout must be a thorough and fair investigation of the allegation(s) in question, conducted in a timely and transparent manner, and with appropriate confidentiality. Any delays to this timescale will be explained to the Complainant and Respondent in writing, presenting an estimated revised date of completion.



## Discussion

Due to the varying nature of the allegations which may be investigated under this Procedure and challenges that may arise when investigating them, it is difficult to set a precise duration for the completion of the Full Investigation Stage. The aim throughout must be a thorough and fair investigation of the allegation(s) in question, conducted in a timely and transparent manner, and with appropriate confidentiality.

The Named Person and the Panel must be mindful of the need to retain the confidence of Complainants, Respondents and other involved parties. There should be a proactive attitude towards communicating any delays to intended timescales. For reasons of confidentiality, it may not be possible to explain in detail all reasons for such delays, but the Named Person should be as open as possible.

When setting a revised date of completion, these must be realistic rather than overly optimistic.

When there is no delay, Named Persons should be mindful of the need to give periodic updates to Complainants, Respondents and other involved parties. Sparse communication during ongoing investigations can lead to a loss of confidence in the process, impeding the operation of the Procedure.



### Discussion continued...

The Named Person should also be mindful that lengthy investigations can lead to a greater need for pastoral care/ support, both for Complainants, Respondents and other involved parties, and also for those responsible for the operation of this Procedure.

90. **PROCESS:** the Full Investigation Stage will normally commence following instruction to that effect from the Named Person after the [Initial Investigation](#) stage.
91. The Named Person shall then, as soon as is practicable, appoint a Full Investigation Panel ("the Panel") to undertake a Full Investigation into the allegation(s).
  - a. The Panel will normally consist of three persons. Depending on the circumstances of the investigation and at the discretion of the Named Person, the Panel may consist of a greater number of persons, for example, to ensure that it contains sufficient expertise or diverse perspectives to reach a thorough and fair conclusion on the allegation(s) under investigation.
  - b. At least one member of the Panel shall be from outside the Organisation, as required by *The Concordat to Support Research Integrity*. At the discretion of the Named Person, the Panel may include multiple external members. This may be advantageous when allegations involve multiple disciplines of research and/or are especially complex and can help involved parties that the investigation process will be transparent, rigorous and fair.
  - c. At least two members of the Panel shall be academic specialists in the general area within which the misconduct is alleged to have taken place, and where allegations concern highly specialised areas of research the Panel should have at least one member with specialised knowledge of the field. Such specialists can be drawn from within the Organisation, bearing in mind the conflict of interest requirements below (see [paragraph 196](#)) or from the Panel's external member(s).
  - d. For allegations that involve staff on joint clinical/honorary contracts it may be helpful to include representation from the other employing Organisation(s). In these circumstances, they are not classified as the external member of the panel.
92. The Named Person will select one of the members of the Panel to act as its Chair. In the event of the Chair becoming unable to participate in the Full Investigation Stage once it is underway, the Named Person will select a new Chair from the members of the Panel and then consider the overall membership of the Panel. At the discretion of the Named Person, the Chair may be selected from the Panel's external members; this can help reassure

- involved parties that the investigation process will be transparent, thorough and fair.
93. All persons appointed to carry out the Full Investigation, will confirm to the Named Person that:
    - a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure (see [paragraphs 196](#));
    - b. They will abide by the Procedure;
    - c. They will respect the confidentiality of the proceedings and data protection requirements; and
    - d. They will adhere to the Principles and Standards of the Procedure.
  94. The Respondent and Complainant may raise with the Named Person concerns that they may have about those chosen to carry out the Full Investigation but neither has a right of veto over those nominated. The Named Person will consider any concerns raised and whether new persons should be selected to carry out the Full Investigation Stage.
  95. The Chair will keep a full record of the evidence received and of the proceedings and should be supported in this by the administrative and other support identified by the Named Person to assist the Panel.
  96. The Named Person or suitable administrative support will provide the Chair and each member of the Panel with:
    - a. a copy of this Procedure;
    - b. details of the allegation(s) which will be considered under the Full Investigation stage;
    - c. a copy of the Named Person's note of the [Receipt of Allegations](#) stage;
    - d. a copy of the report of the [Initial Investigation](#) stage;
    - e. other records from the [Initial Investigation](#) stage as deemed relevant by the Named Person;
    - f. names and contact details of the Complainant(s) and the Respondent(s);
    - g. a summary of correspondence with the Complainant(s) and the Respondent(s) to date; and
    - h. a summary of any evidence secured by the Named Person during the [Receipt of Allegations](#) stage or by the Investigator during the [Initial Investigation](#) stage.
  97. The Named Person will inform the Complainant and the Respondent of the following, formally and in writing that the Procedure has moved to the Full investigation stage and that they will be interviewed as part of the process, and allowed to provide evidence. They will also be informed that they may be accompanied to any meetings by a colleague or Trade Union representative.



- 98.** Respondents will normally be informed of the name of any Complainant(s) who have made the allegation(s) concerning them at the discretion of the Named Person, in exceptional circumstances the identity of the Complainant(s) may remain confidential. Any such decision should be made after seeking advice from human resources/ student and/or legal services; taking into account the Organisation's whistleblowing policy or equivalent and the impact on the Respondent(s) ability to respond to the allegation(s) that have been made against them. No decision should be made that compromises the Principles and Standards of this Procedure or the thorough and fair investigation of the allegation(s) in question.
- 99.** The Complainants will be informed that their identity is being disclosed to the Respondent(s) at this point unless it has been determined that it should remain confidential.
- 100.** The Chair of the Panel will be responsible for the conduct of the proceedings during the Full Investigation. The Panel does not have any disciplinary powers. The Panel shall decide its way of working based on the provisions of this stage of the Procedure and the information that it has been given, as to what information it needs and whom it wishes to interview/ take statements from in addition to the Complainant and the Respondent, who must be interviewed.
- 101.** When making any decisions about the conduct or conclusion of the Full Investigation, the Panel will attempt to reach a consensus by discussion.
- 102.** The Panel shall 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 possible outcomes set out in [paragraph 87](#);
  - d.** it may choose to make recommendations on further actions which might be necessary to address what the Full Investigation discovers in line with the possible outcomes set out in [paragraph 88](#).
- 103.** As part of its work, the Panel must separately interview the Complainant and the Respondent. Where there are multiple Complainants and/or Respondents, each must be interviewed separately. Note that Complainants and Respondents are never interviewed together unless the Procedure has adopted a formal hearing approach (see [text box](#) below).
- a.** Complainants and Respondents have the right to 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).
  - b.** When interviewed, the Respondent will be allowed to respond to the allegations made against them, set out their case and submit their evidence for consideration by the Panel, before interview. They can also suggest



witnesses for the Panel to interview; the Panel may then choose to invite the suggested witnesses to interview.



### Reminder

When conducting any interviews, the Panel should be mindful of the Standards of this Procedure (see paragraph 18-30), including those relating to record keeping, and any Organisational requirements for the conduct and recording of interviews in staff/student conduct



### Optional

If it is the norm for their internal procedures, some Organisations may wish to allow the Respondent to call witnesses to be interviewed by the Panel (rather than suggest witnesses which the Panel might interview) and/or to ask questions of the Complainant(s) and witnesses. **Any such changes to this Template Procedure should only be made after consultation with Human Resources, legal and other relevant bodies/ groups.**



### Optional

This Template Procedure includes separate interviews of the Complainant(s), Respondent(s) and witnesses. If it is the norm for their internal procedures, some Organisations may wish to instead hold a formal hearing which the Complainant(s), Respondent(s) and witnesses all attend. Any such changes to this Template Procedure should only be made after consultation with Human Resources, legal and other relevant bodies/ groups.

It should be noted that such hearings can be difficult for participants, which can impact on the effectiveness of the investigation, and also challenging to operate effectively, which lead to challenges on procedural grounds. It also can change the nature of the Template Procedure from an investigation to a quasi-disciplinary hearing or 'courtroom'-style adversarial process. As such, **UKRIO advises that Organisations consider all these factors carefully before introducing a formal hearing element into their version of the Template Procedure.**

- 104.** If the Complainant or Respondent does not wish to be interviewed, they should be asked to engage with the process through other means, such as providing written answers to questions posed by the Panel.

- 105. The Panel should also interview relevant witnesses; these can include witnesses suggested by the Complainant or Respondent.
- 106. Where the Complainant has raised an allegation relating to a large body of work, or work carried out over a significant period, the Panel will need to carry out a sufficient investigation to reach a robust conclusion on the allegation(s). This can take time and resources, and advice should be sought from the Named Person and their advisers/ support on how to best approach this.
- 107. Conclusion of this stage and next steps: the Panel will reach a conclusion on the allegation(s) under investigation.
- 108. The Panel shall write a report setting out their conclusions (where relevant, for each allegation), giving the reasons for its decision and recording any differing views. The standard of proof used by the Full Investigation is that “*on the balance of probabilities*.” This means that the activity was more likely than not to have occurred. The potential outcomes are set out in [paragraph 87](#) above.
- 109. In its report, the Panel may also make recommendations, for consideration by the Named Person and/or appropriate Organisational authorities, regarding any further action(s) which should be taken by the Organisation 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 during the course of the Full Investigation. Please refer to [paragraph 88](#) for the areas that may be covered.



### Reminder

Whether or not the Panel make such recommendations, these issues should be considered by the Named Person working with the Research Integrity Officer, and with others as necessary, during the [Outcomes and reporting](#) stage.

- 110. The outcome of the investigation will be sent to the Complainant and the Respondent for comment on matters of factual accuracy. The Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.
- 111. The Panel will submit their final report to the Named Person, setting out the conclusions of the Full Investigation stage on the allegation(s) under investigation, their recommendations regarding further actions to be taken and any other matters they wish to draw to the attention of the Organisation. The Chair and Panel will also hand over to the Named Person or their nominated representative all records/ material relating to the Full Investigation.
- 112. The Named Person shall convey the substance of the Panel's findings and recommendations to the Complainant, the Respondent and such other persons or bodies as they deem appropriate.

- 113.** The work of the Panel is then concluded and the Panel should be disbanded. As the matter may then give rise to disciplinary or other action, the Chair and members of the disbanded Panel should not make any comment on the matter in question, unless formally requested by the Organisation or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.
- 114.** The Full Investigation stage is complete and the Procedure moves to the relevant section of the [Outcomes and reporting](#) stage.
- 115.** Those who have contributed to the disbanded Panel should have no further involvement in the Procedure unless formally asked to clarify a point in their written report at a subsequent stage or as part of any subsequent action or process. A role as Chair or member of the Panel rules out participation in any subsequent disciplinary or other processes.
- 116.** The Full Investigation stage now ends.



### *Reminder*

The Named Person, working with the Chair and other Panel members as necessary, should take great care to ensure that all information on the investigation is fully and accurately transferred to the next stage of the procedure.

## Outcomes and Reporting stage

- 117. PURPOSE:** The purpose of the Outcomes and Reporting stage is to ensure that all necessary actions are taken at the conclusion of this procedure, including but not limited to: actions arising following any [Initial Investigation](#) or [Full Investigation](#) that may have taken place; and ensuring that the research record is correct.



### Discussion

The Outcomes and Reporting stage encompasses many potential situations and its operation can involve considerable decision-making by the Named Person, Research Integrity Officer and others. While some steps are required in any use of this Procedure, others apply only during certain outcomes of an investigation.

Given the sheer breadth of scenarios which this stage can address, the guidance is general in nature and those operating this Procedure will need to determine how best to apply it during specific investigations. Decisions made during the operation of this stage, and the reasoning behind them, should be recorded in a brief format, in case they need to be referred to subsequently.

- 118. CONDUCTED BY:** The Named Person is responsible for ensuring that the actions described under this stage are carried out. Some actions may require the involvement of other departments within the Organisation and/or external organisations.
- 119. POSSIBLE OUTCOMES:** the Named Person is responsible for ensuring that any necessary actions are carried out after the investigation is completed. *In general terms*, these actions may include:
- a.** Actions relating to the operation and conclusion (subject to any subsequent appeal) of this Procedure, including appropriate transfers of information to any subsequent Organisational processes or informal measures (see [Annex 3](#)), and/or to any relevant processes of external organisations.
  - b.** Reporting the outcomes to relevant colleagues/ bodies within the Organisation, for example, line managers, Human Resources and/or Student Services, Academic Board or equivalent.
  - c.** Making necessary disclosures on the outcomes of uses of the Procedure to external organisations and other interested parties.
  - d.** Duty of care to Complainants, Respondents and other involved parties, including but not limited to research participants.
  - e.** Ensuring that appropriate efforts are made to correct the research record.
  - f.** Addressing procedural or organisational matters uncovered during the investigation.

- 120. TIMESCALE:** This will vary depending on the scale of action needed, but the Named Person should aim to ensure they are completed within three months of completion of the investigation. However, some actions may require longer to complete. Any delays to this timescale will be explained to the Complainant, the Respondent and other involved parties in writing, presenting an estimated revised date of completion.
- 121. PROCESS:** the required steps of this list fall into two categories: "**Required actions**" which relate to any use of the Procedure and "**Actions required following [OUTCOME]**", which relate solely to that particular outcome of the Procedure. All "Required actions" should be taken, followed by those relating to the particular outcome in question.
- 122. Required actions:** The Named Person working with the Research Integrity Officer, and with others as necessary, should take any further action(s) they deem necessary to: address any misconduct the investigation may have found; correct the record of research, and/or address other matters uncovered during the course of the investigation. Such recommendations might include but are not limited to:
- a. whether following the conclusion of the operation of this Procedure, the matter should be referred to the Organisation's relevant disciplinary procedure; and/or
  - b. whether following the conclusion of the operation of this Procedure, the matter referred to another relevant Organisational process, such as the examination regulations, academic misconduct process or equivalent or the Organisation's financial fraud investigation process; and/or
  - c. what individuals and/or departments within the Organisation should be notified of the findings of the investigation, such as line managers, Human Resources and/or Student Services, a central committee with responsibility for research quality, or equivalents; and/or
  - d. what external organisations should be informed of the findings of the investigation, with appropriate confidentiality, such as statutory regulators, relevant funding bodies, partner organisations and professional bodies, the latter being particularly relevant if concerns relate to Fitness to Practise; and/or
  - e. informing research participants and other involved parties; and/or
  - f. 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 allegation of misconduct in research and/or by a person against whom an allegation of misconduct in research has been upheld; and/or
  - g. whether procedural or organisational matters should be addressed by the Organisation or other relevant bodies through a review of the management of research and other measures as appropriate; and/or

- h. other matters that should be investigated, including allegations of misconduct in research which are either unrelated to the allegation in question or alleged to have been committed by persons other than the Respondent and/or other forms of alleged misconduct; and/or
  - i. communication of anonymised summary data on uses of this Procedure within a specific period. This includes reporting required in the Annual statement on research integrity required under The Concordat to support Research Integrity, reports to relevant central committees/ departments within the Organisation, and dissemination of anonymised learning points within the Organisation as appropriate.
- 123. When considering the above, the Named Person and the Research Integrity Officer should take into account any recommendations on such actions made by the [Full Investigation](#) Panel and any need to involve other elements of the Organisation (for example, line managers, Human Resources, committees/ departments with responsibility for research quality, etc.) and/or external bodies (for example, partner research organisations, publishers, funders, regulatory bodies, etc.) in carrying out agreed actions.
- 124. *Actions required following the conclusion that the allegation(s) is unfounded because it is mistaken or is frivolous or is otherwise without substance:*
  - a. The Named Person shall take appropriate steps to preserve the good reputation of the Respondent. If the case has received any adverse publicity the respondent may be offered the opportunity to have an official statement released by the Organisation.
  - b. Those who have raised concerns/ made allegations in good faith will not be penalised and the Named Person shall take appropriate steps to preserve the good reputation of the Complainant.
  - c. Appropriate communications on the outcome and the reasons for it will be important to ensure a good understanding of the process and outcome.
- 125. *Actions required following the conclusion that the allegation(s) is unfounded because it is vexatious and/or malicious:*
  - a. The Named Person may consider recommending to the appropriate authorities that action be taken against anyone where there is clear evidence that a complaint was vexatious and/or malicious. This may include disciplinary action where the individual is internal to the Organisation.
  - b. The Named Person shall take appropriate steps to preserve the good reputation of the respondent. If the case has received any adverse publicity the Respondent may be offered the opportunity to have an official statement released by the Organisation.
- 126. *Actions required following the conclusion that the allegation(s) warrants referral directly to another formal process of the Organisation:* Where this is necessary, the Named Person will inform the Complainant in writing of:
  - a. the reasons why the allegation cannot be investigated using this Procedure;

- b.** which process for dealing with complaints is appropriate for handling the allegation; and
  - c.** that the allegation will be referred to the relevant department/ process.
- 127.** The Named Person will then refer the matter to the relevant department/ process.
- 128.** *Actions required following the conclusion that the allegation(s) warrants referral directly to an external organisation:*
- 129.** When the Named Person has determined that the allegation does not relate to researchers or research under the auspices of the Organisation, the Named Person will inform the Complainant, in writing, of:
  - a.** The reasons why the Organisation is not an appropriate body to investigate the allegation;
  - b.** Which external organisation(s) might be an appropriate body to investigate the allegation;
  - c.** Relevant information relating to contacting the external organisation(s).
- 130.** When the Named Person has determined that, while the allegation does relate to researchers or research under the auspices of the Organisation, the allegation warrants referral directly to an external organisation, the Named Person will:
  - a.** Contact the relevant external organisation(s), in writing, to inform them of the allegation and ask them to investigate or otherwise address it. The Named Person should also explain why the Organisation has concluded that the allegation warrants referral directly to the external organisation in question.
  - b.** Inform the Complainant, in writing, that the allegation is being referred directly to the external organisation(s) in question and provide the Complainant with relevant information so that they can contact the external organisation(s) in question if they so wish.
- 131.** *Actions required following the conclusion that the allegation(s) 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 other non-disciplinary approaches:* The Named Person shall ensure that the relevant education and training or other informal measures are provided either directly or by referring the matter to the relevant department.
- 132.** Further advice on addressing matters using informal measures, rather than a punitive/ disciplinary approach, is given in [Annex 3: Resolution using informal measures](#).
- 133.** *Actions required following the conclusion that the allegation(s) is upheld in full or in part:* The Named Person in conjunction with relevant colleagues should decide whether the matter should be referred to the Organisation's disciplinary process or for other formal actions.



- a. Should the allegations proceed to the Organisation's disciplinary process, the report of the [Full Investigation](#) Panel should form the basis of the evidence that the disciplinary panel receives.
  - b. Relevant information collected and brought to light through the Procedure should be transferred to the disciplinary process.
- 134.** The Named Person should take such steps as are appropriate, given the seriousness of the allegations, to support the reputation of the Complainant and, if the allegation has been upheld in part rather than in full, the Respondent as appropriate, and any relevant research project(s).
- 135.** Following the conclusion of the Procedure, the Named Person may need to recommend further measures in addition to those that may be taken by way of the Organisation's disciplinary process.
- 136.** Examples of potential actions that an Organisation may consider include, but are not limited to, the following, listed in no particular order. The Organisation should also remember the measures listed under "Required Actions", above (see [paragraph 126](#)):
- a. Recommendations for retraction/correction of published research, via notification of findings to editors/ publishers;
  - b. withdrawal/repayment of funding;
  - c. notifying research participants and other involved parties;
  - d. notification of findings to relevant employers, statutory, regulatory, professional, grant-awarding bodies or other public bodies with a relevant interest;
  - e. notifying other employing organisations;
  - f. notifying other organisations involved in the research;
  - g. adding a note of the outcome of the investigation to a researcher's file for any future requests for references;
  - h. review internal management and/or training and/or supervisory procedures for research; and/or
  - i. revocation of any degrees awarded based on research that is the subject of a research misconduct finding.
- 137.** Where an investigation has established research misconduct relating to a significant body of work over some time, the Organisation will wish to consider whether it needs to review other work carried out by the individual or individuals concerned, including work not specifically flagged up in the course of the investigation.
- 138. CONCLUSION OF THIS STAGE AND NEXT STEPS:** The Complainant and Respondent will be informed of:



- a. The actions arising from this stage of the Procedure and any relevant actions arising from earlier stages and, where relevant, the contact points for any follow-up communications regarding those actions.
  - b. The options for appeal open to them (see [next stage](#)).
  - c. They should also be informed that, unless an appeal is raised, the investigation and the use of this Procedure have now concluded.
- 139.** The Outcomes and Reporting stage of the Procedure is then concluded, with the Named Person and Research Integrity Officer involved in follow-up actions, or receiving reports on them, as appropriate. As the matter may then give rise to disciplinary or other action, the Named Person and Research Integrity Officer should remember that all information concerning the allegation and investigation was given to them in confidence.

 **Discussion**

Research misconduct investigations can lead to a wide variety of outcomes and follow-up actions. Consequently, the point at which Complainants and Respondents are informed that the investigation and use of this Procedure have concluded may vary.

Equally, some actions arising from this and earlier stages of the Procedure may require follow-up communications and liaison with Complainants and/or Respondents, while others will not. Depending on the nature of the actions arising from a particular investigation, there will come a point where it may be appropriate to inform the Complainant and/or Respondent that they will no longer receive updates on follow-up actions as the investigation and use of the Procedure has concluded, and/or because the follow-up actions have concluded.

- 140.** A role as the Named Person or Research Integrity Officer rules out participation in any subsequent disciplinary process.
- 141.** The Outcomes and Reporting stage now ends and the Procedure moves to the [Appeals](#) stage.

 **Reminder**

The Named Person, working with the Research Integrity Officer and others as necessary, should take great care to ensure that relevant information on the investigation is fully and accurately transferred to subsequent actions and processes as required.

## Appeals stage

- 142. PURPOSE:** The purpose of an appeals stage is to permit the Complainant and/or the Respondent to appeal in certain circumstances against the findings of an investigation carried out under this Procedure, by the requirements of The Concordat to Support Research Integrity.



### Reminder

*The Concordat to Support Research Integrity* states that “Employers of researchers must... have robust, transparent and fair processes for dealing with allegations of misconduct that reflect best practice. *This includes... clear routes for appeal.*” [emphasis added]

**Organisations must therefore consider how they will comply with this provision of the Concordat and ensure that their research misconduct investigation procedure contains information on such clear routes for appeal and the subsequent process.**

Given varying approaches of organisations to the criteria and processes for appeals, the guidance in this stage is general in nature. Those operating this Procedure will need to determine how best to apply it during specific investigations. Decisions made during the operation of this stage, and the reasoning behind them, should be recorded in a brief format, in case they need to be referred to subsequently.

If an Organisation has a standard appeals stage that it uses in processes for examining the conduct of staff and/or students, it may wish to use that process in place of this stage of the Template Procedure. Advice should be sought from Human Resources and other relevant sources in the Organisation.

Historically, some Organisations have only allowed appeals at the conclusion of a disciplinary process. However, this is not compliant with the requirements of the Concordat, as such an appeals process does not apply to Respondents who wish to appeal the outcome of a research misconduct investigation, rather than the outcome of a disciplinary process, and does not apply to Respondents who have left the Organisation or to Complainants.

- 143. CONDUCTED BY:** The appeals process will be managed by an individual other than the Named Person as they could be implicated in the substance of any appeal. An alternative designated individual who has not been involved in the matter previously will establish an **Appeals Panel**, whose appointment is discussed under 'Process' below. At least one member of the Appeals Panel must be from outside the Organisation.
- 144. POSSIBLE OUTCOMES:** The Appeals Panel has the power to uphold, reverse or modify the following outcomes of the Procedure, including the decisions

and/or recommendations associated with them. The following outcomes are available:

- a. A conclusion of an [Initial Investigation](#) or a [Full Investigation](#) that an allegation is unfounded, because it is mistaken or is frivolous or is otherwise without substance, and will be dismissed; or
  - b. A conclusion of an [Initial Investigation](#) or a [Full Investigation](#) that an allegation is unfounded, because it is vexatious and/or malicious, and will be dismissed; or
  - c. A conclusion of an [Initial Investigation](#) or of a [Full Investigation](#) that an allegation 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 other non-disciplinary approaches, such as mediation, rather than through the next stage of the Procedure or other formal processes; or
  - d. A conclusion of a [Full Investigation](#) that an allegation is upheld in full; or
  - e. A conclusion of a [Full Investigation](#) that an allegation is upheld in part.
- 145. [TIMESCALE:](#)** Any appeal should normally be heard within two months of the outcome of the investigation. Any delays to this timescale will be explained to the Complainant and the Respondent in writing, presenting an estimated revised date of completion.
- 146. [PROCESS:](#)** Appeals may be permitted on any or all of the following grounds:
- a. Procedural irregularity in the conduct of the investigation up to and before the Appeal Panel that could have had a material impact on the outcome.
  - b. Fresh evidence becoming available which was not available to the Investigator and/or the [Full Investigation](#) Panel.
  - c. There was evidence of bias or unfairness in the process or decisions taken by the Named Person, Investigator and/or the [Full Investigation](#) Panel.
  - d. The 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.
- 147.** The Complainant and/or the Respondent may appeal against the outcomes of the Procedure, including the decisions and/or recommendations associated with them.
- 148.** Any appeal shall be made in writing to the [Alternative Named Person](#) within 10 working days of being notified of the outcome of the Procedure. The written notice of appeal shall set out the grounds of appeal, and be accompanied, wherever possible, by supporting documentation.
- 149.** The Alternative Named Person 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.

- a. If the appeal does not fall within one or more of the grounds for appeal set out above, then the appeal is dismissed and this decision should be communicated to the person who submitted the appeal. The Appeals stage now ends.
- b. If the appeal does fall within one or more of the grounds for appeal, the Alternative Named Person shall then, as soon as is practicable, appoint an Appeals Panel to undertake the appeals process.



### Discussion

Decisions that an appeal does not fall within one or more of the grounds for appeal should be taken carefully and an appropriate explanation of the reason behind the matter not proceeding further should be provided to the person(s) concerned.

Whilst it may be clear to the Organisation that a concern does not fall within the grounds for appeal, this might not be equally clear to the person who has made the appeal, who may have raised their concerns after considerable thought and have strongly held views on the substance of the matter.

Extra care should be taken also if this decision is being taken by one person without any advice. All people have their own unconscious biases and gaps in their expertise. Care must be taken not to dismiss on the basis of bias, or because of the way the matter has been presented, or because it appears to resemble previously seen matters.

- 150.** The Appeals Panel will normally consist of three persons. Depending on the circumstances of the investigation and at the discretion of the Alternative Named Person, the Appeals Panel may consist of a greater number of persons, for example, 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 or as the Named Person.
- a. One member of the Appeals Panel shall be from outside the Organisation. At the discretion of the Appeals Named Person, the Appeals Panel may include more than one external member. This may be advantageous where the appeal involves multiple disciplines and/or is especially complex, and can help reassure involved parties that the process will be transparent, rigorous and fair.
  - b. One member of the Appeals Panel shall be an academic specialist in the general area within which the misconduct is alleged to have taken place (where allegations concern highly specialised areas of research they should instead have specialised knowledge of the field). Such a specialist can be drawn from within the Organisation, bearing in mind the conflict of interest

requirements below (see [paragraph 196](#)) or from the Appeals Panel's external member(s). When allegations involve multiple disciplines of research, it may be necessary to increase the membership of the Appeals Panel so it contains sufficient expertise.

- c. For matters that involve staff on joint clinical/honorary contracts it may be helpful to include representation from the other employing Organisation(s). In these circumstances, they are not classified as the external member of the panel.
  - d. Once convened, the membership of the Appeals Panel should not normally be changed. If the membership falls below its initial number, the Alternative Named Person will determine whether to recruit additional members and continue the investigation from its current point or restart the investigation.
- 151.** The Alternative Named Person will select one of the members of the Appeals Panel to act as its Chair. In the event of the Chair becoming unable to participate in the Appeals Stage once it is underway, the Alternative Named Person will select a new Chair from the members of the Appeals Panel and then consider the overall membership of the Appeals Panel. At the discretion of the Alternative Named Person, the Chair may be selected from the Appeal Panel's external members; this can help reassure involved parties that the investigation process will be transparent, thorough and fair.
- 152.** All persons appointed to carry out the Appeals stage, and all persons allowed to observe it, will confirm to the Alternative Named Person that:
- a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure (see [paragraph 196](#));
  - b. They will abide by the Procedure as it affects the work of the Appeals stage;
  - c. They will respect the confidentiality of the proceedings; and
  - d. They will adhere to the Principles and Standards of the Procedure.
- 153.** Both the Respondent and Complainant may raise with the Alternative Named Person concerns that they may have about those chosen to carry out the Appeals stage but neither has a right of veto over those nominated. The Alternative Named Person will consider any concerns raised and whether new persons should be selected to carry out the Appeals Stage.
- 154.** The Chair is responsible for keeping a full record of the work of the Appeals Panel and should be supported in this by the administrative and other support identified by the Named Person to assist the Panel.
- 155.** When making any decisions about the conduct or conclusion of the Appeals Stage, the Appeals Panel will do so by reaching a consensus.
- 156.** The Appeals Panel will then 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 allegation(s) in question.
- 157. CONCLUSION OF THIS STAGE AND NEXT STEPS:** The Appeals Panel will decide whether it upholds, reverses or modifies the outcome in question by the

Procedure, including the decisions and/or recommendations associated with it. The decision of the Appeal Panel is final.

158. The Appeals Panel shall write a report setting out its conclusions, giving the reasons for its decision and recording any differing views.
159. 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.
160. The Appeals Panel will then submit their final report to the Alternative Named Person. The Chair and Appeals Panel will also hand over to the Alternative Named Person or their nominated representative all records/ material relating to the [Full Investigation](#).
161. The Alternative Named Person 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.
162. The Alternative Named Person 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 the Research Integrity Officer and others, within and/or external to the Organisation, as necessary.
163. The work of the Appeals Panel is then concluded and the Appeals Panel should be disbanded. As the matter may then give rise to disciplinary or other action, the Chair and members of the disbanded Appeals Panel should not make any comment on the matter in question, unless formally permitted by the Organisation or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.
164. Any queries or requests for comment addressed to the Chair or members of the Appeals Panel should be referred to the Alternative Named Person.
165. Those who have contributed to the disbanded Appeals Panel should have no further involvement in the Procedure unless formally asked to clarify a point in their written report at a subsequent stage or as part of any subsequent action or process.
166. A role as Chair or member of the Appeals Panel rules out participation in any subsequent disciplinary or other processes.
167. The Appeals stage now ends.



### *Reminder*

The Alternative Named Person, working with the Chair and other Appeals Panel members as necessary, should take great care to ensure that all information on the Appeals stage is fully and accurately transferred.

## Annex 1: Principles

- 168.** Misconduct in research is a serious matter. The investigation of allegations of misconduct in research must be conducted by the highest standards of integrity, accuracy, and fairness.
- 169.** Those responsible for carrying out investigations of alleged misconduct in research should always act with integrity and sensitivity.
- 170.** 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 allegations of misconduct in research.
- 171.** 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 (see [paragraph 214](#) onwards).

### Data Protection

- 172.** The use of this Procedure to investigate or otherwise respond to any allegation 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 Organisation must comply with the Data Protection Legislation and accordingly any investigation or use of this Procedure will be carried out in accordance with it.
- 173.** The Organisation 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

- 174.** The investigation of any allegations of misconduct in research must be carried out fairly and in accordance with the statutory human rights of all parties involved.
- 175.** Matters should be dealt with promptly - without unreasonable delay of meetings, decisions or outcomes.
- 176.** 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 organisation.
- 177.** Those responsible for carrying out this Procedure should do so with knowledge of:
  - a.** the statutory obligations of the Organisation 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.
- 178.** 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 allegations 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.
- 179.** Where anyone is formally accused of misconduct in research, that person must be given full details of the allegations in writing at the appropriate stage.
- 180.** 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 allegations against them.
- 181.** 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).
- 182.** 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 Organisation, 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 Organisation, 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

- 183.** 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



- allegations, any requirements of health and safety or any issue related to the safety of research participants.
- 184.** The confidential nature of the proceedings is essential to protect the Complainant, the Respondent and others involved in the Procedure.
  - 185.** Nothing in this Procedure prevents anyone from making a disclosure under whistleblowing law (the Public Interest Disclosure Act).
  - 186.** 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, (see [paragraph 214](#) onwards).
  - 187.** 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 allegations 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 allegations;
    - 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 Organisation's regulator.
  - 188.** 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.
  - 189.** The Organisation and/or its staff may have contractual/legal obligations to inform third parties, such as funding bodies or collaborating organisation(s), of allegations 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 allegations.
  - 190.** While the allegations are under investigation using this Procedure (and/or the Organisation's disciplinary process), the Complainant, the Respondent,

witnesses or any other persons involved in this Procedure should not make any statements about the allegations to any third parties, unless formally sanctioned by the Organisation or otherwise required to by law.

- 191.** Breaching confidentiality may lead to disciplinary action unless covered by the Public Interest Disclosure Act and/or the Organisation's grievance or whistle-blowing procedures.
- 192.** 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 principle of Balance (see [paragraphs 214](#)), and use their judgement to choose the appropriate solution.

## Integrity

- 193.** An investigation into allegations 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.
- 194.** 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.
- 195.** Similarly, 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.
- 196.** All parties involved must inform the Named Person immediately of any interests that they have which might constitute a conflict of interest as regards any aspect of the allegations, the investigation, the area(s) of research in question, or any of the persons concerned. Where the Named Person 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.
- 197.** In the interests of openness and transparency, inviting at least one member from outside the Organisation to join the [Full Investigation](#) Panel of the Procedure is required (see [paragraph 91\(b\)](#)). When allegations are deemed to be particularly complex or contentious, Organisations should consider inviting multiple external members to join [Full Investigation](#) Panels and to use Initial Investigation Panels to undertake the Initial Investigation stage.
- 198.** Confidential records should be maintained on all aspects and during all stages, of the Procedure. It is the responsibility of the Named Person to see that such records are maintained and made available at all stages for any use of the Organisation's Disciplinary Processes or any other proceedings or actions which might follow the conclusion of the Procedure.

- 199.** After the proceedings, all records should be retained by the Organisation in line with the provisions given earlier in this Procedure (see [paragraphs 26-28](#)).
- 200.** 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.
- 201.** 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 an allegation, and so another instance of research misconduct.
- 202.** Suggested good practices on the keeping, transfer and storage of records can be found in [paragraphs 26-28](#).

### Prevention of Detriment

- 203.** 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 allegations of misconduct in research;
  - b.** the position and reputation of those suspected of, or alleged to have engaged in, misconduct, when the allegations or suspicions are not confirmed; and
  - c.** the position and reputation of those who make allegations 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.
- 204.** It is acknowledged that allegations 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 allegations are of sufficient substance to warrant investigation.
- 205.** Anyone accused of misconduct in research is entitled to the presumption of innocence.
- 206.** A full Investigation should establish, on the balance of probabilities, the truth of any allegations.
- 207.** 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 Organisation's disciplinary process which provides the Respondent with the right of appeal. Only when allegations have been upheld through the Organisation's disciplinary process and, where

called upon, the appeals process, may it be appropriate to apply any sanctions to the Respondent.

- 208.** The Organisation must take all reasonable steps to ensure that the Respondent (or any other party) does not suffer because of unconfirmed or unproven allegations.
- 209.** 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.
- 210.** The Organisation may choose to suspend the implementation of any promotion, completion of probation or any similar step, for the period that allegations are investigated using the Procedure, rather than delay the actual consideration of such matters.
- 211.** If the allegations are upheld at the end of the Procedure, subject to the Organisation's disciplinary process and/or appeals process, the Organisation's normal rules concerning steps related to professional development, such as those detailed above, should apply.
- 212.** It should be made clear that any actions that might be taken by the Named Person in response to the notification of allegations of misconduct in research are not to be regarded as a disciplinary action and do not in themselves indicate that the allegations are believed to be true by the Organisation. The Named Person 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 allegations of misconduct in research can be properly investigated.
- 213.** Appropriate action should be taken against:
  - a.** Respondents where the allegations of misconduct in research have been upheld, in full or in part, under this Procedure; and
  - b.** anyone who is found to have made frivolous, vexatious and/or malicious allegations of misconduct in research.

## Balance

- 214.** 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 (see [paragraphs 18-30](#)). For example, it may, in certain circumstances prove to be impracticable to undertake a thorough and fair [Initial Investigation](#) of the allegations without releasing the Complainant's identity to the Respondent.

- 215.** The Named Person 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 allegations via a thorough and fair investigation, conducted in a timely and transparent manner, and with appropriate confidentiality. The Named Person can seek guidance from UKRIO and other bodies, as well as seeking legal advice.
- 216.** In addition, the Named Person should be responsible for ensuring the integrity of this Procedure and any actions taken. The Named Person should decide the course of action to be taken in cases of doubt.
- 217.** The Named Person should keep a written record of all decisions taken throughout all the steps of the Procedure. The Named Person 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: Definitions

- 218. ACCEPTED PROCEDURES (FOR RESEARCH):** 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 set out by and/or approved by a regulatory authority such as 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, such as a Code of Practice for Research;
  - g. any protocols for research set out in the guidelines of appropriate recognised professional, academic, scientific, governmental, national and international bodies;
  - h. any procedures 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 data, artefacts and materials.
  - j. any existing guidance on good practice in research.
- 219.** Accepted procedures do not include:
- a. un-consented to/ unapproved variations of the above;
  - b. any procedures that would encourage, or would lead to, breaches in the law.
- 220.** Although allegations of misconduct in research are often raised as departures from accepted procedures in the conduct of research, investigations should aim to establish intentional and/or reckless behaviour as set out in the definition of misconduct in research (see [paragraph 231](#)).
- 221. COMPLAINANT:** The Complainant is a person making allegations of misconduct of research against one or more Respondents. They need not be a member of the Organisation.



## Discussion 'Complainant' or 'Initiator'?

A 'Complainant' is defined in this Procedure as a person making an allegation of misconduct in research against one or more Respondents.

Some Organisations prefer to use the term 'Initiator' instead of 'Complainant', as they feel this better represents the role of that type of person in their investigation process or because they feel that 'Complainant' can convey negative connotations about those raising concerns/ whistleblowing.

As 'Complainant' appears to be more commonly used, this Procedure uses that term. However, it can be replaced throughout with 'Initiator' if the Organisation wishes; this change will not compromise the use of the Procedure in any way. Organisations should check with Human Resources, Student Services and other relevant departments to see if there is an institutional preference for either term.

- 222. DISCIPLINARY PROCESS:** The Disciplinary Process refers to an Organisation's mechanism for resolving disciplinary issues amongst its staff or students.
- 223. EMPLOYER:** The Employer is defined in this Procedure as the person or organisation who has retained the person (e.g., the Respondent) to carry out work at the time that the matter in question took place, usually, but not always, through a contract of employment.
- 224. FULL INVESTIGATION:** The [Full Investigation](#) is that part of the Procedure the purpose of which is to:
- a. conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld; and
  - b. make recommendations, for consideration by the appropriate Organisational authorities, regarding any further action the [Full Investigation Panel](#) ("the Panel") deems necessary to: address any misconduct it may have found; correct the record of research, and/or address other matters uncovered during the course of its work.
- 225. HONORARY CONTRACT:** Honorary contracts are used in a variety of circumstances. As a result, it is not possible to provide blanket guidance as to which organisation should lead an investigation into allegations of misconduct in research against someone holding such a contract.
- 226.** There are different types of honorary contracts but organisations remain responsible for research carried out under the auspices of the institution regardless of whether they are the employer of the researcher(s) in question.
- 227.** It is possible to have agreements in place with partner organisations on the process of investigations into the conduct of employees where there are cross employment and/or honorary contracts. This is particularly important as the outcome of any investigation by one party might affect the contractual



relationship of the individual investigated with the other party. These are complex issues and it is therefore recommended that legal advice or other forms of clarity - for example, an agreed protocol as to how matters raised will be dealt with - is sought before any investigation commences and that partner organisations liaise closely.

- 228. INITIAL INVESTIGATION STAGE:** The **Initial Investigation** stage is that part of the Procedure the purpose of which is to determine whether there is sufficient evidence of research misconduct to warrant a **Full Investigation** of the allegation or whether alternative action(s) should be taken.
- 229. MISCONDUCT IN RESEARCH:** In discussing misconduct in research, which could be investigated using the Procedure, the following may serve as useful terms by way of guidance. Interpretation of the terms will involve judgements, which should be guided by previous experience and decisions made on matters of misconduct in research.
- 230. The definition below is taken from *The Concordat to Support Research Integrity (2019)* [please note that paragraph numbers have been added] and it is strongly recommended that this is the definition used.** Whilst organisations may decide what definition to be used, they should be aware that this is what is specified in the Concordat. An Organisation's Procedure must set out what it defines as misconduct in research and at what point poor or questionable research practice becomes research misconduct.
- 231.** *The Concordat to Support Research Integrity (2019), Commitment 4, pages 12-13: Research misconduct '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, wastes resources, undermines the research record and 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 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.
- 232.** Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct.'
- 233.** For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission.
- 234.** In addition, the standards by which allegations of misconduct in research should be judged should be those prevailing in the country in which the research took place and at the date that the behaviour under investigation took place (the requirements on the processing and storage of personal and research data). This is particularly important (and not straightforward) when investigating allegations relating to research that was carried out many years previously.

- 235.** The basis for reaching a conclusion that an individual is responsible for misconduct in research relies on a judgement that there was an intention to commit the misconduct and/or recklessness in the conduct of any aspect of a research project. Where allegations concern an intentional and/or reckless departure from accepted procedures in the conduct of research that may not fall directly within the terms detailed above, a judgement should be made as to whether the matter should be investigated using the Procedure.
- 236. NAMED PERSON:** The Named Person is defined in the Procedure as the individual nominated by the Organisation (see [paragraph 9](#)) to have responsibility for receiving any allegations of misconduct in research; initiating and supervising the Procedure for investigating allegations of misconduct in research; maintaining the record of information during the investigation and subsequently reporting on the investigation to internal contacts and external organisations; and taking decisions at key stages of the Procedure.
- 237.** The Named Person should have a nominated alternate who should carry out the role in their absence or in the case of any potential or actual conflict of interest. The Named Person and the nominated alternate should not be the Organisation's Principal or equivalent, or Head of Human Resources.
- 238. ORGANISATION:** The Organisation is defined in this Procedure as the establishment that employs the Respondent, the Named Person and, on occasions, other parties involved in the proceedings and is the host and (most likely) the Sponsor for the research to which allegations of misconduct refer.
- 239. POOR RESEARCH PRACTICE:** the conduct of research that departs from [Accepted Procedures \(for research\)](#) but the cause is not considered either intentional or reckless behaviour.
- 240. THE PROCEDURE:** The Procedure refers to this document, *The Procedure for the Investigation of Misconduct in Research*.
- 241. PROFESSIONAL BODY:** A professional body is an organisation with statutory powers to regulate and oversee a particular profession, such as doctors or solicitors.
- 242. REGULATORY AUTHORITY:** A regulatory authority is an organisation with statutory powers to regulate and oversee an area of activity, such as health and safety, or medicines to be used on humans.
- 243. RESEARCH:** *The Research Excellence Framework (Research Excellence Framework 2021, Assessment framework and guidance on submissions, Annex C)* defines research as the following [please note that paragraph numbers have been added: ... 'research is defined as a process of investigation leading to new insights, effectively shared.'
- 244.** It **includes** work of direct relevance to the needs of commerce, industry, culture, society, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including

design and construction. It excludes routine testing and routine analysis of materials, components and processes such as for the maintenance of national standards, as distinct from the development of new analytical techniques. It also **excludes** the development of teaching materials that do not embody original research.

- 245.** It **includes** research that is published, disseminated or made publicly available in the form of assessable research outputs, and confidential reports.
- 246.** Other definitions of research are available, for example, the 'Frascati' definition' (*Frascati Manual 2015: Guidelines for Collecting and Reporting Data on Research and Experimental Development*, OECD 2015). Organisations should ensure they define in their procedure what is and is not research.
- 247. RESEARCH INTEGRITY OFFICER:** is the term used in the Procedure for staff within the Organisation responsible for research integrity and research misconduct matters. They may do this alongside other roles.
- 248. RESPONDENT:** The Respondent is the person against whom allegations of misconduct in research have been made. They will be a present or past employee/research student of the Organisation that is investigating the allegations using the Procedure, or an individual visiting the Organisation to undertake research.
- 249. SPONSOR:** there is no universal definition of the term 'sponsor', however for this Procedure the definition from *The UK Policy Framework for Health and Social Care Research 2020* (paragraph 9.10), p. 22) may be useful: *“The sponsor is the individual, organisation or partnership that takes on overall responsibility for proportionate, effective arrangements being in place to set up, run and report a research project. All health and social care research has a sponsor. The sponsor is normally expected to be the employer of the chief investigator in the case of non-commercial research or the funder in the case of commercial research (The employer or funder is not automatically the sponsor; they explicitly accept the responsibilities of being the sponsor). The sponsor has overall responsibility for the research”...Sponsors of clinical trials of investigational medicinal products have particular legal duties”.*

## Annex 3: Resolution using informal measures

- 250.** One potential outcome of the use of this Procedure is a conclusion that the allegation(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 allegation stage, as an assessment of the substance of the allegation has not taken place at this point.
- 251.** Resolution through such measures - called 'informal' as opposed to resolution through a formal process of the Organisation, 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 Named Person 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.
- 252.** Informal measures can take many forms and some examples are given below. This list should not be taken as exhaustive and Organisations should devise and implement other informal measures as needed for the situation in question.
- 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 allegation(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.
- 253.** The audience of the informal measures can also vary - Respondents, Complainants, other involved parties, other researchers and/or professional services staff within the Organisation or even the Organisation as a whole. Different informal measures may well be needed for different people.

- a. The implementation of some informal measures may require the involvement of other organisations and/or making disclosures to them.



### Reminder

The use of informal measures to resolve an allegation does not remove the need to implement required provisions of the [Outcomes and Reporting stage](#). For example, making necessary disclosures to involved organisations and the fulfilment of contractual obligations.

- 254. IMPLEMENTING RESOLUTION USING INFORMAL MEANS:** six key features of an effective system of resolution using informal measures are set out in the following paragraphs:
- 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 designated person, 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** by the Research Integrity Officer and others about any learning points for the Organisation.
- 255.** The person designated to carry out the informal measures can also request implementation of formal measures instead, and this should be considered by the Named Person as above.
- 256. DEFINED:** the nature and scope of the informal measures should be defined in writing. This should be communicated by the Named Person or the Research Integrity Officer to the persons involved, in writing and including those who will be responsible for carrying out the informal measures. (e.g., *"The Respondent should undergo training in authorship and publication ethics, including the norms of their discipline. The training will be sourced by the Organisation and the Respondent must provide evidence to their line manager that they have completed it."* ).
- 257.** If communications with external persons or organisations are required, this would normally be carried out by the Research Integrity Officer on behalf of the Organisation.
- 258. DESIGNATED PERSON:** the Organisation should determine who will carry out and/or oversee the informal resolution, what resources will be made available to support them, and to whom they will give updates on the progress of the

informal resolution (e.g., *"The Departmental Head will liaise with the Research Integrity Officer to arrange awareness-raising activities on plagiarism, including discipline-specific information, within their department. The Research Integrity Officer will provide materials for these activities and, if possible, a speaker for an awareness-raising event."* ).

- 259.** For some informal measures, support made be needed from outside the Organisation and the Research Integrity Officer should assist the designated person as necessary.
- 260. DURATION:** the duration of informal measures should be set out at the onset, including a proposed start date, and communicated to all involved parties (e.g., *"The process of mentoring for the Complainant will last for three months and then there will be a review by the line manager, with the mentoring extended for an additional three months if necessary"*). The designated person should make the Named Person aware via the Research Integrity Officer if there is a significant delay in starting or completing the informal measures.
- 261. DELIVERY:** Given their nature, informal measures can be vulnerable to delays and/or a lack of engagement from involved persons, whether an individual (e.g., Complainant and/or Respondent) or groups (e.g., a research team or a department within the Organisation). The aim is the delivery of the informal measures as defined (see above) and progress should be measured, in a light-touch way, against their agreed nature and scope (e.g., *"We are undertaking the agreed course of mediation between the Complainant and Respondent to repair their working relationship. At the end of the mediation, they and their line managers will explore whether the Complainant and Respondent now both feel comfortable working together in the future or if they will no longer work in partnership."* ).
- 262.** Care must be taken to ensure that agreed actions are delivered by the Organisation and the designated person must be given support by the Named Person, the Research Integrity Officer and/or others, as needed.
- 263. DOCUMENTATION:** the informal nature of these measures does not mean that no records should be kept. Brief notes should be kept on: the nature and scope of the informal measures; who has responsibility for their delivery; the proposed and actual duration of the measures; and their delivery and associated outcome(s).
- 264.** When informal measures are concluded, involved parties (e.g., Complainant and/or Respondent; Named Person 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 (e.g., *"The Respondent has now completed the six-month period of additional supervision of their research. They have outlined in writing key lessons learned during this period [see attached] and the additional supervision will now cease. The Respondent has been reminded that they can seek advice from their supervisor, their line manager and the Research Integrity Officer on issues of consent and data management in the future."* ).

- 265.** If communications with external persons or organisations are required, this would normally be carried out by the Research Integrity Officer on behalf of the Organisation.
- 266.** Records should be retained in line with the provisions given earlier in this Procedure (see [paragraphs 26-28](#)), normally by the Research Integrity Officer.
- 267.** The Organisation should determine if records should also be retained by others within the Organisation (e.g., line managers; Human Resources or Student Services).
- 268. DISCUSSION:** the conclusion of informal measures is an opportunity for review and learning, whether in relation to the persons involved; wider groups of researchers and/or professional services staff; or for the systems and practices as a whole. The Research Integrity Officer, working with others as necessary, can generate learning points for dissemination to appropriate members of the Organisation, supported by anonymised summary information, to safeguard and enhance good research practice within the institution.

## Acknowledgements

UKRIO is very grateful to those who responded to the consultation on a draft version of this Procedure, which was held in April-May 2022. The comments and feedback were extremely helpful in the development of the final version.

### Authors

James Parry and Nicola Sainsbury are equal co-authors of the Procedure.

James Parry – concept, initial draft, editing, reviewing (equal co-author).

Nicola Sainsbury – research, drafting, editing, reviewing (equal co-author).

### Contributors and Reviewers

Dr Josephine Woodhams – reviewed and commented on drafts.

Matt Hodgkinson – reviewed and commented on drafts.

Dr Mohi Ahmed – reviewed, commented on, and formatted final draft.

### Competing Interests

Dr Mohi Ahmed, Matt Hodgkinson, James Parry, Nicola Sainsbury and Dr Josephine Woodhams are employees of UKRIO.

### Funding

This work was funded by UKRIO.



## Further Reading

- *The Concordat to Support Research Integrity* (2019): <https://www.universitiesuk.ac.uk/sites/default/files/field/downloads/2021-08/Updated%20FINAL-the-concordat-to-support-research-integrity.pdf>
- *UKRIO Self-Assessment Tool for the Concordat to Support Research Integrity* (2021): <https://doi.org/10.37672/UKRIO.2021.02.self-assessment>
- *Montreal Statement on Research Integrity in Cross-Boundary Research Collaborations* (2013): <https://www.wcrif.org/downloads/main-website/montreal-statement/123-montreal-statement-english/file>
- *Russell Group Statement of Cooperation in respect of cross-institutional research misconduct allegations* (2018): <https://russellgroup.ac.uk/media/5708/russell-group-research-integrity-forum-statement-of-cooperation-may-2018.pdf>
- *Guide to managing and investigating potential breaches of the Australian Code of Responsible Conduct of Research* (2018): <https://www.nhmrc.gov.au/sites/default/files/documents/reports/guide-managing-investigating-potential-breaches.pdf>
- *European Network of Research Integrity Offices: Recommendations for the Investigation of Research Misconduct* (2019): [http://www.enrio.eu/wp-content/uploads/2019/03/INV-Handbook\\_ENRIO\\_web\\_final.pdf](http://www.enrio.eu/wp-content/uploads/2019/03/INV-Handbook_ENRIO_web_final.pdf)

UKRIO consulted many research misconduct procedures from across the university sector including:

- |                                   |                               |
|-----------------------------------|-------------------------------|
| ○ Cardiff University              | ○ University of Edinburgh     |
| ○ De Montfort University          | ○ University of Glasgow       |
| ○ Durham University               | ○ University of Hertfordshire |
| ○ Heriot Watt University          | ○ University of Huddersfield  |
| ○ Imperial College London         | ○ University of Liverpool     |
| ○ King's College London           | ○ University of Manchester    |
| ○ Kingston University             | ○ University of Newcastle     |
| ○ London School of Economics      | ○ University of Oxford        |
| ○ Loughborough University         | ○ University of Sheffield     |
| ○ Queen Mary University of London | ○ University of Southampton   |
| ○ Queens University Belfast       | ○ University of Surrey        |
| ○ St Andrews University           | ○ University of Sussex        |
| ○ University College London       | ○ University of Westminster   |
| ○ University of Cambridge         |                               |



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