

# PROCEDURE FOR INQUIRING INTO ALLEGATIONS OF MISCONDUCT IN RESEARCH AND SCHOLARSHIP

## 1. Introduction

- 1.1. The University of Bath is a leading research University committed to maintaining the highest standards of research excellence and integrity. This Procedure shall be read in conjunction with the Code of Good Practice in Research Integrity (<https://www.bath.ac.uk/corporate-information/code-of-good-practice-in-research-integrity/>) (which sets out the standards of research conduct expected of all those engaged in research in connection with the University), the Institutional Code of Ethics (<http://www.bath.ac.uk/about/values/ethics/code-of-ethics.html>), Statute 25 (<http://www.bath.ac.uk/about/organisation/governance/statutes/>), Ordinance 19 (<http://www.bath.ac.uk/ordinances/>), student Regulations 7 and 8 (<http://www.bath.ac.uk/regulations/>) and the Fitness to Practice policy (<https://www.bath.ac.uk/publications/fitness-to-practise-policy/>).
- 1.2. In developing a procedure for examining allegations of misconduct in research and scholarship, the University has sought to ensure that it has a thorough and rigorous methodology for investigating such allegations whilst upholding the principle of academic freedom (<https://www.bath.ac.uk/corporate-information/academic-freedom/>) and respecting the reputation of the individual researcher as well as the emotional and mental wellbeing of all involved. Where a decision is taken to initiate a formal investigation, it will be undertaken under (and in line with) the disciplinary procedure relevant to the respondent in addition to this Policy:
  - 1.2.1. for academic staff as the Respondent – [Statute 25 \(Part III\)](https://www.bath.ac.uk/publications/statutes-of-the-university-of-bath/) (<https://www.bath.ac.uk/publications/statutes-of-the-university-of-bath/>)
  - 1.2.2. or all other staff as the Respondent – the [Staff Disciplinary Policy & Procedure](https://www.bath.ac.uk/corporate-information/disciplinary-policy-and-procedure/) (<https://www.bath.ac.uk/corporate-information/disciplinary-policy-and-procedure/>)
  - 1.2.3. for [students as the Respondent - Disciplinary Policy & Procedure](https://www.bath.ac.uk/corporate-information/student-disciplinary-procedure/) (<https://www.bath.ac.uk/corporate-information/student-disciplinary-procedure/>) and Fitness to Practice policy (<https://www.bath.ac.uk/publications/fitness-to-practise-policy/>).

The University will also ensure that the requirements of the UKRI's Preventing Harm in Research and Innovation Policy (<https://www.ukri.org/wp-content/uploads/2020/10/UKRI-050920-PreventingHarmSafeguardingInResearchAndInnovationPolicy.pdf>) (please see as included in **Appendix 1** below) are also followed.

- 1.3. This procedure will be invoked in the case of any allegation of misconduct in research and scholarship made against any member of the University or any visiting or honorary researcher based at the University at the time the misconduct was alleged to have occurred, excepting where it has been agreed that the 'employing' institution will invoke its own procedures and there is no evidence of complicity on the part of members of the University.

## 2. Definitions

2.1. As set out in the *Code of Good Practice in Research Integrity* (<https://www.bath.ac.uk/corporate-information/code-of-good-practice-in-research-integrity/>), the University takes seriously all allegations of research misconduct. In alignment with the Concordat to Support Research Integrity (<https://www.universitiesuk.ac.uk/sites/default/files/field/downloads/2021-08/Updated%20FINAL-the-concordat-to-support-research-integrity.pdf>), the University defines misconduct in research and scholarship as:

- **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*
- **falsification:** *inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents*
- **plagiarism:** *using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission*
- **failure to meet:** *legal, ethical and professional obligations, for example:*
  - *not observing legal, ethical and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment*
  - *breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent*
  - *misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality*
  - *improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest; inadequate disclosure of clearly limited competence; misappropriation of the content of material; and breach of confidentiality or abuse of material provided in confidence for the purposes of peer review*
- **misrepresentation of:**
  - *data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data*
  - *involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution*
  - *interests, including failure to declare competing interests of researchers or funders of a study*
  - *qualifications, experience and/or credentials*
  - *publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication*
- **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"*

*Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct.*

In addition, at this Institution the definition of misconduct does not include the application or exploration of controversial or unpopular methods or ideas; or challenging received wisdom.

- 2.2. A **Respondent** is the person against whom an allegation of research misconduct is directed or who is the subject of a research misconduct proceeding.
- 2.3. A **Complainant** is the person raising the allegation of research misconduct.

### **3. Making an Allegation of Misconduct in Research and Scholarship**

- 3.1 Any allegation of misconduct in research and scholarship shall be submitted, in writing, to the Pro-Vice-Chancellor (Research).
- 3.2 Allegations which may in any way be linked to the Pro-Vice-Chancellor (Research) or which raises the potential for a conflict of interest for the Pro-Vice-Chancellor (Research) – including links (e.g. collaborators, spouses, etc) with the Respondent or complainant) or where the Pro-Vice-Chancellor (Research) is in some way personally concerned with the subject matter of the allegations shall immediately be referred to the Deputy Vice-Chancellor who shall then implement the Procedure with PVC (Research) being replaced by DVC throughout.
- 3.3 The Pro-Vice-Chancellor (Research) shall review the nature of the allegation(s) by referring to Section 2 above. If the allegations are judged to fall within the definition, this Procedure shall continue to the next stage and the Pro-Vice-Chancellor (Research) will provide the complainant(s) with a copy of the University's *'Procedure for Inquiring into Allegations of Misconduct in Research and Scholarship'* and a written acknowledgment of receipt of the allegation. If it concerns a member of staff, the Pro-Vice-Chancellor (Research) will inform the Director of Human Resources, in writing, that an allegation has been received. Anonymous complaints will not be accepted.
- 3.4 Where the allegations are outside the definition, the Pro-Vice-Chancellor (Research) shall
  - i. communicate to the Complainant in writing:
    - 1. the reasons why the allegations cannot be investigated using this procedure;
    - 2. which process for dealing with complaints might be appropriate for handling the allegations (if any); and
    - 3. to whom the allegations shall be reported.
  - ii. Consider, in consultation with the Director of Human Resources, whether there is a case to answer under any other policy
- 3.5 In situations that require immediate action to prevent further risk or harm to staff, participants or other persons, suffering to animals or negative environmental consequences, the Pro-Vice-Chancellor (Research) shall take immediate action to ensure that such potential or actual danger/illegal activity/risk is prevented/removed. In taking such action it shall be made clear to all parties that the actions are taken without prejudice and shall not be regarded as disciplinary action.

- 3.6 If the nature of the allegation requires an investigation by a legal (e.g., export control) or regulatory body (e.g., Medical Health Regulatory Agency), this shall take precedence over this Procedure.
- 3.7 If the nature of the allegation includes behaviour subject to defined sanctions in the University's disciplinary process, then the Pro-Vice-Chancellor (Research) shall liaise with the Director of Human Resources. In this situation an investigation under both the Research Misconduct Policy and the relevant University staff disciplinary policy & procedure (Statute 25 Part III for academic staff) will be undertaken.
- 3.8 The Pro-Vice-Chancellor (Research) will be responsible for ensuring that the Dean of Faculty/ School, in which the Respondent is located, has no conflict of interest in the case. Where the allegation is made against a Dean, the Pro-Vice-Chancellor (Research) will nominate a Dean from another Faculty/School to carry out the investigation. If the Dean has a conflict of interest in the case, the PVC-R will nominate an alternate.
- 3.9 The Pro-Vice-Chancellor (Research) shall have regard to the notification requirements of relevant external funding and regulatory bodies in relation to the reporting of allegations of research misconduct.
- 3.10 If researchers have concerns about possible misconduct relating to research unconnected to the University of Bath, for example in a published paper or in research being conducted by another institution, they may seek advice from the Pro-Vice-Chancellor (Research) on how to raise their concerns with the appropriate body.
- 3.11 Allegations of misconduct in research that do not require notification to legal or regulatory bodies or immediate referral to the University's disciplinary process shall proceed to the next stage in this Procedure.
- 3.12 All allegations of research misconduct will be treated seriously and any member of the University or any external research partner may draw concerns to the University's attention without fear that they will be penalised or disadvantaged by so doing, unless it is subsequently established that the allegation was made with malicious intent and with no foundation. In the case of malicious allegations, the complainant(s), if members of the University, will face disciplinary procedures.
- 3.13 The University has a whistleblowing procedure (<https://www.bath.ac.uk/corporate-information/public-interest-disclosure-whistleblowing/> ) . The Director of Finance is the liaison for whistle-blowers or any other person wishing to raise concerns about research integrity in confidence.

#### **4. Initial Consideration of the Allegation**

- 4.1. The Pro-Vice-Chancellor (Research) shall, in consultation with the nominated individuals in HR and Finance/ RIS, investigate the contractual status of the Respondent and the contractual details specific to the research project(s) related to the allegations.
- 4.2. If the University is not the Respondent's primary employer, the Respondent having only an honorary or secondary contract with them, the Pro-Vice-Chancellor (Research) shall contact the Research Integrity contact of the Respondent's primary employer and inform them of the allegations.

- 4.3. The Pro-Vice-Chancellor (Research) shall investigate whether the research project to which the allegations relate includes contractual obligations that require the University to undertake prescribed steps in the event of allegations of misconduct in research being made. Such an undertaking might be in:
- a contract from a funding organisation;
  - a partnership contract/agreement/Memorandum of Understanding; or
  - an agreement to sponsor the research.
- 4.4. An external Sponsor, funding organisation and/or collaborators might have a valid interest in, or responsibility for, the way that the investigation is conducted. The Pro-Vice-Chancellor (Research) shall confirm whether the University has any contractual/legal obligations towards such organisations concerning any aspects of the investigation to ensure that any such obligations are fulfilled at the appropriate time through the correct mechanisms. The Pro-Vice-Chancellor (Research) shall liaise with HR to ensure that the rights of the Respondent and Complainant, and the integrity of the investigation are not compromised by any such actions.
- 4.5. Subject to processes that may override this Procedure as defined in 8.3 and 8.4, the Pro-Vice-Chancellor (Research) shall inform the Respondent that an allegation of misconduct in research has been made which involves them. This meeting shall be confidential and in the presence of a HR representative. Details of Wellbeing Services available to staff shall be made known to the Respondent. The Respondent shall be offered the opportunity to be paired up with a senior member of staff or trade union representative who is not involved in the investigation, but can act as a confidant, and provide peer support. Where the Respondent is a student, they will be informed of the independent support & advice offered by the SU. \_
- 4.6. For instances where there is no complainant and the member of staff has come forward to request a 'retrospective ethical consideration' the procedure, as defined in Appendix II shall be followed.

## **5. Informal resolution**

- 5.1. In considering whether a formal investigation of research misconduct shall be conducted the Pro-Vice-Chancellor (Research) shall first consider whether it might be more appropriate to deal with the allegation:
- Through informal resolution if the alleged research misconduct is considered to be of a minor nature and is of a level where correction of the error is feasible; or
  - By arranging for the matter to be taken forward using an alternative procedure. For example, where a student has not obtained the required ethics approval to conduct a research project, it may be possible, in exceptional circumstances, for an application for retrospective approval to be considered (as per Appendix II).
- 5.2. Informal explorations of possible ways in which a matter may be resolved will not prejudice the consideration of a later formal investigation. Consideration shall also be given as to whether guidance or training might be an appropriate and effective method of addressing the issue raised.
- 5.3. Research Ethics Subcommittee Chairs and/or Postgraduate Research Directors can provide confidential advice on concerns relating to research ethics and integrity to help establish

whether a formal report or investigation under this policy and procedure might be required. If necessary, the Academic Ethics and Integrity Committee Chair may also be consulted for further confidential advice.

- 5.4. Once the Pro-Vice-Chancellor (Research) determines that allegations are not made in error, frivolous, vexatious or malicious and that the 'informal resolution' route is not appropriate then a formal investigation shall be carried out.

## **6. Formal investigation: Preliminary steps**

- 6.1. The Pro-Vice-Chancellor (Research) will pass the allegation to the Dean of the Faculty/ School, who will be responsible for considering the allegation to determine how the investigation shall proceed. The Dean will liaise with the Respondent(s) to inform them that an official investigation is being launched and give them the opportunity to respond within 20 working days from the date of contact with the Dean.
- 6.2. If the Dean decides that an investigation is not warranted, they will record their justification for that decision and inform the complainant and Respondent(s), in writing, of the outcome and the justification. This decision will be notified to the Pro-Vice-Chancellor (Research) and (if it concerns a member of staff) the Director of Human Resources. Any complainant(s) who disagrees with the outcome may make an appeal within 20 working days, from the date on the outcome letter, to the Pro-Vice-Chancellor (Research), who will arrange for the appeal to be heard by another Pro-Vice-Chancellor. There is no further right of access to the University Grievance Procedure.
- 6.3. Where the Respondent(s) accepts culpability, the Dean will invoke the University's disciplinary procedures, or any other sanctions as detailed in 8.7.
- 6.4. Where the Respondent does not accept culpability and the Dean is not satisfied with the response then they will initiate the investigation procedure.

## **7. The Investigation Procedure**

- 7.1. For instances where the Respondent is a student, please see Section 11.
- 7.2. The purpose of the investigation is to examine and evaluate all relevant facts to determine whether research misconduct has been committed and, if so, the responsible person(s) and the seriousness of the misconduct.
- 7.3. In consultation with the Pro-Vice-Chancellor (Research), the Dean will appoint an Investigation Committee, normally within 20 working days of receiving the allegation. The Committee will consist of at least three individuals who do not have conflicts of interest in the case, and who have appropriate expertise in a related field to evaluate the research and scholarship issues. At least one of these individuals will be a non-employee of the University of Bath and one an existing member of staff. One of the internal members will be Chair of the Committee. The members must have the necessary expertise in a related field to examine the evidence, interview the witnesses, conduct the investigation and make a recommendation to the Dean.
- 7.4. The Dean will define the subject matter of the investigation in a written charge to the Investigation Committee.
- 7.5. The Dean/Head of School will notify both the Respondent(s) and the complainant(s) in writing to

- remind them that they are expected to co-operate in the investigation.
  - notify them of the proposed committee membership.
- 7.6. If one or more of the Respondents or complainants submit a written objection to any of the persons appointed the Dean may decide to replace the challenged person with a qualified substitute.
- 7.7. If the Dean does not replace the challenged person, the reasons for the decision will form part of the investigation report.
- 7.8. Both the complainant(s) and the Respondent(s) will be offered the opportunity to be accompanied and/or represented by a trade union/Student Union Advisor or other work or student colleague acting as a friend.
- 7.9. Postgraduate students can also be accompanied by the University Independent Advisor for Postgraduate students.
- 7.10. The investigation will normally include examination of all relevant documentation including, but not limited to, research proposals, research data materials, research subjects (if appropriate), publications, computer files, correspondence and memoranda.
- 7.11. The Respondent(s) will be interviewed. They will have been:
- 7.11.1. advised that they are required to release all relevant material to the Investigation Committee.
  - 7.11.2. provided with copies of, or have access to, all material relevant to the allegation and its consideration at the assessment stage.
  - 7.11.3. Offered the opportunity to provide documentation in support of their defence and to provide witness statements.
- 7.12. Whenever possible, interviews shall be conducted of all individuals involved in making the allegation and other individuals who might have information regarding aspects of the allegations, including persons introduced as witnesses by the Respondent(s).
- 7.13. The Dean shall appoint a Secretary to the Committee who will provide a full record of these interviews. This shall be provided to the interviewed party to ensure factual accuracy and be included as part of the investigation report.
- 7.14. The investigation shall normally be completed within 60 working days of its initiation. This includes conducting the investigation, preparing the report, (Appendix III) of findings and submitting the report to the Dean. The report must state how the investigation was conducted, describe how and from whom information was obtained relevant to the investigation, state the findings and explain the basis for the findings. It will include an accurate agreed summary of the views of the Respondent(s).
- 7.15. The Respondent(s) will be given a copy of the report and evidence considered by the Investigation Committee and an opportunity to comment on the report. The comments must be received by the Dean within 15 working days of receipt of the report and shall then be attached as an addendum to the report.

## **8. The Decision and Notification**

- 8.1. The Dean will write to the Respondent(s) and the complainant, normally within 20 working days of the Committee meeting, to notify them of the decision in the light of all the evidence, including details (if appropriate) of the disciplinary procedures to be invoked and the likely consequences of further research misconduct.
- 8.2. If the University Disciplinary Process is invoked the Investigation Committee report will form part of the material considered. The Disciplinary Procedure will normally be implemented at the formal stage of that procedure.
- 8.3. In the case of academic staff, where the offence may constitute good cause for dismissal or removal from office, a Disciplinary Tribunal will be constituted (Section 25 of the University Statutes and Ordinance 19).
- 8.4. The process of appeal for the Respondent is as set out in the University Disciplinary procedures (Staff Disciplinary Policy & Procedure or Statute 25 Part III). For instances where the Respondent is a student, please see Section 11. Independent advice and support on the appeals process is available to Students through the SU Advisor..
- 8.5. The Dean will inform the Pro-Vice-Chancellor (Research) (and the Director of Human Resources if it affects a member of staff) of the outcome of the investigation.
- 8.6. The Dean can also recommend to PVC-R whether professional societies, editors of journals in which falsified reports may have been published, collaborators of the Respondent(s) in the work, grant awarding bodies, or other concerned parties, shall be notified of the outcome of the case. The Respondent(s) will be informed of any action to be taken. If a decision is made that one or more parties shall be notified this shall normally be done within 20 working days of the opportunity for the Respondent to appeal against disciplinary action having expired.
- 8.7. Sanctions may include embargo of data due for publication, retraction of published data, withdrawal of funding, disciplinary or legal action.
- 8.8. A report of the number of cases, type and outcomes may be produced at the discretion of the University.

## **9. Communication with Funders**

- 9.1. The Pro-Vice-Chancellor (Research) is required to follow the 'Research Council Investigating allegations of misconduct in research policy' (<https://www.ukri.org/wp-content/uploads/2020/10/UKRI-020920-InvestigatingAllegationsOfMisconductInResearchPolicy.pdf>) UKRI's guidelines (<https://re.ukri.org/documents/2020/policy-and-guidelines-on-the-reporting-of-formal-investigations-of-research-misconduct/>) on the reporting and investigating of unacceptable research conduct
- 9.2. For research funded by other organisations such as charities (e.g., Wellcome Trust, British Heart Foundation etc) reporting will be carried out as set on the Terms & Conditions of the award.
- 9.3. When dealing with Allegations of Research Misconduct under United States Public Health Service (USPHS) Research-related Activities and in accordance with US Federal Regulation 42, CFR Parts 50 and 93, the University will notify the US Office of Research Integrity (ORI) when an allegation of research misconduct involving USPHS funds is received.

- 9.3.1. The Designated Official for notification purposes is the Pro- Vice-Chancellor (Research) who is responsible for receiving all allegations of misconduct in research and scholarship under the University's procedures.
- 9.3.2. The ORI model policy and procedures will provide the process for responding to a research misconduct allegation that is consistent with US Federal Regulation 42, CFR Parts 50 and 93, except that where research misconduct is substantiated and disciplinary action is appropriate, the University's disciplinary procedures shall be followed from that point in relation to the Respondent(s).
- 9.3.3. The University will submit appropriate reports to the ORI that describe the process followed in conducting the investigation, the evidence on which the conclusions of the investigation are based and, if a finding of research misconduct is made, the disciplinary and administrative actions taken against the Respondent(s).

## **10. Monitoring, Evaluation and Review of the Procedures**

- 10.1. Senate will receive an anonymised report on all allegations of misconduct in research and scholarship that have not been deemed frivolous or malicious.
- 10.2. An anonymised annual report, on any allegations during the previous academic year, is submitted to the Academic Ethics and Integrity and to the [Research and Knowledge Exchange Committees](#) for discussion every October. It is also sent to Senate for their information.
- 10.3. The Academic Ethics and Integrity Committee will be responsible for annual monitoring of the number of allegations received by the University, for reviewing any issues raised and for evaluating the effectiveness of the procedures adopted in addressing them. The Pro-Vice-Chancellor (Research), Deans and Chairs of Investigation Committees will be asked to complete a short, confidential evaluation questionnaire to enable the University to enhance its procedures in the light of its experience of their implementation.

## **11. Guidance for Dealing with Allegations of Research Misconduct Made Against a student**

- 11.1. In instances where the respondent is a student, the supervisor shall be contacted in the first place so that the guidance, advice and level of supervision can be confirmed
- 11.2. Where the student has been shown to have intentionally deviated from advice provided through Supervision or by Professional Services, the procedure as detailed in the Disciplinary Regulations For students (<https://www.bath.ac.uk/publications/regulations-for-students-2020-21/attachments/regulations-for-students-2020-21-7-disciplinary-regulations-for-students.pdf>) will be followed.
- 11.3. Where the student is able to demonstrate that they followed the advice provided by their supervisors, local processes or Professional Services and that this advice was responsible for the error, the investigation shall follow the informal route. A separate investigation shall be carried out to ensure that the source of advice is corrected.
- 11.4. For instances, where the supervisor is responsible for the student's error an investigation shall be carried out, by the Dean, to understand where the reasons for this error arose from. Where the supervisor is shown to fall short from the expected standards of Supervision and duty of care and poor Supervision, a full investigation shall be launched to understand the current practices in that team. Any deviations from the expected standards will constitute an investigation into research misconduct as confirmed above.

Change and review history

Version Number	Effective Date	Significant Changes	Previous Version No
<b>1</b>	<b>3 July 2008</b>	First version	<b>n/a</b>
<b>1.2</b>	<b>July 2009</b>		
<b>1.3</b>	<b>October 2015</b>		
<b>1.4</b>	<b>16 October 2019</b>	Change contact from University Secretary to PVC-R	<b>1.3</b>
<b>2</b>	<b>tbc</b>	<ul style="list-style-type: none"> <li>• Include disciplinary procedures as part of the formal investigation.</li> <li>• Include reference to Fitness to Practice policy.</li> <li>• Alignment of the definition of misconduct with the one on the Concordat to Support Research Integrity</li> <li>• Introduction of an 'informal resolution stage' to allow for issues which may present as misconduct but are the result of either a misunderstanding, or a dispute between individuals that can be managed and recorded.</li> <li>• Introduction of a process to manage instances where the Pro-Vice-Chancellor (Research) or a Dean has a</li> </ul>	<b>1.4</b>

## Appendix 1

		<p>conflict of interests.</p> <ul style="list-style-type: none"><li>• Include details of whistle-blower.</li><li>• Include details of what kind of information needs to be provided to Research Councils and/or funders.</li><li>• Include wellbeing support for the Respondent.</li><li>• Introduction of a process to manage instances where the allegation is against a student.</li><li>• Include details of support available to Students through the SU.</li><li>• Listing of potential sanctions.</li><li>• Introduction of a process to consider requests for retrospective ethical review.</li><li>• Include draft template for reporting findings from the investigation.</li><li>• Overall review to help flow.</li></ul>	
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### Appendix I: key reference websites:

- Code of Good Practice in Research Integrity: <https://www.bath.ac.uk/corporate-information/code-of-good-practice-in-research-integrity/>
- Institutional Code of Ethics: <http://www.bath.ac.uk/about/values/ethics/code-of-ethics.html>
- UKRIO *Code of Practice for Research: Promoting good practice and preventing misconduct*: <http://www.ukrio.org/wp-content/uploads/UKRIO-Code-of-Practice-forResearch.pdf>
- UKRIO Procedure for the Investigation of Misconduct in Research: <https://www.ukrio.org/publications/misconduct-investigation-procedure/>
- Concordat to Support Research Integrity <https://www.universitiesuk.ac.uk/policy-and-analysis/reports/Documents/2019/the-concordat-to-support-research-integrity.pdf>
- Preventing Harm in Research and Innovation Policy <https://www.ukri.org/wp-content/uploads/2020/10/UKRI-050920-PreventingHarmSafeguardingInResearchAndInnovationPolicy.pdf>
- University of West England <https://www.uwe.ac.uk/research/research-ethics/policies-procedures-and-guidance>
- University of Sheffield [https://www.sheffield.ac.uk/polopoly\\_fs/1.112760!/file/Research-Ethics-Policy-Note-10.pdf](https://www.sheffield.ac.uk/polopoly_fs/1.112760!/file/Research-Ethics-Policy-Note-10.pdf)
- BMC Medical Ethics <https://bmcomedethics.biomedcentral.com/articles/10.1186/s12910-019-0399-1>
- The British Psychological Society <https://www.bps.org.uk/psychologists/standards-and-guidelines/ethics-queries>

### Appendix II: Retrospective Ethical Review

1. It is fundamental to the spirit of research integrity that research ethics approval is sought before the project is started. There might be instances where it may be legitimate to consider exceptional circumstances. These may include:
  - 1.1. Instances where there is uncertainty when research begins (or has begun). As an example, researchers may generate notes at a conference which then are used to frame a research question, or may 'come across' material of interest when carrying out web searches for an ongoing research project, collecting evaluation material that sets out a certain train of thought, or may be sent, unsolicited, a set of data that develops a new line of research
  - 1.2. Instances where there was guidance provided by the Department/supervisor which deviate from Institutional codes or policies
  - 1.3. Instances where the project was considered under an existing framework which is revised before the end date of the project and demands further scrutiny.
  - 1.4. Instances where research with human participants has taken place without ethical approval but has generated information of value to the participants or to the group they represent.
2. For instances where exceptional circumstances need to be considered (the list above is not exhaustive) a 2-stage process shall be followed:
  - 2.1. The researcher (or their supervisor if a student project), must satisfy the PVC (R) that there are exceptional circumstances for their failure to obtain ethical approval before starting their research; and
  - 2.2. The appropriate research ethics sub-Committee must agree that the proposal would have been supported without conditions if their view had been sought before the research was started.
3. Applications must be made to the Chair of the Academic Ethics and Integrity Committee by the PI (or the supervisor, for student projects), in writing. The reason(s) why ethical review was not sought and obtained before the research was carried must be detailed in full. Any supporting documentation providing evidence for the reasons must also be provided.
4. The Chair of the AEIC and the PVC(R), with support from the Project Manager (University Research) will consider the individual circumstances and make a recommendation on whether there are exceptional circumstances that need to be considered.
5. Shall exceptional circumstances need to be considered, the PM(UR) will write to the Chair of the relevant research ethics sub-Committee on behalf of the PVC(R) requesting that the sub-Committee considers the application and decides whether the application as submitted could have been approved without conditions.
6. If both conditions are satisfied, the sub-Committee may exercise discretion to issue a favourable opinion for the research.

## Appendix 2

7. If there is no case to be made for an exceptional circumstance or the sub-Committee rules that the application cannot be given an unconditional favourable opinion, then the research is classed as having been carried out without meeting acceptable standards. This would mean that the issue shall be referred to PVC(R) for appropriate action which could include a referral to the Research Misconduct Procedures as research would have taken place without the appropriate ethical review. On doing so, the sub-Committee would be asked to summarise the ethical concerns and highlight, in particular, any concerns regarding the welfare of participants or of the Researcher.
8. For student projects, which are by definition being supervised by a member of research staff, there is a need to consider whether the issue has arisen due to the student deviating from agreed protocols or due to poor supervision as detailed in 11.

### Appendix 3: Investigation Report Template

This template report format is for guidance only and may be changed to reflect the individual circumstances of the case.

The report must state how the investigation was conducted, describe how and from whom information was obtained relevant to the investigation, state the findings and explain the basis for the findings. It will include an accurate agreed summary of the views of the Respondent(s).

Faculty:	Department:
Allegation/Issue:	<i>Please give details as per the definition – falsification, fabrication, etc.</i>
Type of Investigation	Research misconduct – any other?
Name and job title of Respondent	
Name, job title and affiliation of Complainant (if appropriate)	
Investigator(s) – Name and Job Title	
HR Support Link	
Member of staff appointed as support	

<b>Background</b>
<i>Date of allegation being received. Any other information relevant as background?</i>
<b>Remit of the Investigation</b>
<i>Is the investigation limited to research misconduct or are there other policies to be observed?</i>
<b>Process</b>
<i>Provide details of relevant policies. Describe how information gathering has taken place. Record dates of interviews/statements collection, content as well as a list of documents reviewed</i>
<b>Panel and witnesses</b>
<i>Provide details of names, job titles and affiliations of the investigative panel members as well as of witnesses contacted.</i>
<b>Findings</b>
<i>Summary of findings and observations for each allegation/issue of concern investigated; ensure that documents are cross-referenced where needed</i>
<b>Recommendations</b>
<i>Details of recommendations on behalf of the panel and next steps.</i>