



ACADEMIC BOARD

RESEARCH & ENTERPRISE COMMITTEE

26 March 2015

**Review of the Code of Good Practice & Regulations relating
to Misconduct in Academic Research**

REPORT SUMMARY

Executive Summary

In June 2014 a Short-Life Working Group (SLWG) was commissioned to review the Code of Good Practice & Regulations relating to Misconduct in Academic Research which has been in place since 2011. It was agreed that it would be timely to undertake a review at this time in order to ensure that it remained up-to-date, transparent, robust, fair, and aligned with relevant external benchmarks including the Concordat to Support Research Integrity and the UK Research Integrity Office (UKRIO).

The review took place between May 2014 and March 2015 and involved:

- Consideration of our approach with relevant external benchmarks including the Concordat to Support Research Integrity and the UKRIO.
- Comparison of our practice in relation to other Higher Education institutions.
- Reviewing the consistency of approach with other University regulations relating to student discipline, complaints and academic appeals.
- General review the current Code of Good Practice & Regulations relating to Misconduct in Academic Research to ensure they are clear, transparent and easier to follow.

The SLWG concluded that our University's Code of Good Practice & Regulations relating to Misconduct in Academic Research appeared to be broadly aligned with sector practice and there were no significant differences either in the Code of Good Practice for research or the procedures used to address allegations of research misconduct. Nevertheless The SLWG proposed that they would benefit from being made more accessible, easier to follow and apply, and in relation to the procedures, more streamlined in order to ensure the process was concluded in an appropriately

timely manner

This report outlines the proposed revisions to our current Code of Good Practice & Regulations relating to Misconduct in Academic Research that address the conclusions of the SLWG.

Recommendation

The report is **for discussion**. The Research & Enterprise Committee is asked to consider, discuss and provide feedback on the proposed changes and enhancements to our Code of Good Practice & Regulations relating to Misconduct in Academic Research (Appendices C & D).

Appendices

Appendix A: Agreed scope, membership and timescale of the SLWG commissioned to review the Code of Good Practice & Regulations relating to Misconduct in Academic Research.

Appendix B: Benchmarking against Concordat to support research integrity

Appendix C: Proposed Code of Good Practice for Research

Appendix D: Proposed Procedures relating to Misconduct in Academic Research

AUTHOR	
<i>Name</i>	Stuart Morris
<i>Job title</i>	Governance Officer (Academic)
<i>Date</i>	March 2015

APPROVAL	
<i>Name</i>	SLWG -
<i>Job title</i>	N/A
<i>Date</i>	February 2015

Review of the Code of Good Practice & Regulations relating to Misconduct in Academic Research.

Introduction

- 1 In June 2014 a Short-Life Working Group (SLWG) was commissioned to review the Code of Good Practice & Regulations relating to Misconduct in Academic Research (The Code of Good Practice & Regulations).
- 2 The current Code of Good Practice & Regulations has been in place since 2011 and it was agreed that it would be timely to undertake a review at this time in order to ensure that it remained up-to-date, transparent, robust, fair, and aligned with relevant external benchmarks including the Concordat to Support Research Integrity and the UK Research Integrity Office (UKRIO).
- 3 The review was jointly coordinated by the University Research Office and the Governance & Legal Affairs Team.

Aims, Objectives and Scope of the review

- 4 The objectives of the review were:
 - (a) To review the current Code of Good Practice & Regulations relating to Misconduct in Academic Research to ensure they are clear, transparent and easier to follow.
 - (b) To review consistency of approach with other University regulations relating to student discipline, complaints and academic appeals.
 - (c) To consider alignment of our approach with relevant external benchmarks including the Concordat to Support Research Integrity and the UKRIO.
 - (d) To compare our practice in relation to other Higher Education institutions.
- 5 The aim of the review was to consider current Code of Good Practice & Regulations relating to Misconduct in Academic Research and make recommendations to enhance the University's approach to the provision of information concerning good practice in research and the management of allegations of research misconduct.
- 6 The scoping document attached at Appendix A, sets out the agreed scope, membership and timescale of the Review.

Benchmarking exercise: Initial Findings

- 7 The SLWG benchmarked our University's Code of Good Practice & Regulations against practice at a number of other higher education institutions¹. It also reviewed an initial report that provided evidence on how our University complied with the commitments set out in the Concordat to Support Research Integrity (Appendix B). It also sought feedback from academics and administrators at our University who have had recent experience in administering the procedures in place for the management of allegations of research misconduct. A review was also undertaken of the consistency of approach with other University regulations relating to student discipline, complaints and academic appeals.
- 8 The SLWG concluded that our University's Code of Good Practice & Regulations relating to Misconduct in Academic Research appeared to be broadly aligned with sector practice and there were no significant differences either in the Code of Good Practice for research or the procedures used to address allegations of research misconduct.
- 9 The benchmarking and alignment exercise led to the identification of the following observations:
 - (a) *The procedures for dealing with allegations of misconduct could be made more accessible and that the guidance could be easier to follow:* There is a general consensus amongst the SLWG, and administrators at our University who have had recent experience of engaging with the procedures for dealing with allegations of research misconduct, that the current procedures are not easy to follow and that by presenting them in a more accessible format with clearer guidance there would be less room for interpreting the procedures incorrectly. A number of benchmark institutes provided flowcharts to accompany their procedures which made them easier to follow.
 - (b) *It would be beneficial to separate the Code of Good Practice for research from the procedures for dealing with allegations of research misconduct:* The benchmarking exercise has shown that a significant number of universities separate their codes of good practice for research from their

¹ Benchmarking with other universities regulations and procedures for research integrity / misconduct was carried out with the following institutions: Kings College London; University of Leeds; University of East Anglia; University of Central Lancashire (UCLAN); Sheffield Hallam University; Portsmouth University; University of Huddersfield; Nottingham Trent University; University of Bradford; and Manchester Metropolitan University, University of York.

procedures for addressing allegations of misconduct in academic research. It would appear that this is a conscious decision to ensure that the codes of good practice are given more prominence, as these are the documents that are provided to all researchers to inform them of the principles by which they should conduct their research. The procedures and regulations for dealing with allegations of research misconduct, whilst important, are not something that the majority of researchers will have need to come into contact with on a regular basis and are not usually given as much prominence.

- (c) *The potential for a more streamlined approach to the initial phase of the management of an allegation of research misconduct should be explored:* Some universities have a more streamlined approach to the initial phase of the management of an allegation of research misconduct where it decided whether an allegation of research misconduct is founded and should either progress to a full hearing, or is unfounded and should be dismissed. Our current process involves a more lengthy process of setting up for the Initial Enquiry stage a full panel that normally requires an external subject specialist to attend. This is very time consuming, costly, can put the complainant and respondent through undue amounts of stress due to the need to attend two separate panel hearings, and can be difficult to prevent the initial hearing becoming a part investigation of the allegation itself.

Draft Proposals

- 10 The SLWG considered the above conclusions and undertook drafting of a revised set of procedures between January 2015 and March 2015. The following documents were produced:

- (a) Draft Code of Good Practice for Academic Research (Appendix B)
- (b) Draft Policy & Procedures for the (Appendix C)

Summary of Changes

- 11 The key proposed changes and additions can be summarised as follows:
- (a) The Code of Good Practice for academic research has been separated from the policy & procedures for dealing with allegations of research misconduct in order to ensure that it was afforded more prominence as a set of principles in its own right and also so that it could be used in a more

positive manner when inducting research students rather than presenting it with a set of procedures that would be used in the event of an allegation of research misconduct, which would be negative in nature.

- (b) The term regulations has been removed from the description of the policy & procedures for dealing with allegations of research misconduct to reflect that the proposal is for a policy and a set of procedures. The regulations related to Investigating Research Misconduct and Plagiarism, Collusion and Other Forms of Unfair Practice can be found in section G7.1 of our University's Academic Principles & Regulations.
- (c) The procedures had been re-written in an effort to make them more accessible with guidance that is easier to follow. A flowchart now accompanies the Policy & Procedures outlining each step of the procedures in order to provide a clearer overview of how the process operates.
- (d) A more streamlined approach to the initial phase of the management of an allegation of research misconduct had been devised that would significantly reduce the time taken to determine whether a formal investigation was required. The SLWG felt that this new adjudication stage would remain robust whilst also reducing the potential for overlap with the investigations of any formal hearing. It would also ensure that both the complainant and respondent were not put through undue amounts of stress due to a lengthy and repetitive process.
- (e) Additional detailed information concerning the potential procedures that might be engaged following the completion of the procedures had been removed as it was felt that this was potentially confusing when read in conjunction with the main procedures and had also been found to be out of date in places.

Conclusion

- 12 The SLWG concluded that our University's Code of Good Practice & Regulations relating to Misconduct in Academic Research appeared to be broadly aligned with sector practice and there were no significant differences either in the Code of Good Practice for research or the procedures used to address allegations of research misconduct.
- 13 The SLWG proposed that our University's Code of Good Practice & Regulations relating to Misconduct in Academic Research would nevertheless benefit from

being made more accessible, easier to follow and apply, and in relation to the procedures, more streamlined in order to ensure the process was concluded in an appropriately timely manner

- 14 The proposals are recommended to the Research & Enterprise Committee as ones which build on the best of our current code and policy & procedures and enhances them in ensuring that they remain robust, transparent, easy to follow, and are in alignment with current practice in our University and guidance in the higher education sector.

Recommendations

- 15 The Research & Enterprise Committee is invited to consider, discuss and provide feedback on the proposed changes and enhancements to our Code of Good Practice & Regulations relating to Misconduct in Academic Research (Appendices C & D).

Stuart Morris, Governance Officer (Academic)
March 2015

Short Life Working Group to review Code of Good Practice & Regulations relating to Misconduct in Academic Research

Proposed Membership	
Chair	Professor Richard Hogston*
Associate Dean Carnegie Faculty	Professor Carlton Cooke*
Head of the University Research Office	Ms Kathryn Brown*
Registry Manager	Mr Matt Froggatt
Governance & Legal Affairs	Stuart Morris
*Indicates member of Research & Enterprise Committee	
Aims	
To review current Code of Good Practice & Regulations relating to Misconduct in Academic Research and make recommendations to enhance the University's approach to the provision of information concerning good practice in research and the management of allegations of research misconduct.	
Objectives	
<ol style="list-style-type: none"> 1. To review the current Code of Good Practice & Regulations relating to Misconduct in Academic Research to ensure they are clear, transparent and easy to follow. 2. To review consistency of approach with other University regulations relating to student discipline, complaints and academic appeals. 3. To consider alignment of our approach with relevant external benchmarks including the Concordat to Support Research Integrity and the UKRIO. 4. To compare our practice in relation to other Higher Education institutions. 	
Timescales	
Scoping paper to Academic Governance Sub-Committee outlining proposal for review	8 May 2014
Working group meeting (1)	16 June 2014
Completion of benchmarking exercises	
Working group meeting (2)	06 October 2014
Update Report to Academic Governance Sub-Committee	04 December 2014
Draft proposed Policy & Procedures	January 2015 – March 2015
Working group meeting (3)	04 March 2015
Draft Policy & Procedures submitted to Deputy Vice Chancellor Research & Enterprise for consideration	23 March 2015
Draft Policy & Procedures submitted to	26 March 2015

APPENDIX A

Research & Enterprise Committee for consideration	
Update Report to Academic Governance Sub-Committee	07 May 2015
Proposed Policy & Procedures submitted to Academic Board for approval	01 July 2015
Proposed Policy & Procedures submitted to Board of Governors for final ratification	17 July 2015
Website updated	31 July 2015
New Policy & Procedures in force	01 August 2015

Benchmarking against Concordat to support research integrity

Introduction

- 1 The concordat seeks to provide a comprehensive national framework for good research conduct and its governance. It aims to support the research community to maintain the highest possible standards in the conduct of research and will achieve this by introducing a requirement, from 2013/14, that institutions eligible to receive their research funding from HEFCE must comply with the Concordat to Support Research Integrity. This has been made a condition of receiving HEFCE funds specified in institutions' funding agreements.
- 2 Commitment to the principles set out in the concordat helps demonstrate to government, business, international partners and the wider public that they can continue to have confidence in the research produced by UK institutions. It provides assurances of the standards expected of all stakeholders, identifying five commitments that all those engaged with research should be able to make. It also sets out the related responsibilities for different groups under each commitment, including for researchers, employers of researchers and funders of research.
- 3 By acting in accordance with the principles and commitments outlined in the concordat, the research community can demonstrate that they:
 - (a) underpin all of their work with common values of rigour and integrity
 - (b) conform to all ethical, legal and professional obligations incumbent on their work
 - (c) nurture a research environment that supports research of the highest standards of rigour and integrity
 - (d) use transparent, robust and fair processes to handle allegations of misconduct
 - (e) continue to monitor, and where necessary improve, the suitability and
 - (f) appropriateness of the mechanisms in place to provide assurances over the
 - (g) integrity of research
- 4 The concordat applies to all fields of research, emphasises responsibilities and accountabilities, compliments existing frameworks, and recognises the autonomy of employers.
- 5 HEFCE has set out that compliance with the Concordat means that institutions, as the employers of researchers, will act in accordance with the commitments and the related responsibilities for employers of researchers as outlined in the Concordat. This includes fulfilment of the expectations held by funders of research for employers of researchers, where these are stated in the Concordat.

6 The purpose of this report is to:

- (a) identify where the University has complied with the Concordat;
- (b) identify any areas where the University has not complied and explain the steps being taken to ensure compliance;

Concordat principles

7 The Concordat sets out five commitments for University's to comply with.

8 The commitments are as follows:

- (a) *Commitment #1:* We are committed to maintaining the highest standards of rigour and integrity in all aspects of research;
- (b) *Commitment #2:* We are committed to ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards;
- (c) *Commitment #3:* We are committed to supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers;
- (d) *Commitment #4:* We are committed to using transparent, robust and fair processes to deal with allegations of research misconduct should they arise
- (e) *Commitment #5:* We are committed to working together to strengthen the integrity of research and to reviewing progress regularly and openly.

Analysis of Compliance with the Concordat

9 The following section will present an analysis of the University's compliance with the Concordat. The analysis will use a 'comply or explain' approach and therefore where the University complies, this will be merely reported as such with a brief statement as to how it does so, where the University does not comply an explanation will be provided as to the steps being taken to comply.

Commitment #1: We are committed to maintaining the highest standards of rigour and integrity in all aspects of research;

- 10 The University is fully compliant with this part of the Concordat. The University has in place a Code of Good Practice & Regulations relating to misconduct in Academic Research. The Code includes detailed guidance, regulations and procedures concerning research integrity and provides: clear information for researchers on the standards they are expected to follow when conducting research; detailed information on the governance of research in the University; a comprehensive set of regulations and procedures for use when investigating allegations of misconduct in academic research; and guidance on the appropriate disciplinary procedures associated with findings of misconduct in academic research. The academic board reviews the academic regulations annually.
- 11 Investigations into allegations of research misconduct are reported through the University's governance structures and an anonymised overview report is presented to the University's Audit Committee of the Board of Governors on an annual basis.
- 12 The University Research Office (URO) has the responsibility for ensuring the quality of processes and procedures relating to research degree programmes, external research grant applications and in the training and development of academic staff and research students. We are compliant with the QAA Quality Code, Part B: Assuring and Enhancing Academic Quality, Chapter B11: Research Degrees, expectations and indicators and have robust procedures in the management of research students. The University's internal Peer Review and Approval process safeguards the quality of external research grant applications and compliance with funding organisations prior to submission.

Commitment #2: We are committed to ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards;

- 13 The University is fully compliant with this part of the Concordat. The University's current Code of Good Practice & Regulations relating to misconduct in Academic Research was introduced in 2011 and was benchmarked against the procedures in place in a number of comparator UK universities to ensure that it was up-to-date and aligned with good practice in the sector.
- 14 All research projects are subject to ethical scrutiny. The URO work closely with all academic staff in preparing external research grant applications in accordance with the terms and conditions of individual funding organisations. The University's internal Review and Approval process provides quality assurance at each specific check point prior to the submission of external research grant application. The University Research Ethics committee is a sub committee of the

University Research and Enterprise Committee and reports proceedings to each meeting. An annual audit of compliance is also conducted and reported.

Commitment #3: We are committed to supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers;

- 15 The University is fully compliant with this part of the Concordat. The University has a Code of Good Practice in Research that promotes honesty and openness in research, and stipulates that researchers must refrain from practices such as plagiarism, piracy or the fabrication of results. Detailed guidance on the governance of research is also provided including the submission of research proposals, the management of research projects and the documenting of results and storing of primary data. The importance of the promotion of research leadership is detailed in the Code of Good Practice and the support for the needs of new researchers is strongly promoted. There are a number of University wide and Faculty led schemes such as the Early Career Researcher network.
- 16 The URO is responsible for the organisation of a Staff and Research Student Development Programme. The programme demonstrates a commitment to developing our academic staff and research students, in line with the Concordat and Vitae's Researcher Development Framework, through a range of training opportunities on all aspects of research activity. Faculties provide continued professional development funding which supports researchers with conferences, higher degrees and other related expenses.

Commitment #4: We are committed to using transparent, robust and fair processes to deal with allegations of research misconduct should they arise

- 17 The University is fully compliant with this part of the Concordat. The University has in place a detailed policy, regulations and procedures relating to allegations of misconduct in academic research which we believe to be transparent, robust and fair processes in order to deal with allegations of research misconduct should they arise. When they were introduced in 2011 they were benchmarked against a number of comparator UK universities to ensure that they were up-to-date and aligned with good practice in the sector.
- 18 The University's Code of Good Practice & Regulations relating to misconduct in Academic Research is disseminated to all new researchers when they begin working for the University via their induction. Support and guidance concerning the Code and associated regulations and procedures is provided by the University's Research Office and Governance & Legal Affairs Team. All the information is also available to students, staff and the public via the University's web site.

Commitment #5: We are committed to working together to strengthen the integrity of research and to reviewing progress regularly and openly.

19 The University is compliant with this section of the Concordat. The University's current Code of Good Practice & Regulations relating to misconduct in Academic Research is in the process of being reviewed to ensure that it remains up-to-date, transparent, robust and fair. The review is also timely as it coincides with this exercise to ensure that they are compliant and are aligned with the commitments set out in the new Concordat.

Conclusions

20 The University is fully compliant with the Concordat to Support Research Integrity.

CODE OF GOOD PRACTICE FOR RESEARCH

High standards of research integrity underpin the quality and reliability of research outcomes and the subsequent impact in the broadest terms.

Our University expects all University employees and students, honorary and visiting staff to conduct research to the highest standards of rigour and integrity. We have confidence in the excellent quality of our research being undertaken and in our academic staff and students to maintain the highest possible standards.

This document sets out the standards of good research practice and principles to be understood and observed by all University employees and students (from this point will be referred to as researchers).

1 HONESTY

Researchers should be honest in respect of their own research and in their responses to the actions of other researchers. The research should be conducted to the highest levels of integrity which applies to the whole range of research, including:

- applying for funding,
- research/experimental design,
- generating, recording, analysing and interpreting data,
- robust and defensible findings,
- publishing results,
- acknowledging the direct and indirect contributions of colleagues, collaborators and others,
- reporting cases of suspected misconduct in a responsible and appropriate manner (see University Policy and Procedure on Research Misconduct).

Plagiarism, piracy or the falsification or fabrication of results will be regarded as a serious disciplinary offence.

2 OPENNESS

In recognising the need for researchers to protect their own and the University's research interests in the process of planning their research, obtaining findings and publishing the result, the University encourages researchers to be open as possible in discussing their work with other researchers and with the public (subject to the terms and conditions of any research contracts and the protection of intellectual property, commercial exploitation and ethical approval).

This includes:

- the disclosure of any conflicts of interest;
- the reporting of research data collection methods;

- the analysis and interpretation of data;
- making all research findings widely available (including sharing negative results as appropriate);
- disseminating research in a way that will have the widest impact;
- and promoting public engagement/involvement in research.

3 RIGOUR

Researchers must be thorough and meticulous in performing their research (in line with disciplinary norms and standards) and observe the standards set out in the guidelines of funding bodies, scientific and learned societies and other relevant professional bodies and care is taken:

- to use the appropriate methods,
- to adhere to an agreed protocol (where appropriate),
- when drawing interpretations and conclusions from the research,
- when communicating the results.

4 CARE AND RESPECT

Researchers should at all times show care and respect to other colleagues and participants in and subjects of research

5 LEADERSHIP

The University is responsible for creating a research environment that nurtures good research practice and a culture of research integrity. The Vice Chancellor, Deputy Vice Chancellors, Faculty Deans, Faculty Directors of Research, Head of School, Institute Directors, Professorial and senior staff are responsible for creating a climate and capacity in which research is undertaken that safeguards good research practice.

The creation of a research environment in which researchers are encouraged to develop their skills and promote open exchange of research ideas which are open to scrutiny and debate is crucial. Researchers should be encouraged to undertake appropriate continual professional development and mentoring opportunities across all aspects of research activity.

6 ETHICAL APPROVAL

The University expects all researchers to consider the ethical implications of their research and to be aware of their responsibilities to society, the environment, their profession, the University, research participants and the organisation(s) funding the research. All research conducted in the University must be carried out in accordance with Leeds Beckett Research Ethics Policy and Procedures.

7 DOCUMENTING RESULTS AND STORING PRIMARY DATA

Researchers are responsible for keeping clear and accurate records of the research procedures followed, approvals granted during the research process, including interim and final reports and all results. This provides evidence of proper research practice which will be available for examination if required.

Primary data should be kept securely in durable form. The location of such data should be known to the University and be held for the length in accordance with the University's guidance. Researchers are expected to make themselves aware of, and comply with, any legislation or regulations that govern their research. This includes, but is not limited to:

- Data Protection
- Human Tissue Act
- Leeds Beckett Data Management policies.

8 PUBLISHING AND ACKNOWLEDGEMENT OF COLLABORATORS

The outcome of research, unless a compelling reason not to, for example, confidentiality agreement, should be published in an appropriate format. The normal method for research results is usually through refereed journals. The refereeing process promotes quality, and publication in such journals ensures results are verifiable by the research community.

Listed authors to a paper are expected to accept personal responsibility for, and be able to identify their contributions to it. Gift authorship is not acceptable.

Researchers should have regard to the commercialisation potential of their work and take appropriate steps to protect any intellectual property in line with the University guidelines.

The contributions of formal collaborators and all others who directly assist or indirectly support the research should be appropriately acknowledged.

Open Access

The University requires all researchers to deposit forthcoming publications into the University Repository following notification of approval for publication. This must be done within three months of the notification being received.

9 SUBMITTING RESEARCH PROPOSALS

Principal/Lead Investigators should take reasonable steps to ensure the accuracy and completeness in applications for funding. All University process must be adhered to and any ethical issues discussed at the Research Ethics Sub-Committee.

10 MANAGING RESEARCH PROJECTS

Principal/Lead Investigator have a responsibility to take all reasonable measure to ensure compliant with the requirements of the sponsor(s), the University and all legal, ethical and moral obligations in managing projects.

11 CONFLICT OF INTEREST

Researchers should identify, declare and manage any real of potential conflicts of interest, whether legal, ethical, moral, financial, personal or professional to avoid any future complications and potential exposure of the University to legal action. Any conflict of interest should be brought to the attention of the Research Ethics Sub-Committee.

12 RESEARCH MISCONDUCT

Allegations of research misconduct will be taken seriously by the University and addressed through the University's Policy and Procedures Relating to Allegations of Misconduct in Academic Research.

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A. Policy Statement

1. Ensuring and sustaining integrity in all aspects of research is a core aspect of the University's commitment to the advancement of knowledge. Misconduct in research damages the integrity of research, brings both the individual and the institution into disrepute and can, in extreme circumstances, cause harm to those involved in research. This Procedure has been approved by the Academic Board of the University to provide a procedural framework for investigating allegations of misconduct in research conducted under the auspices of the University.
2. Research misconduct is an extremely serious matter and, therefore, the University has a duty to ensure that such individuals receive appropriate training in the relevant ethical, legal and other conventions. The University seeks to sustain this approach by providing an environment that fosters and supports honesty in research and also discourages unacceptable behaviour by dealing seriously and sensitively with all allegations of misconduct in research.
3. It is a condition of conducting research under the auspices of the University and/or on University premises that practice conforms to the University's Code of Good Practice for Research which has been benchmarked against the UK Research Integrity Office Code of Practice for Research. Failure by a researcher to comply with the provisions of the Code will be grounds for action to be taken under this Procedure.
4. Staff, research students and all others conducting research under the auspices of the University are required to report misconduct in research where they have good reason to believe it is occurring. The University will investigate allegations or complaints about misconduct in research. Any complainant who has honest and reasonable suspicion that research misconduct is taking or has taken place, can be assured that the concern will be investigated fairly by the University and that any complainant will be protected from any subsequent victimisation, even if the concern is subsequently found to be mistaken or unfounded.
5. The University also recognises the possibility that an allegation of research misconduct may be vexatious or malicious. Any respondent can be assured of fair process, and that any allegations found to be vexatious or malicious may be referred to the University disciplinary procedures, or elsewhere as appropriate, for further action.
6. Any complainant should recognise that a complaint of dishonesty in research is serious and potentially defamatory. As such it may not be containable within the procedures of the University; and could lead to legal proceedings.
7. When an allegation of research misconduct is raised under the University's Whistleblowing (public interest disclosure) complaints procedure, at the point when the allegation is considered the University Secretary & Registrar (the designated Whistleblowing Officer) will refer the allegation of research misconduct to be dealt with under this Procedure.
8. This Procedure is compatible with the principles of the Universities UK Concordat to support research integrity (2012), the RCUK Policy and Guidelines on the Governance of Good Research Conduct (2013) and the UK Research Integrity Office's Procedure for the Investigation of Misconduct in Research (2008).
9. The Secretary & Registrar has the general responsibility for ensuring the integrity of the proceedings under this procedure, and due reference to any other procedures of the University. The Registrar and Secretary shall determine the procedure to be followed in cases of doubt.

Equality and Diversity

10. To ensure fair treatment and, where appropriate, provision of support by the University in the application of this procedure, members of staff should be encouraged to provide information about any equality or diversity issues which may be relevant. In the case of a disability or language issue a member of staff may be accompanied by an appropriate person to provide support.
11. At all stages of the procedure, those investigating allegations of Research Misconduct should check if there are any special arrangements, e.g. support for a disability, that a member of staff or the individual who is accompanying them may require to enable them to participate fully in the procedure. Appropriate guidance may be sought from the Human Resources. Correspondence in relation to this procedure will invite the member of staff to inform the University if they require additional support.
12. It is a requirement that those investigating allegations of Research Misconduct will have had appropriate training, are aware of the requirements of the Equality Act 2010 and of good practice in relation to equality and diversity. The possibility that research misconduct may arise from misunderstandings due to ethnic/cultural/gender/disability or other issues should also be considered and the Equality and Diversity Office/Disability Office consulted as appropriate. Cases in this category will be dealt with sympathetically

B. Scope

13. This Procedure applies to any person conducting research under the auspices of the University, whether solely or in conjunction with others in the University or with other organisations, including, but not limited to:
 - (a) a member of staff;
 - (b) a student;
 - (c) an independent contractor or consultant;
 - (d) a person with visiting or emeritus status; and
 - (e) a member of staff on a clinical, honorary or secondment contract.
14. This Procedure recognises that the investigation of allegations of research misconduct can involve complex issues and seeks to discharge the University's responsibilities in a sensitive and fair manner. It outlines the process to be followed when allegations of misconduct in research are brought against a researcher in relation to research conducted under the auspices of the University.
15. This Procedure will normally apply to research students who are registered for an MPhil, PhD or a Professional Doctorate, but not normally to undergraduate or taught postgraduate students. Taught student misconduct is dealt with under the University's Student Code of Discipline.
16. The University will follow this Procedure even in the event that the individual(s) concerned has left or leaves the jurisdiction of the University, either before the operation of this Procedure is concluded or before the allegation(s) of research misconduct was made.

17. Nothing in this Procedure shall limit the right of the University or a member of staff or a student of the University to exercise their rights under any University policies concerning discipline and grievance.
18. Proven research misconduct may result in action being taken under the University's disciplinary procedures for staff or research students, as appropriate, or other relevant process and may be considered good cause for: dismissal in the case of members of staff; programme termination in the case of registered students; and rescission of award in the case of graduates of the University. Reports generated by this Procedure may be used in evidence by the University's disciplinary procedures and other processes and may be released in reporting the matter to any appropriate external organisation.
19. Alleged misconduct in research relating to a thesis which has been submitted for examination will be investigated under this Procedure.
20. Any allegations of financial fraud or other misuse of research funds or research equipment will be addressed under the University's Financial Regulations and Procedures.
21. For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission. As well as complying with accepted procedures, researchers must comply with all legislation that applies to the conduct of their research; 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. Misconduct in research does not include unintentional error or professional differences in interpretation or judgement of data.
22. With the exception of the minimum notice periods for attendance at an Investigation Panel hearing, or an Appeal hearing, the timescales set out in this procedure are indicative of best practice only. Such timescales are not binding on the University and may be varied when circumstances dictate, for example in the unavoidable absence of members of the University required for the operation of these procedures. For the purpose of these procedures "days" are working days.
23. With respect to disciplinary procedures within the University, the proceedings and outcomes of a Formal Investigation are deemed to be the equivalent of the investigative stage of both staff and student disciplinary procedures for all levels of misconduct.

C. Definitions

24. 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;
 - (d) any protocols for research as defined in contracts or agreements with funding bodies and sponsors;
 - (e) any protocols approved by the Medicines and Healthcare Products Regulatory Authority (MHRA) for a trial of medicinal products;
 - (f) any protocols for research set out in the guidelines of the employing institution and other relevant partner organisations;

- (g) any protocols for research set out in the guidelines of appropriate recognised professional, academic, scientific, governmental, national and international bodies;
 - (h) any procedures, including ethical reviews, that are aimed at avoiding unreasonable risk or harm to humans, animals or the environment;
 - (i) good practice for the proper preservation and management of primary data, artefacts and materials;
 - (j) any existing guidance on good practice on research.
25. Adjudicator: A person(s) appointed under this Procedure to conduct a Preliminary Adjudication of an allegation of misconduct in research.
26. Code: the UK Research Integrity Office. Code of Practice for Research: Promoting good practice and preventing misconduct.
27. Complainant: the person making an allegation of misconduct in research, who need not be those identified in 10 above.
28. Formal Investigation: an inquiry to review all the relevant evidence and conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld.
29. Formal Investigation Panel/the Panel: the persons appointed under this Procedure to conduct a Formal Investigation. The Panel does not have disciplinary powers, but will make recommendations regarding further action necessary to rectify any misconduct it has found and correct the record of research and to preserve the academic reputation of the University, for consideration by the appropriate University authorities.
30. Governance Officer: the officer of the University (in Governance & Legal Affairs) designated as having responsibility for administrative support matters related to the procedures governing allegations of Research Misconduct.
31. Misconduct in research/research misconduct: any breach of the Code or accepted procedures that seriously deviate from those that are commonly expected within the academic and scientific communities for proposing, conducting or reporting research. It specifically encompasses, but is not restricted to:
- (a) Piracy by the exploitation of the ideas of others without permission or acknowledgement, including the piratical use of material that has been provided in a privileged way for review, examination, assessment or appraisal.
 - (b) Plagiarism by the misappropriation of ideas, data or text without adequate acknowledgement or citation. Complaints of this nature against students of the University would normally be heard via the University's regulations and procedures concerning Cheating, Plagiarism and Other Forms of Unfair Practice
 - (c) Fraud by the manipulation of data or findings with an intention to deceive, including the fabrication of data and the falsification of data.
 - (d) Collusion by the deliberate participation in the research misconduct of another person, or concealment of such action by others.
 - (e) Failures to follow accepted procedures or to exercise due care in carrying out responsibilities for avoiding unreasonable risk or harm to human or animal participants in research and/or to the environment.

- (f) Failures to follow accepted procedures or to exercise due care in carrying out responsibilities for the proper handling of privileged or private information relating to individuals, and collected during the research.
 - (g) Interference by the intentional damage to, withholding or removal of, the research-related property of another person.
 - (h) Negligence by the culpable serious departure from legal, institutional and ethical practices in research which involves human or animal subjects, including unjustifiable departure from accepted practices, procedures and protocols.
 - (i) Failure to declare or resolve a conflict of personal interest in research.
 - (j) Breach of confidentiality required by external research contractors.
32. Preliminary Investigation: an initial assessment of an allegation of misconduct in research to determine whether there is sufficient evidence to warrant a Formal Investigation of the allegation.
33. Procedure: the University's Procedure for the Investigation of Allegations of Misconduct in Research.
34. Research: for the purposes of this Procedure, 'research' is defined in accordance with the definition set out in the Frascati Manual (The Proposed Standard Practice for Surveys of Research and Experimental Development - 6th edition): Research and experimental development (R&D) comprises creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society and the use of this stock of knowledge to devise new applications. R&D is a term covering three activities: basic research, applied research and experimental development.
35. Researcher: any person conducting research under the auspices of the University, whether solely or in conjunction with others in the University or with other organisations, including but not limited to: a member of staff; students of the University; an independent contractor or consultant; a person with visiting or emeritus status; and a member of staff on a clinical, honorary or secondment contract.
36. Respondent: the person against whom an allegation of misconduct in research is made.
37. The University: Leeds Beckett University
38. Secretary & Registrar: the senior representative of the University and 'Designated Officer', to whom a whistleblowing complaint should normally be made in the first instance, in accordance with the University's Whistleblowing (Public Interests Disclosure) Complaints Procedure.

D. Receipt of allegations

39. Allegations of possible research misconduct, or concerns that research misconduct may be taking place, may be raised by staff or students of the University; by members of the public; or by outside organisations.
40. All allegations and/or concerns which fall within these procedures should be referred to the Secretary & Registrar. The Secretary & Registrar will decide whether these procedures are appropriate for consideration of the allegation/cause for concern; or whether the matter should be referred for consideration under another University procedure.

41. The Secretary & Registrar will ask the person(s) or organisation making the allegation or raising the concern to submit a detailed written statement containing details of the allegation/concern with such evidence as is available. The Secretary & Registrar will provide the complainant(s) with a copy of these procedures, drawing his, her or their attention to the provisions on confidentiality and the possible limits of this should the matter go to Formal Investigation stage. The Secretary & Registrar will also draw the attention of complainant(s) to the provisions in respect of vexatious or malicious allegations.
42. While this Procedure encourages persons with concerns about the conduct of research to raise them with the Secretary & Registrar directly and asks that they put their name to any allegations they make. It is recognised however that members of staff or students may make an anonymous allegation as they may fear that their own position could be jeopardised if they raise a particular concern. Allegations which are anonymous or where there is no specific Complainant will only be considered at the discretion of the Secretary & Registrar, taking into account: the seriousness of the concerns raised; the credibility of the concerns; and the likelihood of confirming the concerns from alternative and credible sources.
43. If the Secretary & Registrar 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, he/she will instead refer the allegation to a Deputy Vice Chancellor in writing and notify the Complainant accordingly, also in writing. The roles of the secretary and registrar under these regulations are then transposed to a designated Deputy Vice Chancellor who will then take on the role of the Secretary & Registrar as regards the conduct of this Procedure and he/she will be responsible for fulfilling all of the duties allocated to that role by this Procedure.
44. The Secretary & Registrar will review the allegations with reference to the definition of misconduct in research described in paragraph 31 and the status of the Respondent as described in paragraph 13. The Secretary & Registrar shall be free to seek confidential advice from persons with relevant expertise, both within the University and outside it.
45. Where an allegation falls under these definitions, the Secretary & Registrar will acknowledge receipt of an allegation by the Complainant in writing, informing him/her that the allegation will be investigated under this Procedure. A copy of the Procedure will be provided to the Complainant.
46. If the Secretary & Registrar determines that the allegations fall outside either of the definitions, he/she will inform the Complainant in writing:
 - (a) the reasons why the allegation cannot be investigated using this Procedure;
 - (b) which process for dealing with complaints might be appropriate for handling the allegation (if any) and/or, if appropriate, which external body; and
 - (c) to whom the allegation should be reported.
47. In cases where an allegation is of a serious nature but does not fall under the definition of research misconduct, the Secretary & Registrar may choose to initiate an appropriate University procedure to address the allegation or inform an appropriate external body, such as a statutory regulator or professional body. The latter may be particularly appropriate if concerns relate to Fitness to Practise. It should be made clear that any actions that might be taken by the University Secretary & Registrar in response to the notification of an allegation 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 University. Those conducting this Procedure

will take steps to make it clear to the Respondent, Complainant and any other involved parties that these actions are necessary to prevent further risk or harm to any persons involved in the research and that the allegations of misconduct in research can be properly investigated and to meet contractual and other obligations of the University.

48. Where an allegation does fall under the definition of research misconduct and where it concerns situations that require immediate action to prevent further risk or harm to staff, participants or other persons, suffering to animals or negative environmental consequences (where this might contravene the law or fall below good practice), then the Secretary & Registrar 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. An allegation which does not require notification to legal or regulatory bodies will proceed to the next step of the Procedure.
49. The Secretary & Registrar will investigate whether any research project to which the allegation relates includes contractual obligations that require the University to undertake prescribed steps in the event of an allegation of misconduct in research being made and take any actions that may be necessary to meet such obligations. Such obligations might be in:
 - (a) a contract/agreement or guidance on research conduct from a funding organisation;
 - (b) a partnership contract/agreement/Memorandum of Understanding; or
 - (c) an agreement to sponsor the research.
50. Where the allegations are within the definition of misconduct in research, the Secretary & Registrar should inform the Vice Chancellor that allegations of misconduct in research have been received on a particular date and that it will be investigated using this Procedure. They should be provided in confidence with the following information:
 - (a) the identity of the Respondent;
 - (b) the identity of the Complainant;
 - (c) details of all sources of internal and external funding;
 - (d) details of all internal and external collaborators for the research in question; and
 - (e) other details that the Secretary & Registrar considers appropriate.
51. It should be stressed that the allegations of misconduct in research that are to be investigated are as yet unproven and that the information is confidential.
52. The actions described in paragraphs 39–50 above should take place as soon as is practicable upon receipt of an allegation, normally within ten working days. The University Secretary & Registrar may identify suitable administrative and other support to assist him/her in carrying out the above actions.

E. Preliminary Adjudication

53. As soon as is practicable upon receipt of an allegation, normally within ten working days, the Secretary & Registrar will inform the Deputy Vice Chancellor Research & Enterprise of the existence of an allegation or cause for concern, identifying only the individuals involved, and the Academic Unit and Faculty concerned. The Deputy Vice Chancellor Research & Enterprise will then appoint three Adjudicators chosen from Directors of Research and Professors across the University, at least one of whom must be external to the Faculty or Faculties in which the alleged misconduct is said to have occurred. The Adjudicators should have the expertise to

evaluate the relevant research issues, and should themselves have no conflict of interest in the conduct of this enquiry.

54. The purpose of the Preliminary Adjudication is to determine whether there is sufficient evidence of research misconduct to warrant a formal investigation of the allegation.
55. The Secretary & Registrar will identify suitable administrative and other support to assist the Adjudicators. Those selected to provide such support will confirm to the Secretary & Registrar in writing that their participation involves no conflict of interest.
56. The Adjudicators should maintain confidentiality about the enquiry and should take care to limit awareness of its existence, in so far as is reasonably practicable, only to those persons essential for its conduct.
57. The Secretary & Registrar will write to the Complainant/s to confirm the identity of the Adjudicators. When writing to the Complainant/s the Secretary & Registrar will inform them that they may raise in writing any concerns that they may have about the person(s) chosen to conduct the Preliminary Investigation. The Secretary & Registrar will decide if any concerns raised by the Complainant warrant the exclusion of the person(s) concerned from involvement in the investigation, recording the reasons for the decision in writing. He/she will inform the person(s) concerned and the Complainant, as appropriate, of his/her decision in writing.
58. The Secretary & Registrar will instruct each Adjudicator to consider separately the evidence available concerning the allegation, including: the allegation and any supporting evidence from the Complainant and any other documentation and background information relevant to the allegation.
59. The Adjudicators will normally aim to complete the Preliminary Adjudication within 15 working days following instruction from the Secretary & Registrar (see paragraph 56 above). Any delays to this timescale will be explained to the Secretary & Registrar who will then contact the Complainant in writing, presenting an estimated revised date of completion.

F. Preliminary Adjudication: Findings and subsequent actions

60. At the conclusion of their review of the allegation each Adjudicator will determine whether the allegation of misconduct in research:
 - (a) is unfounded;
 - (b) is sufficiently serious and has sufficient substance to warrant a Formal Investigation of the complaint.
61. Each adjudicator will make a written record justifying their decision and this will be made available to the other two adjudicators.
62. Where there is unanimous agreement between the Adjudicators their decision will be presented to the Secretary & Registrar who will write to the Complainant with a report of the outcomes of the Preliminary Adjudication.
63. Where the decision of the adjudicators is not a majority one they will meet as a panel to discuss their conclusions and the majority decision of the adjudicators will be final

64. When allegations are considered to be unfounded they will be dismissed. The Secretary & Registrar will write a completion of procedures letter to the Complainant. The Secretary & Registrar will then take such steps, as are appropriate in the light of seriousness of the allegations, to sustain the reputation of the person(s) whom the allegations were made against and the relevant research project(s) and, provided the allegation is considered to have been made in good faith, the Complainant.
65. When the Preliminary Adjudication concludes that an allegation is sufficiently serious and has sufficient substance to warrant a formal investigation of the complaint, the Secretary & Registrar will take immediate steps to set up a Formal Investigation.
66. For the avoidance of doubt there is no right of appeal available to the Complainant at the conclusion of the Preliminary adjudication stage.

G. Formal Investigation

67. The purpose of the Formal 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, for consideration by the appropriate University authorities, regarding any further action the Formal Investigation Panel ('the Panel') deems necessary to: address any misconduct it may have found; correct the record of research, and/or preserve the academic reputation of the University.
68. If a Formal Investigation is considered necessary, the Secretary & Registrar will write to the Complainant and Respondent to inform them that a Formal Investigation of the allegation is to take place and appoint a Formal Investigation Panel. The Panel will normally be appointed within 15 working days of the completion of the Preliminary Adjudication stage. Any delays to this timescale will be explained to the Complainant, the Respondent and other relevant parties in writing, presenting an estimated revised date of appointment.
69. Where a regulatory body, including statutory bodies regulating professions, or grant or contract-awarding body or partner organisation requires to be informed about such a Formal Investigation, the Secretary & Registrar will provide the necessary confidential information to that body.
70. The Secretary & Registrar will consider whether, without prejudice to the proper conduct of the investigation, any other action should be taken at this stage pending the outcome of the investigation. It should be made clear that any actions that might be taken by the University Secretary & Registrar in response to the notification of an allegation 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 University. Those conducting this Procedure will take steps to make it clear to the Respondent, Complainant and any other involved parties that these actions are necessary to prevent further risk or harm to any persons involved in the research and that the allegations of misconduct in research can be properly investigated and to meet contractual and other obligations of the University.
71. The Secretary & Registrar will arrange the appointment of a Formal Investigation Panel. The Panel should consist of at least three impartial investigators, of which at least one will be from outside the University. Two members of the Panel will be academic specialists in the

discipline(s) in which the misconduct is alleged to have taken place; Where an allegation involves research being conducted in conjunction with a partner organisation, then it may be advisable for a representative of that organisation to be a member of the panel. Similarly, when an allegation involves a researcher on a clinical, honorary or secondment contract, it may be advisable for a representative of the other employing organisation to be a member of the Panel. Members of the Panel will not have previously been involved in the investigation of the allegation.

72. When the research to which the allegation relates is deemed to be commercially sensitive, it may be appropriate for members of the Panel to sign a Non-Disclosure Agreement. However, the terms of any such Non-Disclosure Agreement must not compromise the ability of the Panel to conduct a full and fair investigation of the allegation, including its ability to seek confidential advice from persons with relevant expertise and make recommendations regarding any further action necessary by the University and/or other bodies to address any misconduct it has found, correct the record of research and to preserve the academic reputation of the University.
73. The Secretary & Registrar will select the Chair of the Panel from its members. The Chair will normally be a senior member of the University chosen from Directors of Research and / or Professors, from outside the discipline in which the misconduct is alleged to have taken place. In a case which involves complex legal issues, the Secretary & Registrar may appoint an external lawyer or other suitably qualified person to act as adviser to the Panel.
74. The report of the investigation, will confirm in writing to the Secretary & Registrar that the participation by panel members involves no conflict of interest. They should seek advice from the University Secretary & Registrar if unsure.
75. The Secretary & Registrar will write to the Respondent and the Complainant to inform them that a Formal Investigation will be taking place and to let them know the composition of the Investigation Panel. The Respondent and Complainant will be given the opportunity to raise in writing any concerns that they may have about the persons chosen to conduct the Formal Investigation. The Secretary & Registrar will decide if any concerns raised by the Respondent and/or the Complainant warrant the exclusion of the person(s) concerned from involvement in the Formal Investigation, recording the reasons for the decision in writing. He/she will inform the person(s) concerned and the Respondent and/or the Complainant, as appropriate, of his/her decision in writing.
76. The Chair of the Panel will be responsible for the conduct of the Panel under this Procedure. The Panel does not have any disciplinary powers.
77. The Secretary & Registrar will identify suitable administrative and other support to assist the Investigator. Those selected to provide such support will confirm to the Secretary & Registrar in writing that their participation involves no conflict of interest, seeking advice from the University if unsure.
78. The Investigation Panel should ensure that records are kept of all interviews or written submissions, and the outcomes of any inspection of documents, records or materials. These should be submitted to the Secretary & Registrar with their final report. The Secretary & Registrar will provide the Investigation Panel with confidential administrative support.
79. Both the Complainant and the Respondent will have the right to submit evidence to the Panel orally and in writing. In the case of the Respondent, this includes the right to formally respond

to the allegation made against him/her and set out his/her case. Both the Complainant and the Respondent will have the right to be accompanied at meetings by another person if they so desire (as described in paragraph 81 & 82 below).

80. The Panel shall be free to seek confidential advice from persons with relevant expertise, both within the University and outside it, as described in paragraph XXX below.
81. The Investigation Panel will:
 - (a) Interview the complainant(s) and the respondent(s), on more than one occasion if necessary.
 - (b) Interview any witnesses called by the complainant (s) and the respondent(s).
 - (c) Interview any other persons deemed relevant to the investigation.
 - (d) Inspect any paper or electronic documentation, research records or materials deemed relevant. If access to documents, records or materials is refused, the Registrar and Secretary will assist the Investigation Panel in the disclosure of such evidence.
82. The Panel has discretion to widen the scope of the Investigation if the need for this becomes apparent. The Secretary & Registrar will be informed of such a development.
83. A complainant and respondent will be given at least 5 working days notice in advance of their interview. Both parties may be accompanied and/or represented by a Full-Time Trade Union Official; a local Trade Union or Students Union representative; or a work colleague or fellow student of the University.
84. This right of accompaniment and representation is a general right and is not the right to accompaniment and/or representation by a specific individual. Where a complainant and / or respondent proposes to use and pay a legal professional or equivalent person with whom they have contracted with to provide representation in preparation for and through attendance and advocacy at a hearing, the prior approval of the Secretary & Registrar must be obtained.
85. In the event of difficulties arising in respect of complainant(s), respondent (s) or witnesses attending the Investigation Panel, the Chair of the Panel should consult with the Registrar and Secretary to produce a resolution to any difficulties. This may include informing the relevant academic line manager about the Formal Investigation in order to enable duties to be prioritised to enable attendance.
86. Complainant(s) and respondent(s) will be interviewed separately. The complainant(s) will be interviewed first. The purpose of this interview is for the complainant(s) to present the grounds for his, her or their belief that research misconduct has or may have occurred; and to answer any questions put by members of the Panel.
87. Following this, the Chair of the Panel will provide the respondent(s) with a written statement of the grounds of the allegation, with, if relevant, identification of prima facie evidence of misconduct. The purpose of this is to provide the respondent with the opportunity to rebut the allegation. The quantity and quality of information provided should reflect the fact that a respondent does not have the opportunity to put direct questions to the complainant. The

respondent will then be interviewed. The purpose of this interview is for the respondent to present their rebuttal of the allegation.

88. Both complainant(s) and respondent(s) may nominate persons whose evidence they think is material to the enquiry. At the conclusion of the evidence of the complainant(s) and the respondent(s), the Panel will interview any other persons whose evidence is deemed relevant, and this will normally include persons nominated as above. Following such interviews, the Chair of the Panel must provide the respondent(s) with a summary of the evidence and provide him, her or them with an opportunity for rebuttal. The Chair will determine the extent of the number of nominees from the complainant and respondent
89. If the Panel consider it appropriate, a further meeting with the complainant(s) may be held to clarify any issues raised by the respondent(s) or after hearing the evidence of witnesses. This meeting may not be used by the complainant(s) to raise any new matter. If necessary, the Investigation Panel may then re-interview any respondent.
90. The Secretary & Registrar will send the preliminary conclusions of the Investigation Panel to the complainant(s) and respondent(s). Any complainant or respondent may make observations on the findings within 5 days of receipt of this communication. New evidence will not be admissible unless there are compelling reasons why this was previously unavailable.

H. Formal Investigation: Findings and subsequent actions

91. At the conclusion of the Formal Investigation, the Panel will conclude, giving the reasons for its decision whether the allegation of misconduct in research is:
 - (a) upheld in full; or
 - (b) upheld in part; or
 - (c) not upheld and dismissed as unfounded or mistaken
 - (d) not upheld and dismissed as vexatious or malicious
 - (e) not upheld because of a lack of intent to deceive or due to its relatively minor nature
92. When concluding whether an allegation is upheld in full, upheld in part or not upheld, the standard of proof used by the Panel will be that of 'on the balance of probabilities'.
93. Where the allegation is upheld in whole or part the Investigation Panel will also make recommendations to the Secretary & Registrar on any action it considers appropriate. This may include, but is not limited to, the following:
 - (a) Reference to the University's Disciplinary Procedure
 - (b) Informing the appropriate Professional or Statutory Body
 - (c) Informing the appropriate grant awarding or other contractual body
 - (d) Informing relevant research collaborators
 - (e) Informing relevant publishers
 - (f) Reference to academic regulations in respect of awards of the University
 - (g) Consideration of the revocation of an award of the University
 - (h) Action to protect the interests of other persons damaged by the research misconduct.
94. Such recommendations are advisory only. Any respondent has the right to appeal. No action may be taken in respect of the findings until such time as any Appeal has been heard.

95. Where the allegation is dismissed, and the Investigation Panel have deemed the allegation to be vexatious or malicious, the Panel will also make recommendations to the Secretary & Registrar. This may include, but is not limited to:
 - (a) Reference to the University's Disciplinary Procedure
 - (b) Informing the appropriate Professional or Statutory Body
 - (c) Informing relevant research collaborators.
96. Such recommendations are advisory only. Any complainant has the right to appeal. No action may be taken in respect of the findings until such time as any Appeal has been heard.
97. Where the allegation is dismissed as being unfounded or mistaken there is no appeal against this decision.
98. Where the allegation is dismissed because of a lack of intent to deceive or due to its relatively minor nature the Panel can make recommendations to the Secretary & Registrar for it to be addressed through education and training or other non-disciplinary approach, such as mediation.
99. The Panel will make a confidential written record of its investigation, including any response from the Respondent and the Complainant, and the Panel's conclusions and recommendations.
100. The Panel will make its draft report available to the Respondent and the Complainant, in confidence, for comment on its factual accuracy. The Respondent and the Complainant should submit any concerns about errors of fact to the Panel in writing. The Panel will decide if any concerns raised by the Respondent and/or the Complainant warrant the revision of the draft report and inform the Respondent and/or the Complainant, as appropriate, of its decision in writing.
101. The Chair will then forward the final report to the Secretary & Registrar, together with any documentation used in the investigation.
102. The work of the Panel is then concluded and it should be disbanded, although its members may be: asked by the Secretary & Registrar to clarify any points in the final report of the Formal Investigation and/or be consulted by the Secretary & Registrar regarding any subsequent actions taken under this Procedure or other University processes. Members of a disbanded Panel will not make any comment on the allegation or its investigation unless formally requested by the University or otherwise required to by law. They will treat all information concerning the allegation and its investigation as confidential.
103. The University Secretary & Registrar will:
 - (a) notify the Complainant and the Respondent in writing of the outcome of the investigation, and
 - (b) where appropriate, notify the following in writing of the outcome of the investigation: any relevant regulatory or professional bodies, any relevant partner organisations and any other persons or bodies as he/she deems appropriate, including but not limited to the editors of any journals which have published articles concerning research linked to an upheld allegation of misconduct in research and/or by a person against whom an allegation of misconduct in research has been upheld; and

- (c) take any administrative actions that may be necessary to: meet all legal and ethical requirements; protect the funds and/or other interests of grant- or contract-awarding bodies; and meet all contractual commitments, including any relating to disclosure of the outcome of the Formal Investigation.
104. When an allegation is not upheld, for whatever reason, the Secretary & Registrar will then take such steps, as are appropriate in the light of seriousness of the allegation, to sustain the reputation of the Respondent and the relevant research project(s) and, provided the allegation is considered to have been made in good faith, the Complainant. If the case has received any publicity the Respondent shall be offered the possibility of having an official statement released to the media.
- (a) When a Formal Investigation has concluded that an allegation is not upheld because it is vexatious and/or malicious, the Secretary & Registrar will consider whether disciplinary proceedings should be initiated against the Complainant.
 - (b) When it is concluded that the allegation is not upheld and will be addressed through education and training or other non-disciplinary approach, such as mediation, the Secretary & Registrar will work with relevant University staff to establish a programme of training or supervision in conjunction with the Respondent and his/her line manager. This programme will include measures to address the needs of staff and students working with the Respondent. The use of this Procedure will then conclude at this point.
105. When an allegation of misconduct in research is upheld, the Secretary & Registrar will decide what action needs to be taken under the University's relevant disciplinary procedure and/or otherwise.
- (a) In making this decision, the Secretary & Registrar will take into account any recommendations made by the Panel, namely any further action it would consider necessary by the University and/or other bodies to address any misconduct it has found, correct the record of research and preserve the academic reputation of the University.
 - (b) Particular attention will be paid to: any recommendations concerning research participants; and any recommendations concerning allegations of misconduct, whether research misconduct or otherwise, unrelated to the allegation that was the subject of the investigation (see paragraph 91 above).
106. The Secretary & Registrar will liaise, as appropriate, with relevant officers of the University and with other bodies to ensure any necessary courses of action are taken.
107. In addition, when an allegation is upheld the Secretary & Registrar will take such steps, as are appropriate in the light of seriousness of the allegation, to sustain the reputation of the Complainant. If the case has received any publicity the Complainant shall be offered the possibility of having an official statement released to the media. Care may need to be taken, and appropriate advice sought, regarding the wording of any such statement and the timing of its release, to avoid prejudicing actions being taken by the University and/or other bodies subsequent to the allegation being upheld.
108. In carrying out any of the above actions, the Secretary & Registrar will be free to seek confidential advice from persons with relevant expertise, both within the University and outside it.

I. Appeal

109. Any party having the right of appeal under these regulations must lodge the appeal with the Secretary & Registrar within 5 working days of receiving the written notification of the outcome of the Final Investigation. The letter of appeal should state the grounds on which the appeal is being made.
110. The grounds for appeal are limited to:
 - (a) Material procedural irregularity
 - (b) Some other material irregularity
 - (c) Unfair treatment during the course of the enquiry or investigation
 - (d) New evidence
 - (e) Some other substantial reason (which must be specified).
111. On receipt of notification of appeal, the Secretary & Registrar will establish an Appeal Panel of 3 Senior University Managers, and will designate one of them as the Chair of the proceedings.
112. The Appeal Panel will be constituted as soon as is practicable and will hear the appeal within a reasonable time. In order to ensure that proceedings are not unnecessarily delayed, the Chair of the Panel will discuss the anticipated length of the investigation with the Secretary & Registrar.
113. The Appeal Panel will first consider the validity of the grounds for appeal. The Appeal Panel has the right to dismiss without hearing any appeal which it considers to be trivial, vexatious or insubstantial. New evidence, material or witnesses will not be admissible unless there are compelling reasons why they were unavailable at the time of the Formal Investigation. The letter of appeal should state why such evidence, material or witnesses were unavailable. The Appeal Panel will determine whether such new evidence is admissible. There is no appeal against the Panel's decision on these matters.
114. If the Panel accepts that there are valid grounds for appeal, the Secretary & Registrar will arrange for the appeal hearing to take place. The appellant, and any witnesses will be given at least 5 working days notice of the appeal. The appellant may be accompanied in the same way as provided for at the earlier stages of the process.
115. The appellant(s) will present his, her or their case to the Appeal Panel, and the appellant and witnesses (if called) may be questioned by the Panel members. The appeal is not a re-hearing of the Formal Investigation, and representations to the Panel will be confined solely to the grounds for appeal.
116. At the conclusion of the appeal, the appellant will withdraw and the Appeal Panel will deliberate and reach its conclusions which may be that the findings of the Formal Investigation be:
 - (a) upheld
 - (b) modified (in which case the Panel should specify in what way)
 - (c) rejected
 - (d) In very exceptional circumstances the Appeal Panel could recommend that there be a new investigation.

117. At the conclusion of the Appeal, the Chair of the Appeal Panel will make a report in writing to the Secretary & Registrar. This report (or any abridgement of it as agreed with the Secretary & Registrar to preserve the anonymity of the complainant if relevant) will form an Appendix to the report of the Investigation Panel, and will be made available to any members of staff or students who face disciplinary proceedings as a consequence of a finding of misconduct in academic research.

J. Issuing of a completion of procedures letter

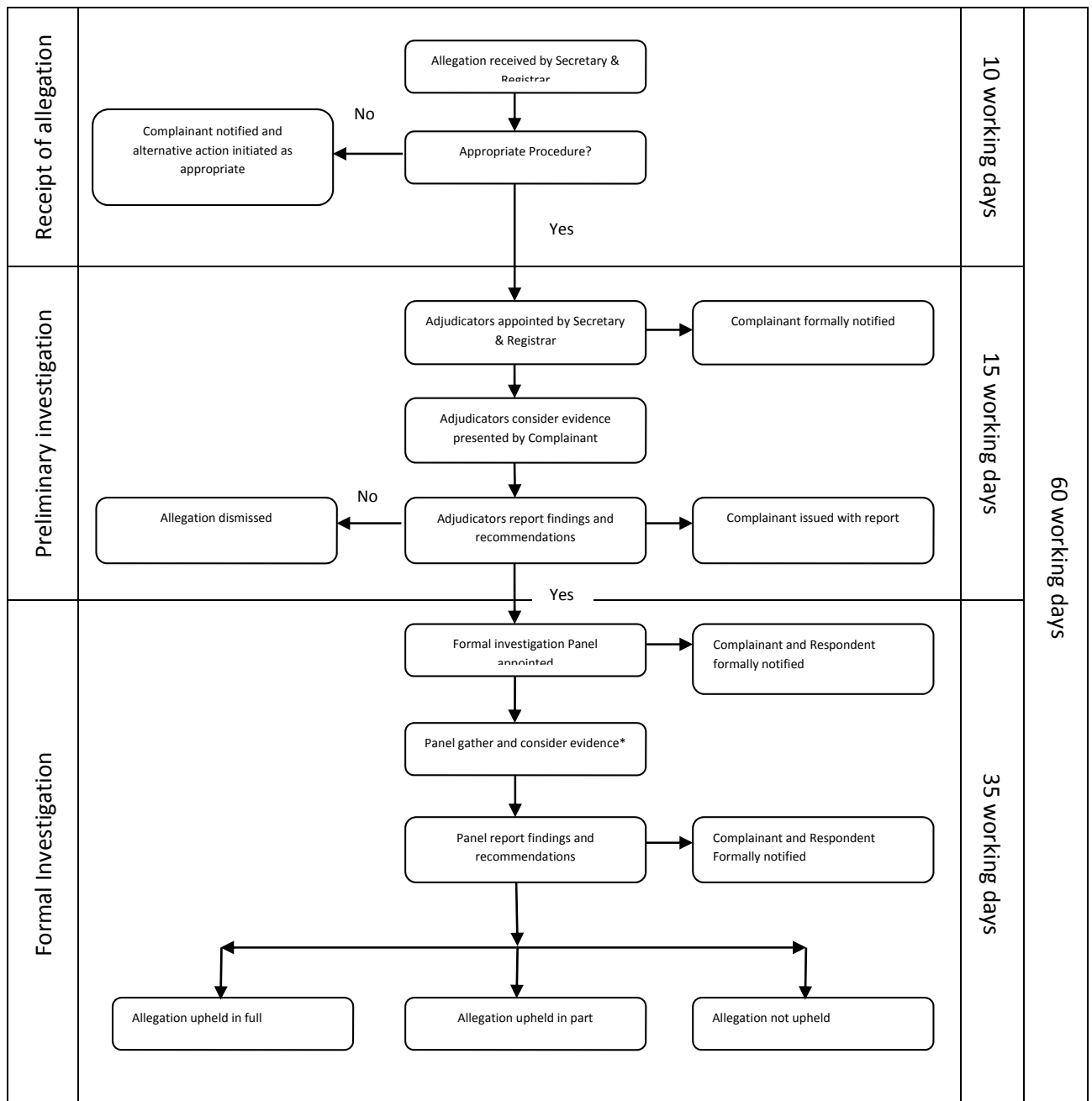
118. For all outcomes other than where the allegation is dismissed as being unfounded or mistaken where there is no appeal against this decision, the Secretary & Registrar will issue a formal "Completion of Procedures" letter confirming that the process is now at an end. This letter will be issued immediately after the conclusion of any action taken under the appeals stage process of this procedure (whether an appeal takes place / or on the expiration of the time limit to appeal).
119. For allegations that have been dismissed as being unfounded or mistaken and where there is no appeal against this decision, the Secretary & Registrar will issue a formal "Completion of Procedures" letter confirming that the process is now at an end at the same time as issuing the final report to the Respondent & Complainant.
120. Where the completion of procedures letter is issued to a student it must also provide information concerning the potential for them to ask the OIA to review the case. Information on what to include is provided by the Governance & Legal Affairs Team.

K. Reporting to the University Committees

121. Summaries of reports generated by the Preliminary Adjudication and the Formal Investigation of allegations addressed under this Procedure will be circulated, in confidence, on an annual basis to the University's Audit Committee as part of the Annual Fraud Management report, as will summaries of follow-up reports relating to any actions taken following the conclusion of such Investigations. All such summaries will be anonymised and/or have content redacted if deemed appropriate, the decision to be made by the Secretary & Registrar in consultation with any other relevant officers of the University.
122. Records of investigations under this Procedure shall be held by the Governance & Legal Affairs. In the case that an allegation is dismissed, addressed informally or referred by a Preliminary Investigation or is not upheld after a Formal Investigation, on closure of the investigation, a summary will be prepared and the original records destroyed. The summary will be retained for a period of six years. In the case that an allegation is upheld (in full or in part) after Formal Investigation, original records will be retained for a period of six years from the date of closure of the investigation under this Procedure.

Annex 1: Flowchart

Flowchart of the Procedure for Investigating allegations of Research Misconduct against Leeds Beckett University staff and students.



*If the panel require more time to complete the investigation they will formally notify the Respondent and Complainant providing their reasons for extending the investigation time.

Annex 2 Bibliography

The University wishes to acknowledge, with thanks, the use of the following documents in the preparation of the Policy and Procedures Relating to Allegations of Misconduct in Academic Research.

- (a) University of Manchester, Code of Practice for Dealing with Allegations of Misconduct in Research.
- (b) University of Glasgow, Code of Policy and Procedures for Investigation and Resolving Allegations of Misconduct in Research.
- (c) University of Leeds, Professional Integrity: Protocol for Investigating and Resolving Allegations of Misconduct in Academic Research.
- (d) University of Warwick, Code of Practice for Dealing with Allegations of Research Misconduct.
- (e) University of York, Policy & Procedure for the Investigation of an Allegation of Research Misconduct.
- (f) UK Research Integrity Office, 2009. Code of Practice for Research: Promoting good practice and preventing misconduct.
- (g) Department of Health, 2005. Research Governance Framework for Health and Social Care: Second Edition.
- (h) Research Councils UK, 2013. RCUK Policy and Guidelines on the Governance of Good Research Conduct.
- (i) UK Research Integrity Office, 2008. Procedure for the Investigation of Misconduct in Research.
- (j) Universities UK, 2012. The Concordat to support research integrity.
- (k) University of Portsmouth, 2012.
- (l) Frascati Manual (The Proposed Standard Practice for Surveys of Research and Experimental Development - 6th edition).

