UNIVERSITY OF HULL

Code of Good Research Practice

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Summary/Description:	This document sets out to articulate the expected practices by which all research activities must abide.
Scope:	This policy applies to all staff and students conducting research associated activities on behalf of or in auspice of the University of Hull as described in the policy
Collaborative provision:	Please state whether this document is applicable to the university's collaborative partners: ☒ Mandatory ☐ Not mandatory
Assessment: (where relevant)	☐ Equality Assessment ☒ Legal
Consultation: (where relevant)	☐ Staff trade unions via HR ☐ Students via Hull University Union ☐ Any relevant external statutory bodies
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Related policies/documents:	Statement of Research Integrity; Procedure for Granting Ethical Approval; Research Ethics Policy; Code of Practice Research Misconduct.
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Governance and Compliance

UNIVERSITY OF HULL

Code of Good Research Practice

This policy and code of practice sets out clear guidance for all members of staff involved in research on the University's policy and procedures to maintain good research practice.

This document is owned, reviewed and maintained by the office of the Pro Vice-Chancellor for Research and Enterprise (PVC-RE).

Contacts:

For questions relating to Research Integrity:
Research Governance (researchgovernance@hull.ac.uk)

For cases of suspected misconduct or whistle-blowing:
University Registrar and Secretary (registrar@hull.ac.uk)

For questions relating to policy and procedure:
Research Governance (researchgovernance@hull.ac.uk)

Due to be reviewed and updated: September 2018

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Section A Introduction

Principles

The University of Hull has a long-established reputation as a research-engaged institution and is internationally recognised for the quality of research in many areas. Throughout its existence, the University of Hull has made major research contributions in diverse academic disciplines. Achievements in research will continue to be an essential component of the University of Hull's academic endeavours.

The University of Hull is committed to the principles of the Concordat to Support Research Integrity:

- To maintain the highest standards of rigour and integrity in all aspects of research
- To ensure that research is conducted according to appropriate ethical, legal, and professional frameworks, obligations and standards
- To support 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
- To use transparent, robust and fair processes to deal with allegations of research misconduct should they arise
- To work together to strengthen the integrity of research and to review progress regularly and openly

The University has endorsed the seven principles of public life that the Nolan Committee articulates for the benefit of all who serve in a public way and which have relevance to best practice in the conduct of research:

Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, Leadership

This Code of Practice provides guidance on areas of good practice in research and should be read in conjunction with the University's Code of Practice on Research Misconduct, Statement on Research Integrity, Policy and Procedure on Disclosures in the Public Interest (Whistle-blowing), Code of Ethics, UK Research Integrity Office (UKRIO) Code of Good Practice for Research and the Singapore Statement on Research Integrity.

Scope

The scope of this Code will be taken to include: all members of the University's academic and non-academic staff; research fellows, assistants and associates; research administrators; students undertaking research as part of a programme of study (whether categorised by the Programme Approvals Committee as taught or research); visiting researchers as well as all those with honorary positions conducting research within, or on behalf of the University of Hull. This includes collaborative work conducted on and off campus, where the lead is not a University of Hull employee, or is clinical contract holder, consultant or contractor. The Code also covers any person(s) not affiliated with or acting on behalf of the University, but who use University premises for research. The Code applies to all research projects conducted, whether externally funded or not. It is applicable to all disciplines of research and applies to all stages of a research project, from beginning to end.

Definition

This Code uses the Frascati definition of research:

"Research and experimental development (R&D) comprise 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" (OECD, 6th edition, 2002; section 2.1,63)

However research in the context of this code is not limited to this definition but includes all work (e.g. consultancy) leading to the effective dissemination of the outcomes. It refers to all aspects of the research process including the

development of research questions, preparation of funding applications and contracts, literature review, research project design, data generation, data recording, research data analysis, writing up and publishing and other forms of dissemination of the results.

Professional Standards

All members of the University of Hull are expected to observe high standards of professional conduct and integrity in the practice and publication of research. Researchers are expected to exemplify the University's values of openness, connectedness and excellence in all that they do.

The University expects all individuals involved in research to ensure that they are aware of, and comply with the policies of the University and their funders so they meet the expected standards of rigour and integrity relevant to their research. The principles of this code should be adhered to throughout all stages of research from the conception of the ideas to disseminating the resulting research. The University endorses the principles of the Singapore Statement of Research Integrity and expects these principles to form the foundation of all University research.

Responsibilities

The University expects Heads to lead their Schools in a visionary manner that inspires their staff and students, promotes and encourages scholarship and academic excellence, and enhances the stature and academic reputation of Schools, Faculties and the University. They must provide academic leadership in relation to learning and teaching, research and enterprise, and engagement; including scholarship and the development of professional practice. Heads and their research leaders should advance significantly the discipline/research area, must create opportunities and nurture researchers' careers and must exemplify the highest standards of research integrity and conduct. They must inspire and lead other researchers to be successful research leaders. They should demonstrate impact in their research and engage the public with their research discipline.

Researchers are expected to conduct their research with highest professionalism, integrity, honesty and collegiality. They must strive to generate accurate and novel knowledge, inspiring and motivating colleagues to aspire to the same.

Funding for research is sourced from many providers who all have their own terms and conditions in the funding agreements that differ significantly. Researchers must familiarise themselves with all the terms and conditions of any funding agreements, and they must ensure that the terms are adhered to by all involved in the research project.

Section B Planning and Conducting Research

Research Design

1. When considering the design of a research project all researchers should ensure that it is appropriate for the question(s) being asked. All legal and ethical requirements must be carefully considered, bearing in mind that these may change during the time span of the research.

2. The University recommends that prior to any research proposals being submitted to the University's Research Funding Office (RFO), the researcher considers all the points listed on UKRIO's recommended Checklist for Researchers.

3. All research proposals must be internally peer reviewed prior to submission to the RFO. New Investigators are strongly encouraged to consult the RFO Quick reference Guide before preparing a proposal.

Health and Safety

4. The University actively engages in risk management of all its activities. There is the expectation that all staff contribute to ensuring a safe environment for the University community including staff and students on campus and away on University business.

5. All research must be conducted in accordance with the Health and Safety at Work Act 1974, and subordinate regulations.

6. Researchers are expected to conduct rigorous risk assessments before conducting any form of research. Compliance with the regulations and procedures outlined by the Health and Safety Services is necessary to ensure a safe working environment for all.

7. Ongoing training and awareness of safety issues is an integral part of the University research culture, and a full programme of courses can be found

on the Health & Safety Services website. All researchers are expected to actively engage in this culture and participate in training programmes as required. It may be necessary to arrange specialist training to facilitate research in high risk areas of interest.

8. Research staff are expected to obtain all necessary approvals, licences and permissions prior to commencing the research. This includes, but is not limited to, ethical approval, Home Office licences for research involving animals, Human Fertility and Embryology Authority (HFEA) licences, Material Transfer Agreements (MTAs), and research sponsorship where required. Researchers should consult their line-managers for advice in cases of uncertainty.

Ethical Practice

9. The University clearly defines the principles it upholds in the Code of Ethics that form the framework to which all ethical procedures must adhere.

10. For all research activity, researchers must consider whether explicit and formal ethical approval is required. There are clear processes for ethical consideration of activity which is devolved from the University Ethics Committee to Faculty Ethics Committees and thereafter Schools; though some faculties operate the approval process at faculty level only.

11. The procedures for granting ethical approval by the University are available here.

12. The University provides guidance regarding the level of decision making permitted at each level of ethical review within the University which is defined by the type of activity being undertaken, the research methods, the associate risk and exposure and participant groups. See Procedure for Granting Ethical Approval.

13. Researchers should use the Researchers Checklist in Appendix 1 for guidance for establishing if a project requires Home Office licence and ethical review.

14. Faculties report activity on an annual basis to the University Ethics Committee and the Chairs of Faculty Ethics Committees are in membership of the University Ethics Committee.

Experimentation

Research using human material

15. All research involving human participants, human material and human data must comply with all the relevant legal and ethical requirements. Particular care must be taken with research involving vulnerable groups such as the very elderly, children and those suffering mental illness; and covert studies or other projects which do not involve full disclosure to participants. Researchers must comply with The University of Hull Data Protection Policy, for further guidance refer to the Data protection Guidelines. These documents are available on the digital repository.

16. All activity involving the acquisition, storage and use of human tissue (including cells, serum, saliva etc) as defined by the Human Tissue Authority (HTA) under relevant material for the purposes of research is covered by a number of different pieces of legislation all of which researchers must fully comply with. This includes but is not limited to the Human Tissue Act 2004, NHS Act 2006 and Mental Capacity Act 2005.

17. Research involving human gametes and embryos must comply with the Human Fertilisation and Embryology Act 2008. Researchers must contact the HFEA before preparing a proposal involving this material.

18. Researchers must not use their own biological or personal material in their research.

19. Principal Investigators (PIs) are expected to ensure that all researchers involved in any project adhere to the relevant legal and ethical requirements.

20. All relevant material needs to be used and stored under approval from a recognised Research Ethics Committee (REC) of the NHS Health Research Authority (HRA) or under a licence issued by the Human Tissue Authority (HTA). See notes for more information on the HTA licences.

21. Researchers using archaeological human and non-human primate biological material should familiarise themselves with the British Association of Biological Anthropology and Osteoacrchaeology: Code of Ethics found here.

22. Researchers must adhere to their Faculty guidelines for ensuring the security and confidentiality of patient and participant data.

23. All researchers, including those based overseas participating in UK-hosted research, must comply with the legal and ethical requirements of the UK, the country where they are based (if different) and the country where the research is taking place.

Research using animals

24. All animal research is overseen by the University's Animal Welfare Ethical Review Body (AWERB) and researchers wishing to conduct animal work must seek guidance from The Home Office Liaison Contact (HOLC) or Faculty Ethics Officer.

25. Researchers must consider if the proposed study using animals requires a Home Office licence during the preparation of the proposal.

26. Researchers must await the decisions of the ethical review before commencing the research. For licensable animal research, review must be conducted by AWERB.

27. Chairs of Faculty Ethics Committees should consult the University HOLC for cases of ambiguity regarding the appropriate committee for review for proposed research using animals.

28. Researchers must abide by the outcome of the ethical review.

29. Protected animals under the Animals (Scientific Procedures) Act 1986 are defined as living vertebrate, other than man, plus cephalopod such as octopus. Immature forms of mammals, birds and reptiles are protected from two thirds through gestation or incubation period; and fish, amphibians and cephalopods from the time at which they can feed independently.

30. Researchers may conduct non-licensed research using animals which includes but is not limited to:

    a. Wild animal observation research

    b. Vertebrates bred or purchased for teaching or tissue culture use

    c. Embryonic and foetal forms of birds, reptiles and mammals prior to the last third of the gestation or incubation period

    d. Larval forms of fish and amphibians prior to the stage of independent feeding capabilities

    e. Invertebrates with the exception of cephalopods and protected species.

    NOTE: There are specific invertebrate species that require a Defra licence. All European protected invertebrate species require a Defra licence for any scientific or educational purpose. Researchers must check the Defra regulations prior to research using invertebrates.

31. Researchers must consider if the proposed procedure using the animal is regulated and requires a licence.

32. All non-licensed animal research including on and off campus studies must be given ethical consideration by the appropriate University ethical review committee.

33. Researchers are required by law to consider the opportunities for Reduction, Replacement and Refinement of animal involvement in research – the principle of "The Three Rs". See here for further information.

34. The University recommends that researchers refer to the relevant national guidelines on the appropriate and ethical use of animals in research. For operational information of licences here and UK Legislation Guidance here.

35. Publications using data acquired from animal research must follow the principles of the Animal Research: Reporting *In Vivo* Experiments (ARRIVE) Guidelines.

36. Researchers must report concerns they may have regarding the treatment of animals being used in research to their managers or supervisors immediately.

37. Abattoir derived animal by-products are permitted for use in research under Animal By-products Regulation (England) (2011). Researchers must check with Defra if registration is required by contacting the University Health and Safety Office.

Fieldwork and other research not conducted on University premises

38. The University expects all staff and students conducting research outside of the University premises to act in the highest professional standard reflecting the principles outlined in this document. This includes visits to other universities, research organisations and institutions, commercial and industrial premises, public sector placements and fieldwork.

39. Researchers must be aware of and comply with their Faculty fieldwork policies and procedures prior to commencing their fieldwork and off campus research.

40. Researchers must respect and be mindful of the environment they are conducting the research in.

41. Researchers undertaking fieldwork must seek approval from their Heads of School (HoS) and obtain the appropriate ethical approval prior to commencing any fieldwork off campus research.

42. Researchers must not put themselves in unacceptable danger.

43. Researchers must refer to the University's Travel and Fieldwork Policy found here prior to commencing field work or overseas travel.

44. Researchers must complete and submit travel risk assessment forms to their School safety officer together with the "Control Risks" report as required.

45. Researchers should consult the Foreign and Commonwealth Office and Control Risks for updates and advice on the destinations of their fieldwork.

46. Researchers must familiarise themselves with all emergency and safety procedures and equipment relevant to their research location prior to commencing their fieldwork.

Hazardous substances

47. Researchers must be aware of the normal requirements of the University's Control of Substances Hazardous to Health Regulations 2002 that requires suitable risk assessments are in place for activities, and that safe working procedures drawn up from the results of these assessments are followed.

48. Researchers intending to bring any controlled drugs or substances onto the University premises must contact the University Chemical Safety Officer prior to doing so. This includes controlled drugs, drug precursors and chemical weapons.

49. Researchers intending to transport or import hazardous substances must comply with the Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations (2009). For further guidance please contact the Faculty Health and Safety Officer or Health and Safety Services.

Non- academic Impact

50. Non-academic impact in research can take many forms and on varying scales. For the purpose of this document it is defined as:

This is the contribution of excellent research to beneficial changes outside academia that affect or lead to changes in society, economy or environment.

These impacts may lead to change or effects to:

- public policy, services or practices
- social practice
- local, national or global economy
- business organisations and practices
- quality of life
- health
- environment
- culture

51. Researchers must familiarise themselves with the specific definition and expectations of impact of the funder or external body involved in the research project.

52. The University expects that for all research conducted consideration is given to any potential impact that may result from the research and, where possible, these are planned for. It is understood that not all research projects will ultimately have impact and that some impacts may not be foreseeable.

53. The “pathway to impacts” should be planned during project conception, with regular updates and review throughout the life of the project.

54. The potential beneficiaries and users of the research should be identified early and encouraged to engage with the project at the earliest possible and appropriate opportunity.

55. It is essential that the details and evidence of impact are collected when they occur, thereby providing the opportunity to generate an accurate evidenced-based impact trail when required.

56. Public engagement with research, although not defined as ‘impact’, is very important and can lead to non-academic impacts.

Collaborative Research

57. The University supports and encourages collaborative projects with both internal and external contributors. However, the nature of consortia which may have numerous partners from different disciplines, industries and countries will have additional complexities which need to be considered at the project planning and submission stage. The RFO will assist researchers with the issues that need to be considered. Therefore it is expected that contact is made with the RFO as soon as involvement with a collaborative project is confirmed.

58. Issues which need to be considered:

    - Particular attention must be paid to the funder’s terms and conditions (T&C) especially those outside the UK
    - Consideration must be given regarding the different working practices of the diverse members of the consortia
    - Who will lead the project?
    - All consortia must have a collaboration/consortium agreement in place

59. Researchers must ensure that all the T&C of the collaborative agreement are adhered to both during the lifetime of the agreement and, if any terms survive the lifetime of the agreement, for so long as those terms continue to apply.

Financial management of research projects

60. All staff are expected to comply fully with the University’s *Financial Regulations and Financial Procedures* located on the University Portal. Funding for research can be sourced internally through the University or

externally for example from research councils, commercial agreements and charity trusts.

61. Researchers must consider the best strategy for obtaining funding for their research.

62. The RFO will assist researchers to identify the most appropriate funding route for the planned application and encourage potential applicants to access the University Funding Initiatives Officer in the RFO for support.

Funding from external sources

Pre-award

63. Prior to applying for external research funds researchers must contact the University RFO at the earliest opportunity. The RFO offers a range of advice and support services to researchers. The team will help source funding opportunities, provide advice on completing research proposals and grant applications, and direct applicants to research heads in all University faculties for approval pre-submission.

64. Researchers must allow sufficient time before the deadline of the application so that it can be properly peer reviewed and approved by the relevant people (HoS/FFO/Dean) in applicant's Faculty.

65. Consideration must be given to the following points prior to preparing the application.

- The proposed research is aligned with the funder's strategies and policies
- The proposed research is aligned with the University's strategies and policies
- Costing of applications appropriately adhering to funder's rules using Full Economic Costing principles
- Review of all research contracts through the University Solicitors' Office

- Approval from the HoS, FFO, and the Dean of Faculty in terms of staff time and other costs that might be incurred when carrying out your research

66. All applications must adhere to the University approval process before it can be submitted to the funders for consideration.

Post-award

67. When a funder awards a grant a letter or e-mail offer will usually be sent to either RFO or PI. It is essential that the PI notifies the RFO immediately so the award can be processed. Some funders require acceptance of grants within tight deadlines, therefore it is essential that the RFO have as much time as possible to process the award.

68. Both RFO and the PI will review the T&C of the award before accepting.

69. PIs must familiarise themselves with the T&C, which may include details of regular reports. If the T&C are not acceptable then the award may not be accepted. In some cases the RFO may require the University Solicitor's Office to review the T&C and associated agreements before accepting the award.

70. There may be a process of contract negotiation which can prolong the time until an award is accepted. If the T&C of the award are different from that of the submitted proposal e.g. change in awarded budget vs requested budget the RFO may seek internal approval (HoS, FFO & Dean) before accepting.

71. After approval of the T&C of the award by the RFO and the PI, the RFO will arrange for the award to be accepted and signed by the appropriate individual e.g. PVC-RE or Research Grants & Contracts Manager and returned to the funder.

72. The RFO will prepare a 'handover pack' after the award is accepted which will include all the associated documentation for the project for the Post Award Finance department to set up a financial code and announce the project award.

73. The researcher is responsible for ensuring all the grant funds are not over spent or grossly under spent. The researcher's FFO will provide support to monitor this and help develop strategies to ensure that funds are spent in due course.

74. Post-award Finance Office will monitor all spending on all live grant including expenditures made by collaborators.

75. Monthly activity reports are available to the researcher via the finance system that captures all financial movement on an active grant such as consumable spending, equipment purchases, travel costs, conference fees and publication fees.

76. Account queries can be requested at any point in time from the FFO or the Post-award Finance office.

Sponsorship

77. Healthcare, social care and medical projects must have an institutional sponsor that accepts overall responsibility for the project, including its management and monitoring. This includes ensuring the project meets the relevant standards in research quality, scope and staffing.

78. The University of Hull is a registered sponsor and will consider acting as research governance sponsor for projects that have no obvious sponsor elsewhere, provided they are undertaken by University of Hull employed staff or registered students, and as long as they do not involve trials of medicinal products (CTIMPs).

79. Sponsorship must be approved by the Chair of the University Research and Enterprise Committee (UREC). Requests for sponsorship should be directed to the Committee Secretary.

Data management and data protection

Researchers must familiarise themselves with the data management terms and conditions of any award or collaborative agreement associated with a research project

and ensure all staff and students involved in the research comply with these terms, which may delay or restrict their ability to share data or place it in the public domain.

80. Researchers must comply with all the terms and conditions of agreements made with any funder including those relating to data management. The end user or stakeholder must only share data that is defined in the agreement.

81. Data management, with reference to anonymity, security and access, is covered within the research ethics framework of the University and NHS, as well as within NHS research governance procedures and the Information Governance Framework which incorporates the Data Protection Act 1998. Researchers should familiarise themselves with the relevant governance frameworks.

University Data Protection Policy and Guidance notes are available on the digital repository.

82. Researchers are expected to comply with requests from research funding bodies and journals that research data be deposited in such a way that it is accessible to referees and for secondary analysis.

83. All researchers are expected to comply with their Faculty data management requirements and produce a data management plan to document the data management practice undertaken.

84. Responsibility for research data management during any research project or programme lies with the PI.

85. All PIs must address the costs and resource impact of managing research data in any funding applications and research activity undertaken, so as to support University services as required.

86. Where the PI is based at a partner institution, staff should focus their attention on data that they have responsibility for as part of the collaborative research, taking account of data management plans within the project.

87. The University is responsible for the provision of training, advice and appropriate resources for research data management and will support PIs in the fulfilment of their responsibility.

    More information regarding research data management can be found here.

Data Curation

88. The University values all data that is generated and collected and encourages researchers to re-use it where appropriate as part of ongoing research to reduce replication.

89. The University encourages widening the availability of research data so that others in the research community can benefit from it subject to any data sharing restrictions which apply.

90. Data management plans generated by researchers should incorporate a clear statement of how the data will be curated after the end of the research itself.

91. The curation should aim to maximise awareness of the data and ensure its ongoing curation and preservation normally for 10 years after the end of the research generating it unless there is a case for exemption. One such exemption is NHS data where the researcher must destroy the data as specified in the NHS approval conditions.

92. The statement generated by the researcher should take account of University services for data curation via the University digital repository and ICTD services, but also recognise the role external services can play in serving this curation need.

93. The University expects at a minimum that a record describing the data via the University's digital repository is made available, referencing where the data is being stored if not in the repository itself.

94. The University will provide guidance on the curatorial practice required, taking account of funder requirements.

    More information regarding data curation can be found here.

Intellectual Property

95. Intellectual property (IP) is defined by the World Intellectual Property Organisation (WIPO) as creations of the mind, such as inventions; literary and artistic works; designs; and symbols, names and images used in commerce, some of which must be registered to be effective eg. patents and trade marks. Intellectual capital is a broader term referring to creative and novel ideas that can result in the production of IP and other forms of intellectual creation.

96. Under the 1977 Patents Act, employers own all IP generated by their employees, consistent with the University's own policy (Intellectual Property Rights Version I January 2005).

    Please note: this does include copyright where the work is carried out in the course of employment at the University however the enforcement of this ownership is at the discretion of the University.

    Any queries regarding IP should be directed to IPenquiries@hull.ac.uk.

97. IP protection is complicated and researchers must seek the assistance of the Knowledge Exchange to ensure the interests of both the University and the researcher are appropriately protected.

98. Consideration must be given to the audience and timing of disseminating the ideas.

99. If a researcher has an invention they must speak to Knowledge Exchange well in advance of disclosing the idea in posters/ talks/papers etc, bearing in mind that patent applications can take a few months to progress from initial discussion to filing.

100. Patenting and publication are not mutually exclusive. Once a patent application is filed, inventions can be publicly disclosed.

101. Researchers who wish to pursue commercial interests must implement a Non-disclosure agreement (NDA, otherwise known as a Confidential Disclosure Agreement) before disclosing any business information or IP to a third party.

102. Researchers must understand and appreciate that most NDAs are reciprocal meaning that they are bound to confidentiality to protect the company's information also.

103. Researchers should speak to Knowledge Exchange at the start of all new interactions as it is more difficult to set up agreements retrospectively.

104. The University expects that researchers should keep good records. Properly dated records in the form of lab books, reports etc are effective evidence of proof of date of invention.

105. All researchers must ensure that collaboration agreements, MTAs etc are implemented to prevent potential legal complications later. These agreements are designed to protect the researcher's right to publish within an appropriate time scale and to work with peer companies.

106. Agreements should be arranged to secure access to data that can be used for Impact case studies years after the project itself has finished.

Conflicts of Interest

107. The University upholds and reflects the principles described at the 2nd World Conference on Research Integrity:

> "Researchers should disclose financial and other conflicts of interest that could compromise the trustworthiness of their work in research proposals, publications and public communications as well as in all review activities."
>
> (2nd World Conference on Research Integrity, 2010)

108. Researchers must be diligent in declaring all conflicts of interest and exercising transparency during the collection of data, dissemination of the results and interpretation.

109. Researchers must report any potential or actual conflicts of interest that includes but is not restricted to, personal or close family affiliation to financial involvement with any organisation sponsoring or providing financial support for projects undertaken by a researcher. This includes when the findings are widely available to both the peer researchers and the general public.

Section C Training and Supervision

Researchers

110. The University is committed to the development of all its staff and aims to develop a flexible and proficient workforce through continued investment in staff development.

111. Staff are expected, with the active support of their manager, to take responsibility for their Continuing Professional Development (CPD).

112. Senior colleagues must ensure that individuals are prepared for the learning and development activities which they undertake and are given time to apply and consolidate their learning. They must also assess the impact of such learning on performance in order to monitor the effectiveness of the provision both for the University and the individual.

113. The University is a current holder of the European HR Excellence in Research award and is committed to the UUK Concordat to Support the Career Development of Researchers demonstrated through the publication of its current action plan in the Supporting Researchers area of the University's website. The plan acknowledges the context within which researcher development occurs and stresses the importance of such development to successful research outcomes and value to the individual researcher.

114. The use of regular informal discussion between the researcher and research leader/supervisor is seen as an important vehicle for identifying learning activities using the Researcher Development Framework as the benchmark.

115. Researchers and research leaders are encouraged to use appraisals and academic investment initiatives as more formal and reported mechanisms for discussions regarding career development and progress.

116. Research leaders and supervisors are encouraged to invest in their own development to enhance outcomes for the research project and the researcher.

117. Research leaders must seek to be familiar with both local and national opportunities including events offered as part of the Staff Development and RFO programmes.

118. Research leaders should also be aware of mentoring schemes offered locally and nationally e.g. by professional associations.

PhD supervisors

119. The University expects its researchers to engage in any training that is necessary to undertake their research and supervisory responsibilities to a high professional standard, and to comply with external benchmarks such as Quality Assurance Agency (QAA) Quality Codes.

120. Postgraduate research student (Masters and Doctorate) supervisors are required to attend the *Training Programme for Research Supervisors* before or alongside starting to supervise, and to update supervisory skills every two years, by attending CPD sessions arranged by the Graduate School.

121. Postgraduate research student supervisors are responsible for the production and authorisation of risk assessments undertaken by research students. Students may not authorise their own assessments however may contribute to the draft of an assessment for their supervisors.

Section D Publication

Researchers must familiarise themselves with the publication terms and conditions of any award or collaborative agreement associated with a research project and ensure all staff and students involved in the research comply with these terms, which may delay or restrict their ability to publish.

Dissemination and Authorship

122. The channels selected for the dissemination of research outputs are a matter of academic freedom provided that any restrictions imposed by any grant, award, contract or other applicable agreement are observed. Decisions will, and should, be informed by discipline, audience, purpose, and timeliness, in keeping with Faculty research dissemination strategies.

123. The University believes that research dissemination is integral to the practice of research, and can bring mutual benefit to the researcher and University in demonstrating the quality of the research undertaken and where that research is taking place.

124. Researchers must consider the intended impact of the research outputs and use this information to identify the most appropriate channel for dissemination.

125. All researchers are expected to maintain a current record of publications and other outputs where they are identified as an author.

126. The University will provide appropriate systems to enable this and training for their use.

127. Research funders can and do ask for records of dissemination undertaken: the University will provide support and guidance on meeting these requirements to minimise duplication of effort.

128. Researchers must disclose all sources of funding, institutional affiliations and conflicts of interests when publishing research.

129. Researchers are responsible and accountable for the accuracy and completeness of their reports and must remember this when disseminating research.

130. Researchers should maintaining good dissemination records as good practice to place researchers and the University in good standing with funding bodies for future research grant applications.

131. Where appropriate, researchers should publish or otherwise make publicly available negative or inconclusive research results.

Open Access

132. Researchers must familiarise themselves and comply with the University's Open access policy located in the digital repository.

133. Researchers must familiarise themselves with any open access expectation of the grant funder and comply appropriately.

134. Open access options for publication must be explored as part of any dissemination activity, and taken advantage of where feasible.

135. The University will offer support and guidance on exploitation of open access to ensure compliance with local and external requirements.

136. Open access publication can be achieved through two routes: Gold and Green. The University Open Access Policy defaults to Green open access. For journal articles this requires that the author's final version of the article be deposited within the University's digital repository; for all other research outputs this is the most appropriate version for archiving and/or making available.

137. Open access to the output will be managed through the Library, respecting any embargoes set by publishers, the University, or other external organisation.

138. Gold open access usually requires the payment of a fee (commonly known as an Article Processing Charge, or APC) to a publisher. Authors are responsible for sourcing any such fees, and may be assisted by their faculty or school on request.

139. Gold open access articles must be deposited into the University's digital repository to meet Higher Education Funding Council for England (HEFCE) Research Excellence Framework (REF) requirements.

Peer review

140. The University promotes a system supporting career development and high quality research excellence. This is achieved by rigorous and systematic review of the research outputs by an appropriate and experienced panel of peers.

141. The University provides an environment that actively supports and encourages peer review of research activities which complies with both the Concordats for Supporting Research Integrity and for Public Engagement invoked by HEFCE.

142. All outputs for submission in the REF must undergo a peer review process to identify and select the highest quality outputs generated within the University reflecting the University's research excellence.

143. The University expects that all outputs are peer reviewed to ensure robust academic excellence of internationally recognised quality.

144. The review process should be rigorous, ongoing and incorporated into the normal Faculty process of output assessment as a means to provide early feedback on research outputs to encourage and improve research quality.

145. Researchers are encouraged to foster a more organised and time efficient approach to the REF2020 by actively participating in a peer reviewing process of research outputs throughout the entire REF period.

146. Establishing a faculty or school Reading Group is encouraged as a standard internal peer review process. Identifying and engaging a group of experienced researchers within the faculty or school to participate in an assessment and feedback process is an effective means to support the production of high quality research and development of early career researchers.

147. Reviewers must not copy, retain or use the material without the expressed consent from the author(s).

148. The material under review must be considered confidential at all times.

149. The review must be conducted to the highest level of professionalism providing honest and constructive feedback.

Section E Risk Management

150. ‘Risk’ is defined in this document as uncertain events that arise within or outside your work environment which could lead to potential harm, or a potential action or event that could cause harm; or impact on the achievement of your objectives.

151. Research inherently has risk associated with it. As a research intensive institution, the University is vulnerable to research misadventure. These vulnerabilities arise from:

- Offsite data collection away from direct supervision
- A large number of projects supervised by a small number of senior staff
- A high level of investigator initiated research not monitored by external bodies
- A heavy reliance on junior staff to supervise data collection and analysis conducted by PhD students and research assistants

152. Researchers must consider the physical and reputational risk to both the individuals involved in the research and the University before embarking on the research project.

153. The University recognises that, while most risks are associated with research projects, some (especially risks to the reputation of the individual researcher and the wider University) can be encountered outside the context of a project (e.g., media interviews, decisions to affiliate with controversial external organisations). Such risks are regarded as part of the day-to-day work of researchers but must also be given careful risk consideration.

154. PIs must consider if the research project requires a risk management plan.

155. PIs must familiarise themselves with the University Research Risk Assessment and Management Policy located on the digital repository. This may include measures such as project progress evaluation points to identify when project focuses may need to change, Thesis Advisory Panels for research students and regular meetings with research leaders.

156. All researchers should take reasonable measures to ensure they are aware of external factors that could impact the research.

157. It must be clear to all involved in the research especially those that are responsible for each area of the project where the risks lie and that they are fully aware of any residual risks remaining once suitable and sufficient controls are in place.

Section F Consultancy and Knowledge Exchange

158. Active engagement with business and other external organisations is an essential part of University activity and is encouraged.

159. Researchers must ensure such interactions are coordinated effectively and carried out to the high quality required to protect and enhance the University's reputation at home and abroad.

160. The University expects that any such interaction delivers financial and reputational benefits to all parties involved and is handled to a high degree of professionalism.

161. Policies detailing expectations and processes required of Commercialisation and Consultancy activity are available on the University Portal (Register of Regulations- Consultancies by Staff). These are reviewed periodically to ensure currency.

162. All such activity is overseen by the Knowledge Exchange team, the University's primary interface with business and the outside world. They can provide advice as required.

Section G Breaches of the Code

Responsibilities

163. The University of Hull takes breaches of the principles and standards as defined in this *Code of Good Research Practice*, *Code of Conduct* and the *Statement of Research Integrity* very seriously and has in place a robust and transparent system to manage allegations.

164. The responsibility for ensuring that research is conducted with integrity and in accordance with all ethical and legal obligations devolves to the researcher.

165. Each member of the University community is responsible for fostering an environment of honesty and integrity as outlined in the *Statement of Research Integrity*.

166. All staff should be diligent in detecting instances of misconduct and address the issue promptly. The procedure for making an allegation is detailed in the *Code of Misconduct* which provides information regarding the appropriate route for reporting and the University's support for the whistleblower.

167. Allegations that are not upheld will be dealt with appropriately by the University's Registrar and Secretary to ensure the reputation of the Respondent and the relevant research project(s) as outlined in Section 34vi. of the *Code of Misconduct.*

Whistle-blowers

168. The University supports all members of staff including research staff to report suspicions or concerns of research misconduct.

169. This support is detailed in the *Policy and Procedure on Disclosures in Public Interest (Whistle-blowing)* located on the University Portal and any

researcher who needs to report any suspicions must consult this document prior to making any formal allegations.

170. All allegations are handled with confidentiality and sensitivity including the identity of the “whistle-blower”.

171. The University has a zero tolerance policy for retribution from other members of staff including researchers during and after the allegation has been investigated. Equally, malicious allegations will be dealt with firmly and appropriately.

UNIVERSITY OF HULL

Appendix 1 Researcher checklist for licences and ethical approval requirements

If you are working with the following you will need to establish whether your project requires the specified licence and ethical approval.

		IRAS[1]	Home office License/permit	University Ethics	Faculty Ethics
1.	Vulnerable adults or children	◯	◯	◯	✓
2.	Human material[2]	✓	◯	◯	◯
3.	Human subjects[3]	✓	◯	◯	✓
4.	NHS patients and facilities	✓	◯	◯	◯
5.	Staff	◯	◯	◯	✓
6.	Students	◯	◯	◯	✓
7.	Animals[4]	◯	✓	✓	◯
8.	Radiation sources	✓	✓	◯	◯
9.	Lasers	◯	◯	◯	✓
10.	Fieldwork	◯	◯	◯	✓
11.	Questionnaires (non-NHS patients)	◯	◯	◯	✓
12.	Overseas data	◯	◯	◯	✓

✓ - required O - not required

[1] All projects requiring IRAS must obtain approval through the Faculty prior to submission.

[2] Excluding human gametes and embryos, consult the HFEA for research using this material.

[3] Some health and social care research study involving human subjects must seek Health Research Authority ethical approval, see category 4.

[4] Researchers will need to establish if the procedures to be undertaken on animals requires a Home Office licence and should consult the faculty ethics officer, HOLC or HoS.

NB. Researchers using or collecting foreign data or material must also comply with any ethical and regulatory requirements of the source country.

Glossary

APC	Article Processing Charge
ARRIVE	Animal Research: reporting In Vivo Experiments
AWERB	Animal Welfare Ethical Review Body
CPD	Continuing Professional Development
CTIMPs	Clinical Trials of Medicinal Products
Defra	Department for Environment, Food, and Rural Affairs
FFO	Faculty Funding Officer
HEFCE	High Education Funding Council for England
HFEA	Human Fertility and Embryology Authority
HoS	Head of School
HOLC	Home Office Liaison Contact
HRA	Health Research Authority
HTA	Human Tissue Authority
ICTD	Information and Communication Technology Department
IP	Intellectual Property
IRAS	Integrated Research Application System
MTA	Material Transfer Agreement
NDA	Non-disclosure Agreement (also known as Confidential Disclosure Agreement)
NHS	National Health Service
PI	principal investigator
PVC-RE	Pro-Vice Chancellor for Research and Enterprise
QAA	Quality Assurance Agency
REC	Research Ethics Committee

REF	Research Excellence Framework
RFO	Research Funding Office
T&C	terms and conditions
UKRIO	UK Research Integrity Office
UUK	Universities UK
UREC	University research and Enterprise Committee
WIPO	World Intellectual Property Organisation

Sources of Further Information

UKRIO ‘Code of Practice for Research: Promoting good practice and preventing misconduct’, September 2009

UKRIO ‘Procedure for the investigation of misconduct in research’, August 2008

‘The Concordat to Support Research Integrity’, Universities UK, 11 July 2012

‘The Singapore Statement on Research Integrity’; 2nd World Conference on Research Integrity; 22 September 2010

Managing Health and Safety in Research October 2012

Responsible Research Publication: International standards for Authors, 11 November 2011