

University Code of Practice Research Misconduct

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| Document Reference: | Research Misconduct | |
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| Version: | 2 06 | Date: October 2014 |
| Approved By: | Senate | |
| Originator: | PVC(R&E) | |
| Application to Collaborative Provision: | not applicable | |
| Responsibilities: | All staff and students involved in research (including taught students involved in research) Deans | |
| Contacts: | Graduate School quality@hull.ac.uk | |
| Applications for exemptions to: Report Exemptions to: | Research Degrees Committee University Research and Enterprise Committee | |
| Cross reference: | Regulations on Unfair Means – QH: F8 | |

Summary/ Description

This code governs research misconduct by staff and students involved in research. It specifies that for allegations against students will be dealt with in accordance with the regulations on unfair means (QH:F8) as a form of unfair means.

ULTAC recommended that the code should apply to all students, rather than just those registered for research degrees, to reflect the importance of sound research practice whenever undertaken.

Version 2 06 (October 14)

- Corrects the link in para. 13.

Version 2 05 (April 14)

- The Code of Practice has been thoroughly revised and expanded throughout. The revisions clarify the standards of professional integrity in research, the scope of the Code of Practice and the definition of research misconduct. The procedures for allegations and investigations have been expanded, identifying those responsible for undertaking investigations and agreeing a thorough and fair standard process.

Version 2 04 (Aug 11)

- Replaces references to Deputy Vice-Chancellor with PVC

Version 2 03 (Sep10) recognises the following changes:

- The revised committee structure

Version 2 02 (Sep 07) made the following changes:

- Replaces references to 'code' on unfair means with 'regulations'
- Replaces references to AAC with Programme Approvals Monitoring and Enhancement Committee (PAMEC)
- Removes reference to Pro Vice Chancellor Academic Affairs

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University Code of Practice Research Misconduct

1. This Code of Practice should be read in conjunction with other relevant processes, including HR processes, PhD regulations, whistleblower regulations, as appropriate.

STANDARDS OF PROFESSIONAL INTEGRITY IN RESEARCH

2. The University is committed by its mission statement to the exploration, creation and communication of knowledge. In fulfilment of this mission, the University is committed to conducting its research professionally, in ways that are both expert and responsible. Research in this context not only means activity defined by the Frascati definition (OECD, 6th edition, 2002) but all work (e.g. consultancy) leading to the public dissemination of the outcomes.
3. The Nolan Committee on Standards in Public Life has made recommendations 'to ensure the highest standards are maintained' in key areas of public life. The Committee properly sees higher education as one of those key areas. 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 and leadership.
4. HEFCE has also stated clearly the requirement for institutions to comply with the Concordat to support research integrity, as a condition of HEFCE grant from 2013-14. (www.hefce.ac.uk/whatwedo/rsrch/rinfrastruc/concordat/). The funding agreements for 2013-14 state: 'The institution is required to comply with the Concordat to Support Research Integrity published by Universities UK in July 2012. Institutions in receipt of research grant from the Council are also required to provide assurance of their compliance with the Concordat through the annual assurance return to the Council and following any guidance that the Council may provide. For 2013-14 only, in recognition that compliance by some institutions may require a period of time to achieve, institutions in receipt of research grant from the Council may provide assurance either of their compliance, or that they are working towards compliance, with the Concordat.'
5. Everyone involved in research in an institution of higher education owes a duty of accountability to society, to their profession, to their institution and to the funders of their research, to accept full responsibility for the integrity of their own conduct of that research, and for the activities of staff or students under their direction. This extends to accountability for the ethical basis of the research, for the safety of all involved in the research process, for the probity of the financial management of the project, and for seeking to provide optimum value for the public or private funds invested in the project. These responsibilities extend in turn to the effective management of any agreed timetable for the project, together with timely provision of any tangible outcomes scheduled to be delivered to an external sponsor. Anyone who has concerns that research misconduct has taken or is taking place has a duty of care to raise those concerns and should feel free to raise them with the Dean of the appropriate Faculty in complete confidence.
6. Investigation of alleged research misconduct may involve other external bodies, either because of the nature of the employment contract of the person(s) implicated or because of the nature of the research. For example, allegations associated with a joint appointment with a local hospital will require involvement of the NHS and perhaps the

General Medical Council (GMC) or other professional body. If the allegation is related to a clinical trial, the Medicines & Healthcare Products Regulatory Agency (MHRA) may need to be involved.

7. This Code of Practice outlines how the stages of a research misconduct investigation should be conducted and how appropriate investigation panels should be organised. The objectives of the Code of Practice are to:
 - ensure that an investigation is thorough and fair;
 - ensure that, by using an agreed standard process, errors in the conduct of an investigation should be minimised; and
 - reassure those who are under investigation that the process of investigation will follow a standard procedure consistent with national best practice.

DEFINITION OF MISCONDUCT IN RESEARCH

8. All members of the University of Hull are expected to observe high standards of professional conduct and integrity in the practice of research and in the publication of research. Any departure from those ethical standards for proposing, conducting and publishing research constitutes research misconduct and is unacceptable to the consensus among members of the University on the standards and values to which they wish to subscribe. The University holds that all the instances of misconduct exemplified by (but not limited to) those outlined below, are unacceptable.
9. The following are examples of research-related misconduct whether deliberate, reckless or negligent:
 - Fabrication;
 - Falsification;
 - Misrepresentation of data and/or interests and/or involvement, including improper allocation or denial of authorship/ contributorship;
 - Plagiarism; and
 - Failures to follow accepted procedures or to exercise due care in carrying out responsibilities for:
 - avoiding unreasonable risk or harm to:
 - humans;
 - animals used in research; and
 - the environment; and
 - the proper handling of privileged or private information on individuals collected during the research or of human tissue/ material.

For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission. In addition, the standards by which allegations of misconduct in research should be judged should be those prevailing in the country in question and at the date that the behaviour under investigation took place.

SCOPE

10. The scope of the policy in this document will be taken to include: all members of the University's academic and academic-related staff; research fellows, assistants and associates; 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. The policy also covers any person(s) not affiliated with or acting on behalf of the University, but who use University premises.

11. Allegations or indications of research misconduct could arise from a number of sources including, but not limited to, (a) specific allegations made by a member of staff or a researcher or a student, (b) concerns highlighted by further research in the area, (c) concerns raised by a person external to the University, such as a research participant or patient, (d) disputes between researchers about the validity of published work (but **excluding** those that are a normal part of the conduct and evolution of original research), (e) concerns raised by a journal [see Wager E, Kleinert S on behalf of COPE Council. Cooperation between research institutions and journals on research integrity cases: guidance from the Committee on Publication Ethics (COPE). March 2012. www.publicationethics.org].

ALLEGATIONS AGAINST STUDENTS

12. Any allegation of misconduct against a student as set out in this code **must** be dealt with in accordance with the regulations on the use of unfair means. Where the student is also a member of staff (e.g. academic staff undertaking a PhD, or a PhD student also employed to do work by the University), the Registrar & Secretary will determine which process should be used.
13. Where an allegation is found proven in accordance with the regulations on unfair means, where the research student is in receipt of external funding for his/her research degree, the relevant funding body **must** be informed of the finding of misconduct and the penalty imposed. Under normal circumstances, an external body **must not** be informed of any allegation which is not proven, **except** when required by a regulatory body or when the funding body requires to be informed that an investigation has been initiated and/or has reached a particular stage, even if no allegation has yet been proven (e.g. <http://www.rcuk.ac.uk/RCUK-prod/assets/documents/reviews/grc/RCUKPolicyandGuidelinesonGovernanceofGoodResearchPracticeFebruary2013.pdf>)

ALLEGATIONS AGAINST STAFF

14. The procedure for handling allegations of research misconduct is separated into two stages: Firstly, an initial assessment to determine whether there is a *prima-facie* case for an investigation, and secondly an investigation to examine and evaluate all the relevant facts, and to recommend an appropriate course of action.

Initial Assessment

15. All complaints/ concerns, whether verbal or written, relating to an alleged act of research misconduct should be made to the Registrar & Secretary, who will immediately inform the PVC (Research & Enterprise) and the relevant Faculty Dean. The identity of the person making an allegation will be kept confidential to the extent that the maintenance of such confidentiality does not hinder or frustrate any related investigation. However, the course of investigation may inevitably lead to the need for the person making the disclosure to provide a statement as part of the necessary gathering of evidence and this could lead to the identity of the person being revealed or becoming obvious.
16. The University does not encourage the making of anonymous allegations, but does encourage a complainant to put their name to any disclosures made. Anonymous allegations will be considered only at the absolute discretion of the University. In

exercising this discretion, factors to be taken into account will include: (1) the seriousness of the issues raised; (2) the credibility of the concern; (3) the likelihood of confirming the allegation from attributable sources.

17. An initial assessment (paragraph 15) of the allegations will be made by the Registrar & Secretary, assisted by a senior independent member of academic staff with relevant expertise, or an external expert where no independent internal expertise exists. If a conflict of interest should exist for the Registrar & Secretary, the assessment will be made by a Pro-Vice-Chancellor other than the PVC (Research & Enterprise). The initial assessment **should** be started within 10 days of the complaint being received and completed, with a written report, within a further 30 days.
18. The Initial Assessor(s) will meet separately with the complainant(s) and with the person(s) concerned to discuss the allegation(s) and to make an initial assessment of the case and how to proceed.
19. The complainant and accused individual(s) will be provided with a copy of the draft report of the assessment and be given an opportunity to comment on the findings, preferably within 1 week of the provision of the report. Only errors of fact or omissions will be grounds for amending the report.
20. The Assessors shall submit the final report to the Vice-Chancellor, recommending one of the following:
 - (i) that the allegations are unfounded and should be dismissed, or
 - (ii) the matter should be referred directly to the University's disciplinary procedures or another relevant University process or to an external organisation, or
 - (iii) the matter should be addressed through education and training or another non-disciplinary approach, such as mediation, or
 - (iv) that there is prima facie evidence of research misconduct as defined above, such that an Investigation Panel should be established to investigate matters further.
21. The decision of the Vice-Chancellor shall be communicated to the complainant(s) and the person(s) concerned.
22. If it is considered that the complainant(s) has been vexatious, the Vice-Chancellor may determine to invoke disciplinary proceedings as appropriate.

Investigation

23. If the Vice-Chancellor accepts the recommendation of an investigation, the PVC (Research & Enterprise) will convene an Investigation Panel. Where the person(s) against whom allegations have been made has responsibilities outwith the University, the appropriate authorities should be informed of the establishment of such a Panel [see paragraph 6].
24. The Investigation Panel will consist of the PVC (Research & Enterprise), the Dean of the Faculty, one member of the Senior Academic Staff appointed by the PVC(R&E) and a further expert member appointed from outwith the University. The external member may

attend the Panel meetings or contribute by correspondence, according to need and availability.

25. If the complaint involves the PVC(R&E), another PVC will chair the Panel. If the complaint involves the Faculty Dean, the PVC(R&E) will invite another Dean to take his/her place on the Panel. The Panel will be serviced by the Faculty Administrator of the appropriate Faculty.
26. The Panel **should** be formed within 10 days of the decision to move to this stage and it should aim to complete its deliberations within a further 2 months.
27. The Panel will take the written allegation(s) from the complainant(s) and invite a written response from the person(s) concerned. and the Panel will proceed to investigate those complaints within the normal requirements of natural justice.
28. The Panel will meet separately with the complainant(s) and with the person(s) concerned, as well as with any relevant witnesses identified by either party or by the Panel themselves during their investigation. The Panel may request a second meeting with any individual should this be deemed necessary, for example by the uncovering of new evidence.
29. The person(s) against whom the allegations are made is/are entitled to be accompanied by another person during the interview(s). This may be a Union representative, a workplace colleague or a friend, but not a legal practitioner.
30. The Panel Chair, on behalf of the Panel, will produce a written report on the conclusions of the Panel, agreed by all members. This **should** be produced within 2 weeks of the conclusion of the Panel meetings. This will include as appendices minutes of each meeting undertaken by the Panel.
31. The object of the Panel report is to recommend to the Vice-Chancellor one of three courses of action, with detailed reasoning which substantiates that recommendation:
 - (a) That the allegation(s) be dismissed;
 - (b) That the allegation(s) is substantiated in whole or in part but that the nature of the misconduct is such that the matter should be disposed of informally, e.g. through an informal warning from the Head of Department or equivalent;
 - (c) That the allegation(s) is substantiated and is such that the University's appropriate disciplinary and dismissal procedures should be invoked in such a manner as the Vice-Chancellor deems appropriate.

In addition the Panel may make other recommendations, including but not limited to:

- (d) Action to correct the research record;
 - (e) Action to uphold the reputation of the University;
 - (f) Referral to another University process, e.g. in relation to fraud;
 - (g) Informing relevant external organisations;
 - (h) Informing research participants;
 - (i) Any other investigation deemed necessary;
 - (j) Any necessary administrative actions, e.g. to meet legal requirements
32. The complainant and accused individual(s) will be provided with a copy of the draft report of the assessment and be given an opportunity to comment on the findings, preferably

within 1 week of the provision of the report. Only errors of fact or omissions will be grounds for amending the report.

33. The Chair will then forward the final report to the Registrar & Secretary, together with any documentation used in the investigation.

Findings and Actions

34. The Registrar & Secretary will:

- i) confirm with the Vice Chancellor his/her acceptance of the recommendations of the Panel report;

- ii) notify the complainant and the accused person(s) in writing of the outcome of the investigation, providing a copy of the final report. The accused person(s) may share the report with their representative in confidence;

- iii) where appropriate, notify in writing and in confidence the outcome of the investigation to (a) any relevant regulatory or professional bodies, (b) any relevant partner organisations, (c) research participants and patients and/or their doctors, (d) any other persons or bodies as he/she deems appropriate, including the editors of any relevant journals;

- iv) take any actions that may be necessary to meet all legal, contractual and ethical requirements, including relevant disclosures to funding bodies;

- v) take any further actions agreed following additional recommendations of the Panel (paragraph 31).

- vi) When an allegation is not upheld, for whatever reason, the Registrar & Secretary 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.

35. The Registrar & Secretary will ensure that all the actions recommended by the Panel and agreed by the Vice Chancellor are taken forward in an appropriate manner, in line with University policies and practice.

36. The final report of the investigation and documentation **must** be maintained by the University for three years from the time the report is delivered to the Registrar and Secretary.

Sources of Further Information

1. Wager E, Kleinert S on behalf of COPE Council. Cooperation between research institutions and journals on research integrity cases: guidance from the Committee on Publication Ethics (COPE). March 2012. www.publicationethics.org
2. UKRIO 'Procedure for the investigation of misconduct in research', August 2008
3. 'The concordat to support research integrity', Universities UK, 11 July 2012; <http://www.universitiesuk.ac.uk/highereducation/Documents/2012/TheConcordatToSupportResearchIntegrity.pdf>
4. UKRIO IN-01 'Guidance for researchers on retractions in academic journals'