

Research Integrity Report 2024-25 – Lancaster University

Section 1: Key contact information

1A. Name of organisation	Lancaster University
1B. Type of organisation: higher education institution/industry/independent research performing organisation/other (please state)	Higher Education Institution
1C. Date statement approved by governing body (DD/MM/YY)	23 rd January 2026
1D. Web address of organisation's research integrity page (if applicable)	https://www.lancaster.ac.uk/research/research-services/research-integrity-ethics--governance/research-integrity/
1E. Named senior member of staff to oversee research integrity	Name: Professor Malcolm Joyce Pro Vice Chancellor: Research and Enterprise
	Email address: m.joyce@lancaster.ac.uk
1F. Named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity	Name: Becky Gordon Head of Research Quality and Policy
	Email address: b.gordon@lancaster.ac.uk

Section 2: Promoting high standards of research integrity and positive research culture. Description of actions and activities undertaken.

2A. Description of current systems and culture

Lancaster requires the highest standard of research integrity from university researchers, irrespective of the source(s) of funding (if applicable), area of research or research group. We are committed to upholding University UK's [Concordat to Support Research Integrity](#) and have been a subscriber to the UK Research Integrity Office since 2011.

Research at Lancaster shall be legal and transparent and conducted in line with the principles of accountability and responsibility, honesty, openness and respect, as set out in our [Research Ethics Code of Practice](#). The University has existing policies and procedures that consider the ethical and reputational concerns highlighted below. Individual responsibility and accountability for adherence to these policies and to conducting research that is always legal and transparent rest with the Principal Investigator or PhD Supervisors.

Leadership:

The University Research Ethics and Integrity Committee (UREIC) leads on research integrity. This committee is Chaired by Professor Malcolm Joyce, Pro-Vice Chancellor for Research and Enterprise, and has a representative membership that includes senior individuals from across all faculties as well as a post-graduate researcher, a Research Associate and independent lay members.

UREIC has a core responsibility to foster and develop a culture of ethical research and research integrity in our research community. UREIC has oversight of the core elements of research ethics and integrity including the commitment to the Concordat to Support Research Integrity.

Centralised support:

[Research Services](#) provides information and guidance relating to the University's research activities at all stages of development, completion, or dissemination. All applications for externally funded research have a designated member of the team to support researchers in the project development. Through this support any ethical, reputational or other concerns can be flagged at the pre-application stage. Additional support teams provide assistance after the award of funding, or for unfunded projects, to help researchers and research teams ensure they are acting with integrity and accordance to all legal and other requirements during their project.

Researcher development:

Training is offered to all research staff and PhD students at Lancaster which covers a range of topics. Specific training for both ethics and integrity is available online and the modules are available to all staff and PGRs. From October 2024 core modules from both packages are mandatory for selected members of staff and all PGRs. In addition, all staff are required to take,

and regularly refresh, mandatory training on EDI, health and safety, mental health awareness and information security.

Safeguarding:

Designated Safeguarding Leads (DSLs), Deputy DSLs and Local Safeguarding Officers have continued to deliver a programme of safeguarding awareness-raising across the University to embed understanding of safeguarding responsibilities and reinforce the role of all staff in maintaining a safe environment. In addition, specific staff groups have been identified as requiring [Safeguarding training](#), although the training is available to all staff.

Research self-assessment:

All externally-funded research projects must be costed and approved through [ACP](#), the University's costing and pricing tool and the Principal Investigator (PI) must complete the researcher self-assessment in the [ACP governance checklist](#). PIs and PhD supervisors have responsibility to ensure they assess all their research, including un-funded research that is not logged through ACP, and flag up issues for consideration through one or more established routes (e.g. Faculty Research Ethics Committees) or seek advice from Research Services.

Funding approval:

The ACP process includes the [approval stage](#). All externally funded applications for research will go to the relevant Head of Department (HoD) for approval. HoDs can view the financial cost/recovery, research partners and researcher self-assessment. At this stage HoDs can raise any concerns before approval. Depending on the size of the application further approvals may be required from the Faculty Executive Dean/Research Institute Director, or, for the largest value projects, the Director of Finance and Vice-Chancellor. Applications requiring institutional match funding are considered by the University Planning and Resources Group. At any stage of this approval process integrity questions may be raised and the process of approval halted.

Ethical approval:

Ethics committee approval is required for activities that directly involve humans, human tissue, data relating to humans, or other ethical issues that have been raised. It is the responsibility of the Principal Investigator, or PhD Supervisor, to decide whether ethical approval is required.

An application for ethical approval must be submitted to the relevant Faculty Research Ethics Committee (FREC) via our digital approval system [REAMS](#). Approval must be gained prior to any work being undertaken. Details of the internal processes can be found in the [Procedures for Research Ethics Approval](#). FREC review is also a route to raise potential conflicts of interest.

UREIC has oversight of all FREC activity; it makes decisions on applications referred up from the FREC and undertakes periodic reviews of FREC approvals. The total number of FREC applications received 2020-21 to 2024-25 are shown in Table 1, together with those funded projects identified by the researcher as not needing ethical review via the ACP governance checklist.

Table 1: Submitted Research Ethics Applications

Annual totals	2020-21	2021-22	2022-23	2023-24	2024-25
Total reviewed	542	625	643	755	730
FREC review not needed	146	206	158	186	178

Clinical research sponsorship:

All research projects that require approval from the Health Research Authority gain appropriate ethical review (via either an NHS Research Ethics Committee or relevant FREC) and project sponsorship prior to commencing. Where Lancaster University provides sponsorship, the process is overseen, and approval granted by, the Health and Social Care Research Sponsorship Committee and researchers are supported by a clinical research governance team. Related policies, procedures and templates are [available to researchers on our webpages](#), table 2 shows the number of sponsored projects over the last five years.

Table 2: Sponsored Clinical Research Projects

	2020-21	2021-22	2022-23	2023-24	2024-25
Total sponsored	16	23	28	28	18

Research due diligence panel:

The University assesses the financial, operational, and reputational risk of research projects, including working with certain research funders and partners and in accordance with our acceptance of external funding policy. Due diligence checks are a requirement of several research funders including UKRI. A series of checks to identify and manage risk are completed before an activity is approved to proceed using the [ACP governance checklist](#). If appropriate, further due diligence checks are undertaken by the [Research Development](#) team in liaison with the PI and research partners. A partner questionnaire and a due diligence checklist are submitted as documentary evidence to the Research and Enterprise Due Diligence Panel for approval or recommendation.

Philanthropic fundraising:

The University has an [Ethical Giving Policy](#) for staff engaged in fundraising activities, ensuring that due diligence is observed when assessing whether or not to accept significant benefactions or establish specific philanthropic relationships. A due diligence and review process is overseen by the Director of Development & Alumni Relations and through a Gift Review Panel.

Animal research:

All research on animals, or their tissues, is dealt with by the Animal Welfare and Ethical Review Body (AWERB) in accordance with the requirements of the Animal (Scientific Procedures) Act 1986 (amended 2012). Prior to any work being conducted, each project must have undergone a rigorous and objective review by AWERB, whose membership includes lay persons, scientists, and those with veterinary and animal care expertise.

Export controls:

The University engages widely in international research collaboration, global movement of researchers and the exchange of new ideas in pursuit of its mission to undertake excellent research and provide world-class education. However, some of the knowledge held, goods used, and activities conducted by academics and researchers have the potential to be misused and are therefore subject to UK export control law. Export controls are needed for a variety of reasons, including national security and international treaty obligations. Compliance with export controls is a serious obligation and the University has a [statement on Export Controls](#) and [guidance](#) is available to help build awareness and to ensure compliance.

Nagoya Protocol:

Each country has rights over the genetic resources that exist within their country such as animals, plants, and organisms as well as the associated traditional knowledge. The [Nagoya Protocol on Access and Benefit Sharing](#) is an international agreement establishing a legal framework to govern access to genetic material including the associated traditional knowledge, and ensure that benefits arising from the use of these resources are shared fairly. University [guidance](#) is available to help researchers who source or use such material to exercise diligence to ensure that genetic resources and traditional knowledge associated with those resources have been accessed in accordance with applicable access and benefit sharing laws implemented by the source country.

Open research:

The Open Research team in the Library work with our research community to enable Open Research. They champion the notion that scholarly and scientific knowledge (and data) should be shared as early and freely as possible in the research process across all disciplines, both within and beyond academia. By aiding the development of open research skills and practices, we are working towards more reproducible, accessible, and rigorous research at Lancaster. Oversight in this area is provided by our Open Research Group with membership including senior academic research leaders from all faculties, Research Services, and the Library.

Other policies relating to research:

Other University policies and procedures impact on our approach to upholding the highest standards of research integrity and individual responsibility and accountability. These include:

- Raising Serious Concerns and Disclosing Public Interest Matters ([Whistleblowing](#))
- Misconduct in Research [Procedure](#)
- Code of Practice on [Freedom of Speech](#)
- Health and Safety [Policy](#)
- [Safeguarding in Research](#) Statement and Policy
- Bullying, Harassment and Sexual Misconduct (BHSM) [Policy](#)
- [Financial Regulations](#)
- Anti-bribery and Corruption [Policy](#)
- Rules Governing [Outside Professional Activities](#)
- Intellectual Property [Policy](#) and Support
- [Equality, Diversity and Inclusion](#)

- [Sustainability](#)
- [Research Data Policy](#) and [Data Protection](#)

A full list of all University policies and procedures can be found [here](#).

2B. Changes and developments during the period under review

Digital ethics approvals:

The digital research ethical approval management system (REAMS) was launched in 2021 to reduce administrative load for applicants, academic reviewers and professional services staff, saving valuable time whilst enhancing the experience for the community to further foster an environment of excellent research integrity. In July 2023, a survey was circulated to gather information on how users have adapted to the digital system and to request feedback so that developments that could be implemented in future versions. The survey examined each area of the system including functionality, navigation, accessibility, guidance, processing times and future development ideas; it was sent to all types of user. Recommendations were implemented to improve the flow and administration access within the system. Other changes were made to improve clarity of use including adjusting wording of questions and information boxes, changing layout and the order of the questions. Self-review was also removed, at the request of the FRECs, due to a low number of projects being eligible.

Sponsorship approvals:

The Health and Social Care Sponsorship Committee oversees sponsorship of clinical projects working in a Health and Social Care setting. Proportionate review has been trialled over several years and four levels relating to project risk were confirmed this year. A study falling into the highest level is unlikely to be sponsored by Lancaster at this time but are considered on a case-by-case basis with appropriate controls, management and monitoring put in place by agreement to assist with institutional development to potentially expand acceptable risk levels in the future. Where the University is unable to sponsor, researchers are given support to work with external organisations who will be able to provide sponsorship.

Researcher training:

During 2022-23, two new digital training packages were purchased Research Integrity 2.0 (an updated version of previous institutional provision) and Ethical Research which includes new modules called 'becoming an ethical researcher' and 'research ethics in practice'. Following consultation within the research community in 2023-24, UREIC and the University Executive Board (UEB), agreed elements of this training were to be rolled out to certain parts of the research community as mandatory training. Completions were monitored during 2024-25 by UREIC and reference to the required training has been included in relevant documentation such as the Manual of Academic Regulations and Procedures for postgraduate research students. Uptake of training for whom it is mandatory has been increasing throughout the year and feedback from those who have completed the courses has been positive.

Cuppa Conundrums:

Lancaster was awarded £1m from the Wellcome Trust for institutional research culture development. The project titled 'Reimaging Research Practices' has a work package specifically focused on ethics and, in 2024-25, has been delivering 'Cuppa Conundrums' - safe spaces for ethical discussions. Topics included using social media data and deepfake technology.

2C. Reflections on progress and plans for future developments

Digital approvals:

The digital system REAMS will be further reviewed and adapted during 2025-26. Firstly, to address system accessibility issues and secondly to review and refine system workflow and forms to improve user experience. As part of this process, the integration of the sponsorship approval process will be considered to provide a consistent user pathway for university approvals, however due to the smaller number of applications this is not a major priority for 2025-26.

Researcher training:

Discussions have been held at UREIC and the University's Research Culture Strategic Advisory Group during 2024-25 that ideally the mandatory requirement for the ethics and integrity training packages would be expanded to include all staff. This will be recommended for reconsideration by senior committees in 2025-26.

Research misconduct:

Lancaster takes any concerns raised about the conduct of research very seriously – see section 3 of this report. Although not all allegations result in formal research misconduct investigations any issues that need institutional, or local (e.g. departmental), action are discussed at UREIC. Discussions of allegations happen anonymously but allow UREIC to agree actions for improvements to policy or process. Issues discussed this year include staff and student training (see researcher training above) and poor publication practice. To address the latter the university library is looking to produce a good publication guide during 2025-26.

Institutional responsibility:

A small number of issues have been flagged during 2024-25 where no committee, faculty/department or professional service division has clear responsibility. These include oversight of human tissue management, overseas health and social care research and non-NHS interventional research. Institutional level discussions to resolve the ambiguity have begun and aim to be resolved within 2025-26.

Ethics policy:

During 2025-26 the University's Research Ethics and Governance Code of Practice will be reviewed and updated with the intention of retitling as an Ethics Policy. A researcher from the Wellcome Trust funded Reimaging Research Practices project has been using linguistic analysis to study the language used across sector university sustainability policies and the findings will

influence both the development/refresh of the Code of Practice and the above-mentioned new good publication guide.

Section 3: Addressing research misconduct

3A. Statement on processes that the organisation has in place for dealing with allegations of misconduct

Lancaster is committed to the highest standards of research integrity and takes any concerns raised about the conduct of research undertaken by any staff member or research student very seriously. To ensure that both internal staff and students and external individuals feel able to report suspected instances of research misconduct we ensure that all our research webpages are publicly available to encourage an open environment, this includes information about our research misconduct procedure.

The University's [Procedure for the Investigation of Misconduct in Research](#) was updated in 2021 in line with the [procedure published by the UK Research Integrity Office](#). It provides a transparent, timely, robust and fair process for dealing with allegations of research misconduct. Other relevant policies and procedure are listed in section 2A of this report.

In the event of an issue being raised to the University under a specific policy or procedure that may/does not fit with the criteria within, a decision on where best to investigate/deal with the matter is made by the senior staff in charge of the relevant processes. Each policy or procedure articulates, where appropriate, how they may relate or interact with each other.

During the year changes have been made to the way in which research misconduct complaints are managed. A small team within Research and Enterprise Services now shares workload between them avoiding single points of failure for individual cases thus ensuring that progress is made during planned and unexpected leave. A shared email account has been created to simplify communications and to enable the shared work managing the case load.

A new misconduct investigation procedure will be rolled out in 2025-26 that provides a revised screening process designed to reduce the stress and burden for all persons involved in the process. This change is introduced in line with sector guidance and following the second edition of UK Research Integrity Office's template investigation procedure. The new process will normally be to conduct a screening review by one senior academic member of staff rather than to form a panel. Feedback from individuals involved (across the sector and at Lancaster) was that a screening panel followed by a formal panel appeared to repeat a step in the investigation which added stress, particularly to the Respondent, and burden to all involved.

Other changes in the new procedure include a clearer initial review stage and more detailed examples of actions that might be implemented following the end of the investigation at any stage. The University will use the opportunity of the new procedure's release to promote the importance of raising research concerns across the research community. This will be promoted alongside other university policies to ensure the continuation and strengthening of an environment where researchers are confident that concerns are heard and investigated appropriately. In addition, where possible, references to the University's misconduct procedure will also be integrated into the new integrity training provision.

During 2024-25 the university opened three formal investigations into research misconduct concerns, two of these concerns were first raised in 2023-24 and the other during 2024-25.

Several other concerns were raised in year (see 3B), but these are either still undergoing earlier review stages in line with our procedure, or were deemed not to require a formal investigation.

3B. Information on investigations of research misconduct that have been undertaken.

*Please complete the table on the number of **formal investigations completed during the period under review** (including investigations which completed during this period but started in a previous academic year). Information from ongoing investigations should not be submitted. An organisation's procedure may include an initial, preliminary, or screening stage to determine whether a formal investigation needs to be completed. These allegations should be included in the first column but only those that proceeded past this stage, to formal investigations, should be included in the second column.*

Type of allegation	Number of allegations			
	Allegations reported to the organisation	Formal investigations	Upheld in part after formal investigation	Upheld in full after formal investigation
Fabrication				
Falsification		1		
Plagiarism		1		
Failure to meet legal, ethical and professional obligations	3	1		
Misrepresentation (e.g. data; involvement; interests; qualification; and/or publication history)	1			
Improper dealing with allegations of misconduct				
Multiple areas of concern (when received in a single allegation)				
<i>Other</i>	1			
Total:	5	3	-	-