

Procedure for Investigating Potential Research Misconduct

Addressing Concerns Regarding Research Integrity

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Referenced policies and documents

Universities UK: [Concordat to Support Research Integrity](#)

UK Research Integrity Office: [Procedure for the Investigation of Allegations of Misconduct in Research](#)

Lancaster University: Research Ethics and Research Governance [Code of Practice](#)

Lancaster University: [Raising Serious Concerns and Disclosing Public Interest Matters \(Whistle blowing\)](#)

Lancaster University: [Disciplinary Procedure](#)

Lancaster University: [Manual of Academic Regulations and Procedures](#)

Lancaster University: [Student Discipline Regulations](#)

1. Principles

- 1.1. Lancaster University expects the highest standard of [research integrity](#) from university researchers, irrespective of the source(s) of funding, area of research or research group. The University's [Code of Practice](#) sets out our commitment to research integrity and our expectations from our researchers. The University is committed to upholding University UK's [Concordat to Support Research Integrity](#).
- 1.2. The University uses the definition of research misconduct taken from the Concordat to Support Research Integrity: *research misconduct is characterised as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. It can cause harm to people and the environment, wastes resources, undermines the research record and damages the credibility of research.* A full definition is available in [Appendix 1](#).
- 1.3. For concerns that do not fall within the definition of research misconduct, the University's [Raising Serious Concerns and Disclosing Public Interest Matters \(Whistle blowing\)](#) policy will be referenced. Lancaster University Statutes take precedence over anything set out within this Procedure.
- 1.4. This Procedure provides a blueprint for how the stages of investigation will be conducted and will be followed as closely as is practicable. It has been developed using the UK Research Integrity Office (UKRIO) [Procedure for the Investigation of Allegations of Misconduct in Research](#). UKRIO's procedure will be referred to for any additional information/guidance.
- 1.5. The objectives of the Procedure are to:
 - ensure that an investigation is thorough, transparent and fair, conducted in a timely and transparent manner and with appropriate confidentiality;
 - demonstrate that, by using an agreed standard process, there should be fewer errors in the conduct of investigations; and
 - reassure those raising concerns, who are under investigation and other parties, that the process of investigation will follow a standard procedure adopted nationally by other research universities.
- 1.6. By adopting and following the Procedure it should be possible to:
 - establish the ethos and mechanisms by which misconduct in research may be addressed appropriately, investigated effectively, handled fairly, in a timely manner, and with an appropriate balance of confidentiality and transparency;
 - assess whether the allegations have substance and should be addressed through the Procedure, or other means, or be dismissed;
 - conclude through full investigation whether, on the balance of probabilities, the evidence upholds the allegations of intentional misconduct in research;
 - produce a report to initiate appropriate action.
- 1.7. Those responsible for carrying out investigations within this Procedure will act following principles of fairness, confidentiality, integrity and prevention of detriment. There may be occasions when a balance must be struck in the application of the Principles.
- 1.8. All proceedings must be conducted under the presumption of innocence and carried out with sensitivity and as confidentially as is reasonably practicable. The confidential nature of the proceedings will be maintained provided this does not compromise either the investigation of

the misconduct allegations, any requirements of health and safety, or any issue related to the safety of participants in research.

- 1.9. All reasonable steps will be taken to ensure that the Respondent (or any other party) does not suffer because of unconfirmed or unproven allegations. The University may choose to suspend the implementation of any promotion, completion of probation or any similar step, for the period that allegations are investigated using the Procedure, rather than delay the actual consideration of such matters.
- 1.10. Those using this Procedure will take advantage of advice and guidance available from Lancaster University Research Services, UKRIO, and other relevant bodies, and will seek legal advice where appropriate and necessary.
- 1.11. The Named Person will decide whether to initiate or continue investigations in light of any significant developments such as:
 - the Initiator withdrawing the allegation at any stage;
 - the Respondent admitting, or having admitted, the alleged misconduct, in full or in part;
 - the Respondent or the Initiator resigning, or having already resigned, their post.
- 1.12. While the allegations are under investigation using this Procedure, the Initiator, the Respondent, or any other persons involved in this Procedure should not make any statements about the allegations to any third parties, unless formally sanctioned by the University or otherwise required to by law.

2. Named Person

- 2.1. The Named Person and senior officer responsible for dealing with cases of potential misconduct is the Pro Vice-Chancellor for Research and Enterprise. In their absence, or where there is a conflict of interest, the Deputy Vice-Chancellor is their nominated alternate, unless otherwise selected by the Vice Chancellor.
- 2.2. The Named Person has responsibility for:
 - receiving any allegations of misconduct in research;
 - initiating and supervising the Procedure for investigating allegations;
 - maintaining the information record during the investigation and subsequently reporting on the investigation with internal and external contacts; and
 - taking decisions at key stages of the Procedure.
- 2.3. Dealing with research misconduct cases can be complex and difficult. Whilst the intention is for the Procedure to be as comprehensive as possible, it cannot cover all scenarios that will occur during any specific case. Integral to running an investigation well is the need, on occasion, to make informed judgements in difficult situations. The Named Person is responsible for resolving any conflicts, that may involve deviation from the Procedure, keeping in mind at all times that the primary goal is to determine the truth of the allegations. They will decide the course of action to be taken in cases of doubt.
- 2.4. The first point of contact for queries regarding research misconduct is Research Services via researchmisconduct@lancaster.ac.uk. Access to this mailbox is restricted. A Case Manager will implement elements of this Procedure under the oversight of the Named Person and as such will be a key liaison for the Initiator, Respondent, and any investigators in the use of this Procedure.

3. Scope

- 3.1. This Procedure allows full and fair investigations of allegations of misconduct in research brought by any internal or external sources. Such allegations might be brought to the University as the employer of the individual against whom the allegations are made, or in another capacity, such as the host or Sponsor of the research.
- 3.1.1. The Procedure will apply to (but is not limited to) research conducted by:
- A current or former member of staff
 - A current or former Postgraduate Research Student (see 3.5)
 - A person with visiting, honorary or emeritus status or a joint clinical contract
 - An independent contractor or consultant, or anyone carrying out research under the supervision/direction of a University staff member
- 3.1.2. After an investigation into allegations where a Respondent is not a current member of staff/student, the Named Person will determine the nature of any further action to be taken in relation to the investigation and its outcome.
- 3.2. The Procedure will only be used for investigating intentional and/or reckless behaviour set out in the definition of misconduct in research (see [Appendix 1](#)). Allegations relating to other forms of misconduct will be investigated using the appropriate University procedure(s).
- 3.3. In research, situations arise that might present as misconduct but are the result of either a misunderstanding or a dispute between individuals. In these cases, it may be appropriate to resolve matters through informal action, mediation, arbitration and/or dispute resolution. In such situations, the Procedure beyond [Section 6](#) (Assessment of Allegations) will only be used if the informal route is inappropriate due to the serious nature of the allegations, or where mediation and/or arbitration has been refused or proved unsuccessful.
- 3.4. The Procedure is neither a disciplinary nor a legal process and must not be considered as such. It is designed to be used in its entirety prior to any use of Lancaster University's standard disciplinary process. It is intended to allow the full and fair investigation of research-related issues, using an expert panel to investigate the matters raised, to reach a conclusion on any allegations prior to considering any disciplinary or other non-disciplinary steps that might be required or recommended. Information gathered in the course of an investigation may become relevant to, and disclosed in, any such disciplinary or regulatory process.
- 3.5. If the Respondent is a current/graduated Postgraduate Research Student registered at the University the Named Person, seeking appropriate advice as needed, will decide whether the complaint falls under the scope of this procedure using the following criterion:
- 3.5.1. If the alleged misconduct is within the research process (including, but not limited to ethics approvals, data management and dissemination), even if identified through a formal assessment process, the complaint WILL fall under the scope of this Procedure.
- 3.5.2. Complaints raised against a Postgraduate Research Student outside of the research process, or where the Respondent is an Undergraduate or Taught Postgraduate Student registered at Lancaster University, are NOT in the scope of this Procedure and fall under the [Manual of Academic Regulations and Procedures](#) or the [Student Discipline Regulations](#).
- 3.6. Throughout the Procedure additional or counter-allegations may be raised by any party, the Named Person will decide if they will be investigated separately or with the initial allegation.

4. Raising Allegations

- 4.1. Allegations of research misconduct should be made to the Named Person via Research Services researchmisconduct@lancaster.ac.uk. The Initiator (see 12.2) should make a detailed formal written submission accompanied by any supporting evidence that is available to them.
- 4.2. Initiators will normally be required to put their name to any allegations they make. However, it is recognised that Initiators can be concerned about revealing their identity. Anonymous allegations, or matters that are identified where there is no specific Initiator, will be considered at the discretion of the Named Person, taking account of the seriousness of the concerns raised and the likelihood of confirmation of the concerns from alternative sources/evidence.
 - 4.2.1. The Named Person will decide on a case-by-case basis, if/when to disclose the identity of the Initiator to the Respondent and will advise the Initiator in advance.
- 4.3. Allegations which are in any way linked to the Named Person or which raise the potential for a conflict of interest for the Named Person will immediately be referred to the Named Person's alternate who will then oversee the Procedure. The Named Person will declare any such conflicts which include links with any persons involved (Respondent or Initiator) or where the Named Person is in some way concerned with the subject matter of the allegations.
- 4.4. A Case Manager will formally acknowledge receipt of the allegations via email to the Initiator, informing them the allegation will be considered initially under the Assessment of Allegations stage of the Procedure. A copy of the Procedure will be provided.
- 4.5. Concerns about the fair handling of the Procedure should be directed to the Named Person in the first instance or to the Vice Chancellor if the concerns involved the Named Person. If concerns are upheld, the Named Person or Vice Chancellor may wish to restart this Procedure at an appropriate stage with the alternate Named Person and/or new panel members.

5. Record Keeping

- 5.1. All documentation and communications relating to all stages of this Procedure will be passed through a Case Manager and confidentiality will be maintained.
- 5.2. Following the conclusion of proceedings, records will be retained for a period that accords with the University's records retention policy. Access to this archive is limited.
- 5.3. If the University's [Disciplinary Procedure](#) is to be invoked as a result of the outcome of this Procedure, all the information relating to the Procedure will be transferred to the Disciplinary Panel.
 - 5.3.1. Depending on the outcome of the Procedure, the Named Person will liaise with the Director of People and Organisational Effectiveness to obtain any further relevant information from any relevant parties and add it to the confidential case archive.
- 5.4. All parties involved must inform the Case Manager immediately of any interests that they have which might constitute a conflict of interest. The Named Person will decide if an interest declared warrants exclusion from involvement in the investigation and record the reasons for the decision.

6. Assessment of Allegations

- 6.1. Allegations will be assessed to determine the most appropriate method to investigate or otherwise address. Assessment is conducted by the Case Manager, with external advice as needed using the below considerations in order. The Named Person will agree any proposed outcomes of this stage (as summarised in [Appendix 2](#)).
- 6.1.1. Where possible, the assessment will normally be completed within 15 working days from the receipt of the allegations. Any delays will be explained to all parties via email, and a revised completion date given.
- 6.1.2. Appeals to any decision(s) made during the Assessment stage may be submitted in accordance with the criteria set out in [Section 11](#).
- 6.2. **CONSIDERATION 1:** The nature of the allegation may mean that it is necessary to immediately gather evidence and/or notify the appropriate legal or regulatory authorities at the earliest practicable opportunity. This may be in situations where an activity is potentially or actually illegal and/or a danger to persons, animals and/or the environment.
- 6.2.1. As a consequence of such notification, the University may be required to comply with an investigation led by a legal or regulatory body, which will take precedence over this Procedure. The Procedure may continue in parallel but may have to be suspended, concluded later, or declared void by the Named Person.
- 6.2.2. In these cases, the Named Person will take immediate appropriate action (in accordance with the University's processes for the management of risk) to ensure that any such potential or actual danger/illegal activity/risk is prevented/eliminated. In taking such actions it will be made clear to all parties that the actions taken are not to be regarded as disciplinary action and do not in themselves indicate that the allegation is considered to be true by Lancaster University.
- 6.3. **CONSIDERATION 2:** Where allegations include behaviour subject to defined sanctions in the University's disciplinary or other investigatory process, then the Case Manager will take steps to refer to that process. This Procedure may continue in parallel with other processes but may have to be suspended, concluded later, or declared void by the Named Person.
- 6.4. **CONSIDERATION 3:** The nature of the allegations will be reviewed by referring to the definition of misconduct in research detailed in [Appendix 1](#).
- 6.5. Where the allegations are **outside the definition** the assessment and use of this Procedure will conclude and the Named Person will communicate to the Initiator in writing:
- the reasons why the allegations cannot be investigated using this Procedure;
 - which process for dealing with complaints might be appropriate for handling the allegations (if any); and to whom the allegations should be reported.
- 6.6. If the allegations are judged to **fall within the definition** of research misconduct, the Named Person will inform the Respondent normally via email that allegations have been made which involve them. The Respondent will be offered a confidential meeting with the Case Manager and a People and Organisational Effectiveness (POE) representative to discuss the Procedure, they will be invited to attend the meeting (and any future meetings) with a colleague or Trade Union representative if required. This individual will provide support to the Respondent. They are not considered part of any investigation that might follow and can only query procedure.

- 6.6.1. The purpose of this notification is to inform the Respondent that allegations of misconduct in research have been made against them. It will be made clear that at this stage the allegation is being initially assessed and an investigation into research misconduct is not taking place (although this might follow).
- 6.7. **CONSIDERATION 4:** The Case Manager may decide that insufficient information has been provided by the Initiator to assess the allegations. In such cases, the Initiator will be given an opportunity to provide further information before a final decision is reached on whether further assessment or any investigation can take place.
- 6.7.1. A decision to stop assessment due to insufficient information will be reported via email to the Respondent, Initiator and any parties who have knowledge of the allegation.
- 6.8. **CONSIDERATION 5:** The assessment will then determine the seriousness of the allegations, whether they are clearly mistaken, frivolous, vexatious and/or malicious, or the result of poor practice, deliberate action or a misunderstanding (by the Respondent or between individuals). The Case Manager may decide it is necessary to contact the Initiator, Respondent, or other parties to seek information or ask questions to carry out this assessment.
- 6.8.1. In circumstances where it is acknowledged that problems exist between individuals, it may still be appropriate to conduct an assessment to establish whether the allegation has sufficient substance to warrant an investigation.
- 6.9. If the Named Person decides that **the allegations are without substance as they are mistaken, frivolous, vexatious and/or malicious**, the allegations will then be dismissed. For potential subsequent actions see 10.3.2 and 10.3.3.
- 6.9.1. This decision will be reported via email to the Respondent, Initiator and any parties who have knowledge of the allegation.
- 6.10. **Allegations that are considered by the Named Person not to be serious or deliberate in nature, the result of misunderstanding, poor practice or disagreement between individuals** will, where possible, be resolved by remedial measures (including arbitration and/or dispute resolution) without the requirement for any further steps of this Procedure. For potential subsequent related actions see 10.3.5-7.
- 6.10.1. This decision will be reported via email to the Respondent, Initiator and any parties who have knowledge of the allegation
- 6.11. **CONSIDERATION 6:** In considering the allegations and the information available, the Named Person may decide that additional investigations into related but separate issues of misconduct in research need to be instigated and/or reported to other organisations.
- 6.12. Following assessment of the above considerations, if the allegations cannot be entirely discounted, or resolved through remedial measures, the next steps of the Procedure will be followed. Otherwise, the use of the Procedure concludes at this point with all parties informed as per above.

7. Informing Relevant Parties

- 7.1. If the Procedure is to be used to investigate the allegations, the Case Manager will investigate the contractual staff/student status of the Respondent and the contractual details specific to the research project(s) related to the allegations. If Lancaster University is not the Respondent's primary employer, the Named Person will contact the Named Person of the Respondent's primary employer and inform them of the allegations and the completed assessment.
- 7.2. An external sponsor, funder and/or collaborators might have a valid interest in, or responsibility for, the way that the investigation is conducted. The Case Manager will confirm whether the University has any contractual/legal obligations towards such organisations concerning any aspects of the investigation and ensure that any such obligations are fulfilled at the appropriate time. The Case Manager will ensure that the rights of the Respondent and Initiator, and the integrity of the investigation are not compromised by any such actions.
- 7.3. The Case Manager will update the Respondent via email that the allegations will be investigated using the Procedure. A summary of the allegations in writing will be given to the Respondent (and their representative by agreement) together with a copy of the Procedure.
 - 7.3.1. If the allegations are made against more than one Respondent, the Case Manager will inform each individual separately and, where appropriate/possible, not divulge the identity of any other Respondent(s).
- 7.4. The Case Manager will update the Initiator that the allegations will be investigated using the next stage of the Procedure.
- 7.5. Where a person involved in the investigation has difficulties at any stage of the Procedure due to a disability they should discuss this with the Case Manager as soon as possible and reasonable adjustments will be made to ensure they are able to fully participate.

8. Screening Process

- 8.1. The Named Person will appoint an Investigator to undertake a Screening Process that will determine whether there is *prima facie* evidence of misconduct in research that warrants a Full Investigation or whether alternative remedial action should be taken. The Investigator will normally be an experienced member of academic staff from within the University, will be supported by the Case Manager and may seek internal/external advice from relevant experts.
 - 8.1.1. The Named Person may, on occasion, decide that the Screening Process should instead be conducted by a Screening Panel consisting of two or three persons that may include external members. This decision will be made on a case-by-case basis.
 - 8.1.2. Both the Respondent and Initiator may raise concerns about the person(s) chosen to undertake the Screening Process but neither has a right of veto over those nominated.
- 8.2. Every effort will be made to conduct the Screening Process as quickly as possible without compromising the Principles of the Procedure. A range of factors can influence the time taken, these include (but are not limited to) complexity of the matter, the volume and accessibility of evidence, the need to make reasonable adjustments and the availability of those involved. Any delays will be explained to all parties via email.

- 8.3. The Investigator will gather information from the Initiator and Respondent (via email and/or via separate interviews) to support their investigation. Along with any additional information, they will review and assess the evidence provided to determine whether the allegation:
 - i. is mistaken, frivolous, vexatious and/or malicious so should be dismissed;
 - ii. should be referred directly to another internal or external process;
 - iii. has some substance but due to its relative minor nature or because it relates to poor practice rather than to misconduct, will be addressed through remedial measures; or
 - iv. is sufficiently serious and has sufficient substance to justify a Formal Investigation.
- 8.4. The Respondent will be invited to submit evidence for consideration and will normally be provided with other evidence collected by the Investigator (redacted as required to maintain confidentiality) prior to any interview. The written statement of complaint will not normally be provided in full but will be summarised.
- 8.5. The Investigator will write a report outlining the outcome using the standard of proof “*on the balance of probabilities*” meaning the activity was more likely than not to have occurred.
 - 8.5.1. The report will be sent to the Initiator and the Respondent for comment on matters of factual accuracy with a deadline. Extensions to the deadline will only be considered in exceptional circumstances. The Investigator will consider responses received and, if they consider that the report includes errors of fact, will correct the report as necessary.
- 8.6. The Investigator will then submit their final report to the Named Person and should play no further part in the Procedure apart from any required clarifications.
- 8.7. The Named Person will then decide the next steps (see 8.6.1-3) and may choose to convey these to the Initiator, the Respondent and/or any other persons or bodies they deem appropriate, in full or in part, along with a copy of the final report. Appeals may be submitted in accordance with the criteria set out in [Section 11](#).
 - 8.7.1. When the allegations are considered mistaken, frivolous, vexatious and/or malicious, they will be dismissed. **The investigation using the Procedure then concludes at this point.** For potential subsequent actions see 10.2.2 and 10.2.3.
 - 8.7.2. When the allegations have some substance, but due to a lack of clear intent to deceive or due to their relatively minor nature, the matter should be addressed through remedial measures. **The investigation using the Procedure then concludes at this point.** For potential subsequent related actions see 10.2.5-7.
 - 8.7.3. When the allegations are sufficiently serious and have sufficient substance to warrant recommending a Formal Investigation, the Case Manager and Named Person will take immediate steps to set up a Formal Investigation as quickly as possible.
- 8.8. Where the allegations are to be investigated through a Formal Investigation, the Case Manager will inform the Vice Chancellor, Director of People and Organisational Effectiveness, Director of Research, Enterprise & Innovation and Director of Finance that allegations of misconduct in research have been received and will be investigated using this Procedure. The Case Manager will emphasise that the allegation is as yet unproven and confidential. They will provide the identity of the Respondent and Initiator, details of all sources of internal and external funding, details of all internal and external collaborators for the research in question, and any other details that the Named Person considers appropriate.

9. Formal Investigation

- 9.1. The Case Manager will inform the Initiator and the Respondent via email that the Procedure has moved to the Formal Investigation stage and that they will be interviewed as part of the process and allowed to provide evidence. They will also be informed that they may be accompanied to any meetings by a colleague or Trade Union representative. This individual is not considered part of the investigation and cannot ask questions, call witnesses or raise points about any information provided, however they can query procedural elements of the investigation.
- 9.2. The Named Person will appoint a Formal Investigation Panel (see [Appendix 3](#)) that will establish, on the balance of probabilities, the truth of any allegations.
- 9.3. Every effort will be made to conduct the investigation as quickly as possible without compromising the Principles of the Procedure. A range of factors can influence the time taken, these include (but are not limited to) complexity of the matter, the volume and accessibility of evidence, the need to make reasonable adjustments and the availability of those involved. Any delays will be explained to all parties via email.
- 9.4. The role of the Panel is to review all the relevant evidence and conclude whether the allegation of misconduct in research:
 - i. is upheld (in part or in full);
 - ii. is mistaken, frivolous, vexatious and/or malicious so should be dismissed;
 - iii. should be referred directly to another internal or external process; and/or
 - iv. has some substance but due to its relative minor nature or because it relates to poor practice rather than to misconduct, will be addressed through remedial measures.
- 9.5. The Panel may make recommendations that include, but are not limited to, those stated in [Section 10](#) of this Procedure.
- 9.6. To perform its task the Panel should review:
 - the submission(s) and supporting evidence provided by the Initiator;
 - any response and/or supporting evidence provided by the Respondent;
 - background information relevant to the allegations; and
 - any interviews conducted with the Respondent, the Initiator, and other witnesses who may provide relevant information to assist the Panel.
- 9.7. The Panel shall decide, based on the information provided, what information it needs and whom it wishes to interview in addition to the Initiator and the Respondent, who must be interviewed separately.
 - 9.7.1. The Respondent will be invited to submit evidence for consideration and will normally be provided with other evidence collected by the Panel (redacted as required to maintain confidentiality) prior to any interview. The written statement of complaint will not normally be provided in full but will be summarised.
 - 9.7.2. Both the Initiator and Respondent can suggest witnesses for the Panel to interview; however, the Panel will choose whether interviewing the individuals is necessary for the investigation. Witnesses will only be present during proceedings when giving their evidence and will not normally have access to any investigation documentation beyond the allegation summary.

- 9.7.3. If any person (Initiator, Respondent or witness) cannot or does not wish to be interviewed, they will be asked to engage through other means, such as providing written answers to questions posed by the Panel.
- 9.8. Should any evidence of misconduct be brought to light during the course of the Formal Investigation that suggests (i) further possible distinct instances of research misconduct by the Respondent that are unconnected to the allegations under investigation, or (ii) potential research misconduct by another person or persons, then the Panel should submit these new allegations of misconduct in research to the Named Person in writing, along with all supporting evidence.
- 9.9. The Case Manager will keep a full record of the evidence received and Panel proceedings. The Panel will have access to all information gathered in earlier stages of this Procedure.
- 9.10. When making decisions and/or when concluding the Formal Investigation, the Panel will attempt to reach a consensus by discussion.
- 9.11. The Panel will write a report setting out their conclusions (see 9.4) giving the reasons for its decision, recording differing views and making any recommendations. The standard of proof used is that “*on the balance of probabilities*” meaning the activity was more likely than not to have occurred.
- 9.11.1. The report will be sent to the Initiator and the Respondent for comment on matters of factual accuracy with a deadline. Extensions to the deadline will only be considered in exceptional circumstances. The Panel will consider the responses received and, if they consider that the report includes errors of fact, will correct the report as necessary.
- 9.12. The Panel will then submit their final report to the Named Person and should play no further part in any further action apart from any required clarifications.
- 9.13. The Named Person will then decide the outcomes and resulting actions (see [Section 10](#)) and may choose to convey these (in full or in part) to the Initiator, the Respondent and any other persons or bodies they deem appropriate along with a copy of the final report. Appeals may be submitted in accordance with the criteria set out in [Section 11](#).

10. Outcomes and Actions

- 10.1. Outcomes and actions described in this section can be taken following the conclusion of the investigation at any stage of the Procedure.
- 10.2. The Named Person is responsible for ensuring that the actions described below are carried out in a timely manner. Ideally this will be within three months of completion of the Procedure however, some actions may take longer to complete.
- 10.3. The Named Person, delegating to others as required, will take any further action they deem necessary. These actions may include but are not limited to:
 - 10.3.1. **Any misconduct allegation upheld (in full or in part).**
 - i. referral to the relevant University procedure with transfer of relevant information;
 - ii. reporting the outcomes to relevant colleagues/bodies within the University;
 - iii. making necessary disclosures on the outcomes to external organisations and other interested parties including other employing organisations, regulatory bodies, funders and research participants;
 - iv. support the reputation of the Initiator and/or Respondent (as necessary if the allegation is upheld in part) and any relevant research project(s);
 - v. raising other concerns that should be investigated appropriately;
 - vi. ensuring that appropriate efforts are made to correct the research record; and/or
 - vii. addressing procedural or organisational matters uncovered during the investigation.
 - 10.3.2. **Any allegation dismissed because it is mistaken, frivolous or otherwise without substance.**
 - i. preserving the good reputation of the Respondent. If the case has received any adverse publicity the Respondent may be offered the opportunity to have an official statement released by the University;
 - ii. preserving the good reputation of the Initiator where allegations have been made in good faith; and/or
 - iii. ensuring appropriate communications on the outcome and the reasons for the decision.
 - 10.3.3. **Any allegation dismissed because it is vexatious and/or malicious.**
 - i. preserving the good reputation of the Respondent. If the case has received any adverse publicity the Respondent may be offered the opportunity to have an official statement released by the University;
 - ii. recommending that action be taken against anyone where there is clear evidence that a complaint was vexatious and/or malicious. This may include disciplinary action where the individual is internal to the University; and/or
 - iii. ensuring appropriate communications on the outcome and the reasons for the decision.
 - 10.3.4. **Any allegation that warrants referral to another process of the University or to an external organisation.**
 - i. writing to the Initiator to explain the reasons why the allegation cannot be investigated using this Procedure and where the allegation will be referred to including any relevant contact information;
 - ii. referring the matter to the appropriate process/organisation in writing to inform them of the allegation, explaining why it cannot be investigated using this Procedure, providing all relevant information and asking them to address it; and

- iii. ensuring appropriate communications on the outcome and the reasons for the decision.

10.3.5. Any allegation that should be addressed through remedial measures.

- i. education, training and other development activities;
- ii. enhanced supervision/oversight of research activities;
- iii. restriction of research activities;
- iv. mentoring;
- v. mediation between involved parties;
- vi. awareness-raising of relevant issues of good research practice;
- vii. pastoral care and support; and/or
- viii. revision of relevant research practices, systems and/or policies relating to the allegation(s) in question. Such revision may be limited to a particular team or have a wider scope, covering a department or the entire organisation, and should be supported by appropriate training and awareness-raising.

10.3.6. When implementing remedial measures, the following should be followed:

- i. the nature and scope of the measures should be clearly defined;
- ii. the Named Person will identify a designated person(s), such as the Respondent's line manager or supervisor, who should be responsible for carrying out the measures;
- iii. their duration should be clearly set out;
- iv. appropriate documentation should record the delivery and outcomes of the measures and any next steps; and
- v. once completed there should be discussion by Research Services and others about any learning points for the University.

10.3.7. Further guidance on remedial measures is available in the UKRIO [Procedure for the Investigation of Allegations of Misconduct in Research](#) (Annex 3) and the University will refer to this document where necessary.

11. Appeals

- 11.1. Appeals by the Respondent or Initiator may be raised on any, or all, of the following grounds:
- procedural irregularity in the conduct of the investigation up to and before the Appeal Panel that could have had a material impact on the outcome;
 - fresh evidence becoming available which was not available to the Investigator and/or the Formal Investigation Panel;
 - there was evidence of bias or unfairness in the process or decisions taken by the Named Person, Investigator and/or the Formal Investigation Panel;
 - the recommendations made as part of an outcome of the Procedure/subsequent actions taken are either excessive or inadequate concerning the misconduct found by the investigation.

- 11.2. Any appeals should be made in writing to the Alternate Named Person (see 2.1) within 10 working days of being notified of the outcome of the Procedure. The written notice of appeal shall set out the grounds of appeal, and be accompanied, wherever possible by supporting evidence. Appeals should be sent to researchmisconduct@lancaster.ac.uk.

- 11.3. The Alternate Named Person will then assess the appeal to determine whether it falls within one or more of the grounds for appeal set out above, seeking clarification from the person(s) submitting the appeal as necessary.

11.3.1. If the appeal does not fall within one or more of the grounds for appeal set out above, then the appeal is dismissed, and this decision will be communicated to the person who submitted the appeal. The Appeals stage now ends.

- 11.4. If the appeal does fall within one or more of the grounds for appeal, the Alternate Named Person shall then, as soon as possible, appoint an Appeals Panel to undertake the appeals process (see [Appendix 3](#)).

- 11.5. The Appeals Panel will review the conduct of the investigation and any evidence submitted in support of the appeal(s) in question. It will NOT carry out a re-investigation of the allegation(s) in question. When reaching any decision, the Appeals Panel will do so by reaching a consensus.

- 11.6. The Appeals Panel will decide whether it upholds, reverses or modifies the outcome in question, including the decisions and/or recommendations associated with it.

- 11.7. The Appeals Panel shall write a report setting out its conclusions, giving the reasons for its decision and recording any differing views.

11.7.1. The report will be sent to the Initiator and the Respondent for comment on matters of factual accuracy with a deadline. Extensions to the deadline will only be considered in exceptional circumstances. The Appeals Panel will consider the response received and, if they consider that the report includes errors of fact, will correct the report as necessary.

- 11.8. The Appeals Panel will then submit their final report to the Alternate Named Person who will convey the substance of the findings and conclusions to the person who raised the appeal, the Initiator, the Respondent and any other persons or bodies they deem appropriate.

- 11.9. The decision of the Alternate Named Person is final.

12. Appendix 1 – Definitions

12.1. **Accepted Procedures** for research include but are not limited to the following.

- gaining ethical approval where required;
- gaining formal approval from relevant organisations where required;
- any protocols contained in any formal approval that has been given for the research;
- any protocols as defined in contracts or agreements with funding bodies, sponsors,
- any protocols approved by Regulatory Authorities;
- any protocols set out in University guidelines and other relevant partner organisations;
- any protocols set out in the guidelines of appropriate recognised professional, academic, scientific, governmental, national and international bodies
- any procedures that are aimed at avoiding unreasonable risk or harm to humans, animals or the environment;
- good practice for the proper preservation and management of primary data, artefacts and materials; and
- any existing guidance on good practice on research.

12.1.1. These do not include (i) un-consented to/unapproved variations of the above; or (ii) any procedures that would encourage, or would lead to, breaches in the law.

12.1.2. Although allegations of misconduct in research are often raised as departures from accepted procedures in the conduct of research, the Procedure will only be used to investigate intentional and/or reckless behaviour as set out in the definition of misconduct in research (see 12.7).

12.2. **Initiator** - the person making allegations of misconduct of research against one or more Respondents (see 12.14).

12.3. **Disciplinary Procedure** - the University's mechanism for resolving disciplinary issues amongst its staff or Postgraduate Research Students.

12.4. **Formal Investigation** - that part of the Procedure which is intended to examine the allegations of misconduct in research, hear and review the evidence and determine whether the alleged misconduct occurred, take a view on who was responsible, and which may make recommendations as to any response that the University might make. Formal Investigations will be preceded by Screening Process (see 12.14).

12.5. **Honorary Contract** - used in a variety of circumstances. As a result, it is not always clear which organisation should lead an investigation into allegations of misconduct in research against someone holding such a contract¹.

12.6. **Misconduct in research** - The following definition of research misconduct is taken from the Concordat to Support Research Integrity: *research misconduct is characterised as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. It can cause harm to people and the environment, wastes resources, undermines the research record and damages the credibility of research. The Concordat recognises that academic freedom is fundamental to the production of excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily*

¹ Further definition/explanation is available in the UKRIO [Procedure for the Investigation of Allegations of Misconduct in Research](#) (Annex 2).

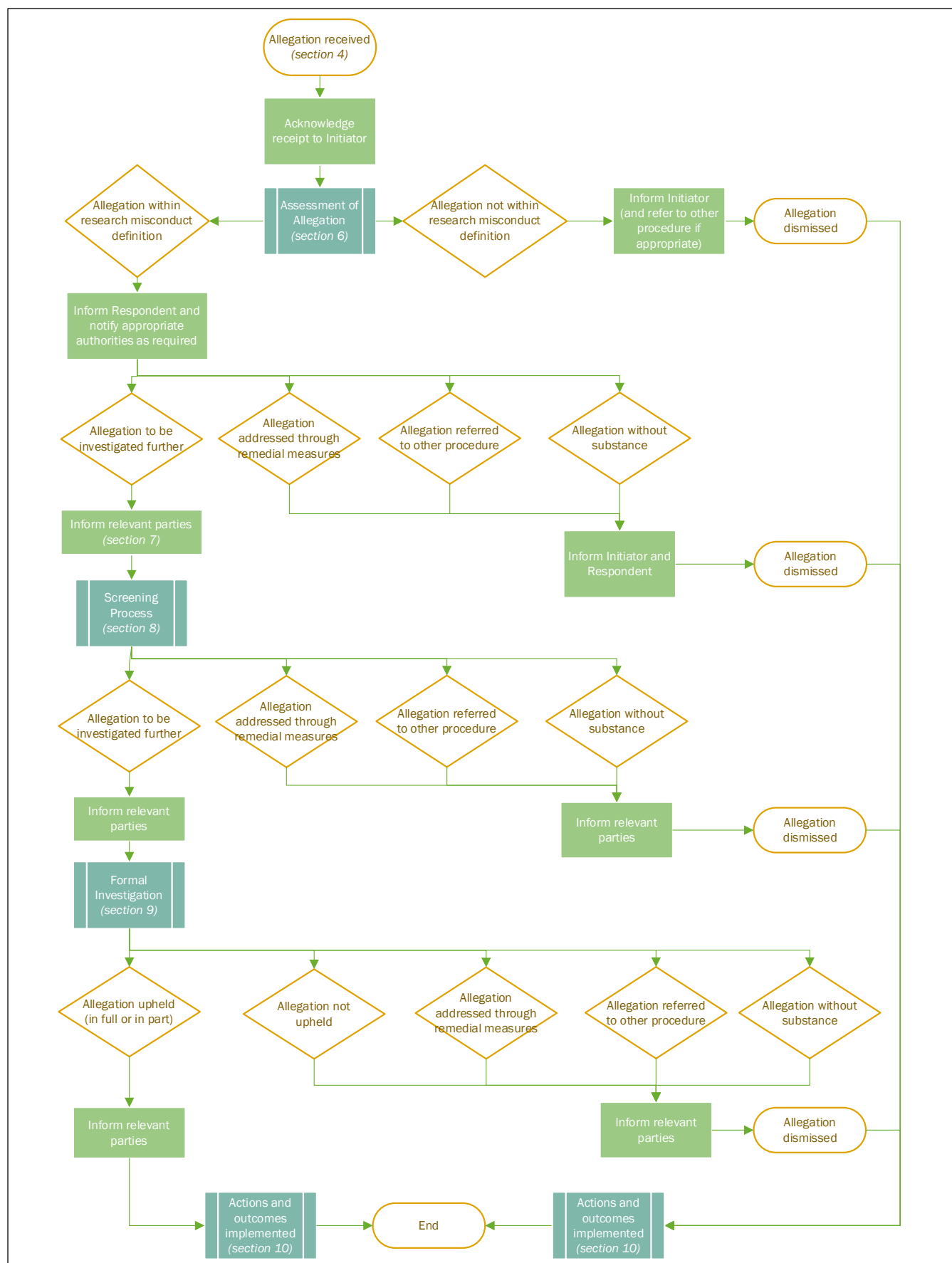
with individual researchers. Research misconduct can take many forms, including but not limited to:

- 12.6.1. **Fabrication** - making up results, other outputs (for example, artefacts) or aspects of research, including documentation and participant consent, and presenting and/or recording them as if they were real.
- 12.6.2. **Falsification** - inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents.
- 12.6.3. **Plagiarism** - using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission.
- 12.6.4. **Failure to meet legal, ethical and professional obligations**, for example:
 - not observing legal, ethical and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment;
 - breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent;
 - misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality; and/or
 - improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest, inadequate disclosure of clearly limited competence, misappropriation of the content of material, and breach of confidentiality or abuse of material provided in confidence for the purposes of peer review.
- 12.6.5. **Misrepresentation of:**
 - data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data;
 - involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made appropriate contributions;
 - interests, including failure to declare competing interests, of researchers or funders;
 - qualifications, experience and/or credentials; and/or
 - publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication.
- 12.6.6. **Improper dealing with allegations of misconduct** - failing to address possible infringements, such as attempts to cover up misconduct and reprisals against whistle-blowers, or failing to adhere appropriately to agreed procedures in the investigation of alleged research misconduct accepted as a condition of funding. Improper dealing with allegations of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.
- 12.6.7. **Multiple/serial instances of poor research practice** that collectively amount to significant deviation from accepted practice.
- 12.6.8. Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct.
- 12.6.9. Misconduct in research includes acts of omission as well as acts of commission.

- 12.6.10. Where the research in question has been undertaken outside of the UK, the standards by which allegations of misconduct in research are to be judged, should be those of the UK, not the country in which the research has taken place.
- 12.6.11. The basis for reaching a conclusion that an individual is responsible for misconduct in research relies on a judgement that there was an intention to commit the misconduct and/or recklessness in the conduct of any aspect of a research project. Where allegations concern an intentional and/or reckless departure from accepted procedures in the conduct of research that may not fall directly within the terms detailed above, a judgement should be made as to whether the matter will be investigated using the Procedure.
- 12.7. **Named Person** - defined in the Procedure as the individual with responsibility for receiving any allegations of misconduct in research; initiating and supervising the Procedure for investigating allegations of misconduct in research; maintaining the record of information during the investigation and subsequently reporting on the investigation to internal contacts and external organisations; and taking decisions at key stages of the Procedure.
- 12.8. **Poor research practice** – the conduct of research that departs from accepted procedures but the cause is not considered either intentional or reckless behaviour. These include but are not limited to:
- 12.8.1. Genuine errors in the reporting of research or in research methodology or interpretation.
- 12.8.2. Failure to give appropriate recognition to others involved in research activity where this does not constitute plagiarism or misrepresentation of involvement as defined above. This Procedure will be used to investigate authorship disputes (including who should be included as co-authors, who is corresponding author and order of authorship).
- 12.8.3. Deviation from current accepted practice in carrying out research where this was not deliberate or negligent and does not fit into any category described above.
- 12.8.4. Mismanagement or inadequate preservation of data and/or primary materials where this would not have a significant impact on the research or research outputs.
- 12.8.5. Minor breaches of legal requirements or ethical review that are not deliberate or negligent.
- 12.8.6. Failure to follow University policies or guidance that are relevant to research integrity where they do not constitute research misconduct as defined in Point 12 (for example, failure to follow the University's Research Data Management Policy where this does not involve personal data or other data subject to regulatory/legal restrictions).
- 12.9. **The Procedure** - this publication.
- 12.10. **Professional Body** - an organisation with statutory powers to regulate and oversee a particular profession, such as doctors or solicitors.

- 12.11. **Regulatory Authority** - an organisation with statutory powers to regulate and oversee an area of activity, such as health and safety, or medicines to be used on humans.
- 12.12. **Research** - a process of investigation leading to new insights, effectively shared. It includes work of direct relevance to the needs of commerce, industry, culture, society, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction. It excludes routine testing and routine analysis of materials, components and processes such as for the maintenance of national standards, as distinct from the development of new analytical techniques. It also excludes the development of teaching materials that do not embody original research.
- 12.13. **Respondent** - the individual (or group of individuals) responsible for the research under scrutiny.
- 12.14. **Screening Process** - the stage of the Procedure used to determine whether there is sufficient evidence of research misconduct to warrant a Formal Investigation or whether other remedial action should be taken.
- 12.15. **Sponsor** - the [Health Research Authority defines Sponsor](#) as ‘an individual, company, institution, organisation or group of organisations that takes on responsibility for initiation, management and financing (or arranging the financing) of the research’.

13. Appendix 2 – Flowchart of Procedure



14. Appendix 3 – Formal Investigation/Appeal Panel Composition

- 14.1. Named Person will establish a panel of at least three senior individuals with relevant skills and experience. The Named Person will select one of the Panel members to act as Chair. The Named Person must not be a member of, nor seek to influence the work of, a Panel.
- 14.2. In selecting members of a Panel, the Named Person will consider:
 - the subject matter of the allegations, including whether it would be advantageous for members of a Panel to possess any specialised knowledge or investigative skill;
 - any potential conflicts of interest including any potential links with any of the persons involved (Respondents or Initiators), or personal/work connections with the subject matter of the allegations;
 - as appropriate/possible, selecting a diverse and representative panel; and
 - whether a nominee was involved in the earlier stages of the Procedure, as this excludes such a person from serving on a Panel relating to the same allegation.
- 14.3. At least one member of a Panel must be selected from outside the University as required by The Concordat to Support Research Integrity. The Named Person (or their alternate) may choose to consult UKRIO to nominate member(s) from the Register of Advisers to sit as member(s) of a Panel.
- 14.4. For allegations that involve staff on joint clinical/honorary contracts it may be helpful to include representation from the other employing organisation(s), these are not classified as external members.
- 14.5. At least one panel member will be an academic in the area of research in which the alleged misconduct has taken place, and where possible they should not be members of the Department concerned. Where allegations concern highly specialised areas of research a Panel should have at least one member with specialised knowledge of the field.
- 14.6. All Panel members will confirm to the Case Manager that (i) their participation involves no conflict of interest, (ii) they will abide by the Procedure and its Principles and (iii) will respect the confidentiality and data protection requirements.
- 14.7. Both the Respondent and the Initiator may raise with the Case Manager any concerns that they may have about those chosen to serve on a Panel, but do not have a right of veto over those selected.
- 14.8. Once convened, it is desirable to not change or add to the membership of a Panel. Members who are not able to continue should not be replaced unless the membership falls below three. In this case, the Named Person should take steps to recruit additional members or re-start the Formal Investigation or Appeals process. In the event that the Chair stands down, the Named Person should select a new Chair from the original membership or re-start the Formal Investigation or Appeals process.
- 14.9. A Panel may call expert witnesses to give advice if necessary and as appropriate, but such witnesses do not become members of the Panel.