

# Policy for Investigating Allegations of Research Misconduct

Effective from 01/04/23

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## 1. Purpose

Newcastle University is committed to conducting research to the highest standards of excellence, rigour and integrity. When these standards are not upheld, research misconduct may occur. Although research misconduct is uncommon, this can cause harm to people and the environment, waste resources, undermine the research and the credibility of the researcher.

The purpose of this policy is to set out how the University will respond to allegations of research misconduct in line with principles of the [Concordat to Support Research Integrity](#), guidance issued by the UK Research Integrity Office (UKRIO), UKRI and other funder requirements.

## 2. What is covered by the policy?

2.1 **Research misconduct** is defined as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of the research is upheld. Research misconduct can take many forms, including:

- **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 legitimate.
- **Falsification:** inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents.
- **Plagiarism:** intentionally using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission.
- **Failure to meet legal, ethical and professional obligations**, for example:
  - Not observing legal, ethical or other requirements for human research participants, animal subjects, human organs/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.
  - Improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest and operating beyond the limits of one's competence.

- Misappropriation of the content of material, and/or breach of confidentiality or abuse of material provided in confidence for the purpose of peer review.
- **Misrepresentation of:**
  - Data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data.
  - Involvement and contribution, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution.
  - Interests, including failure to declare competing interests of researchers or funders of a study.
  - Qualifications, experience and/or credentials or publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication.
- **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 of allegations of research misconduct also includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.

## 2.2 Exclusions

- 2.2.1 **Honest errors** – such as miscalculation, mismeasurement or mislabelling – do not fall within the definition of research misconduct. Where honest errors are identified, remedial action will be taken to correct the mistake and local training provided to avoid reoccurrence.
- 2.2.2 **Poor research practices** – such as poor research design, weak procedures or analysis, inadequate documentation or record-keeping and insufficient attention to quality assurance – may happen inadvertently through lack of training or knowledge. Although poor research practices have an impact on research integrity, they are not generally defined as research misconduct and will be addressed through training and support. Any concerns regarding poor research practices should be raised with the relevant Head of Academic Unit, Concerns may also be addressed to the Research Integrity and Governance Manager at: [research.integrity@ncl.ac.uk](mailto:research.integrity@ncl.ac.uk).
- 2.2.3 **Grievances** – the University acknowledges that good working relationships are central to positive and inclusive research environments. Any concerns, problems or complaints relating to relationships with colleagues or managers should be reported in line with the University's general [Grievance Procedure](#) or [Bullying and Harassment Policy](#), unless research misconduct is the cause or the effect of the breakdown of the relationship.

## 3. Who does this policy apply to?

- 3.1 This policy applies to all who conduct research under the auspices of the University. This includes, but is not limited to:

- University colleagues
- Honorary colleagues
- Visiting colleagues
- Emeritus colleagues
- Those working under joint clinical, or other joint contracts
- Sub-contractors
- Research consultants
- Those using the University's facilities

3.2 The University has developed a separate procedure for students. To avoid duplication, any allegations relating to the research undertaken by students will be re-routed to the University's [Student Assessment Irregularities Procedure \(Academic Misconduct\)](#).

#### 4. Roles and responsibilities

All University colleagues should be aware of their professional, legal and regulatory responsibilities outlined in the [Code of Good Practice in Research](#). This includes the responsibility to report any concerns if they have good reason to suspect misconduct in research. Other roles and responsibilities identified in the procedure are defined as follows:

- Complainant:** individual(s) raising an allegation about the research conduct of an individual(s) conducting research at Newcastle University.
- Respondent:** individual(s) named in the complaint, against whom the allegation is made.
- Named Person:** the Pro-Vice Chancellor Research and Innovation is the named person responsible for research integrity under the Concordat, with overall responsibility for decision-making. In the absence of the Pro-Vice Chancellor Research and Innovation the Dean of Research Strategy and Culture will act as an Alternative Named Person.
- Responsible Officer:** the Research Integrity and Governance Manager has delegated responsibility for the implementation of the policy and procedure on behalf of the Named Person with due respect for confidence. In the absence of the Research Integrity and Governance Manager, the Research Compliance and Governance Officer will act as an Alternate Responsible Officer.
- Lead Investigator:** the relevant Faculty Dean of Research and Innovation has delegated responsibility for carrying out a preliminary investigation on behalf of the Named Person.
- Head of Academic Unit:** point of contact for informal queries regarding research integrity. Responsible for overseeing local actions such as supervision, mediation, education and training in response to the issues raised.
- Witness:** an individual who may be called by the Investigation Panel to provide evidence or information. To avoid any conflicts of interest, a Witness cannot act as a Supporter.
- Supporter:** a colleague or Trade Union representative who can provide support for the Complainant or Respondent. A Supporter may accompany the Complainant or Respondent to panel meetings, but may not act as their representative, make statements or ask any questions.

## 5. Policy

### 5.1 Institutional responsibilities

- 5.1.1 As a signatory of the [Concordat to Support Research Integrity](#), the University has a responsibility to promote research integrity and fully investigate all allegations of research misconduct in an objective, fair and timely manner.
- 5.1.2 Newcastle University is also committed to working collaboratively with other institutions in accordance with principles of the [Russell Group Statement of Co-operation in respect of cross-institutional research misconduct allegations](#). In these cases, a decision will be made whether it would be most appropriate to follow a single institutional process, separate processes or a combination of processes to ensure that the process is managed thoroughly and efficiently and with due care and regard for the wellbeing of all individuals.
- 5.1.3 Due to the nature of the allegation(s), it may be necessary to notify legal or regulatory authorities in the event of any illegal activity and/or a danger to persons, animals or the environment. In these cases, the legal or regulatory authority may undertake an external investigation which would supersede this policy. However, the findings of the external investigation would be used to determine internal actions in response to the issues identified.
- 5.1.4 Newcastle University also has an obligation to notify funders and regulatory bodies of any formal investigations of research misconduct. Funded activities may be paused during the investigation to protect the integrity of the research project. The University will also notify funders of the outcome of the investigation and outline any remedial actions taken.

### 5.2 Responsibilities of researchers

- 5.2.1 Academic freedom is fundamental to the production of excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily with individual researchers. All colleagues involved in research activities at, or on behalf of, Newcastle University should observe the highest standards of professional behaviour, rigour and integrity in proposing, conducting and publishing research in accordance with the [Code of Good Practice in Research](#).
- 5.2.2 Researchers should continue to support their professional development through formal training, self-directed learning and engagement activities. The University provides free access to a [Research Integrity e-learning programme](#) to all staff and students. A full list of internal and external training, tools and resources is available on the University's [Research Integrity webpages](#).
- 5.2.3 Research misconduct is least likely to arise in an environment where good open research practice is encouraged and where there is effective supervision at all levels. Heads of Academic Units are responsible for establishing and communicating the standards, protocol and ethics for research relevant to their area to all academic and research staff, and for ensuring adherence to these standards. Academic researchers are also encouraged to share good practice with internal colleagues through peer review, discussions at Research Group meetings, seminars, lecture series, workshops, formal teaching or the supervision of PhD students.
- 5.2.4 Where an allegation of research misconduct does arise, researchers are expected to co-operate fully with the procedure outlined in this document and provide information when requested.

5.2.5 The University may approach senior academic colleagues with expertise in a specific discipline to participate in an Investigation Panel. These roles should be undertaken with due respect for confidentiality and any conflicts of interest should be declared. Full guidance and support will be provided to colleagues undertaking these roles by the Responsible Officer. Occasionally, the University may also seek volunteers to participate in research misconduct panels at other universities, where an external expert is required. These roles will be considered on a case-by-case basis, following a request from the UK Research Integrity Office (UKRIO).

### 5.3 Investigation of allegations

5.3.1 All allegations will be investigated fully by the University in accordance with the [Procedure for Investigating Allegations of Research Misconduct](#).

5.3.2 The investigation of allegations will be made in line with the following guiding principles:

- **Data Protection**

The processing of personal data will be carried out in accordance with the principles of the UK General Data Protection Regulation (GDPR) and the amended Data Protection Act (1998). University staff with responsibility for implementing this procedure must complete mandatory data protection training.

- **Fairness**

Anyone formally accused of research misconduct will receive full details of the allegation(s) in writing and be given the opportunity to respond. Respondents will be given the opportunity to raise points, ask questions, submit evidence in their defence and suggest witnesses. Both the Complainant and the Respondent also have the right to be accompanied by a colleague or Trade Union representative (a Supporter) at formal meetings and seek advice or assistance from anyone of their choosing.

- **Confidentiality**

The confidential nature of the proceedings will be maintained provided this does not compromise the investigation, any health and safety requirements, or any issue related to the safety of participants in research. The identity of the Complainant or the Respondent should not be made known to any third party such as funders, professional or regulatory bodies unless it is deemed necessary. Any disclosure to a third party should be made on a confidential basis.

In order to progress the investigation, details of the source and the nature of the allegation will be shared with Respondent, their Head of Academic Unit and the investigation panel. However, while the allegations are under investigation, the Complainant, Respondent, Witnesses or any other persons involved in the 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. Breaching confidentiality may lead to disciplinary action. This does not apply to colleagues seeking support from the University's Just Ask volunteer network or Employee Assistance Programme, legal or Trade Union representatives.

- **Integrity**

Investigation panel members must ensure that the investigation is impartial and extensive enough to reach a reasoned judgement on the matter(s) raised and declare any potential conflicts of interest. Similarly, those who are asked to give evidence should do so honestly and objectively.

- **Prevention of detriment**

- **Complainant:** any allegations will be assumed to have been made in good faith, based on a reasonable belief and/or supporting evidence that misconduct in research may have occurred. However, any allegations found to have been made frivolously, maliciously or vexatiously will be considered a serious offence.
- **Respondent:** anyone accused of research misconduct is entitled to the presumption of innocence. The purpose of the formal investigation is to establish, on the balance of probabilities, the truth of any allegations. The University will take all reasonable steps to ensure that any parties involved in the investigation do not suffer because of unconfirmed or unproven allegations.

5.3.3 Once initiated, the procedure should progress to conclusion irrespective of:

- The Complainant withdrawing the allegation at any stage
- The Respondent admitting, or have admitted, the alleged misconduct in full or in part
- The Respondent or Complainant resigning, or already having resigned their post.

5.3.4 The procedure is intended to complement – rather than replace – the University’s [Disciplinary Policy](#). When allegations of research misconduct are upheld, in full or in part, this may result in disciplinary action being taken. Information gathered in the course the investigation will be shared with People Services to facilitate this process, alongside a copy of the Full Investigation Panel report. A formal record of the outcome will also be recorded in the Respondent’s People Services file.

## 6. Related regulations, statutes and policies

This policy should be read alongside the following policies and guidelines:

- [Attribution of Authorship Guidelines](#)
- [Bullying and Harassment Policy](#)
- [Code of Good Practice in Research](#)
- [Disciplinary Policy](#)
- [Grievance Policy](#)
- [Policy and Procedure on Public Interest Disclosure \(Whistleblowing\)](#)
- [Policy on Declaration of External Interests](#)
- [Procedure for Investigating Allegations of Research Misconduct](#)
- [Research Ethics Policy](#)
- [Student Assessment Irregularities Procedure \(Academic Misconduct\)](#)

## 7. Procedure to implement the policy

Please refer to the University’s [Procedure to Investigate Allegations of Research Misconduct](#), which includes a process flow chart.

## 8. Monitoring and reporting on compliance

Detailed and confidential records of proceedings will be maintained by Research Strategy and Development Team in line with the University’s [Policy on Records Management](#).

What will be monitored?	Frequency	Method	Who by	Reported to
Number and type of allegations (anonymised data)	Annually	Via the annual statement on Research Integrity	Research Integrity & Governance Manager	University Research and Innovation Committee, Senate and Council. A copy of the annual statement is also published externally via the University's Research Integrity webpages.
Allegations progressing from screening to formal investigation	As often as necessary	When allegations progress from screening to formal investigation, this will trigger a number of actions including formally notifying stakeholders.	Research Integrity & Governance Manager	Relevant funding bodies. Professional bodies; collaborating organisations; statutory regulators; journals.

## 9. Failure to comply

Failure to comply with this policy may result in disciplinary action.

<b>Document control information</b>		
<b>Does this replace another policy?</b> Yes / <del>No</del> If yes please state. Policy and Procedure for Investigating Allegations of Research Misconduct (2016)		
<b>Approval</b>		
<b>Approved by:</b> University Council		<b>Date:</b> 20 <sup>th</sup> March 2023
<b>Effective from:</b> 1 <sup>st</sup> April 2023		
<b>Review due:</b> 1 <sup>st</sup> April 2026		
<b>Responsibilities</b>		
<b>Executive sponsor:</b> Professor Matthew Grenby, Pro-Vice Chancellor Research & Innovation		
<b>Policy owner:</b> (This maybe an officer or Committee) University Research & Innovation Committee		
<b>Person(s) responsible for compliance:</b> Louise Jones, Research Integrity & Governance Manager		
<b>Consultation</b>		
<b>Version</b>	<b>Body consulted</b>	<b>Date</b>
Version 1	University Research & Innovation Committee	2 <sup>nd</sup> November 2021
Version 2	People Services team	28 <sup>th</sup> July 2022
Version 3	UKRIO People Services team	4 <sup>th</sup> October 2022
<b>Equality, Diversity and Inclusion Analysis:</b> <b>Does the policy have the potential to impact on people in a different way because of their protected characteristics? Yes/ <del>No</del> / <del>Unsure</del></b> If yes or unsure please consult the Diversity Team in HR for guidance		

<b>Initial assessment by:</b> Louise Jones	<b>Date:</b> <u>29<sup>th</sup> September 2022</u>
<b>Key changes made as a result of Equality, Diversity and Inclusion Analysis</b> N/A – standard procedures apply to all colleagues, reducing the potential for discrimination. However, the individual needs of individuals invited to attend formal interviews will be assessed on a case-by-case basis and any requests for reasonable adjustments taken into consideration in consultation with People Services.	
<b>Document location</b>	
<a href="https://www.ncl.ac.uk/research/researchgovernance/policies/">https://www.ncl.ac.uk/research/researchgovernance/policies/</a>	