

# Procedure for Managing Allegations of Research Misconduct – Staff

## 1 Purpose and Scope

### 1.1 Overview

This document provides guidance and the procedure to be followed where there is an allegation of misconduct in research. It applies to all staff and, individuals such as contractors or consultants, who are undertaking research on behalf of the University of Westminster. This procedure operates alongside other policies and procedures, both in terms of outlining the University expectations relating to research governance and conduct.

- 1.2 If a member of staff is also enrolled as a doctoral research student and the alleged misconduct is within their doctoral research studies then Student Research Misconduct Regulations be followed.

## 2 Roles & Definitions

### 2.1 Funder

The individual or organisation funding the research. The Funder may have explicit requirements regarding the notification of allegations of Research Misconduct.

### 2.2 Initiator

The person or organisation making an allegation of potential Research Misconduct against one or more Respondents (see below). The Initiator may be referred to as a Complainant under the Research Misconduct procedures of other organisations, eg Funders, Sponsors, Professional Bodies, Regulatory Bodies, etc.

### 2.3 Named Person

The Named Person is the individual nominated by the University to receive allegations of Research Misconduct. The named person will be an individual within the University with significant knowledge and experience of research but is **not** the Vice-Chancellor & President, Provost or Director of Human Resources. The Named Person (and their alternate during their absence) will be detailed on the University's Research Framework webpage at:

<https://www.westminster.ac.uk/research/research-framework/managing-allegations-of-research-misconduct>

The Named Person will be responsible for initiating and overseeing the Procedure, and if appropriate reporting the outcome to internal and external bodies

#### 2.4 Professional Body

An organisation with statutory powers to regulate and oversee a particular profession, e.g. the British Psychological Society, Law Society, Royal Institute of British Architects, etc.

#### 2.5 Regulatory Body

An organisation with statutory powers to regulate and oversee an area of activity, e.g. Health Research Authority, Human Tissue Authority, Health and Safety Executive, Information Commissioner, etc.

#### 2.6 Researcher(s)

Individual(s) with a direct role in undertaking research (either past or present) on behalf of the University.

#### 2.7 Respondent(s)

The individual(s) against whom an allegation of Research Misconduct has been made. They must be a present or past Researcher.

#### 2.8 Secretariat

The Secretary to the Formal Investigation Panel (FIP). If required, will be appointed from either the Research Office or from within the wider Student and Academic Services directorate.

#### 2.9 Sponsor

The individual, group or organisation taking responsibility for securing the arrangements to initiate, manage, and finance the research, typically in relation to Health and Social Care research in the United Kingdom. The sponsor may have explicit requirements relating to the notification of allegations of Research Misconduct.

#### 2.10 University

University of Westminster

### 3 Principles

The University treats all reported allegations of Research Misconduct seriously, requires that they are investigated fully and that the outcomes are reported to the appropriate Regulatory Bodies and University Committees. Investigations of alleged Research Misconduct should be carried out thoroughly, sensitively, in a timely manner and under a presumption of innocence. The Respondent will be given an

opportunity to respond before any decision is made. Where the Respondent is not an employee of the University, any evidence of research misconduct will be notified to their employer or host institution.

Should a Respondent leave the University, the allegation may still be investigated as far as possible and appropriate recommendations/actions proposed and implemented.

Staff attempting to influence, victimise or intimidate an Initiator of an allegation of misconduct or a witness will themselves be subject to disciplinary action. Similarly, any organisation condoning such behaviour may also be subject to action by the University.

The University requires that instances of potential Research Misconduct should be reported (see Code of Research Good Practice). The University will assume that an allegation is made in good faith and that it is the Initiator's belief that misconduct may have occurred. As such, the University will aim to provide appropriate support for the Initiator. Equally, the University is committed to protecting Researchers from frivolous, vexatious or malicious accusations. Where it is found that an Initiator has acted in bad faith, which includes raising frivolous, vexatious or malicious allegations, this will be treated as a serious matter and may lead to disciplinary action.

All parties involved in the management of an allegation of potential Research Misconduct are required to maintain confidentiality in so far as it is practicable. Where it is considered it may be necessary to disclose confidential information, a balance will be drawn between preserving confidentiality and the need for informed discussion.

## 4 Examples of Research Misconduct

The University Framework for Research Governance and its supporting codes of practice, i.e. Code of Research Good Practice and the Code of Practice Governing the Ethical Conduct of Research, set out the University's position with regard to research integrity and good practice and its expectations that all parties involved in research activities will exhibit the highest standards of research integrity and conduct. A failure to observe these standards may result in an allegation of Research Misconduct.

The following are examples of Research Misconduct that may be investigated using this procedure (this list is non-exclusive and non-exhaustive):

- Fabrication
- Falsification
- Misrepresentation of data and/or interests and/or involvement
- Plagiarism
- Inappropriate attribution of authorisation
- Inciting others to be involved in Research Misconduct

- Collusion in or concealment of Research Misconduct of others
- Failure to obtain appropriate permission to conduct research
- Failure to declare an interest in the commission, completion or outcome of research activities
- Failures to follow accepted procedures or to exercise due care in carrying out responsibilities for avoiding unreasonable risk or harm to
  - Humans
  - Animals used in research
  - The environment; and
- Breach of a duty of care, including:
  - Breach of confidentiality without consent
  - The improper handling of privileged or private information on individuals collected during the research. (e.g. data protection or Information Security)
  - Placing parties either directly or indirectly associated with the research in danger without valid consent and appropriate safeguards being in place.
  - Failing to observe legal and ethical requirements
  - Improper peer review of proposals, results or research outputs

For the avoidance of doubt, a Researcher may be subject to an allegation of misconduct in research for:

- Acts of omission as well as acts of commission, and
- Failing to report an act of Research Misconduct.

## 5 Consideration of other Policies & Procedures

The University and external bodies have a range of policies and codes of practice that can impact upon the governance of research. Similarly, Professional and Regulatory Bodies can provide a statutory framework within which research activities have to be undertaken. External Research Ethics Committees and Site Management(s) may also set conditions that need to be complied with. Breaches of such requirements may result in Research Misconduct. Examples include:

### 5.1 Internal

- Framework for Research Governance
- Code of Research Good Practice
- Code of Practice Governing the Ethical Conduct of Research
- Information Security and Acceptable Use Policy (currently the IT Security and Use policy)
- Intellectual Property Rights Policy
- Safety Health and Wellbeing policies and procedures as applicable to researchers, participants and third parties affected by the research

- Procurement policies and procedures, e.g. relating to Insurance and Travel.
- Complying with published participant information, valid consent and management permissions.

## 5.2 External

- Research Governance requirements of Professional and Regulatory Bodies, e.g. British Psychological Society, Health Research Authority, Law Society, Medicines and Healthcare Products Regulatory Agency, etc.,
- Research Governance requirements of Research Funders and Sponsors, e.g., Research Councils, European Union, etc.
- Research Governance and Management Permission requirements relating to sites/locations where research is to be undertaken, e.g. NHS Trusts,
- Compliance with statutory provisions while undertaking research, e.g. data protection, human tissue, mental capacity, counter-terrorism and chemical warfare, etc.

## 6 Research Misconduct Procedure

### 6.1 Overview of Procedure

<b>Stage</b>	<b>Purpose</b>
<b>Stage 1 Preliminary Action / Pre-Screening [10 University working days]</b>	The Named Person to acknowledge receipt of allegation and carry out initial review of evidence. Determine if the allegation should be: dismissed, referred to another procedure, reported to professional or regulatory bodies, continue to Stage 2 of this procedure
<b>Stage 2 IAP / Screening [30 University working days]</b>	The Initial Assessment Panel (IAP) to establish if there is <i>prima facie</i> evidence of Research Misconduct or not.
<b>Stage 3 Formal Investigation [30 University working days]</b>	The Formal Investigation Panel (FIP) to decide whether the allegations of misconduct in research are: upheld in full; upheld in part or not upheld.

Should it be necessary to vary the timescales, the Named Person will communicate this to the appropriate parties and provide a revised timescale.

## 6.2 Stage 1 – Preliminary Action & Initial Review (pre-screening) [within 10 University working days from receipt of the allegation of Research Misconduct]

- 6.2.1 The Initiator must make any allegation of misconduct in academic research to the Named Person. If such an allegation is made to another member of staff at the University, it is their duty to bring it to the attention of the Named Person.
- 6.2.2 The Initiator should submit the allegation in writing (email is acceptable) and attach any supporting evidence that is available to the Initiator. In exceptional circumstances the Initiator may wish to maintain their anonymity, particularly during the Preliminary stage, however to proceed with an investigation, the Initiator may need to be known to the Panel and potentially the Respondent.
- 6.2.3 Depending on the nature of the allegation the Initiator may wish to raise their concerns via the University's [Whistleblowing Policy \(Public Interest Disclosure\)](#), highlighting that the notification relates to Research Misconduct.
- 6.2.4 On receipt of the allegation the Named Person should acknowledge receipt of the allegation to the Initiator.
- 6.2.5 The Named Person may inform the the Chair of the Research Committee, or others about the allegation, for example if there is a potential reputational risk to the University.
- 6.2.6 Should the Named Person consider they have a conflict of interest in dealing with this matter they should refer the case to their alternate to progress the case.
- 6.2.7 The Named Person may appoint an individual to compile any initial evidence available, as quickly as possible, and to present their findings for the Named Person to review.
- 6.2.8 The Named Person will keep a record of the allegation in a central file.
- 6.2.9 The Named Person will decide on one or more of the following potential outcomes:
  - The allegation is not serious in nature and should be resolved by informal discussions or procedures.
  - Dismiss the allegation as mistaken, frivolous, vexatious and/or malicious
  - Refer to a disciplinary or other internal procedure (note internal procedures may run in parallel or be placed on hold depending outcomes)
  - Notify any professional or regulatory bodies
  - **Continue to stage 2 of this procedure**
- 6.2.10 The Named Person will communicate the decision, in writing, to the Initiator
- 6.2.11 Depending on the outcome (and specifically if the decision is to continue to Stage 2), the Named Person will notify the Respondent(s) and Faculty Dean of the allegation and will remind them about confidentiality.
- 6.2.12 Should this stage not be complete within 10 University working days from receipt of the allegation(s), any delays should be communicated to all parties and a revised timeframe given.

### 6.3 Stage 2 – Initial Assessment Panel (IAP) / Screening [30 University working days from the initiation of the stage]

- 6.3.1 If the Named Person decides to proceed to Stage 2 of this procedure, they will convene an IAP and appoint members.
- 6.3.2 The Named Person will ensure that the Respondent(s) and Faculty Dean have been notified about the allegation(s) and reminded them about confidentiality.
- 6.3.3 The purpose of the IAP is to determine whether there is *prima facie* evidence of Research Misconduct or not.**
- 6.3.4 The IAP will comprise three members. A Faculty Research Director (usually from a different Faculty to that of the Respondent) will chair the panel. The Named Person will appoint two other panel members with the appropriate level of experience and subject expertise. The Named Person will also decide if any of the panel members should be external to the University.
- 6.3.5 The IAP will conduct an assessment of the evidence.
- 6.3.6 The IAP will determine whether the allegation(s) of misconduct in research is one or more of the following:
- Not serious in nature and should be resolved by informal discussions or procedures for example, learning & development
  - Mistaken, frivolous, vexatious and/or malicious
  - Should be referred to a staff disciplinary or other internal procedure (note internal procedures may run in parallel or be placed on hold depending on outcomes)
  - Of sufficient substance to justify referring to a Formal Investigation Panel **under stage 3 of this procedure**
  - Such that the substance cannot be established and should therefore be referred to a Formal Investigation Panel **under Stage 3 of this procedure**
- 6.3.7 The Chair of the IAP will send a confidential written report to the Named Person outlining their conclusions and enclosing any documentation relating to this stage of the procedure.
- 6.3.8 Should this stage of the procedure not be complete within 30 University working days, the Panel Chair should ensure the delay is communicated to all parties, including the Named Person, and provide a revised timeframe.
- 6.3.9 The Named Person will:
- Communicate the findings of the IAP, in writing, to the Respondent, the Faculty Dean and where appropriate the Initiator, depending on the findings of the IAP.
  - If required, notify any Professional or Regulatory bodies
  - If required, consult with the Chair of the Research Committee in advance
- 6.3.10 Following the conclusion of the IAP the Named person will arrange for all notes, records, evidence collated etc. to be kept on a central file.



## 6.4 Stage 3 – Formal Investigation [30 University working days from initiation of the stage]

- 6.4.1 Where the IAP has determined that there is sufficient substance in the allegation of Research Misconduct to justify a Formal Investigation or where the IAP is unable to establish the substance of the case, the Named Person will convene a Formal Investigation Panel (FIP) and nominate members.
- 6.4.2 The key purpose of the FIP is to decide whether the allegations of misconduct in research are: **upheld in full; upheld in part or not upheld.**
- 6.4.3 The FIP will comprise a minimum of three members. A Dean or a Faculty Research Director, with no prior involvement in the case and usually from a different Faculty to that of the Respondent, will chair the panel. The Named Person in consultation with the Chair of the FIP will appoint a minimum of two other panel members with the appropriate level of experience and subject expertise. They will also decide if any of the panel members should be external to the University.
- 6.4.4 The Named Person will appoint a Secretary to the FIP. The Secretary will be responsible for all communications with the various parties and for taking confidential notes at the Panel meeting(s).
- 6.4.5 The Formal Investigation will normally include an examination of all documentation including, but not limited to, the report from the IAP, relevant research data, materials such as imagery and recordings, proposals and approved protocols, relevant consents and permissions, publications and other outputs, correspondence, notebooks, emails, etc.
- 6.4.6 The Respondent will be invited to be interviewed as part of the Formal Investigation. The Respondent may be accompanied at any interview or hearing by a work colleague, or an accredited trade union official.
- 6.4.7 Wherever possible other individuals who may have information relating to key aspects of the allegation should be interviewed. The Respondent will be asked to provide details of any relevant witnesses. Written notes of the interviews will be produced that accurately reflect the points discussed and these will form part of the official record. Each person interviewed will be provided with a copy of the notes relating to their interview.
- 6.4.8 The FIP should provide a **draft** investigation report of its findings to the Named Person, the Respondent who will have an opportunity to comment on the factual accuracy of the report. If any factual inaccuracies are received the Chair of the FIP, and if appropriate Panel Members, will consider these before finalising a confidential final written report. If an individual does not agree with the final report, their comments can be kept on file, however for all purposes the final Chair approved version of the notes prevails.

- 6.4.9 The FIP will produce a **final** investigation report which summarises the methodology of the investigation and states whether the panel have decided that the allegations of misconduct in research have been **upheld in full or in part or not upheld**, giving the reasons for its decision;
- 6.4.10 The FIP may also include one or more of the following recommendations or actions:
- The case should be referred to a disciplinary or other internal procedure
  - If the alleged Research Misconduct has been substantiated, the FIP may recommend:
    - Removal from the project
    - Additional monitoring of future work
    - Specific training
    - Withdrawal of funding
    - A requirement to correct the published record
    - Withdrawal of rights to act as a project PI/Supervisor
    - Referral to third parties for progression via their employer/organisation
    - Referral to the Staff Disciplinary procedures
  - Recommendations in relation to any matters relating to any other misconduct identified during the investigation
  - Address any procedural matters that the investigation has brought to light within the organisation and relevant partner organisations and/or funding bodies.
  - Notify any Professional and/or Regulatory Bodies
- 6.4.11 The Named Person will consider the report and the FIP recommendations and actions. These will be progressed unless there are exceptional reasons for not doing so. In these circumstances the Named Person should provide a written record of their reasons for disagreeing with the findings of the FIP.
- 6.4.12 The Formal Investigation should normally be completed within 30 University working days from the appointment of the FIP. Should this stage not be complete within 30 University working days from initiation of Stage 3, any delays should be communicated to all parties and a revised timeframe given.
- 6.4.13 If any or part of the **allegations are upheld**, the Named Person will refer the case to the University disciplinary procedure.

- 6.4.14 The Named Person will write to the Respondent and where appropriate the Initiator to inform them of the outcome within 5 University working days of the completion of Stage 3.
- 6.4.15 Where the Named Person proposes notifying a Professional and/or Regulatory Body, Funder, Sponsor or other third party organisation e.g. another University, Publisher, etc. the Chair of the Research Committee should be notified in advance.
- 6.4.16 Following the conclusion of the FIP the Named person will arrange for all notes, records, evidence collated etc. to be kept on a central file.

## 7 Employee Support

The University provides a confidential external employee support helpline on 0800 068 6729. The Employee Assistance Programme service is free of charge and available 24 hours a day, seven days a week. Further details are available at <https://myintranet.westminster.ac.uk/my-journey/health-and-wellbeing/health-and-wellbeing/health-and-wellbeing-resources>.

## 8 Monitoring, Reporting and Review

The Procedure for Managing Allegations of Research Misconduct was reviewed in 2017.

The Named Person is responsible for providing an anonymised report to the first meeting of Research Committee each Academic Year for onward communication to University Executive Board, Academic Council and University Court. The report will include a summary of all cases of Research Misconduct considered during the previous academic session. The report should indicate the end decision/determination under the Procedure and where referred for consideration under an associated procedure.

This Procedure is not incorporated into the individual's contract of employment, where applicable, and it will be reviewed periodically to ensure it continues to reflect legislative changes and best practice.

**Approved by the Research Committee on:** 4<sup>th</sup> October 2017

**Approved by the Academic Council on:** 18<sup>th</sup> October 2017

**Effective from:** 18<sup>th</sup> October 2017

**Review date:** 2019/2020