RESEARCH MISCONDUCT POLICY

Introduction

1. This policy outlines the processes which will be followed when complaints of misconduct

in academic research are brought against any student or member of staff whose research is liable

to bring the University of Suffolk into disrepute. The University is committed to promoting and

supporting a culture of research integrity that discourages unacceptable behaviour by dealing

seriously and sensitively with all allegations of research misconduct. This policy provides a

procedural framework for investigating allegations of research misconduct concerning research

conducted under the auspices of the University of Suffolk. To help support and promote a culture

of research integrity, this policy aims to encourage those who have concerns/allegations to

raise/make them and reassure such individuals that their concerns/allegations will be taken

seriously and handled sensitively. To seek advice on the interpretation and/or implementation of

this Policy, contact researchoffice@uos.ac.uk.

Policy Statement

2. The University of Suffolk is responsible for ensuring that the research it supports is carried

out legally, in the public interest and in accordance with best practice.

3. The University of Suffolk is committed to the Concordat to support Research Integrity and

the five commitments that provide assurances that research in the UK continues to be underpinned

by the highest standards of rigour and integrity.

4. This document sets out the principles and procedures for making, managing, and

investigating allegations of research misconduct.

5. All employees and students of the institution and individuals permitted to work within it have

the responsibility to report any cases of suspected research misconduct. All those individuals within

the scope of this policy undertaking research at the University are obliged to comply with this

procedure.

6. The University of Suffolk expects all external partners to conform to its code of conduct for

research when undertaking research in collaboration with University of Suffolk staff (including

honorary staff) and students. If the PVC Research and Knowledge Exchange is made aware,

either through an allegation made under this code of conduct for research or an investigation

undertaken in line with this code, that an external partner is suspected of research misconduct.

the PVC Research and Knowledge Exchange reserves the right to report such matters to the

Research Misconduct Policy Version: 5.0 (December 2024)

Owner: PVC (Research & Knowledge Exchange)

Page 1 of 10

individual's employer or another relevant organisation (for example, an applicable funding body) with a view to such employer/organisation investigating the matter according to their own

procedures (without prejudice to any other action the University of Suffolk may decide to take).

Scope

7. The University of Suffolk considers an allegation of research misconduct to be within its

remit and suitable for consideration according to this Procedure if it:

a. concerns a current employee, a current member of honorary staff or a current student at

the University of Suffolk

b. relates to research conducted on the University of Suffolk premises and/or undertaken

using the University of Suffolk research facilities and any of the University's sites/locations,

or other sites/locations as agreed with their line manager.

c. involves a current employee of the University of Suffolk, a current member of honorary staff

of the University of Suffolk, or a current student at the University of Suffolk and is alleged to

have occurred before the individual concerned commenced paid employment and/or an

honorary appointment and/or a period of study as a student at University of Suffolk.

d. concerns a postgraduate research student, the allegation will be referred to University of

Brighton, UEA or University of Essex depending on where they are registered for dealing

with in accordance with their policy.

8. The University of Suffolk reserves the right to invoke the Procedure for an allegation of

research misconduct made against a former employee of the University of Suffolk, a former

member of honorary staff of the University of Suffolk, or a former student of the University of

Suffolk if the allegation relates to research which was undertaken while they were employed by,

held an honorary staff appointment with, or were studying at the University of Suffolk.

9. This policy does not apply to postgraduate research students (PGR) enrolled at the

University of Suffolk who are registered for awards at the validating university of their studies.

Such students will be subject to the relevant research misconduct policy of their awarding

Institution. Staff members that are also enrolled for a research degree at University of Brighton,

UEA or University of Essex will also be subject to the relevant research misconduct policy where

the misconduct allegation applies to research undertaken as part of the doctoral research project.

The PVC Research and Knowledge Exchange will decide whether there is a case for an

additional investigation under the University of Suffolk Research Misconduct Policy.

10. University of Suffolk makes clear to researchers that any misconduct in research is

unacceptable and should be reported; that researchers who are found to have committed

Research Misconduct Policy Version: 5.0 (December 2024)

misconduct in research will be subject to disciplinary proceedings; and that where researchers are

members of a regulated profession, cases of serious misconduct in research will be referred to

the body regulating their profession. University of Suffolk makes it clear that researchers who are

found not to have committed misconduct will be supported and appropriate steps taken to restore

their reputation and that of any relevant research project(s).

11. Researchers should:

know what constitutes misconduct in research and report any suspected misconduct

through the relevant procedure of the organisation as soon as they become aware of it.

recognise that good practice in research includes reporting concerns about the conduct of

research.

cooperate with any investigation of misconduct in research when requested.

work with their institution to support those who raise concerns in good faith about the

conduct of research and those who have been exonerated of suspected misconduct.

Principles

12. The Principles of this Policy are as follows:

• The University will take seriously all allegations of research misconduct relating to the work

of any employee, student, or anyone else involved in research within the Institution.

No detrimental action of any kind will be taken against any person making an allegation

through this policy in good faith, including postgraduate research students (PGR) who are

registered for awards at validating University of their studies, in line with the University of

Suffolk Whistleblowing Policy and Public Interest Disclosure legislation.

Any allegations made will be investigated appropriately, and in accordance with the highest

standards of integrity, accuracy, and fairness.

Investigations will be conducted in such a way as to safeguard the confidentiality of the

interested parties. Where the investigation requires contact with participants or their data.

their confidentiality will be maintained.

Bearing in mind the confidentiality of personal matters, the outcome of the investigation will

be made known as quickly as possible to all parties with a legitimate interest in the case.

Definition of Research Misconduct

13. The UK Research Integrity Office (UKRIO) defines misconduct in research as including,

but not limited to:

a. Fabrication.

b. Falsification.

c. Misrepresentation of data and/or interests and/or involvement.

Research Misconduct Policy Version: 5.0 (December 2024)

d. Plagiarism.

e. Failures to follow accepted procedures.

Failure to exercise due care in carrying out responsibilities for avoiding unreasonable risk

or harm to:

humans

animals used in research

the environment

g. The proper handling of privileged or confidential information on individuals collected

during the research.

14. Genuine mistakes, authentic academic/scientific error, honest disagreement, and poor

research, unless there is an intention to deceive, do not constitute research misconduct. Such

issues should normally be raised with the person concerned or their line-manager. Disciplinary,

grievance, performance, harassment, and equality issues should be raised through the right

channels for these issues.

Procedure for Reporting Misconduct

15. Allegations should, wherever possible, be made in writing.

16. If the complainant is uncertain how to go ahead or to whom to make their allegation, they

can seek support from their manager or from POD (staff) or their course leader, Student Life, or

the Students' Union (Students). If they are in the Research and Knowledge Exchange

Directorate, they can seek support from the Head of Research Culture and Knowledge

Exchange.

17. In the case of a person or organisation external to the Institution wishing to report

allegations of research misconduct, they should report it to the Pro Vice-Chancellor Research

and Knowledge Exchange for recording and the allegation will be referred to the Deputy Vice-

Chancellor.

18. An individual who suspects research misconduct should report it to the Dean of the School

or the Research Institute Director. If the matter concerns the Dean of School, any Research

Institute Director or if there is a potential conflict of interest, the matter should be referred to the

Pro Vice-Chancellor Research and Knowledge Exchange. If it concerns the Associate Dean for

Research and Knowledge Exchange, the School Dean should be responsible. The Deputy Vice-

Chancellor or their nominee will act as the 'Responsible Person'. If the matter concerns the

Deputy Vice-Chancellor, the Vice-Chancellor or their nominee will act as the 'Responsible

Research Misconduct Policy Version: 5.0 (December 2024)

Owner: PVC (Research & Knowledge Exchange)

Page 4 of 10

Person'. The Responsible Person will make an initial assessment of the allegation, in

consultation with People & Organisational Development (POD) if the allegation concerns a

member of staff, or the Academic Registrar if the allegation concerns a student. They will

consider the scope of the allegation and identify those individuals who may be implicated in the

alleged misconduct. These individuals will be treated as respondents.

19. If the allegation concerns a postgraduate research student, the allegation will be referred

to University of Brighton, UEA or University of Essex depending on where they are registered for

dealing with in accordance with their policy.

20. The initial screening of the allegations by the Responsible Person may require a meeting

with the complainant, or the respondent(s) to ascertain simple information. However, this is not part

of a formal investigation, and all parties should be reminded of this.

21. During this part of the process, the Responsible Person will consider whether the

allegations are mistaken, frivolous, vexatious and / or malicious. They will then take one of the

following actions:

a. Dismiss the allegation if it is clearly frivolous or mistaken.

b. Arrange for the matter to be resolved informally if the misconduct is of a minor nature.

c. Arrange for the matter to be taken forward using the relevant disciplinary / misconduct

procedure (staff or UG/PGT student or PGR student)

d. Arrange for a formal investigation as outlined below.

22. The outcome of this part of the process should be confirmed in writing to the complainant,

and the respondent(s) if they are aware of the allegations at this stage.

23. Should an allegation of misconduct involve individuals from institutions other than the

University of Suffolk, the Responsible Person will contact their counterpart(s) at the other

institution(s) to agree:

a. whether one institution will be nominated as the lead institution to investigate the allegation

b. whether each institution will investigate separately

c. how each institution will be involved in the process (for example, by providing panel

members)

24. Where contractually required, third parties such as Research Councils, must be informed

of allegations of research misconduct at the start of the Screening Stage and updated at all

subsequent stages. Following investigation, where an allegation of research misconduct has been

upheld, the Responsible person will inform all relevant third parties (for example, editors of journals

Research Misconduct Policy

Page 5 of 10

in which the respondent has published articles to correct the research record).

25. If the Responsible Person decides to proceed to a formal investigation under this

procedure, they should take the following steps, in consultation with the Pro Vice-Chancellor

Research and Knowledge Exchange, Director of People and Organisational Development (staff)

or the Academic Registrar (students) as appropriate unless it involves them:

a. Consider whether to recommend to the Director of People and Organisational Development

or the Pro Vice-Chancellor Research and Knowledge Exchange that the respondent(s)

be suspended during part or all the investigation. This is likely to be appropriate where the

investigation may be inhibited or there is a risk to other employees, students, University

property, working relationships or the continuation of another research. If suspension is

considered necessary, it must be conducted in line with the relevant staff or student

disciplinary/misconduct procedure. The continued need for suspension should be

reviewed regularly throughout its duration.

b. If the research concerned is funded by an external body, then the Responsible Person

should ensure that the funding body's requirements are met in terms of communication

about allegations of research misconduct. For example, several research councils and

charities have clauses stating that they should be notified of cases of suspected misconduct

and kept informed of developments. Where funding bodies wish to conduct their own

investigation, it should be done in partnership with the Institution, and the Institution will

retain its responsibilities as employer.

c. Consideration should be given as to whether any other collaborators need to be informed

or consulted. The Responsible Person should always bear in mind the requirements of the

Data Protection Act when considering what information to release and should always

remember that they need to protect the identity of the potentially innocent respondent(s)

where possible.

d. If the alleged misconduct could constitute a criminal offence, then the police should be

informed at the appropriate time. The Pro Vice-Chancellor Research and Knowledge

Exchange should inform the Dean of School/Director of Research Institute and the

Director of People and Organisational Development (staff) or Academic Registrar

(students) prior to notifying the police. If the police become involved in the matter, their

advice should be sought as to whether to suspend the internal investigation while they

carry out their own enquiries.

e. If the alleged misconduct concerns a matter related to the safeguarding of children, young

people or vulnerable adults, the procedure outlined in the <u>Safeguarding Policy and Code</u> of <u>Practice</u> should be followed. In these circumstances the early advice of the Designated

Safeguarding Officer or the Director of People and Organisational Development should be

sought before any action is taken.

Page 6 of 10

f. The Responsible Person should appoint an Investigation Team to gather and evaluate the

facts in an expeditious manner. This team should consist of at least two people at an

appropriately senior level (from within or outside the Institution), who have the relevant

expertise in the appropriate field if necessary, and who are not (and have not been) directly

involved in the specific piece of research which is subject to the investigation. In addition,

the Responsible Person must ensure that there could be no conflict of interest.

Investigation Team members must be given a copy of this policy at the time they are

appointed.

g. The Responsible Person should confirm to the respondent(s), (verbally and in writing) the

following:

The nature of the allegation

The decision to conduct an investigation.

The duration of the investigation

The members of the investigation team

Sources of support, e.g., counselling

The right to representation during the process, i.e., by Trade/Students' Union or

workplace colleagues

h. The respondent(s) should also be given a copy of this policy and be advised that the notes

of any interviews may be used in any subsequent disciplinary process, where deemed

appropriate to do so.

The Formal Investigation

26. The remit of the investigation team is to establish, examine and evaluate all relevant

facts to assess whether there is evidence that research misconduct has been committed, and if

so, the nature of the misconduct.

27. The investigation will be conducted as quickly as possible so as not to prolong the matter.

28. The investigative team will interview the complainant and any other witnesses as they

see fit, in addition to examining the relevant research records and materials where necessary.

29. When arranging interviews, investigative team will confirm to the interviewees their rights

to representation where appropriate.

30. The investigative team should:

a. confirm to the interviewees, when arranging interviews, their rights to representation where

appropriate.

b. arrange to interview the respondent(s) after all other witnesses.

Research Misconduct Policy Version: 5.0 (December 2024)

allow the respondent(s) to: ask questions.

• present evidence in their defence.

request further witness statements if necessary.

raise points about any information given by any witness.

31. A written record of each interview will be produced, and the interviewee will be asked to

sign to confirm its accuracy.

32. Once the investigative team have completed their interviews and examined any other

records or materials as appropriate, they will prepare a report setting out the evidence, the

accounts of the interviews and a summary of their findings.

Outcome of the Formal Investigation

33. The investigative team will submit their final report to the Responsible Person, who will

determine what action to take, following consultation with the Director of People and

Organisational Development or Academic Registrar. Possible actions are as follows:

a. Further investigations may be undertaken if evidence is unclear, or further evidence needs

to be sought.

b. The matter may be dismissed if there appears to be no case to answer.

c. The matter may be resolved informally through training or counselling if there only appears

to be misconduct of a minor nature.

d. The matter may be taken forward under the appropriate stage of the relevant staff or

student disciplinary procedure (further investigation in these circumstances may not be

necessary). This is where a panel would convene and hear evidence if necessary.

34. In all cases the respondent should be informed of the decision taken both in person and

in writing by the Responsible Person.

35. If the matter has been dismissed, the Responsible Person should take appropriate steps:

a. To preserve the good reputation of the respondent and protect the complainant from any

victimisation.

b. If, however, the allegation is found to have been malicious, vexatious, or frivolous, then

action may be initiated against the complainant under the relevant disciplinary policy,

subject to the provisions of the Whistleblowing Policy.

Action Following Final Outcome

36. Once the matter has been resolved, the Responsible Person should inform those parties

Research Misconduct Policy Version: 5.0 (December 2024)

who have a legitimate interest in the matter. This could include the funding body, a relevant

professional body, or the editor of journals in which articles have been published relating to the

research in question.

37. Where an allegation has been upheld, the Responsible Person should check the conditions

of the relevant funding body in relation to the specific funding for the research in question and take

any action as appropriate. This could involve returning funds or correcting research papers.

38. If the respondent(s) has obtained any qualification through proven misconduct, then the

Responsible Person should consider making a recommendation to the Institution that the

qualification is revoked.

External Referrals

39. In cases where an allegation concerns or implicates someone who is not a member of

university staff, the Designated Person shall consider whether the conclusions of the investigation

will be brought to the attention of any other appropriate person/s or body.

40. Where the research is externally funded, in whole or in part, the Designated Person shall

have regard to any guidance issued by the relevant funding body and shall ensure that the Director

of any such body is given appropriate information at the earliest opportunity.

Useful Resources

When involved in any cases involving Research Misconduct, it is advisable to become

familiar with the following relevant policies/procedures:

Disciplinary Policy and Guidance

Academic Misconduct Policy

Safeguarding Policy and Code of Practice

Whistleblowing Policy

The Concordat to Support Research Integrity

The UK Research Integrity Office's (UKRIO)

42. Code of Practice for Research has been designed to encourage good conduct in research

and help prevent misconduct, to assist organisations and researchers to conduct research of the

highest quality. It provides general principles and standards for good practice in research,

applicable to both individual researchers and to organisations that carry out, fund, host or are

Research Misconduct Policy Version: 5.0 (December 2024)

Owner: PVC (Research & Knowledge Exchange)

Page 9 of 10

otherwise involved in research.

43. If an individual or organisation needs independent advice about research misconduct

issues, they can contact the UK Research Integrity Office who offer a free of charge advisory

service.

44. UKRIO guidance for Research Integrity for Organisations and Researchers the University

of Suffolk will:

ensure that good practice in research forms an integral part of their research strategy or

policy.

establish clear policies and procedures that cover the principles of good practice in

research.

ensure that these policies and procedures complement and are in accordance with existing

organisational policies, such as those for health and safety, raising concerns at work,

management of finances or of intellectual property, and equality and diversity.

make sure that their researchers are aware of these policies and procedures and that all

research conducted under the auspices of the organisation complies with them.

provide training, resources, and support to their researchers to ensure that they are aware

of these policies and procedures and can comply with them.

encourage their researchers to consider good practice in research as a routine part of their

work.

Monitor these measures for suitability and effectiveness and review them where necessary.

45. The University of Suffolk Researchers should:

Recognise their responsibility to conduct research of high ethical standards.

Complete the Mandatory Research Integrity Training

Be aware of their organisation's policies and procedures on good practice in research.

Make sure that their research complies with these policies and procedures and seek

guidance from their organisation when necessary.

Work with their organisation to ensure that they have the necessary training, resources,

and support to conduct their research; and

Suggest to their organisation how guidance on good practice in research might be

developed or revised.

Research Misconduct Policy Version: 5.0 (December 2024)

Owner: PVC (Research & Knowledge Exchange)

Page 10 of 10