



# HARTPURY

## Hartpury University Procedure for the Investigation of Allegations of Misconduct in Research

### Introduction

1. Hartpury University is committed to undertaking high quality research and knowledge exchange, undertaken in an environment of high standards of research integrity, governance and good practice. The University's Code of Research and Knowledge Exchange Practice sets out the expectations of all who are engaged in or support our research and knowledge exchange ('researchers') in and/or for the University.
2. Failure by a researcher to comply with the provisions of the Code will be grounds for action to be taken under the University's Procedure for the Investigation of Allegations of Misconduct in Research (the Procedure). In particular, any allegation or complaint of misconduct will be investigated and dealt with under the Procedure and may be subject to action under the University's disciplinary procedures. Alleged misconduct in research relating to a PhD student's research or to a thesis that has been submitted for examination will normally be investigated under the Procedure.
3. Staff and students have a duty to report misconduct in the prosecution of research, where they have good reason to believe it is occurring, to the Pro Vice-Chancellor. The University will investigate allegations or complaints about misconduct in research or about scientific or scholarly fraud. This Procedure is consistent with and guided by the Hartpury Public Interest Disclosure Procedure ('Whistle Blowing').
4. Any internal complainant who can be shown to have acted maliciously may also be subject to action under the University's disciplinary procedures.
5. Researchers who wish to submit their work to a formal process of internal scrutiny (in the event of retraction of published work or similar) are required to initiate this Procedure.
6. 6. The development of this Procedure has drawn on the UK Research Integrity Office's Procedure for the Investigation of Misconduct In Research (UKRIO, August 2008) and the published procedures of a number of UK universities.

## **Definition of Misconduct**

Misconduct in research is defined as any breach of the University's Code of Research and Knowledge Exchange Practice, or other practices that seriously deviate from those that are commonly accepted within the academic and research communities for proposing, conducting, reporting, translating or using research. It specifically encompasses, but is not restricted to:

- i) Fabrication, including the creation of false data or other aspects of research, including documentation and participant consent.
- ii) Falsification, including the inappropriate manipulation and/or selection of data, imagery and/or consents.
- iii) Misrepresentation of data and/or interests and/or involvement and/or qualifications, experience or credentials and/or publication history.
- iv) Plagiarism, including the general misappropriation or use of others' ideas, intellectual property or work (written or otherwise), without acknowledgement or permission.
- v) Failure to follow required legal, regulatory or professional obligations or processes.
- vi) Failure to declare actual or potential conflicts of interest to line manager or others as required.
- vii) Failure 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 or the environment.
- viii) Any breach of data protection legislation or failure to follow accepted procedures or to exercise due care in carrying out responsibilities for the proper handling of privileged or private information on individuals or organisations collected during the research.
- ix) Improper conduct in peer review (or equivalent) of research proposals, results, manuscripts or other processes.
- x) Intentional damage to, or removal of, the research-related property of another.
- xi) Improper dealing with allegations of misconduct.
- xii) Intentional non-compliance with: the terms and conditions governing the award of external funding for research; the University's policies and procedures relating to research, including accounting requirements, ethics, and health and safety regulations; or any other legal or ethical requirements for the conduct of research.

Misconduct in research does not include unintentional error or professional differences in interpretation or judgment of data.

For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission.

## **Scope**

1. This Procedure applies to any person conducting research under the auspices of the University, including staff, research students, visiting researchers (including visiting research students), emeritus staff, associates, honorary or clinical contract holders, contractors and consultants.

2. Any investigation into alleged misconduct by a person who is not an employee or registered student of the University may involve the substantive employer of the individual, if appropriate. The nature of any actions to be taken following the investigation may be discussed with the individual's employer.
3. It is intended that any action carried out under this Procedure will be sufficient to comply with the preliminary and investigation stages required by the University's Disciplinary & Dismissal Policy & Procedure and by the Academic Regulations of Hartpury and of the University of the West of England.
4. The Procedure will also apply to any allegation of research misconduct made against a person in relation to research by them before they started undertaking research under the auspices of the University.
5. The University will follow this Procedure through to completion even in the event that the individual(s) concerned has left or leaves the jurisdiction of the University, either before the operation of this Procedure is concluded or before the allegation(s) of research misconduct was made.
6. Financial fraud or other misuse of research funds or research equipment may be addressed under the University's Financial Regulations instead of under this Procedure.
7. Nothing in this Procedure shall limit the right of the University or a member of staff of the University or a student of the University to exercise their rights under any Statutes and Ordinances concerning discipline and grievance.

## **Details of the Procedure**

### **A. Safeguards**

1. A presumption of innocence is maintained until the investigation process is complete and complainants who have made allegations in good faith, whether substantiated or not, will be protected. The University is committed to ensuring that all allegations of research misconduct are investigated thoroughly, fairly and expeditiously, and with care and sensitivity.
2. An allegation of research misconduct is potentially defamatory and, therefore, actionable in law. For the protection of the Respondent (the person who is the subject of the allegation) and Complainant (the person making the allegation), this Procedure must be conducted in strict confidentiality and disclosed only to those identified as having a role in the Procedure. The identity of the Complainant(s) or the Respondent(s) will not be made known to any third party unless it is deemed necessary in order to carry out the investigation.
3. Individuals involved in carrying out the investigation procedure must at all times bear in mind the five principles of the Procedure, namely: Fairness, Confidentiality, Integrity,

Prevention of Detriment, and Balance. They should confirm when appointed under this Procedure that they have no conflict of interest with the case. They will not make any comment on the allegation or its investigation unless formally requested by the University or otherwise required to by law. They will treat all information concerning the allegation and its investigation as confidential.

4. Every allegation will be given serious consideration. However, in the event that an allegation is found to be without basis and made with malicious intent, the University may consider initiating disciplinary or conduct proceedings against the Complainant(s).
5. At any stage of the process the Named Person (the senior person in the University with responsibility for this Procedure), supported by Human Resources, may decide to take specific immediate actions, to prevent further risk or harm, or where there are any contractual or regulatory obligations relating to the situation, such as reporting the allegation or the initiation or outcome of the investigation to an external body.
6. Such actions could include suspension of a member of staff or student [in accordance with the relevant University Statute(s)], or other restrictions on access or interactions, or refusing to allow any new applications for funding or supervision by the researcher(s) involved until the investigation has been completed. Decisions to contact any external parties will be taken only after an initial assessment of the allegation by the Named Person. The relevant Head of Department or line manager will be contacted on all these occasions.
7. The Respondent and the Complainant may be accompanied at any meeting required under this Procedure by a colleague or a trade union representative or, in the case of a student, a relevant member of the Students' Union. They should be informed of this right in any correspondence.
8. The operation of this Procedure will be supported by Human Resources to enable full and consistent recording of the proceedings. They will support the Named Person and any Investigator or Panel appointed under this Procedure, drawing on the UK Research Integrity Office documentation (UKRIO, 2008) for guidance as necessary.
9. Throughout this Procedure correspondence may be in physical or electronic form, and the phrase 'in writing' will be taken to mean either form. This Procedure sets out expected timescales, but they are not binding on the University. Any substantive delay should be explained to all parties in writing.

### **A.1 Raising a Concern about Research Conduct**

1. A concern about the conduct of the University's research should be raised with the Deputy Vice-Chancellor, who is the University's Named Person with respect to the Procedure:

Deputy Vice-Chancellor  
Hartpury University

Gloucester  
GL19 3BE  
Email: Rosie.Scott-Ward@hartpury.ac.uk

If for any reason the individual believes that it is inappropriate for the allegation to be made to the Named Person, then the matter should be raised with Vice Principal - Resources. If the allegation is made to the Named Person but they have any connection with the allegation, it will be passed to the Vice Principle Resources.

2. A member of staff or student may also choose to raise a concern in the first instance with a Head of Department, line manager or colleague and ask that person to support them in bringing forward the allegation.
3. Any member of staff or student in receipt of an allegation of research misconduct should inform the Named Person.
4. The Named Person should acknowledge receipt of the concern or allegation.

## **A.2 Initial Actions**

1. The Named Person will assess the concern or allegation against the definitions of research misconduct provided in Section B to determine whether it is in the scope of this Procedure. He/she will inform and may seek advice from HR or Student Services or may take legal or other expertise advice, as appropriate, in confidence.
2. If the concern or allegation relates to research misconduct the Named Person will ask the Complainant(s) to submit in writing a detailed statement in support of the allegation (if they have not already done so) indicating: the precise allegation(s), the substantiating evidence, and what informal steps, if any, have already been taken to resolve the issue.
3. The Named Person will also take other such actions as are required (i.e. for safety, statutory, regulatory or contractual reasons) and to secure all relevant records, materials and locations. Suspension or other restrictions may also be relevant in some cases.
4. The Named Person will inform the Respondent that an allegation of research misconduct has been made against them. Preferably, this should take place in a confidential meeting with a representative of HR in attendance. The Representative may be accompanied as indicated above. A copy of this Procedure will be provided to them.
5. Where the situation is not considered to be serious in nature, local resolution or mediation via the Named Person should be attempted before starting the procedure, where possible.
6. If the Named Person determines that the allegation falls outside of the scope of this Procedure, he/she will inform the Complainant in writing, providing reasons for the decision

and which process or body might be appropriate for handling the concern, allegation or complaint.

7. Where the allegation relates to financial fraud or other misuse of research funds or equipment / facilities, the Named Person may choose to initiate an investigation under the University's Financial Regulations rather than this Procedure.
8. The Named Person should confirm the outcome of these initial actions to the Complainant in writing within 10 days of receipt of the concern or allegation. A copy of this Procedure will also be provided to them.

### **A.3 Preliminary Investigation**

1. The purpose of the Preliminary Investigation is to determine whether there is sufficient evidence of research misconduct to warrant a formal investigation of the allegation.
2. Following receipt of the written formal allegation, the Named Person will notify the Respondent(s) of the allegation in writing within 5 days of its receipt if it follows the initial actions. The Respondent may provide a written response to the allegation, within 10 days of their receipt of the formal allegation.
3. Where an allegation is made against a group, efforts will be made at this step in the process, and at all subsequent steps, to identify which group members are not subject to the investigation.
4. As soon as possible after receiving the formal allegation, normally within 10 days, the Named Person will appoint an Investigator to conduct a Preliminary Investigation. The Investigator should be a senior member of the University's academic staff, preferably with some knowledge of the area of research. For particularly complex cases the Named Person may decide to appoint a Panel of three persons, which might include someone from outside the University.
5. The Named Person will notify both the Respondent and the Complainant of the nomination of the Investigator or the Panel and provide them with the opportunity to raise any concerns within 5 days. The Named Person will consider any concerns and may decide to replace the Investigator or a Panel member. Their decision will be final.
6. The Investigator or Panel will consider the allegation, any supporting evidence, the Respondent's written statement and any other relevant documentation or background information.
7. The Investigator or Panel should interview both the Respondent and the Complainant, where possible, plus others as necessary. The identity of the Complainant will normally be

kept confidential unless this is incompatible with a fair and thorough investigation and/or there is an overriding reason for disclosure.

8. The Investigator or Panel may seek confidential advice from persons with relevant expertise, both within the University and outside it, in order to complete the Preliminary Investigation.
9. The Investigator or Panel will normally aim to complete the Preliminary Investigation and produce a draft report within 30 days of appointment.
10. The Investigator or Panel will provide the draft report to the Named Person, who will pass it to the Respondent and the Complainant for comment on its factual accuracy. Each will be given 5 days in which to provide relevant comments. The Investigator or Panel will consider any comment and make changes where they feel it is appropriate. The report will then be finalised and sent to the Named Person, to be passed to the Respondent and the Complainant.
11. At the conclusion of the Preliminary Investigation, the Investigator or Panel will determine whether the allegation of misconduct in research:
  - i) is unfounded, because it is mistaken, frivolous, vexatious and/ or malicious, or is otherwise without substance, and should be dismissed; or
  - ii) warrants referral directly to: the University's disciplinary procedures; another relevant University process; or to an external organisation, including but not limited to statutory regulators or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise; or
  - iii) has some substance but due to a lack of intent to deceive or due to its relatively minor nature, can be addressed through education and training or other non-disciplinary approach; or
  - iv) is sufficiently serious and has sufficient substance to warrant a Formal Investigation.
12. Where the allegation is considered to be mistaken, frivolous, vexatious and / or malicious the Named Person should take such steps, as are appropriate in the light of seriousness of the allegations, to sustain the reputation of the Respondent and the relevant research project(s). In addition, appropriate action may be taken against anyone who made frivolous, vexatious and/ or malicious allegations.
13. The Named Person will confirm the outcome of the Preliminary Investigation to the Respondent and the Complainant and, where and in the manner appropriate, the next steps or actions to be taken.
14. Where a Formal Investigation is recommended, the Named Person will inform the Dean of Research and Knowledge Exchange and the Head of Department of the Respondent. Where the Respondent is a current student, the Registrar and the Academic Registrar of the University of the West of England will also be informed.

#### **A.4 Formal Investigation**

1. The purpose of the Formal Investigation is to examine the evidence and decide if research misconduct has been committed and, if so, the seriousness of the misconduct.
2. The Named Person will establish a panel of at least three members with the necessary expertise to examine the evidence, interview witnesses and conduct the investigation. At least one of the members of the Panel should be from outside the University. The Named Person will select the Chair of the Panel from its appointed members. The formation of the Panel will normally be appointed within 30 days of the completion of the Preliminary Investigation. The Panel should not include the Investigator or Panel members from the Preliminary Investigation.
3. The Named Person will notify both the Respondent and the Complainant of the nomination of the Panel and provide them with the opportunity to raise any concerns within 5 days. The Named Person will consider any concerns and may decide to replace a Panel member. Their decision will be final.
4. The Chair of the Panel will be responsible for the conduct of the Panel under this Procedure and will determine its own process in the conduct of the investigation. The Panel does not have any disciplinary powers.
5. The Panel will consider the written allegation, any supporting evidence, the Respondent's written statement and any other relevant documentation or background information.
6. The Panel can, if it judges it necessary, require the Respondent or other members of the University to produce files, notebooks, raw data, algorithms, and other records.
7. The Panel should interview both the Respondent and the Complainant, plus others as necessary. Both the Respondent and the Complainant have the right to submit evidence to the Panel orally and in writing. The Respondent must be given the opportunity to respond to the allegation and to comment on all of the evidence gathered by the Panel.
8. The Panel may also seek confidential advice from persons with relevant expertise, both within the University and outside it, in order to complete the Formal Investigation.
9. In carrying out the Formal Investigation the Panel will not work to a prescribed timetable, but should conduct the Formal Investigation as quickly as possible without compromising the principles and standards of the Procedure and the full and fair investigation of the allegation.
10. The Chair will report the Panel's progress to the Named Person on a monthly basis. The Named Person will then provide appropriate information on the progress of the investigation, in confidence, to the Complainant and the Respondent, and to other interested parties as appropriate.



11. The Panel will produce a draft report and provide it to the Named Person, who will pass it to the Respondent and the Complainant for comment on its factual accuracy. Each will be given 5 days in which to provide relevant comments. The Panel will consider any comment and make changes where they feel it is appropriate. The report will then be finalised and sent to the Named Person, to be passed to the Respondent and the Complainant.
12. At the conclusion of the Formal Investigation, the Panel will conclude, giving the reasons for its decision and recording any differing views, whether the allegation of misconduct in research is:
  - i) upheld in full; or
  - ii) upheld in part; or
  - iii) not upheld and will be dismissed.
13. When concluding whether an allegation is upheld in full, upheld in part or not upheld, the standard of proof used is that of 'on the balance of probabilities'.
14. The Panel may determine that an allegation is not upheld because it is mistaken, frivolous, vexatious and/or malicious or is otherwise without substance. The Panel may also determine that an allegation is not upheld because of a lack of intent to deceive or due to its relatively minor nature and will therefore be addressed through education and training or other non-disciplinary approach.
15. The Panel may make recommendations on any actions to: address any misconduct it has found; correct the record of research; address any procedural matters that the investigation has brought to light; and/or preserve the academic reputation of the University. The Panel may also make recommendations on the future operation of this Procedure.
16. If all or any part of the allegation is upheld, the Named Person with the Head of HR should then decide whether the matter should be referred to the University's Disciplinary & Dismissal Policy & Procedure for a member of staff, or to the Academic Regulations for a research student.
17. Where the allegation is not upheld the Named Person should take such steps, as are appropriate in the light of seriousness of the allegations, to sustain the reputation of the Respondent and the relevant research project(s). As with the Preliminary Investigation, if the allegation is considered to be mistaken, frivolous, vexatious and/or malicious the Named Person should consider appropriate action against anyone who made frivolous, vexatious and/or malicious allegations.
18. The conclusions of the Panel will be shared with the Vice-Chancellor, the Dean of Research and Knowledge Exchange, and the Head of Department. Where the Respondent is a current student, the Registrar and the Academic Registrar of the University of the West of England

will also be informed. This communication will take place after the completion of the Disciplinary Process if that is the outcome of this Procedure.

19. The Named Person will confirm the outcome of the Formal Investigation to the Respondent and the Complainant and, where and in the manner appropriate, the next steps or actions to be taken.
20. Other than for the correction of factual errors, the Respondent cannot appeal against the reports of either stage of the Procedure. The Respondent has the statutory right of appeal should the matter be referred to the disciplinary process.

#### **A.5 Findings and Subsequent Actions**

1. The investigation carried out in the terms of this Procedure will be sufficient to meet the investigation required into misconduct under the Disciplinary & Dismissal Policy & Procedure and the Academic Regulations. Thereafter, the Disciplinary & Dismissal Policy & Procedure or the Academic Regulations should be followed in relation to all University employees and research students respectively.
2. The Named Person will, where appropriate, notify the following in writing of the outcome of the investigation: any relevant regulatory or professional bodies, any relevant partner organisations and any other persons or bodies as he/she deems appropriate, including but not limited to the editors of any journals that have published articles concerning research linked to an upheld allegation of misconduct in research and/or by a person against whom an allegation of misconduct in research has been upheld.
3. The Named Person will also take any administrative actions that may be necessary to: meet all legal and ethical requirements; protect the funds and/or other interests of grant- or contract-awarding bodies; and meet all contractual commitments, including any relating to disclosure of the outcome of the Formal Investigation.
4. When it is concluded that the allegation is not upheld and any issues will be addressed through education and training or other non-disciplinary approaches, the Named Person will work with relevant University staff to establish a programme of training or supervision in conjunction with the Respondent and his/her line manager. This programme will include measures to address the needs of staff and students working with the Respondent.
5. The Vice-Chancellor, in conjunction with the Named Person, will determine the nature of any further action to be taken regarding investigated misconduct in relation to any research carried out for the University by any individual not employed by or registered with the University. This may include advising the employer or institution of the individual concerned of the findings of the investigation. The Vice-Chancellor may also consider the suspension or withdrawal of any honorary contract. Where no action is to be taken in relation to persons not employed by the University, the Named Person will take all appropriate steps to inform all parties previously notified of the alleged misconduct of this outcome.

## **B. Reporting, Record Keeping and Use of Anonymised Reports for Internal Training**

1. Reports generated by Preliminary and Formal Investigations of allegations addressed under this Procedure will be circulated, in confidence, on an annual basis to the Research and Knowledge Exchange Committee, as will follow-up reports relating to any actions taken following the conclusion of such investigations. All such reports will be anonymised and/or have content redacted as appropriate.
2. With the specific agreement of the Named Person, suitably anonymised and/or redacted accounts of completed investigations may be used by the Dean of Research and Knowledge Exchange for internal training purposes on a confidential basis.
3. An annual Statement will be published on the University website in November each year, reporting data from the previous academic year. The wording of this statement will be approved by the Hartpury Executive Team each year in September/October. The statement will include, in tabulated format, the number of formal investigations, their outcome and whether the allegation(s) was made against staff or student. It will also describe the activities undertaken to comply with the Concordat to Support Research Integrity.
4. At the conclusion of the proceedings, records will be kept by HR for 10 years. Access to the archive will be limited to appropriate members of HR, the Named Person and their nominated alternates.

### **Reference to Other Policies**

Hartpury University Policies:

[Code of Research Practice](#)

[CODE OF PROFESSIONAL CONDUCT 2023 \(hartpury.ac.uk\)](#)

[Public Interest Disclosure Procedure \('Whistle Blowing'\)](#)

UKRIO (2008), Procedure for The Investigation of Misconduct in Research, UK Research Integrity Office, August 2008

[UKRIO \(2008\), Procedure for The Investigation of Misconduct in Research](#)

UUK (2019), Universities UK Concordat to Support Research Integrity, October 2019

[UUK \(2019\), Universities UK Concordat to Support Research Integrity, October 2019](#)

### **Equality, Diversity and Inclusion**

As with all Hartpury policies and procedures, due care has been taken to ensure that this policy is appropriate to all members of staff regardless of their age, disability, ethnicity, gender, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation and transgender status.

The policy will be applied fairly and consistently whilst upholding Hartpury's commitment to providing equality to all. If any employee feels that this or any other policy does not meet this aim, please contact the HR Department.

Hartpury is committed towards promoting positive mental health by working towards the MINDFUL EMPLOYER Charter. Hartpury aims to create a culture of support within the workplace where employees can talk about mental health problems without the fear of stigma or discrimination.

### **Approval and Review Cycle**

Date Last Approved	October 2023
Policy Owner	Academic Dean RKE
Approving committee	Academic Board
Status	Approved
Effective	October 2023
Next Review	September 2024