



University
of Glasgow

University of Glasgow

Code of Policy and Procedures for Investigating Allegations of Misconduct in Research

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1. Standards of Professional Behaviour in Research

- 1.1. All researchers and students at the University of Glasgow have a duty to society, to their profession, to the University and to research funders to conduct their research in the most conscientious and responsible manner possible. It is therefore essential that all researchers are aware of their responsibility and observe these standards at all times while carrying out their work, as described in the [Code of Good Practice In Research](#).
- 1.2. Research misconduct is least likely to arise in an environment where good, open research practice (e.g. documentation of results, peer review of research, regular discussion, and seminars) is encouraged and where there is adequate supervision at all relevant levels. It is the responsibility of Heads of School to clearly convey the standards, protocols, and ethics for research in their domains and to ensure that adherence to those standards is a matter of course.
- 1.3. Employees and students undertaking research should be made aware of relevant policies and procedures involving grants and contracts, research compliance, intellectual property management, consultancy, and commercialisation activities¹ and comply with the standards of practice set out in guidelines published by funders, journals, publishers, scientific societies, and other relevant professional bodies. The Heads of School should also bring to the attention of any employee or student carrying out research for the relevant School any specific standards and ethics that may be applicable in that School.
- 1.4. **Definition of Misconduct in Research**
 - 1.4.1. When we refer to misconduct in research, we are referring to infringements under **section 2.2** that relate to the work conducted in the research. Bullying and harassment, although a staff/student misconduct issue, is outside the scope of this policy and we would refer you to the University's [Dignity at Work and Study Policy and Procedures](#).
 - 1.4.2. Any practice or conduct of employees or students that deviates from professional academic standards or from ethical or regulatory requirements relevant to a discipline for planning, conducting, and reporting research may constitute research misconduct. Violation of University policy is likely to render any member of staff liable to the University's [Disciplinary Procedures](#), and students liable to the [Student Code of Conduct](#) within the University Calendar.
- 1.5. **Scope of the Policy**

This policy applies to:

 - 1.5.1. All individuals carrying out research for the University including, without limitation, all **University employees**, irrespective of whether their current place of work is on or outside University premises.
 - 1.5.2. All **visiting researchers** of the University, irrespective of whether they are employed by the University, including persons with **honorary/affiliate**

¹ The University's policies can be found at <https://www.gla.ac.uk/research/strategy/ourpolicies/>

- positions conducting research within, or on behalf of, the University.
- 1.5.3. **Matriculated postgraduate research (PGR) students (see 1.7).**
 - 1.5.4. **Visiting PGR students** undertaking research associated with the University.
 - 1.5.5. **Contractors engaged by the University** who are conducting research within, or behalf of, the University.
- 1.6. After investigation into alleged misconduct by any person **who is not an employee of the University**, the Clerk of Senate, (who is the person named by the University to have responsibility for overseeing the process of investigating allegations of research misconduct. This role is referred to as the 'Named Person' in the rest of this document) will determine the nature of any further action to be taken in relation to the findings, which may involve liaison with the employing or host institution.
- 1.7. Alleged misconduct in research relating to a PGR student thesis will normally be investigated under the University's [Student Code of Conduct](#), instead of under this procedure. However, at the discretion of the Named Person, allegations of misconduct in research may be dealt with under this Procedure. This includes but is not limited to published papers that were submitted as part of work for the thesis. The procedures for investigating research misconduct involving PGRs are the same as those for staff in this policy.
- 1.8. It is intended that any action carried out in terms of this procedure will be sufficient to comply with the preliminary and investigation stages required by the [University's Disciplinary](#) and [Student Conduct Procedures](#).

2. What is Research Misconduct?

- 2.1. The setting of standards of professional behaviour in research is not intended to compromise the freedom of academic staff to question and test received wisdom and to put forward new ideas and controversial or unpopular opinions.
- 2.2. Research misconduct is characterised as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. Research misconduct can take many forms, including:
- 2.2.1. fabrication: making up results, other outputs (for example, artefacts) or aspects of research, including documentation and participant consent, and presenting and/or recording them as if they were real
 - 2.2.2. falsification: inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents
 - 2.2.3. plagiarism: using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission
 - 2.2.4. failure to meet: legal, ethical and professional obligations, for example:
 - not observing legal, ethical and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment
 - breach of duty of care for humans involved in research whether

deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent

- misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality
- improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest; inadequate disclosure of clearly limited competence; misappropriation of the content of material; and breach of confidentiality or abuse of material provided in confidence for the purposes of peer review

2.2.5. misrepresentation of:

- data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data
- involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution
- interests, including failure to declare competing interests of researchers or funders of a study
- qualifications, experience and/or credentials
- publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication

2.2.6. improper dealing with allegations of misconduct: failing to address possible infringements, such as attempts to cover up misconduct and reprisals against whistle-blowers, or failing to adhere appropriately to agreed procedure in the investigation of alleged research misconduct accepted as a condition of funding. Improper dealing with allegations of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.

2.3. The basis for reaching a conclusion that an individual is responsible for misconduct in research relies on a judgement that, on a balance of probabilities, there was an intention to commit the misconduct and/or recklessness/negligence in the conduct of any aspect of the research project.

2.4. Activities that, outside formal investigation procedures, attempt directly or indirectly to influence the course of a misconduct investigation constitute staff/student misconduct, and allegations will be investigated via the University's [Disciplinary Procedures](#), or the [Student Code of Conduct](#)

3. Misconduct Investigation Procedure

For ease of reference, the procedures detailed in this section are summarised in the flowchart in **Section 8** of this document.

3.1. Key Features

- 3.1.1 The University is committed to ensuring that all allegations of research misconduct are investigated thoroughly, fairly, and expeditiously, and with care and sensitivity.
- 3.1.2 As described in detail in **Section 3.2.1**, a concern about research conduct should, in the first instance, be raised and discussed, if possible, with the relevant [Research Integrity Adviser or Research Integrity Champion](#) within the School or College.
- 3.1.3 In some circumstances, it is necessary to raise a concern directly at University level. On these occasions, concerns should be communicated to the Named Person via the research-integrity@glasgow.ac.uk inbox. The Named Person is responsible for initiating and supervising the procedure for investigating concerns or allegations; maintaining records; reporting on the investigations; and taking decisions at key stages of the process. In the handling of allegations, the Named Person will normally act only after consultation with the Integrity Council.
- 3.1.4 Individuals involved in carrying out the investigation procedure must at all times bear in mind the five principles of misconduct investigations as defined by the [UK Research Integrity Office \(UKRIO\) Misconduct Policy \(pages 45- 51\)](#), namely: Fairness, Confidentiality, Integrity, Prevention of Detriment, and Balance.
- 3.1.5 All possible steps will be taken to protect the confidentiality of the person(s) making the allegation of research misconduct (the Complainant(s)) and of the researcher(s) against whom an allegation of research misconduct has been made (the 'Respondent(s)'). Unless the Complainant(s) indicates a preference to be named, the identity of the Complainant(s) or the Respondent(s) will not be made known to any third party unless it is deemed necessary, e.g. in order to carry out the investigation. The decision as to whether the identities of the Complainant(s) and/or the Respondent(s) need to be known more widely will be taken by the Integrity Council. Any disclosure to a third party of the identity of Complainant(s) or Respondent(s), or of any other details of the investigation, should be made on a confidential basis. Breaching this confidentiality may lead to disciplinary action.
- 3.1.6 Reasonable steps must also be taken to ensure that neither the Respondent(s) nor any other party suffer detriment due to unconfirmed or unproven allegations. Individuals who are handling a concern about research conduct should communicate the relevant information to College-based Human Resources (HR) staff, or the Student Representative's Council (for students) who will offer support to Respondent(s), Complainant(s), and other parties, as required.
- 3.1.7 Investigations of research misconduct may cross institutional boundaries, such as when individuals (staff members or students) move between institutions, or a researcher or project is based at multiple institutions. Where the University of Glasgow is in receipt of an allegation of research misconduct that crosses the boundaries of Russell Group member institutions, the University of Glasgow will follow the procedure set out in the [Russell Group Statement of Cooperation](#). The University of Glasgow will also

aim to follow the principles of the Russell Group procedure when handling cross-institutional investigations involving institutions outside the Russell Group.

3.2 Raising a concern about research conduct

3.2.1 *Allegations raised by a member of the University.*

Any staff member or student of the University who has concerns about a research conduct issue or may be considering making an allegation of research misconduct should in the first instance seek advice from a [Research Integrity Adviser](#) in their School. If the individual is not comfortable doing this, then they are also free to discuss the issue with any other Research Integrity Champion or Research Integrity Adviser out with their School. Research Integrity Advisers will, following consultation with a [College Research Integrity Champion](#), undertake a preliminary assessment of the concerns and advise the integrity adviser on how best to proceed in accordance with the procedures outlined below and summarised in the flowchart (**Section 8**). Where appropriate, an attempt should initially be made to resolve the issue informally via the Research Integrity Advisers or Research Integrity Champions in the School/ College.

3.2.2 In the event that the outcome of an informal approach is not satisfactory, or if such an approach is deemed to be inappropriate, a formal allegation should be raised with the College Research Integrity Champion, who will notify the Named Person of the allegation as soon as possible, using the contact details below:

Clerk of Senate, Senate Office
Gilbert Scott Building, University of Glasgow,
G12 8QQ
UK

Email: research-integrity@glasgow.ac.uk

3.2.3 If, for any reason, the individual believes that it is inappropriate for the allegation to be made to the relevant Research Integrity Adviser or Research Integrity Champion, a formal allegation can be raised directly with the Named Person, including an explanation of the reasons for the allegation.

3.2.4 The Research Governance and Integrity Team can also be contacted directly to report an allegation of misconduct. E-mails sent to the following address are treated as confidential and are accessed only by members of the Research Integrity Team.

Email: research-integrity@glasgow.ac.uk

3.2.5 *Allegations raised by a person or organisation external to the University*

Any person or organisation external to the University wishing to report suspected research misconduct should contact the Named Person using the details in **Section 3.2.2** above. Any member of staff or student in receipt of an allegation of research misconduct should inform the Named Person, who will work with the local Research Integrity Adviser or Research Integrity Champion towards an informal resolution, if appropriate.

3.2.6 The University's [Whistleblowing Policy](#) can also be accessed by those

wishing to make a complaint.

- 3.2.7 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).

3.3 Preliminary procedures to determine if a Full Investigation Stage is warranted

3.3.1 *Informal resolution*

Informal resolution in the School: Where the situation is not considered to be serious in nature, local resolution, or mediation via the Research Integrity Advisers and/or Research Integrity Champion should be attempted before starting the procedure. Research Integrity Advisers and/or Research Integrity Champions in receipt of a concern or allegation should, before embarking on resolution or detailed fact-finding, summarise the nature of the case (confidentially) to the Named Person via research-integrity@glasgow.ac.uk, in order to discuss subsequent steps and, where relevant, receive advice and administrative support. The Named Person may delegate this responsibility to the Research Integrity Adviser (Misconduct). Where a case is resolved informally within the School, details of the case should be recorded locally by the person who resolved it (either the Research Integrity Champion or Research Integrity Adviser) in their logbook which is then submitted annually to the Research Integrity Adviser (Misconduct). See also the Flowchart in **Section 8**.

- 3.3.2 **Informal resolution by the Named Person:** Where it is not possible to resolve the matter locally in the College, the case should be referred by the College Integrity Champion to the Named Person.

- 3.3.3 The case would be handled by the Named Person supported by Research Services.

- 3.3.4 The Named Person will attempt to resolve the matter informally in the first instance. If this approach does not prove to be successful, they should follow the steps in the procedure below (see the Flowchart in **Section 8**).

3.4 Receipt of Allegation Stage

The purpose of the receipt of allegation stage is to assess whether the allegation relates to research misconduct and to determine the most appropriate process to investigate or otherwise assess the allegation.

This stage will be carried out by the Named Person with support from the Research Integrity Adviser (Misconduct) and the Integrity Council.

- 3.4.1 The Named Person will assess the allegation against the definitions of research misconduct provided in **Section 2.2**. If the allegation relates to research misconduct, the Named Person will consult with the Integrity Council on how to proceed. The Integrity Council is of fixed composition and comprises three senior members of staff: the Clerk of Senate, the Chair of the University Ethics Committee, and an Executive Member of People and Organisational Development. The role of the Integrity Council is to bring expertise and impartial advice at key decision-making stages; due to its senior composition, it also has the authority to take decisions on any

reputational risk to the University.

- 3.4.2 The Named Person along with the Integrity Council shall assess the allegation and may request more information from the complainant or respondent if required, in order to determine how the allegation should be handled.

3.4.3 Possible outcomes of this stage

- 3.4.3.1 The allegation(s) falls within the scope of another formal process of the University and warrants referral directly to it, including but not limited to; student code of conduct, exam regulations, academic misconduct process or equivalent; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary process; or
- 3.4.3.2 The allegation(s) warrants referral directly to an external organisation, including but not limited to: the research organisation(s) under whose auspices the research in question took place; statutory regulators; or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise; or
- 3.4.3.3 The allegation(s) presents as being related to potential poor practice rather than to misconduct. Where this is the case, the initial approach to addressing the matter will be via education and training or other non-disciplinary approach, such as mediation or mentoring, rather than through the next stage of the Procedure or other formal processes; or
- 3.4.3.4 The allegation(s) is sufficiently serious and has sufficient substance to advance to the Initial Investigation Stage of this Procedure or
- 3.4.3.5 The allegation(s) is unfounded, because it is mistaken or is frivolous/malicious or is otherwise without substance, and will be dismissed;
- 3.4.4 Once the Named Person and Integrity Council have decided that an allegation warrants further investigation, the Named Person must notify the Respondent(s) of the allegation, in writing. At the same time, the Respondent(s) should be given a copy of this Code of Policy and Procedures for Investigating Allegations of Misconduct in Research and informed of how the investigation is to proceed. Where the allegation is made against a research group, notification will be made to the Principal Investigator in the first instance. 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.
- 3.4.5 If the Named Person and the Integrity Council decide that an allegation is not to proceed, then the Named Person will write to both the complainant and

respondent informing them of this and the justification behind the decision. The Research Integrity Adviser (Misconduct) will ensure that a summary of the case is kept in accordance with the University's retention policy.

- 3.4.6 Where the outcome of the receipt of allegation stage is to proceed to the Initial Investigation Stage (**Section 3.5**), both the allegation and decision will also be communicated to the relevant Head(s) of College and the Head(s) of College HR.
- 3.4.7 If the Named Person in conjunction with the Integrity Council find that an allegation warrants further investigation, then the investigation will continue regardless of whether complaint wishes to withdraw the allegation.
- 3.4.8 The Integrity Council operates underneath the Named Person. However, where the Named Person has a conflict of interest in relation to the case, the Named Person would not be part of the Integrity Council and they would be replaced in this role by another functional Vice Principal (referred to as NP2).
- 3.4.9 The Research Integrity Adviser (Misconduct) shall identify any external funding sources for the research that is the subject of the allegation, any external collaborators, and any actions required to prevent harm, e.g., to patients. Funders and external organisations will be notified of a misconduct investigation in accordance with their individual policies. Depending on the allegation, the Integrity Council may decide to take further actions, such as requesting the temporary suspension of the Respondent(s) from supervisory duties, or suspending them from part, or all, of the premises of the University, or refusing to endorse any new applications for funding by the researcher(s) involved until the investigation has been completed. Decisions to contact any external parties will be taken only after an assessment of the allegation by the Named Person.
- 3.4.10 The receipt of allegation stage should normally be completed within a **maximum of 20 working days** from the date the allegation was received. Any delay should be explained to all parties in writing.

3.5 Initial Investigation Stage

The aim of the Initial Investigation stage is to determine whether, on the basis of initial evidence, the case should proceed to a Full Investigation Stage. Note that this stage does not determine whether misconduct occurred or who was responsible if so.

- 3.5.1 The Named Person will as soon as is practicable, appoint an individual ('the Investigator') to undertake an Initial Investigation into the allegation(s). The Investigator will normally be an experienced member of academic staff from within the Organisation and may be from within or outside the department concerned, depending on the circumstances of the investigation and at the discretion of the Named Person².

² An external appointment would be made in the situation where relevant expertise is not available internally or where those with relevant expertise have a conflict of interest. The appointment of an external Investigator would also be justified where the researcher(s) against whom an allegation(s) has been made is a former UofG employee or student but is now employed by or studying within a different organisation.

- 3.5.2 Before being appointed Investigator, potential candidates will be given the name(s) of the individual(s) involved and asked to declare no conflict of interest in writing to the Named Person before being accepted as the Investigator for this stage.
- 3.5.3 The Investigator should specifically restrict their role to evaluating the available facts in order to determine whether there is sufficient evidence of potential research misconduct to proceed to the full investigation stage. The Investigator with the assistance of the Research Integrity Adviser (Misconduct) should keep proper records of its proceedings.
- 3.5.4 In all cases, it is essential to keep circulation of details of the allegations and investigation as limited as possible. Any such information must only be disclosed subject to an undertaking of confidentiality from the recipient.
- 3.5.5 The Investigator will examine relevant research records and materials. As part of their deliberations, the Investigator must also interview the Respondent(s) whenever possible. When the Respondent(s) is interviewed, they should be informed that they may be accompanied by a member of staff or a representative of a Trade Union or, in the case of a student, an SRC representative.

3.5.6 Possible outcomes of this stage

- 3.5.6.1 The allegation(s) falls within the scope of another formal process of the University and warrants referral directly to it, including but not limited to; student code of conduct, exam regulations, academic misconduct process or equivalent; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary process; or
- 3.5.6.2 The allegation(s) warrants referral directly to an external organisation, including but not limited to: the research organisation(s) under whose auspices the research in question took place; statutory regulators; or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise; or
- 3.5.6.3 The allegation(s) presents as being related to potential poor practice rather than to misconduct. Where this is the case, the initial approach to addressing the matter will be via education and training or other non-disciplinary approach, such as mediation or mentoring, rather than through the next stage of the Procedure or other formal processes; or
- 3.5.6.4 The allegation(s) is sufficiently serious and has sufficient substance to advance to the Full Investigation Stage of this Procedure or
- 3.5.6.5 The allegation(s) is unfounded, because it is mistaken or is frivolous/malicious or is otherwise without substance, and will be dismissed.

- 3.5.7 The Investigator shall complete their initial investigation and submit their report in writing to the Named Person.
- 3.5.8 The Investigator should not make any comment on the matter in question, unless formally sanctioned by the University or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.
- 3.5.9 The report should state the evidence that was reviewed and make a conclusion based on the above options (**sections 3.5.6.1 to 3.5.6.5.**) As soon as possible after receiving the report, the Named Person will share the report with the Integrity Council, the Complainant(s), and the Respondent(s). The Named Person will then take the necessary steps to respond to the recommendation of the Investigator.
- 3.5.10 Where the Investigator recommends that the procedure should progress to the Full Investigation stage, the Named Person will additionally inform the following individuals: The Principal, the relevant Head(s) of College, the Head(s) of College HR of the relevant College(s), and the relevant Head(s) of School. Additionally, if the allegation may pose any legal risk, the Head of Legal will also be informed.
- 3.5.11 The Investigator should normally aim to complete their work within **60 working days** of being convened.

3.6 Full Investigation Stage

The purpose of the Full Investigation stage is to gather evidence relating to the investigation and to examine and evaluate all relevant evidence and conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld. The purpose of this stage is also to make recommendations, for consideration by the appropriate organisational authorities, regarding any further action the Full Investigation Panel (“the Panel”) deems necessary to address any misconduct it may have found i.e. correct the record of research, and/or address other matters uncovered during the course of its work.

- 3.6.1 When alleged misconduct is in respect of staff (currently or formerly employed) or students currently at the University, the purpose of the Full Investigation is to correct the scientific record and/or make a decision on any further consequences to that individual. Where the alleged misconduct is in respect of research carried out for the University by a person not employed by, or matriculated at, the University, the purpose of the Full Investigation is to allow The Named Person to correct the scientific record if possible and then determine whether any further action should be taken.
- 3.6.2 In all cases, it is essential to keep circulation of details of the allegations and investigation as limited as possible. Any such information must only be disclosed subject to an undertaking of confidentiality from the recipient.
- 3.6.3 The Named Person will appoint a Full Investigation Panel. The composition of this panel should be distinct from the Initial Investigation Panel and consist of one staff member from the College (or, in the absence of a related College, the relevant administrative centre) in which the research activity in question has been conducted, one staff member from elsewhere within the

University and one member who is external to the University³. No member of the Integrity Council shall serve on the Panel. The Research Integrity Adviser (Misconduct) will help the panel keep full detail records of proceedings.

- 3.6.4 Before being appointed to the Panel, potential panel members will be given the name(s) of the individual(s) involved and asked to declare no conflict of interest in writing to the Named Person before being accepted as a panel member.
- 3.6.5 In carrying out the Full Investigation, the Investigation Panel will not work to a prescribed timetable: the Panel should conduct the investigation as quickly as possible without compromising the principles of the procedure.
- 3.6.6 The Panel shall:
- 3.6.6.1 interview, where possible, the Respondent(s) and any other parties whom it deems relevant, including the Complainant(s) and other members of the research group (if applicable).
 - 3.6.6.2 widen the scope of its investigation if it considers that necessary, subject to keeping the Respondent(s) informed, in writing, of the increased scope of the investigation.
 - 3.6.6.3 require the Respondent(s) — and, if it judges it necessary, other members of the University — to produce files, notebooks, raw data, algorithms, and other records; and
 - 3.6.6.4 seek evidence from other parties.
- 3.6.7 The respondent(s) concerned must be given an opportunity to comment on all the evidence gathered by the Investigation Panel before the report is finalised. They must **respond within 10 working days**. Where the Respondent(s) is interviewed by the Panel, they should be informed that they may be accompanied by a member of staff or a representative of a Trade Union or, in the case of a student, an SRC representative.
- 3.6.8 ***Possible outcomes of this stage***
- 3.6.8.1 The allegation(s) falls within the scope of another formal process of the University and warrants referral directly to it, including but not limited to; student code of conduct, exam regulations, academic misconduct process or equivalent; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary process; or
 - 3.6.8.2 The allegation(s) warrants referral directly to an external organisation, including but not limited to: the research organisation(s) under whose auspices the research in question took place; statutory regulators; or professional bodies, the latter being particularly relevant where there are concerns relating to Fitness to Practise; or
 - 3.6.8.3 The allegation(s) presents as being related to potential poor practice rather than to misconduct. Where this is the case, the initial

³ An external appointment is a requirement of the revised [Concordat to Support Research Integrity](#) for all formal investigations.

approach to addressing the matter will be via education and training or other non-disciplinary approach, such as mediation or mentoring, rather than through the next stage of the Procedure or other formal processes; or

3.6.8.4 The allegation(s) is unfounded, because it is mistaken or is frivolous/malicious or is otherwise without substance, and will be dismissed or

3.6.8.5 The allegation(s) is upheld in full; or

3.6.8.6 The allegation(s) is upheld in part.

3.6.7 The Investigation Panel shall submit a report in writing to the Named Person. The report shall generally describe the investigative process, indicating whether it finds there are sufficient grounds for proceeding with the allegation under staff or student disciplinary/conduct procedures. The Panel will make a conclusion based on the options (**sections 3.6.8.1 – 3.6.8.6**). In addition, the Panel can make recommendations on the future operation of the procedures set out in this Code.

3.6.8 As the matter may then give rise to disciplinary or other action, the Chair and members of the disbanded Investigating Panel should not make any comment on the matter in question, unless formally sanctioned by the University or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.

3.6.9 The conclusion of the Panel will be shared with The Principal, the relevant Head of College, the Head of HR of the relevant College, the Complainant and Respondent. In cases where it is deemed appropriate by the Integrity Council, a summary of the final report may also be shared with external bodies for the purpose of correcting the scientific record.

4 Appeals Process

4.1 An appeals process is available to the Respondent to allow them to appeal against the findings of any formal investigation carried out under this policy (“Code of Policy and Procedures for Investigating Allegations of Misconduct in Research”). Appeals will only be considered if they meet the stated grounds for an appeal set out in **section 4.2**.

4.2 *Grounds for appeal:*

Appeals will only be considered on the following grounds:

4.2.1 New material evidence has become available which could not reasonably have been presented during the investigation and which is likely to have had a material bearing on a decision at the earlier stage;

4.2.2 The procedures set out in this Code have not been followed, to the material detriment of the respondent;

4.2.3 The finding of misconduct or sanction(s) imposed at the earlier stage was either unreasonably excessive or inadequate

- 4.3 Appeals need to be made in writing to the Alternate Named Person (who is the VP for Research) **within 10 working days** of the Respondent(s) being notified of the outcome of the Procedure. Appeals lodged outside this time period will not be considered.
- 4.4 In their appeal, the Respondent(s) should indicate clearly (i) upon which ground(s) of appeal in **section 4.2** they are relying; and (ii) the basis of the appeal. The Respondent(s) should also attach any evidence upon which they are seeking to rely in support of their appeal.
- 4.5 On receiving an appeal, the Alternate Named Person will, as soon as possible, decide if the grounds for appeal are met. If so, they will establish an appeals panel to investigate.

4.6 ***Members of the Appeals Panel:***

- 4.6.1 The Appeals Panel will comprise at least one individual who is an expert in the disciplinary field concerned, a senior academic from a separate College and the Alternate Named Person will endeavour to also include a panel member external to the University.
- 4.6.2 No members of the Appeals Panel will have been involved in any aspect of the formal investigations.
- 4.6.3 Before being appointed to the Appeals Panel, potential panel members will be given the name(s) of the individual(s) involved and asked to declare no conflict of interest in writing to the Alternate Named Person before being accepted as a panel member.
- 4.6.4 In all cases, it is essential to keep circulation of details of the allegations and investigation as limited as possible. Any such information must only be disclosed subject to an undertaking of confidentiality from the recipient.
- 4.6.5 The Appeals Panel will appoint one of its members to Chair the Appeals Panel for the duration of the process. It will be the Chair's responsibility to ensure accurate records are kept of the proceedings and that a summary report is completed recording the outcome of the appeal. Administrative support will be provided to the Chair by the Appeals Administrator.
- 4.6.6 When making any decisions about the conduct or conclusion of the appeals process, the Appeals Panel will do so by a vote, with the majority vote determining the outcome.

4.7 ***Process of the Appeal***

If the Alternate Named Person, concludes that grounds for appeal are met, the Appeals Panel will then review the conduct of the investigation and any evidence submitted in support of the appeal, rather than carry out a reinvestigation of the allegation(s) in question.

- 4.7.1 The Appeals Panel shall write a report setting out its conclusions, giving the reasons for its decision. A summary of the conclusions will be sent to the Respondent for comment on matters of factual accuracy. The Respondent will have **10 working days** to respond. Should there be no response from the Respondent, this will be taken as an indication of their being satisfied

that the conclusions are a true and accurate representation. The Appeals Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.

- 4.7.2 The Appeals Panel will then submit their final report to the Alternate Named Person. The Chair and Appeals Panel will also hand over to the Alternate Named Person or their nominated representative all records/ material relating to the Full Investigation.
- 4.7.3 The Alternate Named Person shall within **10 working days** convey the substance of the Appeals Panel's findings and recommendations to the Complainant, the Respondent, the Integrity Council, The Integrity Adviser (Misconduct) and such other persons or bodies as they deem appropriate.
- 4.7.4 The Alternate Named Person will then undertake the actions necessary to implement the conclusions of the Appeals Panel, following relevant provisions of the Outcomes and Reporting stage and liaising with the Research Integrity Adviser (Misconduct) and others, within and/or external to the University, as necessary.
- 4.7.5 The work of the Appeals Panel is then concluded, and the Appeals Panel should be disbanded. As the matter may then give rise to disciplinary or other action, the Chair and members of the disbanded Appeals Panel should not make any comment on the matter in question, unless formally sanctioned by the University or otherwise required to by law. They should also remember that all information concerning the case was given to them in confidence.
- 4.7.6 Any queries or requests for comment addressed to the Chair or members of the Appeals Panel should be referred to the Alternate Named Person.
- 4.7.7 Those who have contributed to the disbanded Appeals Panel should have no further involvement in the Procedure, unless formally asked to clarify a point in their written report at a subsequent stage or as part of any subsequent action or process.
- 4.7.8 A role as Chair or member of the Appeals Panel rules out participation in any subsequent disciplinary or other process. The Appeals stage now ends. As with misconduct investigations, all documents and reports from an appeals process will be kept electronically **for 10 years**.

4.8 *Possible outcomes of this stage*

The Appeals Panel has the power to uphold, reverse or modify the following outcomes of the Procedure, including the decisions and/or recommendations associated with them. The decision of the Appeals Panel is;

- 4.8.1 The appeals panel fully agree with the outcome of the initial investigation.
- 4.8.2 The appeals panel fully reject the outcome of the initial investigation.
- 4.8.3 The appeals panel agree in part with the outcome of the initial investigation.

4.9 *Timescale*

There is no formal time scale for the appeals process. The appeals panel will try to complete the appeal within **60 working days** of receiving the appeal and supporting evidence subject to unforeseen conditions.

5 Subsequent Action and Relationship with Disciplinary Procedures for Academic Staff

The investigation carried out in terms of this procedure will be sufficient to meet the investigation required into misconduct under the Disciplinary Procedures.

Thereafter, the Disciplinary Procedures should be followed in relation to all University employees and student code of conduct for students.

- 5.1 The Named Person in conjunction with the Principal, 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 the University. This may include advising the employer of the individual concerned of the findings of the investigation. The Named Person, in conjunction with the Principal 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.
- 5.2 After completion of the Disciplinary Procedures, the hearing manager of the disciplinary process may, in discussion with the Integrity Council, recommend measures in addition to those that may be taken by way of the University's disciplinary process. Examples of potential actions that may be considered include:
 - 5.2.1 conveying the outcome of the Disciplinary Proceedings to any professional body (e.g., the General Medical Council), any relevant grant-awarding bodies or any other public body with any interest, the editors of any journals which have published articles by the person against whom the allegation has been upheld or any other body which, in the opinion of the University, is likely to be affected by the research misconduct in question. All such disclosure must be limited to misconduct upheld in relation to research relevant to such bodies or published by such journals.
 - 5.2.2 where misconduct has been established and the research concerned contributes to, or contributed to, a degree or other academic award of the University, recommending that Senate reviews whether the award should be revoked or withheld; and/or
 - 5.2.3 requesting that any publications arising from the research concerned are retracted or corrected, as appropriate.
- 5.3 In the event that the Panel considers that a publication should be retracted but not all the authors consent, the University, via the Research Integrity Adviser (Misconduct), may make a direct request to the journal editor concerned to retract the paper. Further guidance on retraction policy is available from [Research Services Directorate](#)⁴ and from [The Committee on Publication Ethics \(COPE\)](#).⁵
- 5.4 The timescales set out in this procedure are not binding upon the University and can be extended where reasonably required. The Complainant(s) and Respondent(s)

⁴ <https://www.gla.ac.uk/myglasgow/ris/researchpolicies/researchintegrity/conduct/>

⁵ [Committee on publication ethics \(COPE\) retraction guidelines](#)

will be notified in writing of any such extension and the reason for it. Where any of the University personnel named as having responsibilities under this procedure are absent or unavailable, their responsibilities may be delegated in their absence. The delegation of duties would be agreed by Research Services Directorate in conjunction with The Named Person and Integrity Council.

6 Reporting and Record Keeping

- 6.1 The University Audit Committee is aware of these procedures and receives an annual report on any issues that have arisen, including brief anonymised details of upheld cases.
- 6.2 An annual Statement will be published on the [Research Integrity pages](#) of the University of Glasgow **website in November** each year, reporting data from the previous academic year. The wording of this statement will be approved by the University's Senior Management Group (SMG) each year in September/October. The statement will follow the template designed by the UK Research Integrity Office (UKRIO) in conjunction with the Research Integrity Concordat Signatories Group⁶.
- 6.3 At the conclusion of the proceedings, records will be archived by the following:
- 6.3.1 For research misconduct investigations all records will be kept by the Research Integrity Team.
 - 6.3.2 For Appeals Procedures all record will be kept by the appeals administration
 - 6.3.3 For HR Disciplinary or Student Conduct cases all records will be kept by HR and Senate respectively.

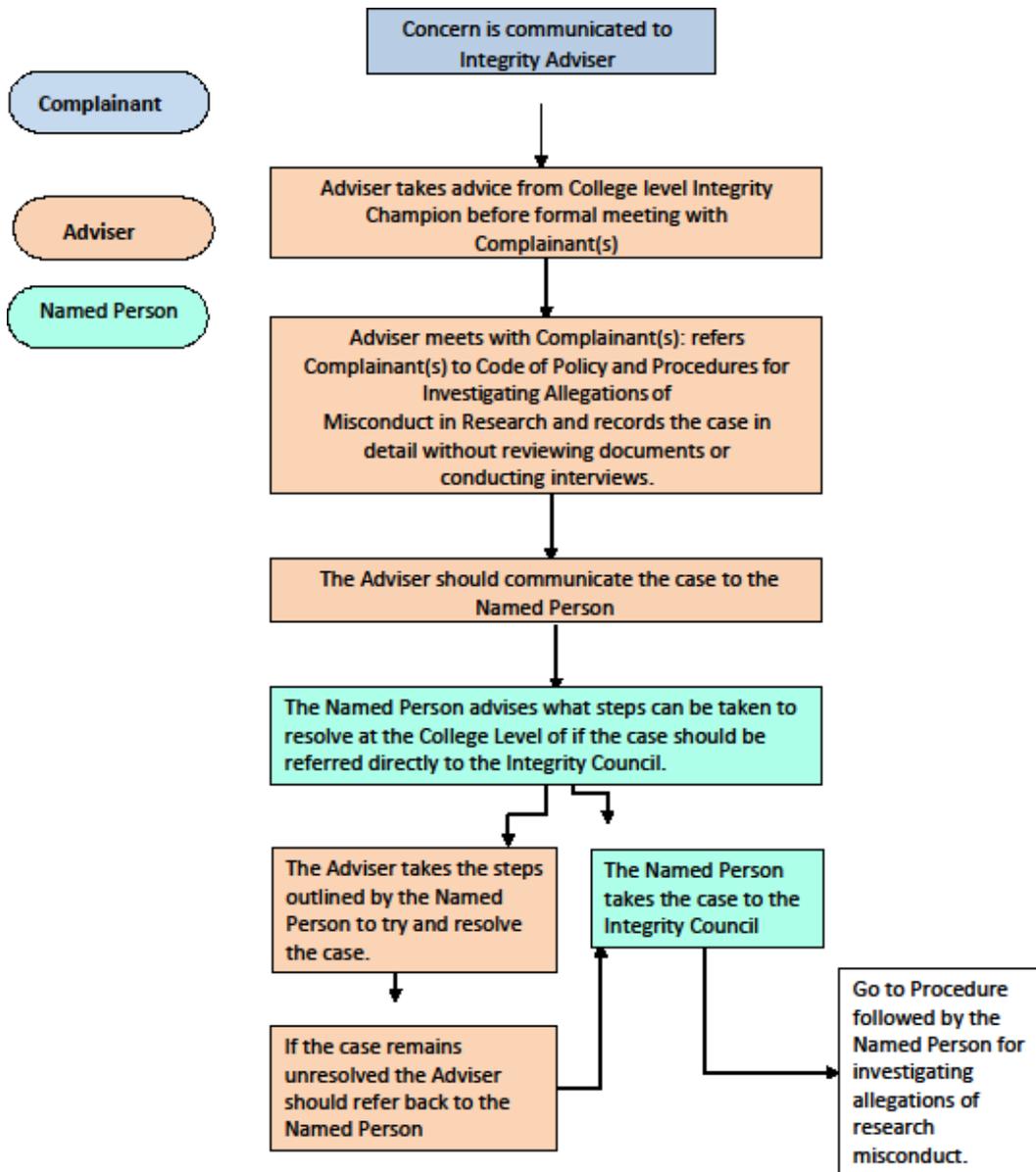
All records will be kept for 10 years and accessed only by authorised member of each team and then at the discretion of the archive holder.

7 Resources

- 7.1 UofG Web Pages
- [Research Integrity](#)
 - [Code of Good Practice in Research](#)
 - [Good Management of Research Data](#)
 - [UofG Whistleblowing Policy](#)
- 7.2 External Resources
- [UK Research Integrity Office \(UKRIO\) Procedure for the Investigation of Misconduct in Research](#)
 - [Universities UK Concordat to Support Research Integrity](#)
 - [COPE \(Committee on Publication Ethics\)](#)

⁶ <https://ukrio.org/news/annual-statement-template/>

8 Flowchart for Formal investigations from Research Integrity Adviser to receipt of allegation stage



- Contact details of Research Integrity Advisers and Research Integrity Champions are available at <http://www.gla.ac.uk/services/ris/researchstrategypolicies/researchintegrity/advisors/>
- UoG Policies relating to Good Practice in Research, Misconduct investigation, and Research Data Management: <https://www.gla.ac.uk/research/strategy/ourpolicies/>
- Further guidance on how Research Integrity Champions and Advisers should handle queries concerns or allegations relating to research practice can be found at <http://www.gla.ac.uk/services/ris/researchstrategypolicies/researchintegrity/advisors/>
- At any time Research Integrity Champions and Advisers can contact research-integrity@glasgow.ac.uk for further discussion and advice.