

POLICY AND PROCEDURE FOR DEALING WITH ALLEGATIONS OF RESEARCH MISCONDUCT

POLICY AND PROCEDURES

Responsibility of	Vice Principal for Research and Innovation
Re-approval date	06 December 2023
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Approved by	Academic Board
Author	Research and Innovation Committee

Definitions

Alternate Named Person (ANP)	<p>The alternate will fulfil the Named Person (NP) role where the NP is not available or where it is inappropriate for the NP to act in this capacity, e.g., where the allegations are in any way linked to the NP or there is the potential for a conflict of interest for the NP. In such cases the ANP will be chosen by the Principal.</p> <p>The ANP is normally a member of the Principal's Advisory Group.</p>
College	<p>The Royal Veterinary College (RVC).</p>
Complainant	<p>The person or persons making allegations of research misconduct against one or more Respondents.</p>
Days	<p>Working days, excluding weekends, Bank Holidays and other days on which the Royal Veterinary College is closed.</p>
Named Person (NP)	<p>The Named Person is the person nominated by the College to: i) receive any allegations of research misconduct; ii) initiate and supervise the procedure where appropriate; iii) maintain a record and preserve documentation relating to an investigation; and iv) take decisions and necessary actions at key stages of the procedure. Checklists are provided at Appendix A and B. The NP may consult in confidence with the UK Research Integrity Office (UKRIO) regarding allegations of research misconduct, and seek further advice and guidance from UKRIO.</p> <p>The NP is normally the College's Vice-Principal for Research and Innovation.</p>
Respondent	<p>The person or persons against whom the allegation of research misconduct is made. They might be a present or past employee of the College, a postgraduate research student or any individual conducting research under the auspices of the College.</p>

1. PURPOSE AND SCOPE

1.1 The College has several policies and codes of practice which guide its staff and students in research integrity; including Policy on Good Research Practice; Guidance on Research with Integrity; Policy and Procedures for Dealing with Allegations of Research Misconduct

The UK Research Integrity Office, is an independent body in the United Kingdom which provides expert advice and guidance about the conduct of research. (<https://ukrio.org/>), and this policy was prepared with reference to their recommendations.

The RVC expects its researchers to undertake activities with the utmost professionalism and integrity (<https://intranet.rvc.ac.uk/DeptResearch/Docs/research-integrity-for-staff-and-students-2020.pdf>) .

1.1.1 This policy and procedure provides a mechanism to consider and investigate allegations of misconduct in research brought against persons conducting research under the auspices of the College, whether on its premises or off-site. This includes academic staff, research staff, postgraduate research (PGR) students and visiting staff or PGR students who make use of the College's facilities. It does not include students on taught courses, who come under other policies of the College.

1.1.2 Those responsible for carrying out this Procedure should be mindful of equality, diversity and inclusion (EDI), and also ensure that all related obligations are met. Where the allegations concern any EDI issues, those carrying out the Procedure will be appropriately trained or have relevant experience in dealing with EDI matters.

1.2 Consequences of Research Misconduct can be severe, and Research Misconduct can occur as a result of both omissions (not doing something) and commission (doing something). Genuine errors, which are not a result of negligence, or differences in evaluation approach and methodology are not research misconduct and are excluded.

1.3 Most of the RVC's research is funded by external bodies, UK government or charities. Funders have expectations on the undertaking of research activities, and place high sanctions in relation to research misconduct. Examples include:

- Wellcome guidance related to research misconduct (2023) <https://wellcome.org/grant-funding/guidance/research-misconduct>
- UKRI guidance related to research integrity <https://www.ukri.org/what-we-do/supporting-healthy-research-and-innovation-culture/research-integrity/>

1.4 Examples of research misconduct include:

- Using other people's ideas, intellectual property, or work without their permission and/or acknowledging their input (plagiarism);
- Breaching legal, ethical and professional requirements needed for research, for example those needed for human research participants, animals, or human organs or tissue used in research, or for the protection of the environment. An example of this includes proceeding with research without ethical approval or not obtaining informed consent.
- Proceeding with research without necessary permissions and approvals in place;
- Making up data or results, or other aspect of the research such as patient consent (fabrication);

- Manipulating and/or selecting research processes, materials, equipment, data etc. to present a false impression or outcome (falsification);
- Misrepresenting data or other information;
- Failing to declare or appropriately manage conflicts of interest.

Research misconduct can include omitting relevant data, manipulating images, fabrication, falsification, plagiarism, misrepresentation, mismanagement or inadequate preservation of data and/or primary materials, and breach of duty of care.

It does not include:

- honest differences in the design, execution or interpretation in evaluating research methods or results
- research of poor quality, unless this encompasses the intention to deceive.

Further information on research integrity and misconduct, and good practice for investigations, can be found on the UKRIO resource pages. <https://ukrio.org/>

1.5 Key external reference documents and policies:

- UUK Concordat to Support Research Integrity (2023) <https://www.universitiesuk.ac.uk/topics/research-and-innovation/concordat-support-research-integrity>
- UK Research Integrity Office <https://ukrio.org/>
- The Public Interest Disclosure Act - GOV.UK <https://www.legislation.gov.uk/ukpga/1998/23/contents>
- UKRI related information pages <https://www.ukri.org/what-we-do/supporting-healthy-research-and-innovation-culture/research-integrity/>
<https://www.ukri.org/what-we-do/good-research-resource-hub/trusted-research-and-innovation/>

2. REACH

2.1 Allegations of research misconduct will initially be considered separately to the College's [grievance](#) and [disciplinary policies and procedures](#). However, allegations of research misconduct may lead to the initiation of such procedures. Likewise, complaints made via such procedures may be referred to this procedure if they are identified as research misconduct.

2.2 Allegations concerning misconduct in breach of the College's [Financial Regulations](#), or in breach of its anti-fraud measures will be considered in accordance with those regulations / measures, and in accordance with the disciplinary procedure where applicable.

2.3 Where the research in question has been conducted alongside external collaborators, close liaison with partner organisations will be necessary as part of the investigation.

2.4 This procedure does not form part of any employee's contract of employment with the College.

3. PRINCIPLES

3.1 Allegations of research misconduct are potentially serious both for the College and the Respondent. Such allegations will be investigated fairly, objectively, confidentially and in accordance with the principles of natural justice.

3.2 All parties involved must inform the Named Person (NP) immediately of any interests that they have which might constitute a conflict of interest as regards any aspect of the allegations, the investigation, the area(s) of research in question, or any of the persons concerned.

3.3 The College reserves the right to take action as it considers appropriate in relation to any matter raised under this procedure, whether raised formally or informally, orally or in writing. This will apply even where a Complainant subsequently withdraws an allegation or where a Respondent admits misconduct or resigns part-way through the process. Such action might include continuing with an investigation and, where necessary, the disclosure of certain information concerning the allegations to a future employer or regulatory or professional body.

3.4 The Respondent is entitled to a presumption of innocence until any investigation is complete and any allegation of misconduct is proven.

4. MAKING A COMPLAINT / RAISING CONCERNS

4.1 If an individual (“the Complainant”) has genuine concerns about misconduct in research, they should submit their concerns to the Named Person (NP) (or Alternate Named Person (ANP)) in writing where possible, accompanied by any supporting evidence that is available to the Complainant.

4.2 If a concern is raised with another person, or through another procedure (e.g., the College’s [Whistleblowing Policy \(2021\)](#)), it should be brought to the attention of the NP/ANP without delay by the person receiving details of the concern. See also [The Public Interest Disclosure Act](#).

4.3 If an individual has concerns but they are unsure whether their concerns are appropriate to be raised under this procedure, they can seek an initial informal discussion with the Vice-Principal for Research and Innovation, Head of the Graduate School or relevant Head of Department, as appropriate. However, in doing so the Complainant should note that the College reserves the right to take any action it considers necessary in response to any information disclosed, as set out in clause 2.3 of this Procedure.

4.4 It is hoped that individuals will feel able to raise concerns openly under this policy. However, if a Complainant wishes to raise a concern confidentially, every effort will be made to protect the identity of the Complainant, and subject to section 6 (“Confidentiality”), only to disclose their identity to those involved in investigating any allegations where it is strictly necessary to do so. If it is necessary for anyone investigating to know the Complainant’s identity, this should be discussed with the Complainant beforehand (see also section 5).

4.5 The College does not encourage anonymous complaints. Proper investigation may be more difficult or impossible if the College cannot obtain further information from the Complainant. It is also more difficult to establish whether any allegations are credible if the person raising them is not identified. Where anonymous complaints are raised, nothing in this clause limits the College from taking such action in response to those complaints as it considers appropriate.

5. SUPPORT AND PROTECTION FOR COMPLAINANTS AND RESPONDENTS

5.1 It is understandable that Complainants are sometimes worried about possible repercussions. The College aims to encourage openness and will support individuals who raise genuine concerns under this procedure, even if they turn out to be mistaken.

5.2 Complainants must not suffer any detrimental treatment as a result of raising a genuine concern. Detrimental treatment includes: dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern. The College will not tolerate the victimisation of individuals who raise genuine concerns under this procedure. A person who threatens or retaliates against a Complainant in any way may be subject to disciplinary action.

5.3 The College cannot guarantee any particular outcome to any concern raised but will aim to deal with concerns raised under this procedure fairly and appropriately. The NP will inform the Complainant if the investigation of their concern will not proceed further at any point. If a Complainant is not happy with the way in which their concern has been handled, they can raise it with the NP and may query whether all their evidence has been considered by the NP (see also clauses 9.14 and 10.11). In these circumstances, the NP will consult with the relevant Head of Department to decide whether any further action is required because of the Complainant's query. The Complainant will also be informed if the allegation is upheld.

5.4 If the outcome of the investigation is to instigate disciplinary proceedings or take other action against the Respondent, the Complainant will not have any right to be informed of the outcome of any disciplinary proceedings or other action nor any right of appeal in respect of any action taken.

5.5 The College will take steps as required and appropriate to support Respondents who are accused of research misconduct, to protect the reputation of Respondents and the research project(s) until any allegation is proven. Where there is good reason to believe that the complaint was not based on genuinely-held concerns, the NP will consider whether any action should be taken against the Complainant.

5.6 Complainants and Respondents may be supported by a trade union representative or a colleague (or, for PGR students, by an individual as agreed with the Head of the Graduate School or relevant Head of Department) at appropriate stages of the procedure.

5.7 Complainants and Respondents who are College employees are able to access the confidential Employee Assistance Programme. This service is free of charge (details available on the College intranet).

6. CONFIDENTIALITY

6.1 Confidentiality is an important part of this procedure. Details of the investigation and the names of the Complainant and the Respondent must only be disclosed on a 'need to know' basis, provided this does not compromise either the investigation or any issue related to the safety of participants involved in research. Any disclosure to a third party should be made on this basis and the third party must understand and respect the confidentiality of any information disclosed.

6.2 The College will aim to keep the Complainant informed of the progress of the investigation and its likely timescale. However, the need for confidentiality may prevent the College giving Complainants specific details of the investigation whilst it is ongoing. Complainants should treat any information they receive about the investigation as confidential.

6.3 The Respondent will be made aware of the concerns raised and, unless there are compelling reasons why the Complainant or any witnesses need to remain anonymous, the name(s) of those raising the concerns together with the name(s) of any witnesses.

6.4 No public statements about any allegation should be made by either party without the approval of the Principal.

6.4.1 In consultation with the NP and with the College's External Relations department, either the Respondent or the Complainant may request the release of a statement if a case has reached the public domain, normally only when the case has concluded. In consultation with the Respondent and/or Complainant, the NP and External Relations, the College may at its discretion release a statement if a case has reached the public domain, normally only when the case has concluded.

6.4.2 Any breach of confidentiality by RVC staff or students may lead to disciplinary action being taken.

Staff

<https://www.rvc.ac.uk/Media/Default/About/Human%20Resources/Documents/disciplinary-procedure.pdf>

Student

<https://www.rvc.ac.uk/Media/Default/About/Academic%20Quality,%20Regulations%20and%20Procedures/General/Academic%20Misconduct.docx#:~:text=The%20student%20will%20be%20interviewed,appropriate%20Notes%20will%20be%20taken.>

7. RECEIPT OF ALLEGATIONS STAGE

7.1 This stage should be completed as soon as possible following receipt, but ideally within ten days. Upon receipt of a complaint the NP shall conduct a preliminary review of the matter including a consideration of the following:

- Does the NP have a potential conflict of interest that needs to be declared? If so an ANP will be appointed who will initiate and oversee the operation of the procedure.
- Does the complaint relate to research misconduct or is another College procedure more appropriate? See clause 7.3.
- Does the complaint concern research conducted solely under the auspices of the College, or is another research organisation involved? See clauses 7.4 and 7.5.
- Is the Respondent undertaking externally-funded research? See clause 7.6.
- Is there a need to inform other legal or regulatory bodies? See clause 7.7.
- Is there a need for immediate action in order to safeguard persons or animals at risk? See clause 7.8.
- Is there a need to secure information and evidence (records and materials), or a need to take any further actions to secure the integrity of any subsequent investigation? See clause 7.9.
- Is there evidence to suggest that the complaint is frivolous, vexatious or malicious? See clause 7.16

Please refer to **Appendix A** for a checklist of considerations for this stage.

7.2 The NP should acknowledge receipt of the complaint by letter to the Complainant, noting the Receipt of Allegations process is being followed, and seeking any further information as required and advising them of the procedure to be followed.

7.2.1 If it is necessary to contact the Respondent at this stage, they should first be informed that allegation(s) of research misconduct have been made concerning them and that the allegation(s) is being assessed to determine what if any action should be taken.

7.3 If the complaint does not relate to research misconduct it will be for the NP to decide in consultation, where appropriate, with any relevant individuals (e.g., Research & Innovation Office, Human Resources, Head of Department), whether this or another College procedure will be followed or whether the concerns can be resolved informally, for example, where the complaint is the result of a misunderstanding between individuals (see section 8).

7.4 If the complaint does not relate to research conducted under the auspices of the College, or it relates to a researcher where the College is not the primary employer (e.g., the Respondent is a visitor or has an Honorary association with the College), the NP should consider whether to raise the matter with the NP of the relevant institution and/or direct the Complainant to the appropriate organisation depending on the nature of the complaint and the contractual status of the Respondent in relation to the research.

7.5 If the complaint concerns research being conducted in collaboration with another organisation/s, the NP shall make a decision as to whether any investigation needs to be conducted solely by the College, or whether a collaborative approach, involving the research partner/s, is required.

7.6 If the Respondent is undertaking externally-funded research the terms and conditions of the relevant funder will be reviewed to establish at what stage they require the allegation to be reported (see also [7.8.1](#) and [7.9](#)).

7.7 The nature of the allegation may mean that it is necessary to inform the funding body, legal or regulatory authorities when the activity is potentially or actually illegal, and/or a danger to persons, animals or the environment. As a consequence, the College may be required to permit an investigation led by a funder, legal or regulatory body, which will ordinarily take precedence over this procedure. In such circumstances, the investigation under this procedure may continue in parallel or may have to be suspended, to be concluded later.

7.8 Where the allegation concerns a situation that requires immediate action to prevent further risk or harm to staff, study participants or other persons, suffering to animals or negative environmental consequences (where this might contravene the law or fall below good practice), the NP should take immediate appropriate action to ensure that any such potential or actual danger / illegal activity / risk is mitigated as far as it is possible to do so.

7.8.1 Where the Respondent receives related external funding, e.g. in the form of a research grant, the Director for Research and Innovation Services may need to be informed confidentially.

7.9 The NP should ensure that all relevant evidence is secured: for example, all relevant records, materials and locations associated with the work; and consider any further actions that might be necessary in consultation with Human Resources or relevant line manager(s), or the Graduate School and Research Supervisors in the case of PGR students. Such actions could include suspension of the Respondent (see clause 7.14) while matters are being investigated.

7.10 The NP will decide on an appropriate course of action normally within 10 working days of receipt of the complaint and decide, based on the preliminary review, whether to initiate the Screening stage (see section 9) or whether informal resolution or another course of action is appropriate. Should the appropriate cause of action not yet be determined, the NP will write to the Complainant, and the Respondent if already aware, to notify them of the delay.

7.11 If the NP is initiating the Screening stage, the NP should inform the Principal, Director of Human Resources, Vice-Principal for Research and Innovation (in the event an ALP is acting), Head of Department and/or Head of the Graduate School, as appropriate, that allegations of research misconduct have been received and that they will be investigated. The above persons should be provided, in confidence, with the following information:

- the identity of the Respondent;
- the identity of the Complainant;
- details of all sources of external funding;
- details of all internal and external collaborators for the research in question; and
- any other details that the NP considers appropriate.

7.12 Where the outcome determined is that it should proceed to the Screening, the Named Person will inform the Respondent of the following, formally and in writing:

- a. An allegation of misconduct in research has been made which involves them,
- b. A summary of the allegation(s) and a copy of the Procedure. At all times, the Named Person should emphasise to all parties that the allegation is as yet unproven, is being addressed under this Procedure and that the information is confidential,
- c. That it has been determined at the Receipt of Allegations stage that the matter has sufficient substance and falls under this procedure and therefore will proceed to the 'Screening' stage,
- d. That they will be allowed to respond to the allegation(s) and set out their case,
- e. The conclusions of the preliminary review of the allegation(s), an outline of the next steps and approximate timescales. Where possible, this may include the identity of the investigator and an indication of when they will be in contact to gain the Respondent's version of events,
- f. When allegations have been made against more than one Respondent, the Named Person should inform each individual separately and not directly identify any other Respondent

7.13 On completion of the Receipt of allegations stage, the NP will normally invite the Respondent to a meeting to inform them that allegations of research misconduct have been made and the processes to be followed (if any). A representative from Human Resources or the Graduate School may be in attendance if required and the Respondent may be accompanied by a trade union/students' union representative or a work colleague if they wish. If the allegations are made against more than one Respondent, the NP should inform each individual separately and should not where possible divulge the identity of any other Respondent. Also see 9.3.

7.14 If the Screening stage is being initiated, the Respondent will be informed of the allegations in writing at the meeting, and given a copy of this procedure. The NP should outline the processes to be followed and the opportunities the Respondent will have to respond. If the Screening stage is not being initiated, the matter will be dealt with in accordance with clause 7.16 (ii, iii) or clause 8, as appropriate.

7.15 Precautionary suspension (on full pay) of the Respondent or alternative precautionary action short of full suspension may be considered at this stage, in consultation with Human Resources (e.g., where the allegations might constitute gross misconduct as defined in the College's [Disciplinary Procedure](#), or for other good and urgent cause). Where the Respondent is a PGR student, they may be suspended from their studies following consultation with the Academic Registrar. It should be made clear to the Respondent that this does not constitute disciplinary action and does not imply any assumption that the Respondent is guilty of any misconduct.

7.16 On completion of the preliminary 'Receipt of Allegation Stage', the NP will normally write to the Complainant and any other relevant parties such as Heads of Department on a 'need to know' basis, to inform them of the outcome of this stage in relation to the matters they raised in their complaint in accordance with clause 6.2, taking into account the duty of confidentiality owed to the Respondent. The letter might include:

- (i) An assurance that the allegations will initially be assessed in accordance with this procedure by individuals with sufficient knowledge and experience of research, and with specialist knowledge of the subject matter. The Complainant may be required to attend additional meetings in order to provide further information or in some cases to act as a witness in any formal investigation, if required; or
- (ii) The reasons why the allegations cannot be investigated using this procedure, and/or:
 - which process for dealing with the complaint might be appropriate for handling the allegations; and
 - to whom the allegations should be reported, if the research is not connected to the College.
- (iii) That the allegations are dismissed on the basis that in the opinion of the NP, they are mistaken, frivolous, vexatious and/or malicious.

7.17 In taking any actions at this stage, it should be made clear to the relevant parties that the information is confidential, and the actions taken are not to be regarded as disciplinary action, nor taken to imply that the Respondent is guilty of any misconduct.

7.18 If the Complainant is dissatisfied with the outcome of the Receipt of Allegations stage (because a decision has been made not to proceed to the Screening Stage), they may appeal to the Principal, but only on the grounds of either: (a) a clear and evident failure by the NP to follow procedure; or (b) new evidence having come to light since the time of the original complaint, that would lead a reasonable person to conclude that the findings of the Receipt of Allegations stage should be re-examined.

8. INFORMAL RESOLUTION

8.1 Situations that the NP considers not to be serious in nature (e.g. the complaint having arisen from a misunderstanding or miscommunication between colleagues) might be resolved informally, without the requirement for a formal investigation. In such instances, the NP may appoint a representative from Human Resources or the Graduate School, or other neutral, suitably qualified member of staff to mediate between the Complainant and Respondent, or decide on such other course of action that the matter can be resolved to the satisfaction of both parties. The NP may seek advice from UKRIO regarding whether such informal mechanisms might be appropriate in any particular case.

9. SCREENING STAGE

9.1 The purpose of the Screening Stage is to determine whether there is prima facie evidence of research misconduct, to determine appropriate next steps and any actions required at that stage.

9.2 The NP will convene an initial panel comprising up to 3 individuals (one of whom will act as Chair). These people will usually be senior academics with sufficient knowledge and experience of research, and with relevant subject knowledge, adequate to allow them to conduct a preliminary evaluation of the available evidence. If there is insufficient specialist knowledge at the College, an external panel member may be used. In these instances, the NP must ensure the Chair is an employee of the College. Appropriate EDI considerations when considering the composition of the panel should be taken into account.

9.3 The Respondent will be invited to submit a written response to the allegations, to be received by the Chair of the panel normally within 10 days of the notification.

9.4 The Chair of the panel will take any steps necessary to secure any evidence (records, data and materials) relevant to the allegations, if this has not already been done. The Respondent should be assured that this does not imply any assumption that they are guilty of any misconduct, but that it is necessary to ensure that the allegations are properly investigated.

9.5 The Screening Stage shall normally be completed within 30 days of the panel being convened.

9.6 The panel shall, in confidence:

- (i) consider the evidence before them and invite the Complainant to clarify any matters that the panel considers necessary and relevant;
- (ii) consider the Respondent's response and seek further clarification if required.

9.7 The panel will make determinations to the NP based on the evidence considered during this stage, as follows:

- (i) There is no evidence that research misconduct has taken place and no further investigation is required because the allegations are mistaken, frivolous, vexatious and/or malicious; or
- (ii) There is no evidence that research misconduct has taken place but certain procedural matters have been brought to light within the College / partner organisations and/or funding bodies that need to be addressed; or
- (iii) There is some evidence of minor unintentional poor practice which could be addressed through non-disciplinary means, such as education and training, or via informal counselling (see clause 9.9). No further investigation is required.
- (iv) Research misconduct may have been committed or the evidence is inconclusive and formal investigation is required.

- (v) There is evidence of misconduct unrelated to the research, that should be referred to the appropriate College procedure, if any; and/or
- (vi) Any other recommendations or required actions that need to be taken in light of the issues raised.

9.8 The NP will consider the panel's findings and notify the Respondent in writing of the outcome of this stage and any further actions or steps to be taken. This will include ensuring appropriate action is taken to correct the record of research, where necessary, such as retraction or correction of articles in journals, and/or notifying research participants of any potential issues that may arise.

9.9 Where informal action is recommended to address unintentional poor practice, the NP may consult, where applicable, with the Vice-Principal for Research and Innovation and the relevant Head of Department on the course of action proposed; and ensure that any action required is instigated, executed and recorded by the appropriate parties.

9.10 The NP will ensure that any other necessary actions further to the panel's findings are taken by the appropriate officer(s); for example, any administrative actions that may be immediately necessary to protect the funds and/or other interests of relevant grant- or contract-awarding bodies, and to meet all contractual commitments.

9.11 If the panel's findings at this stage indicate that the complaint was not based on genuinely-held concerns, the NP will consider whether any action should be taken against the Complainant.

9.12 At the conclusion of the Screening Stage, the NP will normally write to the Complainant and any other relevant parties (on a 'need to know' basis), to inform them of the outcome of this stage in relation to the matters they raised in their complaint in accordance with clause 6.2, taking into account the duty of confidentiality owed to the Respondent. The letter might include:

- (i) There is no evidence that research misconduct has taken place and no further investigation is required because the allegations are mistaken, frivolous, vexatious and/or malicious.
- (ii) That the allegations will be formally investigated and that the Complainant may be required to attend additional meetings in order to provide further information or in some cases to act as a witness in any subsequent disciplinary proceedings if required; or
- (iii) The reasons why the allegations cannot be investigated using this procedure; and/or:
 - which process for dealing with the complaint might be appropriate for handling the allegations (if any); and

- to whom the allegations should be reported, if the research is not connected to the College.

9.13 Again, it should be made clear to the relevant parties that the information is confidential and any actions taken are not to be regarded as disciplinary action and do not imply any assumption that the Respondent is guilty of any misconduct.

9.14 If the Complainant is dissatisfied with the decision, they may appeal in writing to the NP, detailing the reason (for example, the correct procedure has not been followed or new information has come to light). The NP will consult with the Director of Research and Innovation Services or Head of the Graduate School (where the Complainant is a PGR student), as to whether the appeal has merit. Their decision on the appeal shall be final, and the Complainant shall be notified of the outcome in writing within 30 days of receipt of the appeal.

9.15 The Named Person will inform the Complainant and the Respondent of the following, formally and in writing that the Procedure has moved to the Full Investigation stage and that they will be interviewed as part of the process and allowed to provide evidence. They will also be informed that they may be accompanied to any meetings by a colleague or Trade Union representative.

9.16 Respondents will normally be informed of the name of any Complainant(s) who have made the allegation(s) concerning them at the discretion of the Named Person. In exceptional circumstances the identity of the Complainant(s) may remain confidential. This should only be undertaken following consultation with appropriate internal authority, e.g. Human Resources, student services or similar, and with appropriate reference to the RVC whistleblowing policy.

10. FULL INVESTIGATION STAGE AND OUTCOMES

10.1 If allegations are considered suitably serious, or a Full Investigation is recommended following the Screening, the NP will appoint a panel (normally within 30 days of the submission of the Screening panel's report) comprising up to 3 individuals, none of whom should previously have been involved in the investigation. One of these persons will act as Chair. Panel members will usually be senior academics with sufficient knowledge and experience of research, and with relevant subject knowledge. The NP shall ensure that the Chair is an employee of the College. In the interests of transparency, the panel will include at least 1 external representative. . Appropriate EDI considerations when considering the composition of the panel should be taken into account.

10.2 As part of the investigation the panel should interview the Respondent and any relevant witnesses including the Complainant. The Chair of the panel will allow any witnesses and the Respondent the opportunity to comment on the factual accuracy of the information they have provided as recorded by the panel following the interview.

10.3 The Chair of the panel should ensure the NP is kept updated on the progress of the Full Investigation as required. The NP will provide appropriate information on the progress of the investigation to other interested parties as necessary.

10.4 On completion of the Full Investigation, the Chair of the panel will submit a written report to the NP, together with any documentation available during the investigation. The report should:

- (i) summarise the conduct of the investigation;
- (ii) state whether the allegations of misconduct in research have been upheld in whole or in part (see also clause 10.5), giving the reasons for the panel's conclusions and recording any differing views;
- (iii) make recommendations in relation to any matters relating to any other misconduct identified during the investigation (see clause 10.8); and
- (iv) address any procedural matters that the investigation has brought to light within the College and relevant partner organisations and/or funding bodies.

10.5 The investigation panel may conclude that allegations are not upheld for reasons of being mistaken, frivolous, vexatious and/or malicious.

10.6 The Chair of the panel may also:

- (i) make recommendations with respect to whether the allegations should be referred to the relevant disciplinary procedure for staff or PGR students;
- (ii) whether any action will be required to correct the record of research;
- (iii) whether organisational matters should be addressed by the College through a review of the management of research.

10.7 The standard of proof used by the investigation panel is that of "on the balance of probabilities".

10.8 Should any evidence of misconduct be brought to light during the course of the Full investigation that suggests:

- (i) further, distinct instances of misconduct in research by the Respondent, unconnected to the allegations under investigation; or
- (ii) misconduct in research by another person or persons,

then the investigation panel should submit these new allegations of misconduct to the NP in writing, along with all supporting evidence, for consideration under the initial steps of this procedure.

10.9 The NP will notify the Respondent in writing of the outcome of the Full investigation and any further actions or steps to be taken. Where the allegations are upheld, the Respondent will normally be invited to a disciplinary hearing in accordance with the applicable disciplinary procedure.

10.9.1 Staff

<https://www.rvc.ac.uk/Media/Default/About/Human%20Resources/Documents/disciplinary-procedure.pdf>

10.9.2 Student

<https://www.rvc.ac.uk/Media/Default/About/Academic%20Quality,%20Regulations%20and%20Procedures/General/Academic%20Misconduct.docx#:~:text=The%20student%20will%20be%20interviewed,appropriate%20Notes%20will%20be%20taken.>

10.10 The NP will take appropriate action(s) to correct the record of research, which may include: retraction/correction of articles in journals, and/or notifying research participants of any potential issues that may arise.

10.11 The NP will normally write to the Complainant, and any other relevant parties (on a 'need to know' basis), to inform them of the outcome in relation to the matters they raised in their complaint in accordance with clause 6.2, taking into account the duty of confidentiality owed to the Respondent.

10.12 The decision of the panel will be final and there will be no right to appeal, unless on procedural grounds (where there is evidence that the College has not followed its own policy) or where evidence has come to light that was not available to the panel when reaching their conclusion. Any appeal on this basis should be made in writing to the NP. The NP will consult with the Principal and decide on the merit of the appeal, their decision to be final. The outcome of the appeal will be communicated in writing to the Complainant within 30 days of receipt of the appeal.

10.13 Where the NP has made a decision to refer the matter to the applicable disciplinary procedure, the Chair of the investigatory panel may be required to attend any meetings/hearings under the applicable disciplinary procedure in order to present the findings of the investigation and any relevant supporting material. (NB. the Chair of the investigatory panel will not act as Chair of the disciplinary hearing). All relevant information collected and brought to light through this procedure should be transferred to the College's disciplinary process.

A checklist for the NP for this stage can be found at **Appendix B**.

10.14 If the panel hearing is terminated without the procedure having run its full course, for example where the Respondent tenders their resignation, the panel should consider whether serious unresolved concerns about misconduct remain. If that is the case, the Respondent will be advised accordingly and asked to see the process through to the end. Should they not agree to this, the Chair of the panel will notify the NP. The NP will write to the Respondent, informing them that the details of the outstanding case may, without prejudice, be passed to any potential future employer, the relevant funding body, and any appropriate regulatory or professional supervisory body (e.g., the Royal College of Veterinary Surgeons).

11. RECORDS, MONITORING AND REPORTS

11.1 All formal complaints concerning allegations of research misconduct will be recorded for monitoring and reporting purposes including where allegations are upheld. This record will be maintained by Human Resources in the case of staff, or the Graduate School in the case of PGR students. The relevant office will be responsible for monitoring the progress of the investigation and ensuring that all time-frames are adhered to.

11.2 Information concerning allegations of research misconduct may be placed on the researcher's file within HR, along with a record of the outcome and of any notes or other documents compiled during the process. These will be processed in accordance with the Data Protection Act 1998. Where the allegations are not upheld, the College will take into account the wishes of the Respondent in terms of what is recorded on their file.

11.3 The College will publish online an annual report containing an anonymised and high-level statement on any Full investigations of research misconduct that have been undertaken in the relevant year. This may include a note detailing the total number of cases (but not the details of those cases) investigated in a given year.

11.4 Where an allegation was made publicly, the College will make public the outcome of the investigation, including the results of any disciplinary proceedings, any court proceedings or any other proceedings heard by a tribunal. If the complaint is shown to have been made in good faith, the interests of the Complainant will be protected in accordance with the Public Interest Disclosure Act 1998.

Acknowledgements

This procedure and policy draws upon guidance from UKRIO, RCUK (2017), UKRI (2023) and UUK (2019), as interpreted by the author. The original policy was based on research conducted by Emma Harris and Elizabeth Nolan in conjunction with UKRIO, leading to the document entitled 'Misconduct in research – investigation procedure' (De Montfort University, 2016). The assistance of these former colleagues in producing this policy is gratefully acknowledged.

Appendix A: Named Person’s Checklist – Receipt of Allegations Stage

The Named Person (NP) will need to consider whether allegations about misconduct in research require consideration by a Screening panel and if any other immediate actions need to be taken. The following checklist provides a prompt of the relevant considerations and actions that may be required.

1. Named Person (NP) Details	Delete as applicable	Action
a. Does the NP have a conflict of interest?	Yes/No	If Yes, appoint an Alternate Named Person (ANP) – see Definitions.
b. Name and title of NP or ANP		
2. Details of complaint		
a. Date complaint received	DD/MM/YYYY	
b. Name of Complainant (if known)		
c. Source of complaint	Internal/ External	
d. Nature of complaint		
e. Name of Respondent(s)		
f. Is the complaint in writing?	Yes/No	
g. Is the complaint about misconduct in research?	Yes/No	If No, consider whether another College procedure or informal resolution (see section 8) is appropriate. See also clause 7.3 for more information.
h. Does the matter concern research conducted under the auspices of the College?	Yes/No	If No, consider whether to raise the matter with the relevant institution and/or direct the Complainant to the appropriate organisation. See clauses 7.4 and 7.5 for more information.
If the complaint is self-evidently frivolous, vexatious and/or malicious, the NP should contact the relevant Head(s) of Department (and/or Head of the Graduate School in the case of PGR students), to discuss whether further action is required.		
3. Risk		
a. Is there any indication there is a risk to subjects (human or animal)?	Yes/No/Awaiting further information	If Yes, safeguarding action must be taken. See 7.8 for more information.

b. Is there any indication of criminal activity?	Yes/No/Awaiting further information	If Yes, consult with Human Resources or the Academic Registrar as to whether the police should be contacted.
c. Is there a need to secure information and evidence (records and materials) or a need to take any further actions to secure the integrity of any subsequent investigation?	Yes/No/Awaiting further information	See clause 7.9.
d. Is precautionary suspension of the Respondent required? (Consult with Human Resources or the Academic Registrar).	Yes/No/Awaiting further information	See clause 7.14.
4. External contacts		
a. Is external funding involved?	Yes/No	See clause 7.6 for more information
b. If (a) is 'Yes': do the Terms and Conditions require the funder to be informed at the point the complaint is made? NB that if the Respondent is in receipt of UKRI funding, it is a requirement that UKRI be notified, even if the complaint does not relate to a UKRI grant. This would also extend to supervisors of UKRI funded students, even where the complaint doesn't directly relate to the studentship	Yes/No	If Yes, request guidance from the Director of Research and Innovation Services to establish obligation to notify to funders.
c. Are there collaborative external partners?	Yes/No	
d. If (c) is 'Yes': have they been contacted?	Yes/No	If No, highly sensitive conversations which should be managed carefully by the NP, with support where appropriate from the Director of Research and Innovation Services
e. Will there be a joint investigation?	Yes/No/Awaiting further information	
f. Has the College contacted relevant regulatory or professional bodies?	Yes/No/Awaiting further information	See clause 7.7 for more information.
5. Next steps		
a. Does the complaint require consideration by a Screening panel? (See clause 7.10).	Yes/No/Awaiting further information	If Yes, initiate the Screening stage.

		<p>Ensure the Complainant and the Respondent and any other relevant individuals are notified of the outcome of the receipt of Allegation stage.</p> <p>See clauses 7.11, 7.12 and 7.16.</p>
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The NP may wish to consult, in confidence, with UKRIO regarding allegations of research misconduct, to seek further advice and guidance.

Appendix B: Named Person’s Checklist – Post-screening / Post-investigation stages

The Named Person (NP) will need to consider what action is required where an allegation of research misconduct is upheld following Full investigation, or where poor research practice has been identified. The following checklist provides a prompt of the relevant considerations and actions that may be required.

Post-screening stage	Delete as applicable	Action
Are any actions required as a result of the screening stage?	Yes/No	See clauses 9.8 - 9.11 for more information.
Post-investigation stage		
a. Is the Respondent undertaking funded research?	Yes/No	If Yes, the funder will be informed, who may withdraw funding and/or require repayment of funding.
b. Do regulatory bodies and/or other organisations involved in the research need to be informed?	Yes/No	If Yes, the NP must do so in writing.
c. What wider effects has this research had and what actions are required as a result (including those recommended in the investigation panel’s report), e.g., has it been published; did it involve human participants, animals, or the environment, etc.?		The NP will take any further appropriate action(s) to correct the record of research, which may include: retraction / correction of articles in journals, and/or notifying research participants / patients / patients’ doctors / veterinarians of any potential issues that may arise. This may still be required where the allegation of research misconduct is not upheld but where the Respondent is found to have committed poor research practice.
d. Have training and development needs been identified?	Yes/No	NP to liaise with the relevant staff to ensure this is addressed appropriately.
e. Has the Respondent’s personnel / PGR student file been updated?	Yes/No	If No, ensure a record of the outcome of the investigation / hearing is entered on the Respondent’s file as appropriate.

f. Is the matter to be referred to the relevant disciplinary procedure for staff or PGR students or to an external organisation if the Respondent is not a member of staff or a (College) PGR student?	Yes/No	
g. Have any other actions been recommended by the investigation panel and if Yes, have they been taken?	Yes/No	

The NP may wish to consult, in confidence, with UKRIO regarding allegations of research misconduct, to seek further advice and guidance.

Research and Innovation Office

The Royal Veterinary College
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