

## **Preventing Harm in Research & Innovation (Safeguarding) Policy**

### **Process for dealing with reported concerns or incidents, and escalation within the University**

**Concern/incident reported to Designated Safeguarding Contact (DSC)** by victim (or third party on victim's behalf)

NB. Where concerns are reported direct to the Head of Department or Research Ethics & Integrity Manager, the below steps should be taken by that individual in place of a DSC

**DSC addresses any immediate safety concerns and offers appropriate immediate support** in line with project-specific action plan

**DSC seeks as much information as possible about the reported concern/ incident** from the person making the report (including, where possible, the victim's preferred course of action)

**DSC notifies PI (if a staff project) or supervisor (if a student project), and the relevant Head of Department**, of the reported concern/incident. PI/supervisor and HoD liaise to agree appropriate steps to be taken to limit immediate/continued risk of harm (e.g. pausing the research)

**DSC notifies Research Ethics & Integrity Manager in Research Services**, who will seek advice regarding the appropriate next steps, with input where relevant from:

- The University's Safeguarding Panel
- Human Resources
- University Research Ethics Committee
- Vice-President for Research and/or Faculty Directors of Research & Innovation
- Members of partner organisations involved in the research

#### **Action to be taken may include:**

- Initiation of an in-depth fact-finding process
- Convening of an investigation panel to consider the case
- Referral to another University procedure, as appropriate:

Safeguarding Policy: Where the matter falls under the scope of this Policy (relates to current/prospective students (including vulnerable adults), children or vulnerable adults engaged in TUoS activities, staff in the course of their duties and/or external organisations/individuals where we engage (in branded activities) (<https://www.sheffield.ac.uk/research-services/ethics-integrity/safeguarding/about>)

Disciplinary procedures (staff): Where the matter relates to potential inappropriate conduct/behaviour by a member of staff (<https://www.sheffield.ac.uk/hr/guidance/performance/enabling/disciplinary/employee>)

Disciplinary procedures (student): Where the matter relates to potential inappropriate conduct/behaviour by a student (<https://www.sheffield.ac.uk/sss/student-code-of-conduct>)

Procedure for Investigating and Responding to Allegations of Research Misconduct: where the matter relates to potential unacceptable practices in research (<https://www.sheffield.ac.uk/hr/guidance/academicstaff/researchmisconduct/overview>)

Procedure for investigating concerns in relation to compliance with the University's Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue: where the matter relates to a potential breach of the Ethics Policy or terms of ethics approval (section 3.1.11 - <https://www.sheffield.ac.uk/rs/ethicsandintegrity/ethicspolicy/approval-procedure/procedurelements>)

- Cases may need to be reported to funders in accordance with grant terms and conditions.