Council Reading Room: Full Statement to be published on University website

The University of Sheffield's Compliance with the revised Concordat to Support Research Integrity

The University of Sheffield is fully committed to the ongoing development of a culture that supports and nurtures research integrity, and to ensuring that mechanisms are in place to provide assurances and ensure appropriate investigation and action if and when things go wrong. A summary of the actions and activities undertaken by the University in meeting the requirements of the revised Concordat to Support Research Integrity, published in 2019, are outlined below, within each of the five Commitments outlined in the Concordat.

<u>**Commitment 1:**</u> We are committed to upholding the highest standards of rigour and integrity in all aspects of research

The Concordat states that employers of researchers are responsible for:
- maintaining a research environment that develops good research practice and embeds a culture of research integrity, as described in commitments 2 to 5;
- supporting researchers to understand and act according to expected standards, values and behaviours;
- defending researchers when they live up to the expectations of this concordat in difficult circumstances;
- demonstrating that they have procedures in place to ensure that research is conducted in accordance with standards of best practice; systems to promote research integrity; and transparent, robust and fair processes to investigate alleged research misconduct.

<u>Summary of actions and activities in place/undertaken to meet Commitment 1:</u>
- A revised Good Research & Innovation Practices (GRIP) policy has been in place since 2011, and is kept under regular review. The policy includes three sections:
  - Good Research and Innovation Principles, which explains the principles governing all research and innovation activities at the University, the purpose of the policy, its value and to whom it applies. The University believes that research integrity is about how research and innovation activities are undertaken from start to finish, not only in terms of paying attention to detail at all stages to ensure the accuracy and credibility of data and results, but also in terms of behaviour towards people involved in and/or affected by the research and/or innovation activity;
  - Good Research and Innovation Practices, which clarifies the University's expectations concerning good practices in specific research and/or innovation activities (e.g. authorship; collaboration), and;
  - an Annex, which contains information on what the University means by unacceptable research & innovation practices and thus potential research misconduct (encompassing fabrication, falsification and plagiarism, misrepresentation, mismanagement of data or primary material, breach of duty of care, abuse of status, and taking reprisals against an individual who made an allegation of misconduct/attempting to cover up reprisals taken against the individual), as well as additional detailed supporting information including links to other relevant policies and procedures. The policy is available in full from the University's central research web pages (https://www.sheffield.ac.uk/rs/ethicsandintegrity/index).
- An induction portal signposts key policies that all new staff should seek to familiarise themselves with (split into key timeframes such as first day, first week, first month). These include the University's: Public Interest Disclosure (Whistleblowing) policy, Investigating and Responding to Allegations of Research Misconduct Policy, Good Research & Innovation Practices Policy (GRIP), and Preventing Harm in Research & Innovation (Safeguarding) Policy. New external pages are also being developed to provide an overview of key information for individuals who are due to join the University, and as a valuable resource for recruitment purposes.

- A new Code of Conduct is currently being developed to provide a clear outline of expectations of behaviours and professional conduct for all staff and those who operate within the University setting. These behaviours are in line with both existing University policies and procedures, and the University vision. They apply to all internal dealings with staff and students and externally to interactions with other institutions and the wider public including interactions via social media. The Code will operate alongside the University Code of Ethics (see Commitment 2).
- Mandatory training for all postgraduate research students on research ethics and integrity, delivered at Faculty level, has been in place since 2011. The desired outcomes are two-fold: a. to encourage PGRs to critically analyse/reflect upon their own actions and behaviours and their interactions with others involved in their research and b. to heighten PGRs' ethical sensitivity and reasoning. The training underwent a review during the 2019/20 academic year and was updated to incorporate a range of additional mandatory topics.
- The University has purchased an online research integrity course aimed at postgraduate research students and post-doctoral researchers, which includes an in-built test that enables leaders of the Faculty-run training for postgraduate research students to assess students' learning from undertaking the online course itself as well as other learning activities that take place as part of the training. The University has also purchased an on-line research integrity self-assessment exercise aimed at more established academics. The course and self-assessment exercise are promoted to staff and students across the University in a variety of ways, including via regular ethics & integrity bulletins, new staff induction packs, and the University's central ethics and integrity webpages.
- From January 2021 a mandatory system of continuing professional development for PGR supervisors has been in place. This offers tailored opportunities for new, incoming and experienced supervisors to develop their practice and enhance the experience of PGR students.
- Other centrally-run workshops for staff and/or students are held on a needs basis, addressing relevant topical research integrity issues including Information Security, Research Data Management, Licensing and Copyright. The University Research Ethics Committee (UREC) provides regular training sessions for those who undertake the review of ethics applications, and also offers other workshops addressing key ethical challenges.
- The University appointed to a University-level leadership role in 2020, 'Research Practice Lead'. This role focuses on continual research improvement and robustness of research findings, by supporting academic-led initiatives, including research on research ("meta-science") which can inform research quality. The role was created as part of the University's commitment to the UK Reproducibility Network, and (September 2021) won a major investment from the Research England Development Fund to develop, deliver and evaluate training on open research methods. This project will run 2021-2026 and link up with existing work at Sheffield on researcher development, research culture and open research support.
- The University has introduced a new policy on Preventing Harm in Research & Innovation (Safeguarding) during 2020/21. The policy sets out the University's commitment to the prevention of harm to all individuals involved with or affected by the University's research & innovation activities. It encompasses procedures for enabling safeguarding concerns or incidents to be reported and handled appropriately. Alongside the policy, a range of supporting guidance has been developed, and an information session delivered in April 2021 has been recorded and made available to staff and students online.
- The University signed the San Francisco Declaration on Research Assessment (DORA) in November 2018 and in 2019/20 agreed a set of principles for responsible research assessment. Major university processes and systems will be reviewed in 2021/22 to ensure they are consistent with these principles.
- The University Library is engaged on multiple levels in supporting the University's research environment and works in close partnership with Professional Services colleagues to secure effective service delivery. It provides infrastructure and tools to support excellent research management and to enable research outputs to be widely discoverable, accessible to all and preserved for the long term. This includes stewardship of the institutional open access repositories for publications and data: White Rose Research Online (WRRO), White Rose ETheses Online (WREO), Online Research Data (ORDA) and a preservation system ArchiveUS.

- The University Library is an institutional subscriber to DMPOnline, an online tool developed by the Digital Curation Centre to facilitate the creation and editing of data management plans by researchers. The Library has developed regularly updated, extensive guidance that resides within the DMPOnline tool and is instantly accessible to researchers when answering relevant questions for their funders' requirements. The Library also provides a review service through DMPonline, providing personalised support to help researchers improve their data management.
- The University Library is active in the sector nationally and internationally, working closely with peer research libraries, vendors and publishers to ensure the University is well positioned to take advantage of developments in the scholarly communications field. The University Library coordinates the governance of these activities through the University-wide Open Research Advisory Group. The University Library provides a range of advisory and guidance services for staff and students, utilising the skills and experience of specialist staff covering specialist systems, scholarly communications, publishing, licensing and copyright.
- Students are supported through a wide variety of sessions provided through the Doctoral Development Programme, and events organised by Centres for Doctoral Training and Doctoral Training Partnerships, with supporting digital materials. The University Library engages in awareness raising activities and skills development pertaining to excellent research management for researchers throughout the spectrum.
- Environmental scanning and advocacy around the changing landscape is an ongoing role for the Library to ensure the University is able to meet current and future needs pertaining to open research and the sharing of our research outputs. Locally best practice is shared with and between the research community via the regular Open Research Conversation events and the new Open Research Prize.
- The Investigating and Responding to Allegations of Research Misconduct Policy and Procedure was introduced in 2014, and seeks to ensure a comprehensive and cohesive approach to addressing these issues; the Policy and Procedure has been under review during 2020/21 and a number of updates are being proposed to ensure the Policy and Procedure remain fit for purpose.
- Both the Public Interest Disclosure (Whistleblowing) Policy and the Investigating and Responding to Allegations of Research Misconduct Policy advise those who report suspicions of potential research misconduct in line with the relevant policy, that they will not be penalised or suffer detriment by the University and that all associated complaints of victimisation of an individual will be treated seriously and may provide grounds for disciplinary or other appropriate action.

Commitment 2: We are committed to ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards

The Concordat states that employers of researchers must:

- have clear policies on ethical review and approval that are available to all researchers
- make sure that all researchers are aware of, and understand policies and processes relating to ethical approval
- support researchers to adopt best practice in relation to ethical, legal and professional requirements
- have appropriate arrangements in place through which researchers can access advice and guidance on ethical, legal and professional obligations and standards

Actions and activities in place/undertaken in relation to research ethics:
- The University operates an institutional level Code of Ethics, which provides an overarching framework within which distinct policies and procedures sit, including research ethics and Whistleblowing. The Code of Ethics is under the responsibility of the University Secretary's Office, whose role is to oversee the overall effectiveness of the University's governance and compliance structures and to ensure the integrity of the conduct of the University in pursuit of its strategic goals and ambitions. The Office provides independent advice to the Council, the Senate, the President and Vice-Chancellor and the executive leadership and ensures they gain the advice and assurances required to fulfil their statutory

and regulatory responsibilities. Other areas of the Office's responsibilities include work in the area of strategy development, policy and legal advice, key performance indicators, risk management, data protection, freedom of information and records management.

- The University Research Ethics Committee (UREC), supported by Research Services and reporting to the Senate, is responsible for overseeing the University's research ethics arrangements and includes representatives from all five Faculties, the Professional Services, and the Student's Union, as well as 4 lay/external members.
- The University's Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue (Ethics Policy) is available in full from the University's central research web pages (https://www.sheffield.ac.uk/rs/ethicsandintegrity/ethicspolicy/general-principles/homepage). The policy states that it is the responsibility of Heads of Department to ensure that staff and students within their department are aware of their requirements under the Ethics Policy.
- In addition to the Ethics Policy, the UREC has developed a series of Specialist Guidance Papers that provide detailed guidance on specific types of research.
- The Ethics Policy includes details of the University's Ethics Review Procedure, a devolved procedure in which each academic department is responsible for administering its own ethics review procedure within the framework set by the Ethics Policy, and supported by the central UREC. The model is based upon several principles including that disciplines know their own fields (and the relevant ethical considerations) the best and that self-regulation results in greater engagement than top-down regulation.
- Data relating to the ethics decisions made within each department is gathered annually for consideration by the UREC. In addition, each department is required to submit a short update report on an annual basis, to provide details on how they have implemented the ethics review procedure in the past year, to share good practices, and to highlight concerns or support needs.
- The UREC also visits each academic department every five years; this visit includes an audit of ethics documentation relating to reviews conducted in the department and a discussion regarding the ways in which the department raises awareness of the Ethics Policy.
- The UREC annually audits the ethics arrangements for a small selection of ESRC-funded projects which have received University ethics approval. The process involves two projects per year being selected for a detailed check of the ethics documentation and a meeting between the researcher(s) and a sub-group of the UREC, to ensure that the research is proceeding in line with the terms of the ethics approval and the University's Ethics Policy. Audit reports are then provided to the UREC for consideration.
- Any breaches of the Ethics Policy are treated very seriously and are investigated carefully in order for the situation to be addressed appropriately. If awareness of ethics is found to be lacking in a department then the UREC will take appropriate action, e.g. by running a dedicated training workshop.
- An online ethics application system has been in place since December 2013, and is used by all academic departments. The system holds a complete record of the University's ethics review process. The University has been working with the system developers during 2020/21 to implement key developments to the system, including piloting an automated process for managing amendments to existing approved applications, and improvements to the process for managing ethics approvals obtained from external organisations.
- An on-going programme of research ethics workshops has been running for a number of years, facilitated by the UREC, including training for those involved in the Ethics Review Procedure. Eight ethics reviewer training workshops were held during 2020/21. A number of other information sessions were held on request for individual academic departments and support teams to address particular training needs.
- The UREC undertakes a range of other activities designed to promote awareness and understanding of ethical issues; for example, Faculty representatives on the UREC are encouraged and supported to facilitate discussions and network building within their Faculties (e.g. by holding regular Faculty-level meetings for those with responsibility for running the ethics procedures).
- The UREC provides a number of online resources to aid departments in their training and awareness raising activities relating to research ethics, including a range of ethics case studies, and template presentation slides to assist departments in providing basic information to staff/students.

- During 2020/21, a UREC sub-group has been set up to review the data protection aspects of the University's ethics policy and procedure, with a view to ensuring that these support researchers in meeting the requirements of the GDPR and Data Protection Act 2018. A number of changes to the ethics application form and process are being proposed.

Actions and activities in place/undertaken in relation to legal and professional obligations:
- Work has continued across the University during 2020/21 to ensure that the requirements of the GDPR and Data Protection Act 2018 are met, including provision of training to staff/students in departments. The role of the UEB Information Management and Security Group includes ensuring appropriate arrangements in place around information security, legal and regulatory compliance, and data assurance and external reporting.
- The University has a policy and process for managing security sensitive research, as part of the University's Prevent duty (the UK Counter-Terrorism and Security Act 2015's requirement for Universities to 'have due regard to the need to prevent people from being drawn into terrorism'). The aims of the policy are to ensure the welfare of staff and, in particular, students who undertake security sensitive research, recognising the potentially radicalising and/or distressing effects of viewing security-sensitive material; and to protect staff and students undertaking legitimate research from misinterpretation by the authorities (which may result in legal sanction), so that research may proceed unhindered. The policy and associated process are based on a traffic-light system to assess the level of risk that the proposed research presents, and to identify the appropriate steps that should be undertaken to manage the risk.
- A Research Governance Procedure for health and social care research has been in place for a number of years; the Procedure involves registering projects on the University's Costing Tool and undertaking checks via an administrative process to ensure that a research governance sponsor is appointed in line with the UK policy framework for health and social care research. Where the University is appointed as the research governance sponsor, additional checks are undertaken to ensure that the appropriate governance approvals are obtained prior to the commencement of the project, and monitoring and reporting responsibilities throughout the life of the project are clearly delegated to the Principle Investigator and Head of Department. An online tool is available to help researchers establish when research governance is required for a project: https://www.sheffield.ac.uk/rs/ethicsandintegrity/governance/decision_tree/index.
- A risk-based quality assurance process is in place for human-interventional studies sponsored by the University; whilst the University will not sponsor clinical trials of Investigational Medicinal Products or medical devices, it has defined a number of other types of human interventional study that present potentially higher risk to the participants than other studies. These trials must be risk-assessed, and according to the results, an appropriate quality assurance procedure is invoked (e.g. for high risk trials this will involve a visit from the University's Clinical Trials Assessment Team, including detailed discussions with the Principal Investigator and consideration of key documents from the trial master file).
- The University has a policy relating to clinical trials transparency (as part of the Good Research & Innovation Practices policy) which requires all human-interventional studies to be registered on a public clinical trials register, and all findings to be reported in a timely fashion following the end of the study. A monitoring and audit process is in place to ensure that the policy requirements are followed for University-sponsored studies.
- A Research Governance Sub-Committee (RGSC), reporting to the Senate Research & Innovation Committee and supported by Research Services, formally oversees the University's research governance procedures for research that involves health and social care, including the Research Governance Procedure and the University's quality assurance approach for human interventional studies. Its remit includes ensuring that external regulations and requirements are met, ensuring the on-going effectiveness of the above mentioned procedures, and making decisions on the findings of any quality assurance activities that require action.
- A Research Governance Information Session took place in March 2021, run by the RGSC (following on from similar popular annual sessions held in previous years), to provide all those involved in health and social care research with an opportunity to ensure they are fully aware of the relevant

governance responsibilities. A recording of the event is available via the University's research governance webpages.

- The RGSC recently undertook a review of the Research Governance Procedure to ensure that all studies requiring a sponsor are identified and undergo the appropriate procedure. A number of actions resulting from this review have been taken forward in 2020/21, including a series of meetings with relevant Heads of Department to discuss mechanisms for awareness raising and monitoring, and a review of the information available to researchers in various online locations.

- The University has in place an Ethics Policy on the Use of Animals (updated in June 2019) plus a supporting web page (https://www.sheffield.ac.uk/rs/ethicsandintegrity/animal-research) setting out its commitment to ensuring that all staff and researchers comply with the relevant national legislative requirements and meet or exceed legal standards for animal husbandry, care and use of animals. Through the Animal Welfare and Ethical Review Board (AWERB) the University has well established structures of ethical review and monitoring in place. In April 2015 the University signed up to the Concordat on Openness in Animal Research (www.understandinganimalresearch.org.uk/policy/concordat-openness-animal-research/).

- Provision of support for Research Data Management is jointly provided by the University Library, IT Services, and Research Services. This is overseen by the Open Research Advisory Group, chaired by Professor Sue Hartley (Vice-President for Research), and co-chaired by Anna Clements, (Director of Library Services and University Librarian). The University Library and IT Services provide, Online Research Data at Sheffield (ORDA), an on-line repository for research data, especially that which supports published research. ORDA is at: https://orda.shef.ac.uk/. Researchers are directly asked to confirm that they have the relevant ethical approval to share the research data they are depositing and the options for sharing data with a limited audience have recently been expanded.

- Comprehensive information and guidance on management of research data is provided by the University Library at: http://www.sheffield.ac.uk/library/rdm. A range of other research support services provided by the University Library can be found at: http://www.sheffield.ac.uk/library/research.

- IT Services supplies a technical infrastructure that supports researchers' activities (https://www.sheffield.ac.uk/it-services/research). It also provides guidance, training and advice on the use of that infrastructure including delivery of training via the Doctoral Development Programme as well as collaborative work on particular projects and with various research groups. The Service undertakes training and guidance relating to Information Security and compliance issues, and provides support for University research activity through the Research IT Service, led by the Assistant Director (Research IT) and the development of a Research IT strategy. A Research Storage service provides secure and accessible storage for research groups with 10 Terabytes available for each group free of charge at the point of use. The University has a Cyber Essentials Plus certified suite of research IT services that helps ensure the security of research activities. Governance of IT Services research support and its alignment with University objectives in this area is via a number of routes including:

  1. Representation on Senate Research and Innovation Committee and the Capital Research Assets Group;
  2. Strategic and Operational Liaison with Faculties and other Professional Services departments;
  3. The Vice-Presidents for Research and for Innovation sponsor the IT Services Research Strategy and Product catalogue and roadmap, and IT Services have representation on the VP Research Strategy Group which has cross faculty representation including Professional Services;
  4. Specific liaison with the Research Computing community via the Research Computing Advisory Group.
  5. Specific workstreams to manage work relating to research information systems and research administration systems in conjunction with The University Library and Research Services respectively.

6. UEB has established a group, the UEB IT Sub Group (UEB ITSG), to oversee the work of IT Services. It is chaired by the Deputy Vice Chancellor and its membership includes the Vice-President for Research.

7. The University's Chief Information Security Officer provides regular briefings to key stakeholder groups (e.g. VP Research Strategy Group) on specific security challenges relating to research activities and the measures being put in place to address those challenges.

- A list of the services IT Services provides relating to support for researchers is available on the following web pages: http://www.sheffield.ac.uk/it-services/research. The research storage service information is at: https://www.sheffield.ac.uk/it-services/research-storage, and there is also guidance on the IT Services activities relating to Information Security (https://www.sheffield.ac.uk/it-services/information-security), The University's Information Management and Security Group has published policy and guidance on a range of information management issues, see www.sheffield.ac.uk/govern/
- IT Services recognises the increased information security challenges and cyber security threats that are specific to research activities and as such have put in place additional controls to protect the University's research activities.
  o It is a requirement that all research staff and students undertake mandatory information and cyber security training.
  o It is a requirement that all research staff and students must protect their University accounts using multi-factor authentication.
  o Tailored support and additional controls are available for high value research activities that require additional security assurance.

Commitment 3: We are committed to supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers

The Concordat states that employers of researchers must:

- embed these features in their own systems, processes and practices
- reflect recognised best practice in their own systems, processes and practices
- implement the concordat within their research environment
- participate in an annual monitoring exercise to demonstrate that the institution has met the commitments of the concordat
- promote training and development opportunities to research staff and students, and encourage their uptake
- identify a named senior member of staff to oversee research integrity and ensure that this information is kept up to date and publicly available on the institution's website
- identify a named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity, and ensure that contact details for this person are kept up to date and are publicly available on the institution's website

Summary of actions and activities in place/undertaken to meet Commitment 1:
- The actions and activities outlined in relation to Commitments 1 and 2 also address this Commitment;
- An annual review of the University's arrangements for meeting the requirements of the Concordat is undertaken by the University's Senate Research and Innovation Committee, supported by Research Services, as part of the preparation of this annual Statement for the University's Council.
- The Vice-President for Research and Chair of the University's Senate Research and Innovation Committee has overarching responsibility for the University's approach to fostering high standards of good research practice throughout the University's research community. This role has been taken by Professor Sue Hartley during 2020/21. Collectively the Committee's members are responsible for

keeping under review and supporting the implementation of the University's approach within the Faculties.

- The first point of contact for receiving enquiries on matters concerning good research practice (e.g. what constitutes good practice, what constitutes unacceptable practice, and information on existing support resources) is Lindsay Unwin, Research Ethics and Integrity Manager, Research Services.
- Details of both the above roles are available on the University's central research ethics & integrity webpages: https://www.sheffield.ac.uk/rs/ethicsandintegrity, along with a tool to help staff or students identify the routes available to them for raising a concern.

Commitment 4: We are committed to using transparent, timely, robust and fair processes to deal with allegations of research misconduct when they arise.

The Concordat states that employers of researchers must:

- have clear, well-articulated and confidential mechanisms for reporting allegations of research misconduct
- have robust, transparent and fair processes for dealing with allegations of misconduct that reflect best practice. This includes the use of independent external members of formal investigation panels, and clear routes for appeal
- ensure that all researchers and other members of staff are made aware of the relevant contacts and procedures for making allegations
- act with no detriment to whistle-blowers who have made allegations of misconduct in good faith, or in the public interest, including taking reasonable steps to safeguard their reputation. This should include avoiding the inappropriate use of legal instruments, such as non-disclosure agreements
- take reasonable steps to resolve any issues found during the investigation. This can include imposing sanctions, requesting a correction of the research record and reporting any action to regulatory and statutory bodies, research participants, funders or other professional bodies as circumstances, contractual obligations and statutory requirements dictate
- take reasonable steps to safeguard the reputation of individuals who are exonerated
- provide information on investigations of research misconduct to funders of research and to professional and/or statutory bodies as required by their conditions of grant and other legal, professional and statutory obligations
- support their researchers in providing appropriate information when they are required to make reports to professional and/or statutory bodies
- provide a named point of contact or recognise an appropriate third party to act as confidential liaison for whistle-blowers or any other person wishing to raise concerns about the integrity of research being conducted under their auspices. This need not be the same person as the member of staff identified to act as first point of contact on research integrity matters, as recommended under commitment 3.

The University Statutes (Section 6:3 and 6:5) require the adoption of employment procedures regarding the handling of disciplinary cases by reason of misconduct. Details of the University of Sheffield's procedures for reporting and dealing with allegations of misconduct, are provided to all staff and students via the University's website (https://www.sheffield.ac.uk/hr/guidance/academicstaff/researchmisconduct) and within the Good Research & Innovation Practices policy.

The University is committed to creating and embedding a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct. The University's central ethics and integrity webpages (https://www.sheffield.ac.uk/rs/ethicsandintegrity) provide the details of a

first point of contact for receiving enquiries on matters concerning good research, along with an online tool to help staff or students identify the routes available to them for raising a concern.

Further information is provided below.

Comments in relation to staff:
The University of Sheffield has a policy and procedure for investigating and responding to allegations of research misconduct, which has been undergoing a review during 2020/21 to ensure compliance with the revised Concordat's expectations.

During the academic session of 2020/21 the investigation of four cases were completed. None of these were upheld. Two further cases are being considered; one has proceeded to a formal (Stage 2) investigation; a further case is being led by a collaborating institution with the University's support. These cases are listed in Appendix 1. In one further case, initial assessment of the matter resulted in a decision not to proceed to formal investigation under the research misconduct procedure (on account of the allegation being made anonymously and the complainant not setting out clearly their concerns on request).

Specific recommendations arising from upheld cases are implemented at a local level, and the Vice-President for Research is updated on progress with cases on a regular basis. A desk-based review of research integrity policies, processes and resources during 2021-22 will include consideration of the outcomes of recent research misconduct cases to aid institutional learning.

Comments in relation to student research:
The University's regulatory framework underpins the University's expectations of the conduct of its students. Depending on the nature of the research misconduct, action may be taken under the University's Regulations as to the Discipline of Students; General Regulations as to Progress of Students; and the General Regulations relating to Student Fitness to Practice.

For the academic session of 2020/21 there were 2 formal actions taken in accordance with the above Regulations, listed in Appendix 2. There were a further 4 formal actions taken, where the cases were opened during 2019/20 but were not completed until 2020/21; these are also listed in Appendix 2.

The University's Regulations relating to Intellectual Property, Regulations on the Use of Computing Facilities and Regulations relating to the Library may also be of relevance.

Issues or recommendations arising from student cases are shared with the relevant academic department/service and also captured in a document ("Points of Principle/Issues Arising out of Student Hearings/Case Reviews") which is considered annually by the Quality and Scrutiny Sub-Committee, Learning and Teaching Committee and Senate, in terms of wider institutional learning.

Where a student may have concerns about research misconduct on the part of a member of staff, the University's 'Investigating and responding to allegations of research misconduct' policy is the appropriate mechanism for the raising of concerns.

For the academic session of 2020/21 there were no complaints received from students that included an element of alleged research misconduct on the part of a member of staff.

As reported under Commitment 3, work has been underway to investigate potential mechanisms for a more in-depth periodic review/evaluation of the University's arrangements for research integrity. This is due to be taken forward during 2021/22 via an initial desk-based review of policies, processes and resources that support research integrity, to inform recommendations to the University's Executive Board in line with the University's Strategy Delivery Plan for research. The process will include a formal opportunity for the University to review the outcomes of research misconduct investigations, in order to

identify any trends and to consider actions that may be required at a University level to minimise the possibility of similar issues arising in future.

Commitment 5: We are committed to working together to strengthen the integrity of research and to reviewing progress regularly and openly.

The Concordat states that employers of researchers must:

- take steps to ensure that their environment promotes and embeds a commitment to research integrity, and that suitable processes are in place to deal with misconduct
- produce a short annual statement, which must be presented to their own governing body, and subsequently be made publicly available, ordinarily through the institution's website. This annual statement must include:
    - a summary of actions and activities that have been undertaken to support and strengthen understanding and the application of research integrity issues (for example postgraduate and researcher training, or process reviews)
    - a statement to provide assurance that the processes the institution has in place for dealing with allegations of misconduct are transparent, timely, robust and fair, and that they continue to be appropriate to the needs of the organisation
    - a high-level statement on any formal investigations of research misconduct that have been undertaken, which will include data on the number of investigations. If no formal investigation has been undertaken, this should also be noted
    - a statement on what the institution has learned from any formal investigations of research misconduct that have been undertaken, including what lessons have been learned to prevent the same type of incident re-occurring
    - a statement on how the institution creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct
- periodically review their processes to ensure that these remain fit for purpose.

As mentioned in the introduction to this paper, this document constitutes the University's annual statement for the 2020/21 academic year, to be presented to Council at its meeting in November 2021.

Research Services
Human Resources
IT Services
Student Support Services
The University Library
The University Secretary's Office
The Named Information Officer

Appendix 1: Summary of Formal Investigations into allegations of Research Misconduct by Staff (for the Academic Session: 2020/21)

No.	Issue type subject to investigation	Stage of investigation	Date of receipt of formal allegation	Outcome
1.	Breach of duty of care	Preliminary investigation – Stage 1	January 2020	Not upheld
2.	Plagiarism/authorship	Preliminary investigation – Stage 1	June 2020	Not upheld
3.	Plagiarism/authorship	Preliminary investigation – Stage 1	October 2020	Not upheld
4.	Plagiarism/authorship	Preliminary investigation – Stage 1	May 2021	Not upheld
5.	Breach of duty of care	Preliminary investigation led by collaborating institution	October 2019	In progress
6.	Fabrication/manipulation of data and breach of participant confidentiality	Formal investigation - Stage 2	March 2021	In progress

Appendix 2: Summary of research misconduct alleged on the part of students under the University's Regulations as to the Discipline of Students; General Regulations as to Progress of Students; and the General Regulations relating to Student Fitness to Practice.

Cases reported in 2020/21:

No.	Nature of Research Misconduct	Outcome
1.	Plagiarism and fabrication of data	Refusal of credit for the module, with the right to resubmit. Reprimand. Undertaking to be of good conduct in the future, with conditions.
2.	Plagiarism	Failure of PhD examination, with a right to submit a revised thesis. Undertaking to be of good conduct in the future, with conditions.

Additional cases reported in 2019/20 but not completed until 2020/21:

No.	Nature of Research Misconduct	Outcome
1.	Plagiarism	Reprimand and failure of the PhD examination but with the right to be considered by the Examiners for the award of a Masters degree (MPhil).
2.	Plagiarism	Reprimand & undertaking to be of good conduct; failure of thesis, with the right to resubmit.
3.	Fabrication	Expulsion
4.	Fabrication and plagiarism	Refusal of credit for module