

## Preventing Harm in Research and Innovation (Safeguarding) Policy

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## 1. Introduction and purpose of the policy

The University has a moral and legal duty of care to properly manage any risks to the welfare of its staff and students whilst they are carrying out research and innovation activities, as well as to external individuals carrying out such activities on behalf of the University. This duty of care also extends to participants in University research and innovation activities, as well as those affected by these activities, either directly or indirectly.

All those involved in the University's research and innovation activities have a right to be treated fairly with dignity and respect, and to work or participate in safe research and innovation environments, which are free from sexual exploitation, abuse and harassment, bullying, psychological abuse and physical violence.

This policy sets out the responsibilities of those involved in running research and innovation projects, with respect to anticipating, mitigating and addressing potential exploitation, abuse or harm which may arise (including the importance of giving particular consideration to activities involving participants who have prior experience of being subjected to harm). It also sets out how the University will respond to incidents or issues which are referred to it.

It should be noted that safeguarding may take on added significance during emergency or crisis situations. In such cases there may be a tendency to forget or overlook safeguarding requirements, where researchers may need to proceed with research more rapidly than under normal circumstances, and where there may be disruption to normal governance or oversight processes. Where research is to be undertaken in such scenarios, extra care should be taken to ensure that appropriate steps are taken to anticipate, mitigate and manage risk of harm.

The University will employ a "victim/survivor-centred" approach, where in the event of a safeguarding incident occurring, the wishes of the person(s) who suffered the safeguarding incident guides the University's response. This policy affirms a commitment to treat victims/survivors with dignity and respect, responding to their specific needs and wishes, rather than applying a "one size fits all" course of action.

The University is guided by funder requirements in developing this policy. UK funders of research and innovation activities (UKRI, Wellcome Trust, Department of Health and Social Care, Department for Business Energy and Industrial Strategy and Department for International Development) have jointly committed to apply best practice guidance and principles to prevent and tackle harm and abuse in the research and innovation sector. As such, these grant awarding bodies require that all institutions in receipt of funding put in place adequate safeguarding policies and procedures for research & innovation activities, both domestic and overseas.

This policy will interact closely with the University's existing [Safeguarding Policy](#) providing a wider scope to encompass research and innovation activities in both a UK and international context, as well as extending the duty of care to all those who are involved with, or may be impacted by, research and innovation activities.

The policy is also intended to intersect with other existing key University policies and procedures which incorporate aspects of safeguarding, including, but not limited to:

- [Policy on Good Research and Innovation Practices \(GRIP\)](#)
- [Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue](#),

- [Due diligence framework](#) (Staff/PGR log-in required)
- [Managing Security Sensitive Research Policy and Process](#)
- [Dignity at Work Policy](#) (Staff/PGR log-in required)
- [International working guidance](#) (Staff/PGR log-in required)
- [Research Misconduct Policy](#). (Staff/PGR log-in required)

There may be instances where this policy and other policies overlap (e.g. issues raised under this policy may need to be referred to and be dealt with under another policy or procedure, or vice versa).

This policy applies to all research and innovation activities, regardless of where they take place. Research and innovation activities may take place in countries with distinct regulatory, statutory or legislative frameworks, which require adherence. This policy is intended to provide guidance to ensure sound safeguarding practices are employed in instances where activities take place outside the jurisdiction of UK law.

## 2. Key definitions

**'Safeguarding'** – Safeguarding, in the context of research, refers to the measures taken to ensure that all individuals that are employed on, participate in or otherwise come into contact with the research, do not come to harm as a result of their involvement, or as a result of the project's impact on their lives/communities. This includes anticipating, as far as possible, the potential for harm; taking steps to mitigate the identified harms; and taking appropriate actions to address concerns when they arise.

The key groups that should be considered in the context of this Policy are:

- Any University member of staff or student who is engaged in the research;
- Individuals engaged/employed to undertake aspects of research activity on behalf of the University and/or its collaborators/partners;
- Members of collaborating or partner organisations involved in the research;
- Any participants in/subjects of the research;
- The households or family members of research participants/subjects;
- Members of communities/organisations in which the research is being carried out, where the research may impact upon them.

**'Harm'** - In the context of this policy, harm refers to all forms of injury or abuse including bullying, exploitation, psychological abuse, physical violence, and any sexual exploitation, abuse or harassment. It encompasses both physical injury and negative psychological impact. It includes harm which is deliberately inflicted as well as harm of an unintentional nature (e.g. caused by lack of planning/failing to put appropriate preventative measures in place). It includes harm to individuals as well as to communities or groups involved in or affected by the research (e.g. harm caused by the withdrawal of services or funding; environmental or reputational damage which could impact upon tourism). It includes harm which may take place during the course of a research project, and harm which may arise after the research has ended. Researchers should be aware that partner organisations may use different definitions of harm, should seek to engage in open and equitable discussions with partners to reach an agreed definition in the context of the research being carried out.

**'Research'** – It should be noted that slightly different definitions of research are referred to in University policy and guidance. For the purposes of this policy, research is defined as 'a

process of investigation leading to new insights, effectively shared'. This definition is taken from the Research Excellence Framework 2014 and 2021 and is used in a number of other University policies.

It includes work of direct relevance to the needs of commerce, industry, culture, society, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction.

It includes research that is published, disseminated or made publicly available in the form of assessable research outputs, and confidential reports.

It excludes routine testing and routine analysis of materials, components and processes such as for the maintenance of national standards, as distinct from the development of new analytical techniques. It also excludes the development of teaching materials that do not embody original research. [Although such activities are not explicitly covered by this Policy, safeguarding issues may still arise, and arrangements should be made to ensure that those involved in these activities are treated fairly with dignity and respect, and that they are able to work or participate in a safe environment, free from sexual exploitation, abuse and harassment, bullying, psychological abuse and physical violence].

**'Victim/survivor-centered approach'** - This term refers to placing the needs and priorities of victims/survivors of safeguarding incidents at the forefront of any response, thereby supporting victim/survivors rights, dignity, autonomy and self-determination. Placing victims/survivors first, means that it is the rights of victims/survivors to be fully informed about their options, in order to minimise any further risk of harm.

### **3. Specific responsibilities**

#### **3.1 University**

The University (via the Research & Innovation Committee) is responsible for ensuring that appropriate policy, procedure, guidance, and training are in place to enable effective safeguarding of those involved in, or affected by University research.

The University is responsible for taking any reports of safeguarding concerns seriously, and responding promptly to such concerns, placing the victim/survivor at the heart of the response.

In addition, the University is responsible for ensuring that concerns or incidents are reported to funding bodies where required in line with the terms and conditions for funding.

Research Services is responsible for supporting and providing general advice concerning the policy and its implementation, on behalf of the Research & Innovation Committee.

#### **3.2 Heads of department**

Heads of departments are responsible for the conduct of the research that is undertaken in their departments. They are therefore responsible for:

- for creating a departmental culture in which exploitation, abuse and harm are not tolerated;
- ensuring that all research-active staff and students are made aware of the content of this Policy, and that appropriate mechanisms are in place to ensure that the policy's requirements are met (e.g. as part of confirmation reviews);
- for ensuring that any relevant concerns raised with them are dealt with in line with this Policy.

### **3.3 All individuals involved in the running of a research project**

All those involved in the various aspects of setting up and running of a research project, including University staff (both academic/research staff and administrative staff) and students, individuals contracted by the University to work on University research projects, volunteers engaged on a research project under the direction of the University, or any other associated personnel who are acting on behalf of the University, have a responsibility to:

- be familiar with, and to comply with, this policy. This includes taking personal responsibility for treating each other, research participants and members of the general public with dignity and respect, as well as taking steps to anticipate, mitigate and/or address safeguarding risks in line with this policy, as appropriate for their own role;
- ensure they are aware of where to find further information/guidance in relation to implementing the policy, and where to seek informal advice on safeguarding matters;
- ensure they are familiar with the appropriate routes for reporting specific safeguarding concerns or incidents relating either to themselves or others (see section 5 of this policy);
- contribute to creating and maintaining a culture and environment that enables effective prevention of harm, and enables safeguarding concerns to be raised and addressed appropriately;
- reporting specific safeguarding concerns or incidents which may come to their attention, so that these can be addressed in line with the appropriate procedures;
- cooperate fully with any investigations into reported safeguarding concerns or incidents.

### **3.4 Principal Investigators (PIs)**

In addition to the general responsibilities set out under section 3.3, PIs of individual research projects have overall responsibility for ensuring that the project is designed and implemented in accordance with this policy, including:

- taking a leadership role within their research teams to developing and role modelling a culture where exploitation, abuse and harm are not tolerated, and to anticipate, mitigate and address the risks of exploitation, abuse and harm within their research activities;
- giving careful consideration from the start of the planning process to the potential harms the research may present to researchers, participants and wider communities;
- ensuring that the research design (including research questions and methodology) is developed in consideration of the rights of potential, or actual, victims/survivors of safeguarding incidents, to ensure dignity, safety and respect;
- ensuring that for any research involving human participants, personal data or human tissue, the ethical implications and risks of the research (e.g. power dynamics; informed consent arrangements; maintaining participant confidentiality, feedback of research results) are considered carefully and that ethical review and approval is

obtained in line with the University's [Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue \(PDF\)](#) as well as ensuring that the terms of the ethics approval are complied with (including seeking approval for amendments where required);

- ensuring a Health and Safety **risk assessment** is undertaken in line with University policy and guidance in all cases where research will take place off campus, giving particular consideration to projects involving overseas travel (see [HR guidance](#) – staff/PGR log-in required) and/or lone working, and/or which present other particular risks to those involved in/affected by the research;
- ensuring that appropriate insurance (including health insurance/access to medical care) is in place to cover all members of the research team, including those who are employed by any partner organisations, and in the case of overseas research, those employed in the country/ies where the research is to be carried out;
- ensuring that where required, members of the research team undertake DBS (Disclosure and Barring Service) checks (or equivalent) in line with legislation. If further guidance on eligibility for DBS is required, Human Resources can advise;
- where research involves external partners/stakeholders, ensuring that open, equitable and honest partnerships are created in accordance with section 4 of this policy, and section 2.2 (p.25) of the [Good Research & Innovation Practices](#) policy;
- where research involves external partner organisations, ensuring that the University's [Due diligence framework](#) (staff/PGR log-in required) is complied with;
- where a project involves sensitive or extremism-related research, (defined as research involving groups that are on the Home Office list of 'Proscribed terrorist groups or organisations'), ensuring that the policy and process for [Managing Security-Sensitive Research](#) are followed;
- ensuring that appropriate routes for reporting safeguarding concerns or incidents, and an action plan for handling and escalating these, are built into the research design and kept under regular review. Plans should be developed in consultation with any relevant partners, other stakeholders and communities (in line with section 4 of this policy); where applicable, this should include identifying one or more relevant members of the research team to act as a Designated Safeguarding Contact in line with section 5.4 of this policy;
- ensuring that all members of the research team are aware of this policy and their responsibilities under it, as well as the specific details of how the policy will be implemented in the context of the project, and their involvement in it with reference to their own contractual status (including expectations concerning their own conduct, their interactions with partner organisations/participants/communities, and the appropriate routes for reporting of safeguarding concerns or incidents);
- ensuring that routes for raising safeguarding concerns or incidents are explained, using appropriate language/mechanisms, to research participants;
- giving careful consideration of the potential need to modify, or cancel, research activities, if the risk of harm to researchers, participants or communities is too great;
- considering how lessons relating to planning and implementing safeguarding requirements will be learned and shared.

### **3.5 Individual researchers, research assistants, data collectors and translators**

In addition to the general responsibilities set out under section 3.3, individuals involved in carrying out research activities are expected to:

- take responsibility for considering their own personal safety, and for raising any concerns or queries they may have with an appropriate person (e.g. the PI, research team leader, designated safeguarding focal point);

- ensure that they are aware of the support and advice available to them if an incident occurs (both within the University, and locally where carrying out fieldwork off-campus);
- ensure that they are aware of how to report a safeguarding concern or incident which affects themselves, or others who are either involved in, or affected by, the research (e.g. if an interviewee reports an incident and asks for help);
- considering carefully the practical implementation of the research at the planning stage, in terms of gaps in their own knowledge or experience, and in terms of adhering to agreed ethical approaches; any issues or concerns relating to this should be raised with the appropriate person as early as possible (e.g. the PI, research team leader, supervisor, departmental Principal Ethics Contact and/or Head of Department).

### 3.6 Students and their supervisors

In addition to the general responsibilities set out under section 3.3, undergraduate or postgraduate students who are undertaking individual research projects, and their primary supervisors, are jointly responsible for:

- giving careful consideration from the start of the planning process to the potential harms the research may present to the student, participants and wider communities;
- ensuring that the research design (including research questions and methodology) is developed in consideration of the rights of potential, or actual, victims of safeguarding incidents, to ensure dignity, safety and respect;
- ensuring that for any research involving human participants, personal data or human tissue, the ethical implications and risks of the research (e.g. power dynamics; informed consent arrangements; maintaining participant confidentiality, feedback of research results) are considered carefully and that ethical review and approval is obtained in line with the University's [Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue \(PDF\)](#) as well as ensuring that the terms of the ethics approval are complied with (including seeking approval for amendments where required);
- ensuring a Health and Safety **risk assessment** is undertaken in line with University policy and guidance in all cases where research will take place off campus, giving particular consideration to projects involving overseas travel (see [HR guidance](#) – staff/PGR log-in required) and/or lone working, and/or which present other particular risks to those involved in/affected by the research;
- ensuring that appropriate insurance (including health insurance/access to medical care) is in place to cover the student and any others involved in the research;
- ensuring that where required, the student and relevant others undertake a DBS (Disclosure and Barring Service) check (or equivalent) in line with legislation. If further guidance on eligibility for DBS is required, Human Resources can advise;
- where research involves external partners/stakeholders, ensuring that open, equitable and honest partnerships are created in accordance with section 4 of this policy, and section 2.2 (p.25) of the [Good Research & Innovation Practices](#) policy;
- where research involves external partner organisations, ensuring that the University's [Due diligence framework](#) (staff/PGR log-in required) is complied with;
- where a project involves sensitive or extremism-related research, (defined as research involving groups that are on the Home Office list of 'Proscribed terrorist groups or organisations'), ensuring that the policy and process for [Managing Security-Sensitive Research](#) are followed;
- ensuring that appropriate routes for reporting safeguarding concerns or incidents, and an action plan for handling and escalating these, are built into the research

design, and kept under regular review. Plans should be developed in consultation with any relevant partners, other stakeholders and communities (in line with section 4 of this policy); where applicable, this should include identifying a relevant member of the research team to act as a Designated Safeguarding Contact in line with section 5 of this policy;

- ensuring that routes for reporting safeguarding concerns or incidents are explained, using appropriate language/mechanisms, to research participants.

#### **4. Expectations when working with partner organisations**

Where research involves external partners, it is essential that partnerships are developed in an open, inclusive and equitable manner, avoiding any potential for exploitation. When working with external partners, researchers should:

- hold open and sensitive discussions with partners in relation to each organisation's definitions of, and policies/process for, safeguarding, in order to enable a shared understanding of safeguarding (including responsibilities and processes for reporting and addressing concerns or incidents) to be reached;
- discussions should be approached in a spirit of inclusiveness, incorporating capacity-building and two-way learning;
- as part of the above, researchers should aim to reach agreement with partners regarding a process for sharing information about upheld allegations against individuals directly involved in the research and innovation activity, and/or any risks to the activity;
- agreed approaches to safeguarding should be documented in writing. This may be done as part of the formal collaboration agreement, although researchers may prefer to agree some details of a safeguarding approach separately (e.g. as a project-specific code of conduct) in order to help safeguard the relationship between partners;
- in cases where the requirements of this policy are incompatible with the regulatory, statutory or legislative frameworks by which an external partner organisation is bound, then those frameworks must take precedence; however, in such cases, the PI/lead researcher should ensure that a decision of this nature is documented with a clear justification, and that consideration is given to alternative approaches that could be put in place to cover the area of policy in question;
- full details of the overall budget for the research should be shared openly;
- all contributors to the research should be credited fairly and appropriately.

Further information is available in section 2.2 (p.25) of the [Good Research & Innovation Practices](#) policy.

#### **5. Arrangements for enabling safeguarding concerns or incidents to be reported and investigated**

The University has a number of policies and processes providing information and routes for reporting concerns or incidents in a range of areas. These are set out in sections 5.1-5.3.

Where research involves or may affect external participants/communities, specific consideration must be given to ensuring that appropriate routes for raising concerns will be made available to those participants/communities. This is discussed further in section 5.4.



## **5.1 Policies/mechanisms available to staff**

[Safeguarding Policy](#) - provides information and contact points for staff on ensuring the welfare of children and vulnerable adults in the University community.

[Dignity at Work toolkit](#) - information and guidance for staff on investigating and responding to allegations of bullying, harassment, discrimination and victimisation.

[Report + Support](#) - available to any member of staff, student, or visitor for reporting of any form of discrimination such as harassment, abuse, bullying, or sexual violence that may be based on race, gender, sexuality, or other characteristics.

[Public Interest Disclosure \(Whistleblowing\) policy](#) - available to all employees and workers for raising matters of concern that are in the public interest (often referred to as whistleblowing), such as: malpractice, impropriety or wrongdoing. Such disclosures may be about the alleged wrongful conduct of the University, or about the conduct of a fellow employee, service user, or any third party.

## **5.2 Policies/mechanisms available to students**

Student Services Information Desk '[Signposting Our Support](#)' pages - provides information and links to further support mechanisms, as well as emergency contacts, for a range of issues including harassment, bullying and hate crimes, and domestic violence and sexual assault.

[Report + Support](#) - available to any member of staff, student, or visitor for reporting of any form of discrimination such as harassment, abuse, bullying, or sexual violence that may be based on race, gender, sexuality, or other characteristics.

## **5.3 Policies/mechanisms available to all**

[Research Integrity Decision Tool](#) - available to staff, students, stakeholders, collaborators and members of the public to raise concerns about research misconduct. Research misconduct encompasses a breach of duty of care, placing anyone in danger, not observing ethical or legal obligations, breach of confidentiality, plagiarism and inappropriate authorship practices.

## **5.4 Establishing appropriate mechanisms for reporting of concerns or incidents arising within a research project**

Although the University has a number of mechanisms in place for staff and students to report safeguarding concerns (as set out in section 5.1-5.3), consideration must be given to the need for specific additional arrangements to be made for individual research projects to enable appropriate reporting routes to be made available to others involved with or affected by the research. This is likely to be necessary where the project involves one or more of the following:

- human participants, personal data or human tissue;
- external partner organisations;
- engaging with and/or coming into contact with and/or impacting upon members of the public, communities and/or other stakeholders (even where they are not directly participating in the research).

In such cases, appropriate routes for reporting, handling, and escalating concerns about safeguarding or safeguarding incidents should be built into the research design from an early stage. Wherever possible, relevant stakeholders (e.g. members of partner organisations, community leaders, community workers, other researchers familiar with the community/local environment/context) should be consulted to ensure that an approach can be developed which will be accessible to, and appropriate for, the individuals, organisations and communities concerned. Where partner organisations are involved, reporting mechanisms should be openly discussed and agreed in line with section 4 of this policy. In particular, the approach should:

- Include a range of possible mechanisms for reporting safeguarding concerns or incidents, available both to those directly engaged/involved in the research, and those who are not directly involved. At least one route for reporting should be clearly independent of the research team; this may be the Head of the relevant department and/or the Research Ethics & Integrity Manager in Research Services.
- In developing an approach, careful consideration should be given to the potential barriers to reporting of concerns and how these can be addressed. Potential barriers may include real or perceived power imbalances, language barriers, and fear of retribution/negative consequences. For example, community members may feel more comfortable with reporting a concern to a community leader with whom they are already familiar (who will then escalate the concern in accordance with a defined procedure), or via an anonymous reporting mechanism (either virtual or physical) rather than having to directly contact a member of the research team.
- Include at least one clear, accessible Designated Safeguarding Contact (DSC) who will be responsible for receiving details of reported concerns or incidents and ensuring they are dealt with appropriately. Where possible, such contacts should be based in the country in which the research is being carried out (it is recognised that this may not be possible in all cases; however, where the research involves local partner organisations such as universities or NGOs, an appropriate contact should be identified at one or more of those organisations);
- Include an action plan for handling reported concerns or incidents in line with this policy and the local law, with sensitivity to local custom and practice. The plan should involve a careful evaluation of the implications of reporting any incidents to authorities, as the authorities to which incidents are reported and the manner in which they are outlined can have a fundamental impact on the person concerned. The first priority should always be to do no harm, or where harm has already occurred, ensure that subsequent action does not increase the extent of that harm, and minimises the risk of further harm being caused. It should also include an agreed approach to offering support to victims/survivors who report concerns or incidents, as far as reasonably possible, bearing in mind the limitations of project resourcing (e.g. signposting them to relevant support services; offering to accompany them to report a matter to the Police).
- Consideration should be given to how details of reporting mechanisms will be communicated to those who may need to use them. For research participants, details should be included in a participant information sheet (or equivalent verbal script). Other mechanisms might include posters, leaflets, or talks at events within the relevant organisations or communities.

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

Concerns which are raised via the policies/mechanisms set out in sections 5.1-5.3 of this policy will be addressed in accordance with the applicable policy/procedure.

Concerns which are raised via an agreed Designated Safeguarding Contact (DSC) for an individual research project should be dealt with in an impartial, timely and fair manner, which protects the rights of all individuals involved, takes concerns seriously adopting a victim/survivor-centered approach, and ensures that appropriate action is taken. The highest level of confidentiality relating to individual cases should be maintained and information shared only as necessary to safeguard individuals and to ensure compliance with legislation, regulation, funder terms and conditions, and relevant guidance.

The procedure for dealing with reported concerns or incidents is as follows:

- Where possible, the DSC should address any immediate safety concerns and/or offer appropriate immediate support to the individual(s) raising the concern, in accordance with the context-specific action plan for handling such concerns agreed as part of the planning process, whilst taking care to set clear expectations regarding the level and type of support that they are able to offer.
- The DSC should try to obtain as much information as possible regarding the reported concern, whilst also acting sensitively and providing reassurance regarding the process that will be undertaken for handling the report. Where possible, information regarding the action that the victim would like to see taken in response to the incident (and also any actions that they would prefer not to be taken) should be sought, so that this can be considered as a central concern in addressing the matter.
- The DSC should notify the PI/supervisor for the study (unless they are the subject of the concern), and the Head of the relevant department, as soon as reasonably practicable so that steps can be taken to prevent or limit any immediate or or-going risks of harm (for example pausing the research & innovation activity), and to enable the matter to be investigated.
- At this stage, the Research Ethics & Integrity Manager in Research Services should also be notified so that advice can be sought regarding the appropriate next steps (e.g. referral to another appropriate University policy or procedure; commencement of a fact-finding process, convening of a specific safeguarding investigation panel to consider the matter; decision not to proceed with investigating the matter in response to victim's wishes or insufficient information being provided). Advice may be sought from one or more of the following, and/or an investigation panel may include members of the following, depending on the nature of the concern:
  - 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.
- The victim, and other relevant parties should be kept informed regarding progress and key decisions in dealing with the matter.
- If at any point, it is identified that the reported concern comes under the remit of another University policy or procedure, it should be referred to be handled under that policy or procedure. This may include the following:
  - Safeguarding Policy;
  - Disciplinary Procedures for staff or students;
  - Procedure for Investigating and Responding to Allegations of Research Misconduct;

- Procedure for investigating concerns in relation to compliance with the University's Ethics Policy Governing Research Involving Human Participants, Personal Data and Human Tissue.
- If the University has reason to believe that a crime has been committed or that there is imminent risk of harm occurring, a report should be made to the appropriate authority, except in circumstances where there is a reasonable expectation that to do so would cause further harm to the victim/survivor.
- In some cases, where the matter has been reported by a third party/witness, the victim may not wish to provide testimony, and/or they may not wish the investigation to proceed. Consideration should be given to this, particularly where there is a risk of further harm as a result of the investigation proceeding. However, in making a decision regarding whether to proceed with an investigation, the potential for future abuse and harm must be considered, along with national and international law, and reputational risk to the University and/or partner organisations.
- In addressing a reported concern, attention should be paid to how the situation arose, and actions which should be taken at an individual, team, departmental or organisational level to try and ensure that a similar concern does not arise again in future.
- Where required, in accordance with funding body terms and conditions, Research Services will liaise with the department concerned to ensure that concerns or incidents are reported to the funder at the appropriate timepoints.

## 7. Reporting and evaluation

A central record of all reported safeguarding concerns will be held and maintained by Research Services, on behalf of the Senate Research & Innovation Committee. The Committee will regularly review cases in order to allow institutional learning. The Committee will also keep this policy under regular review.

## 8. Further useful sources of guidance

### 8.1 Internal sources

[International Working](#) guidance provided by HR (staff/PGR log-in required)- Provides information about recruitment arrangements for overseas working and advice on preparing for cultural differences, preparing for managing health issues, awareness of political situations etc.

[Risk Assessment](#) guidance provided by Health and Safety - Includes links to template risk assessment forms and details of the online Risk Assessment System (Stop, Act, Think, Review - STAR) (not currently in use with all departments ).

### 8.2 External sources

UKRI policy on [Preventing Harm \(Safeguarding\) in Research & Innovation](#)

National Institute for Health Research (NIHR) [Safeguarding guidance](#)

UK collaborative for Development Research (UKCDR) [Guidance for Safeguarding in International Development Research](#)

CHS Alliance *Guidelines for investigations* <https://www.chsalliance.org/get-support/resource/guidelines-for-investigations/>