

Investigation of Allegations of Research Misconduct at LSTM

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Always view the current version of the document via the Knowledge Exchange Policy Hub.

Modifications from previous version of document:

Version	Date of issue	Details of modification
2.0	Feb 2022	Added definitions and clarified responsibilities
		Added further details of expectations of reports
		Updated to new format and reviewed all content
		Revisions to recommended compositions of panels made in light of EIA

Contents

1.	INTRODUCTION AND CONTEXT	4
2.	EQUALITY AND DIVERSITY	5
3.	SAFEGUARDING	6
4.	SCOPE 6	
5.	DEFINITIONS	6
6.	RESPONSIBILITIES	8
7.	INITIAL ASSESSMENT BY THE ‘NAMED PERSON’.	8
7.3	Timescale:	8
7.4	Preliminary action	8
7.5	Allegations involving potential risk or harm:.....	9
7.6	Allegations involving potential illegal activity:.....	9
7.7	Pre-Screening Stage:.....	9
7.8	Determining the appropriate investigatory body	9
7.9	Notifying LSTM Academic Leadership.....	9
7.10	Notifying the Respondent(s).....	10
7.11	Notifying relevant third parties	10
7.12	Initial Assessment by the Named Person:.....	10
7.13	Outcome of the Initial Assessment:	10
7.14	Mediation and arbitration:	11
7.15	Addressing concerns through competency, education, and training mechanisms:.....	11
8.	SCREENING PANEL	11
8.2	Timescale:	11
8.3	Appointment of a Screening Panel:.....	11
8.4	Notification requirements:	12
8.5	Objections to the composition of the Screening Panel:	12
8.6	Investigation by the Screening Panel	12
8.7	Report of the Screening Panel	13
8.8	Recommending a Formal Investigation.....	14
9.1	Timescale.....	14

9.2	Appointment of the Investigation Panel:	14
9.3	Notification requirements	14
9.4	Objections to the composition of the Investigation Panel	15
9.5	Investigation by the Panel	15
9.6	Collecting evidence and interviewing the Parties.	15
9.7	Final report of the Investigation Panel	16
9.8	Recommendation of the Investigation Panel	16
10.	ACTIONS AND OUTCOMES	17
10.1	Sanctions	17
10.3	Support provided to the Complainant	17
10.4	Support provided to the Respondent	18
10.5	Handling wrongful allegations	18
10.6	Other actions that may be required or be considered appropriate	18
11.10	Communication with Involved Parties	19
	Appendix One: Process Flow Chart	22
	Appendix Two: Equality Impact Assessment (EIA) 23	

1. INTRODUCTION AND CONTEXT

- 1.1 This document has been produced with reference to the following documents:
[Universities UK Concordat to Support Research Integrity \(2019\)](#)
[UKRIO Procedure for the Investigation of Misconduct in Research \(August 2008\)](#)
- 1.2 LSTM is committed to maintaining the highest standards of integrity across its research and teaching portfolio, and places integrity at the centre of its decision-making process. As such LSTM expects its research community to observe this commitment.
- 1.3 Whilst allegations of research misconduct may be rare, it is essential that LSTM has clear policies that guide those individuals involved in any investigation as to the correct process to follow should a research misconduct allegation arise.
- 1.4 This Procedure has been prepared for the investigation of allegations of misconduct in research and ensures all such investigations are conducted in a manner that is thorough and fair to all parties.
- 1.5 This Policy is designed as a model procedure for LSTM to follow for investigation of allegations of misconduct in research. Such allegations might be brought to LSTM as the employer or postgraduate (PGR) programme provider of the individual against whom the allegations are made, or brought to them in another capacity, such as the external host or sponsor of the research involving LSTM staff or students. LSTM will take full responsibility for investigating allegations of misconduct against any of its

staff and PGR students, however, where staff have dual roles, LSTM may refer the allegation to the substantive employer, or home institution in the case of visiting researchers.

1.6 It is not intended that the Procedure should be used as part of any disciplinary or regulatory process. Information gathered in the course of an investigation may become relevant to, and disclosed in, any such disciplinary or regulatory process. This document provides a process for how the stages of the investigation should be conducted and how appropriate screening and investigation panels might be organised.

1.7 The objectives of the Procedure are to:

- ensure that an investigation is thorough and fair
- demonstrate that, by using an agreed standard process, there will be no errors in the conduct of investigations;
- reassure those who are under investigation that the process of investigation will follow a standard procedure adopted nationally by universities and other research organisations; and
- ensure that complainants or witnesses suffer no detriment from raising concerns (see paragraph 5.3).

1.8 By aligning the Procedure closely to UKRIO policy it should be possible to:

- establish the ethos and mechanisms by which misconduct in research may be addressed appropriately, investigated effectively and handled fairly;
- enable an expert panel to establish whether the allegations have substance and constitute misconduct in research;
- enable an expert panel to establish whether, on the balance of probabilities, the evidence upholds the allegations of misconduct in research (either intentional or reckless in nature); and
- produce a report on the basis of which LSTM may initiate appropriate action.

1.9 Investigations of misconduct in research should maintain the highest standards of integrity, accuracy and fairness. All proceedings must be conducted under the presumption of the balance of probability and carried out with sensitivity and confidentiality.

1.10 The stages outlined herein have been developed for the investigation of the acts or omissions defined in the Concordat to Support Research Integrity 2019, as above. Alternative processes should be used to investigate other forms of misconduct and misconduct in research that is of sufficient seriousness should be reported to the appropriate authority or regulatory body.

2. EQUALITY AND DIVERSITY

2.1 LSTM is committed to promoting equality of opportunity, combatting unlawful discrimination and promoting good community relations. We will not tolerate any form of unlawful discrimination or behaviour that undermines this commitment and is contrary to our equality policy.

2.2 An Equality Impact Assessment was completed for this policy document, a copy of which can be found in Appendix Two.

3. SAFEGUARDING

3.1 LSTM recognises its role in safeguarding and protecting research participants, patients and communities with whom we have direct and indirect contact through our work and also our staff, students, volunteers and other representatives.

3.2 Safeguarding is the responsibility that organisations have, to make sure their staff, operations, and programmes do no harm (Keeping Children Safe, 2020). Safeguarding is a term used to describe how we protect adults, children and young people from abuse or neglect. It is an important shared priority of many public facing services.

3.3 The UK Collaborative on Development Research (UKCDR, 2020), have taken the scope of safeguarding further to include:

'Any sexual exploitation, abuse or harassment of research participants, communities and research staff, plus any broader forms of violence, exploitation and abuse relevant to research, such as bullying, psychological abuse and physical violence.'

4. SCOPE

4.1 This policy applies to all LSTM staff, students and anyone involved in research under the sponsorship or guidance of LSTM, including honorary appointments.

4.2 This policy allows for the investigation, regardless of the contractual status of individuals, and extends to individuals who have left LSTM.

4.3 Those entitled to raise complaints about research misconduct are not restricted to members of staff and students (both past and present) but applies to any external individual or organisation. Information on LSTM's whistleblowing policy can be found [here](#).

4.4 For allegations against students for potential plagiarism, collusion, copying, submission of commissioned or procured work or dishonest use of data, the [academic integrity code of practice](#) should be employed.

4.5 LSTM will take disciplinary action against individual(s) found to be attempting to influence, victimise, or intimidate any parties in the investigation.

4.6 LSTM will ensure that, as far as possible, the proceedings of any investigation are treated as confidential. However, where there is a conflict between the need for confidentiality and the need to seek the truth, the latter will prevail.

5. DEFINITIONS

5.1 Research misconduct is defined as, including but not limited to:

The intentional and/or reckless negligence in terms of fabrication, falsification, plagiarism, failure to meet ethical, legal and professional obligations, failure to obtain appropriate permissions to start or conduct the research, or deception in proposing, carrying out or reporting results of research, misrepresentation of data, involvement of self and interests, qualifications, and publishing history, and deliberate, dangerous or negligent deviations from accepted practice in a research project. It includes failure to follow established protocols or conditions set out in ethics committee/regulatory authority approval, if this failure results in unreasonable risk or harm to humans, other vertebrates or the environment and facilitating of misconduct in research by collusion in, or concealment of, such actions by other. It does not include honest error or honest differences in the design, execution, interpretation or judgement in evaluating research methods or results or misconduct unrelated to the research process.

5.2 Complainant

The complainant is the person making allegations of misconduct in research against one or more individuals (respondent{s}). Where potential misconduct is discovered, as opposed to alleged, LSTM will act as the complainant.

5.3 Good Faith Allegation

Those who have made allegations in good faith will not be penalised and will be offered LSTM's full support. However, LSTM will protect individuals against frivolous, vexatious and/or malicious allegations of misconduct in research and will take appropriate action against any individual(s) responsible for such allegations.

5.4 Investigation

Investigation means the formal examination and evaluation of all relevant facts to determine if misconduct has occurred and, if so, the responsible person and the seriousness of the misconduct.

5.5 Named Person

The 'Named Person' within LSTM responsible for oversight of the Research Integrity Process is a senior academic with considerable experience within the field of biomedical research. In most instances this will be the Dean of Research Culture and Integrity but in cases where a real or perceived conflict exists, this will be delegated to an alternative Dean.

5.6 The Named Person should:

- Be an individual within LSTM with significant knowledge and experience of research, preferably at Professorial level.
- Have responsibility for:
 - receiving any allegations of misconduct in research;
 - initiating and supervising the Procedure for investigating allegations of misconduct in research;
 - maintaining the information record during the investigation and subsequently reporting on the investigation with internal contacts and external organisations; and
 - taking decisions at key stages of the Procedure.

- Have a nominated alternate who will receive allegations of misconduct in research and initiate and supervise the Procedure for investigating them in the absence of the Named Person.

5.7 Relevant Third Parties

The term 'relevant third parties' includes but is not limited to: professional bodies, research funders, regulatory authorities, and other LSTM governance committees.

5.8 Respondent

The Respondent is the person(s) against whom allegations of research misconduct have been made.

6. RESPONSIBILITIES

- 6.1 It is the responsibility of any employee of LSTM, who observes, receives, or is informed of, an allegation of research misconduct by another member of staff, to ensure that the Named Person is informed so that they can investigate fully.
- 6.2 All parties are expected to cooperate in the review of allegations and the conduct of screening panels and formal investigations. Individuals have an obligation to answer reasonable questions and to provide relevant evidence promptly. Failure to cooperate with the investigation may result in disciplinary action.

7. INITIAL ASSESSMENT BY THE 'NAMED PERSON'.

- 7.1 Formal notification of an allegation should be made in writing and sent in strict confidence to the Named Person or via the [freedom to speak up portal](#). Should the Complainant wish to discuss the process informally prior to formal notification to the Named Person, they may contact the Head of Research Governance (HRG). The HRG will inform the Named Person about the discussion, which may be escalated from an informal discussion to the formal preliminary assessment/pre-screening stage by either the Named Person or the HRG. This includes, in situations when the allegations are of a serious nature, even if the Complainant does not wish to proceed through a formal route. Minor infractions may be handled through training, mentoring and guidance.
- 7.2 The purpose of the initial assessment is to determine whether the allegations or discovery fall within the Policy on misconduct in research; and to determine the appropriate course of action. Please refer to the process flow in Appendix One.
- 7.3 Timescale:**
- The Initial Assessment should normally be completed within ten working days from receipt of the allegation and the necessary accompanying evidence. And delays will be notified to all parties by the Named Person.
- 7.4 Preliminary action:**
- Acknowledgement of receipt of the allegations will be sent to the Complainant, along with notification of the procedure that will be followed.

7.5 Allegations involving potential risk or harm:

The Named Person will review the nature of the allegation or discovery and, where they concern situations that require immediate action to prevent further risk or harm to staff, participants or other persons, suffering to animals, or negative environmental consequences - where this might contravene the law or fall below good practice - then the Named Person will take immediate appropriate action to ensure that any such potential risk, actual danger or illegal activity is prevented or eliminated.

7.6 Allegations involving potential illegal activity:

The nature of the allegations may mean that it is necessary to notify legal or regulatory authorities, such as in situations where an activity is potentially or actually illegal and/or there is a danger to persons, animals and/or the environment. In such situations, the Named Person will take immediate action to notify the relevant legal or regulatory authority. As a consequence of such notification, LSTM may be required to comply with an investigation led by a legal or regulatory body, which will ordinarily take precedence over this Policy; all relevant parties will be notified should this pathway be invoked.

7.7 Pre-Screening Stage:

The Named Person will ensure that all relevant information and evidence are secured, so that any investigation conducted under this Policy can have access to them. This may include, but is not limited to:

- Securing all relevant records, materials and locations associated with the work.
- Liaising with the Human Resources Department and the relevant Line Manager(s), or the Education Department to:
 - request the temporary suspension of the Respondent
 - request the temporary barring of the Respondent from part, or all, of the premises of LSTM and any of the sites of any partner organisation(s);
 - restrict access to emails, and other electronic data; and/or
 - request a temporary restriction be placed on the Respondent requiring him/her not to have contact with specific LSTM staff and those of any partner organisation(s).

7.8 Determining the appropriate investigatory body

The Named Person will investigate the contractual/student registration status of the Respondent and the contractual/student registration details specific to the research project(s) related to the allegations. If LSTM is not the Respondent's primary employer or education provider, the Respondent having only an honorary or secondary contract with them, the Named Person will contact the Respondent's primary employer or education provider and inform them of the allegations.

7.9 Notifying LSTM Academic Leadership

Notification of the allegation should be sent to the Director of LSTM, Deputy Director, Head of Research Governance, Dean of the relevant department, the relevant Head of Department (HoD) and the Director of Human Resources, unless a Dean or HOD is the Respondent. Where the Director is the Respondent, the Named Person will inform the Chair of the Board of Trustees. The Named Person will emphasise to all parties that the allegation is to be investigated, and is at this point, unproven and remind all that all information is to be kept confidential.

7.10 Notifying the Respondent(s)

The Named Person will inform the Respondent that allegations or a discovery of potential misconduct in research has been made. The Respondent will be informed in a confidential meeting with the Named Person and a member of the Research Governance and Ethics team. The Respondent may be accompanied to this meeting by an LSTM colleague, or a trade union representative. If the Respondent is a student, a representative from the Education Department (appointed by the Dean of Education) may be present.

The purpose of this meeting is to notify the Respondent formally that allegations or a discovery of potential misconduct in research has been made against them. If the allegations are made against more than one Respondent, the Named Person will inform each individual separately and not divulge the identity of any other Respondent(s).

A written summary of the allegations will be given to the Respondent at the meeting, together with a copy of the Procedure to be used to investigate the allegations. The Named Person will outline the Procedure to be used and the opportunities the Respondent will have to respond. The Named Person will also outline the timetable for the Procedure and details of the sources of support available.

7.11 Notifying relevant third parties

The Named Person will determine whether the research project to which the allegations relate includes obligations that require LSTM to notify any relevant third parties. This may include other research organisations that have hosted the Respondent when the work in question was undertaken. Where allegations do not pass the threshold at screening, the allegation will be logged using anonymity for transparent reporting obligations to UKRI.

7.12 Initial Assessment by the Named Person:

The Named Person will review the nature of the allegations by referring to the definition of misconduct in research. Where the allegations are outside the definition, the Named Person will write to the Complainant to communicate:

- The reasons why the allegations cannot be investigated using this Procedure;
- Which process might be appropriate for handling the allegations (if any); and,
- To whom the allegations should be reported.

7.13 Outcome of the Initial Assessment:

If the allegations or discovery fall within the definition of misconduct, the Named Person will determine whether the allegations or discovery of potential misconduct in research:

- can be dealt with through mediation or arbitration (see paragraph 7.14);
- have some substance but due to their relatively minor nature, should be addressed through education and training or other non-disciplinary approaches, rather than through the next stages of the Procedure (see paragraph 7.15);
- warrant progression to the Screening Panel stage (see Section 8); or
- are sufficiently serious to warrant progression directly to the Formal Investigation stage (see Section 9).

All relevant parties will be notified of the outcome of the Initial Assessment.

If the Named Person finds that the complaint is frivolous, then it is the responsibility of the Named Person to inform the Complainant and the Respondent of this finding, as well as all parties who had been informed of the allegation initially.

The Named Person may recommend that disciplinary action be taken against the Complainant should they have made frivolous, vexatious and/or malicious accusations of misconduct in research. However, if these were made in good faith, they will not be penalised and may require support from LSTM.

7.14 Mediation and arbitration:

Situations may arise that might present as misconduct but are not considered serious in nature. Where appropriate, opportunities to resolve matters through mediation will be considered before the formal steps are undertaken. Options for internal and/or external arbitration and/or dispute resolution will also be explored. In such situations, formal steps will only be taken forward if the informal route is considered to be inappropriate due to the serious nature of the allegations, or where mediation and/or arbitration has been refused or proved unsuccessful.

7.15 Addressing concerns through competency, education, and training mechanisms:

The Named Person may determine that the allegations have some substance, but due to their relatively minor nature, the matter can be recommended as best addressed through LSTM's professional development, education and training mechanisms, or other non-disciplinary processes, rather than through the Panel and Investigation stages of this Procedure. The investigation using the Procedure would then conclude at this point. The Named Person will make recommendations to the relevant Dean or Head of Department, who will take steps to establish a programme of training or supervision in conjunction with the Respondent, Human Resources, and their Line Manager; or, if the Respondent is a student, the Education Department and the relevant Supervisor. This programme should include measures to address the needs of staff working with the Respondent

8. SCREENING PANEL

8.1 The purpose of the Screening Panel is to determine whether there is sufficient evidence of misconduct in research by gathering information and determining whether an allegation or apparent instance of misconduct warrants a Formal Investigation or Disciplinary Action.

8.2 Timescale:

The Screening Panel should aim to complete its work within thirty working days of being convened. All parties will be notified if there are any significant delays to this timescale.

8.3 Appointment of a Screening Panel:

The Named Person will recommend to the Director of LSTM that they appoint a Screening Panel consisting of three individuals who do not have conflicts of interest in the case and have appropriate expertise to evaluate the issues. Consideration of the social context of the Complainant and Respondent, and diversity of experiences will be made when appointing the Panel. One of the individuals will be asked to Chair the Panel. The Named Person will not be a member of the Screening Panel and may consult with the Research Integrity and Governance Committee to identify appropriate panel members. In the case of PGR students, at least one member of the panel will be an experienced supervisor of PGRs (who is not involved in the supervision of any parties in the investigation).

The Panel may include a member from outside of LSTM. Members of the Screening Panel will declare any potential conflicts of interest, including those that arise during the course of the investigation.

8.4 Notification requirements:

The Named Person will notify both the Respondent and the Complainant of the establishment and composition of the Screening Panel in writing as soon as reasonably practicable. The Respondent will be given a copy of the allegations and a summary of the available evidence.

8.5 Objections to the composition of the Screening Panel:

The parties will have five working days to submit an objection to the persons appointed to the Panel. If any party submits a written objection to any of the persons appointed to the Panel, the Named Person will consult with the relevant Dean, who may decide to replace this person with a qualified substitute. The ultimate decision on panel membership will reside with the named person.

8.6 Investigation by the Screening Panel

The Screening Panel will meet to review the allegation and supporting evidence. All meetings will be supported by a member of the Human Resources team (or Education Department for PGR students) who, through the Named Person, will provide the Screening Panel with a copy of the available evidence and will record details of the meeting. Representatives from the Human Resources and/or Education Department will be invited to attend the meetings to offer advice on the staff and student processes respectively.

The Screening Panel should determine whether the allegations of misconduct in research:

- are mistaken, frivolous, vexatious and/or malicious (see paragraph 7.13); or
- should be referred directly to LSTM's disciplinary process or other internal process; or
- have some substance but due to a lack of intent to deceive or due to their relatively minor nature, should be addressed through education and training or other non-disciplinary approach (see paragraph 7.15) rather than through the next stage of the Procedure or other Formal Proceedings; or
- are sufficiently serious and have sufficient substance to justify a Formal Investigation (see Section 8.8) or
- formal disciplinary procedure should start and that there is no need for further investigation.

It may be necessary for the Screening Panel to interview the Respondent, the Complainant and other staff or witnesses who might provide relevant information to assist the Panel. In order to make its judgement, the Screening Panel may request additional information as necessary.

Written notes will be made of the interviews. These are not meant to be verbatim, but will be an accurate reflection of the points discussed; will form the official record; and will be included as part of the Investigation Report. Audio recordings of the interviews may be made to assist with note taking and to clarify any points of dispute in the report but these will be destroyed at the end of the process. Each individual will have an opportunity to comment on the notes to ensure factual accuracy, but this should not delay the investigation process. Any disagreements will be noted.

8.7 Report of the Screening Panel

The Chair of the Screening Panel will make the draft findings available to the Named Person, who will forward them to the Respondent and the Complainant for comment on the factual accuracy of the report. A time limit of 3 working days will normally be allowed for receipt of comments.

Only when the report includes errors of fact should the screening panel modify the report. Any comments submitted from either the Respondent or Complainant will be attached as an addendum to the report.

8.8 The Screening Panel will then produce a final report that:

- summarises the conduct of the investigation;
- states whether the allegations of misconduct have been upheld in whole, or in part, giving the reasons for the decision, recording any differing views;
- makes recommendations in relation to any other misconduct identified during the investigation; and
- addresses any procedural matters that the investigation has brought to light within LSTM or relevant partner organisations.

The panel may also make recommendations in relation to whether the allegations should be referred to the relevant organisation's disciplinary process and whether any action will be required to correct the record of research.

All relevant parties will be notified of the outcome of the Screening Panel. The Respondent will be notified of the outcome of the Panel in a meeting with the Named Person and the Chair of the Screening Panel. The Respondent and Complainant will receive a full copy of the final report. The relevant Head of Department, PGR supervisor and Deans, and the Director will be informed of the conclusions of the panel. The Research Integrity and Governance Committee and Management Committee will receive copies of any recommendations for improving processes at LSTM that arise from the investigation but will not receive details of the conclusions of the specific investigation.

The work of the Screening Panel is then concluded, and the Panel should be disbanded. As the matter may then give rise to disciplinary or other action, members of the disbanded Investigation Panel should not make any comment on the matter in question, unless formally sanctioned by LSTM or otherwise required to by law. They

should also remember that all information concerning the case was given to them in confidence.

8.8 Recommending a Formal Investigation

Where the Screening Panel considers that the allegations are sufficiently serious and have sufficient substance to warrant recommending a Formal Investigation, the Named Person will consult with the relevant Dean and the Director of LSTM and will take immediate steps to set up a Formal Investigation.

9. FORMAL INVESTIGATION

The purpose of the Formal Investigation is to examine and evaluate all the relevant facts to determine whether misconduct has been committed, and if so, the responsible person and the seriousness of the misconduct. The Formal Investigation not intended to replace or subsume any existing disciplinary process. The outcome of the Formal Investigation might be to recommend a transfer to LSTM's Disciplinary process.

9.1 Timescale

The Formal Investigation will be conducted as quickly as practicable without compromising the integrity of the investigation. The investigation will normally be completed within sixty working days following the appointment of the Investigation Panel. The Named Person must authorise any extension of the sixty working day timescale and will keep all relevant parties informed.

9.2 Appointment of the Investigation Panel:

The Investigation Panel will be appointed within 30 working days of the recommendation for a Formal Investigation.

The Named Person will recommend to the relevant Dean that they appoint an Investigation Panel consisting of at least three persons who have not been involved in the investigation at an earlier stage and who have appropriate knowledge and experience to evaluate the scientific issues and relevant knowledge of investigating procedures; if the Respondent or Complainant is a PGR, the panel will include someone with recent experience of PGR supervision. One of the individuals will be asked to Chair the Panel. The Panel will include at least one member from outside LSTM. Consideration of the social context of the Complainant and Respondent, and diversity of experiences will be made when appointing the Panel.

Members of the Investigation Panel will declare any potential conflicts of interest, including those that arise during the course of the investigation.

The Named Person will define the subject matter of the investigation to the Investigation Panel and, where the Screening Panel stage has been completed, will attach a copy of the Screening report.

9.3 Notification requirements

The Named Person will notify the following individuals of the establishment and composition of the Investigation Panel: The Complainant, the Respondent, the relevant Head of Department and Dean, the Director and Deputy Director, the RIG

Committee, Board of Trustees and any relevant third parties (e.g., organisations with which the Respondent holds and Honorary Contract).

9.4 Objections to the composition of the Investigation Panel

The parties will have five working days to submit an objection to the persons appointed to the Panel.

If any party submits a written objection to any of the persons appointed to the Panel, the Named Person will consult with the relevant Dean, who may decide to replace the challenged person with a qualified substitute.

If the decision is taken not to replace the challenged person(s), the reasons will be notified to the relevant party in writing.

9.5 Investigation by the Panel

The Chair of the Investigation Panel will report the progress made by the Investigation Panel to the Named Person on a regular basis if the investigation is anticipated to take more than one calendar month. The Named Person will also then provide appropriate information on the progress of the investigation to other relevant parties.

9.6 Collecting evidence and interviewing the Parties.

The Investigation Panel will examine the evidence collected during the Screening Panel stage and investigate further as required. All meetings and evidence requests will be supported and recorded by Human Resources. Representatives from the Human Resources and/or Education Department will offer advice on the staff and student processes respectively.

The Investigation Panel will interview the Respondent and Complainant, and other individuals who might have information regarding key aspects of the allegations (including external expert witnesses if needed). The Panel must hold a Formal Hearing during which the Respondent must be given the opportunity to set out his/her case and respond to the allegations made against him/her. He/she will also be allowed to ask questions, to present evidence, call witnesses and raise points about any information given by any witness (including the Complainant), regardless of who has called the witness in question. The Complainant and other staff may be invited to provide evidence when members of the Panel consider that it may have relevance to the investigation.

The Respondent may be accompanied to any interviews by a colleague, or a trade union representative. If the Respondent is a student, a representative from the Education Department may be present.

Written notes will be made of the interviews. These are not meant to be verbatim, but will be an accurate reflection of the points discussed; will form the official record; and will be included as part of the Investigation Report. Audio recordings of the interviews may be made to assist with note taking and to clarify any points of dispute in the report but these will be destroyed at the end of the process. Each individual will have an opportunity to comment on the notes to ensure factual accuracy, but this should not delay the investigation process. Any disagreements will be noted. The Chair is responsible for keeping a full record of the evidence received and of the proceedings.

9.7 Final report of the Investigation Panel

The Investigation Panel will produce a final report that:

- summarises the conduct of the investigation;
- states whether the allegations of misconduct in research have been upheld in whole, in part, or not upheld, giving the reasons for its decision and recording any differing views;
- makes recommendations in relation to any matters relating to any other misconduct identified during the investigation; and
- addresses any procedural matters that the investigation has brought to light within LSTM and relevant partner organisations and/or funding bodies.

The final report will state how the investigation was conducted, describe how and from whom information relevant to the investigation was obtained, state the findings, and explain the basis for the findings, and an accurate agreed summary of the views of any individual alleged to have engaged in misconduct.

The Investigation Panel's draft report should be made available to the Respondent and the Complainant (and their representatives by agreement) for comment on its factual accuracy. Only when the report includes error of fact as indicated by either Respondent and/or Complainant should the Investigation Panel modify the report. The Chair should determine the truth of such comments and seek the agreement of the majority of the Panel, before making amendments of substance to the Panel's report.

9.8 Recommendation of the Investigation Panel

The Investigation Panel will review all the relevant evidence and conclude whether the allegations of misconduct in research are:

- upheld in full;
- upheld in part; or
- not upheld.

The standard of proof used by the Investigation Panel is that of "on the balance of probabilities".

In addition to reaching a conclusion over the nature of the allegations, the Investigation Panel may make recommendations with respect to:

- whether the allegations should be referred to LSTM's disciplinary process;
- whether any action will be required to correct the record of research;
- whether organisational matters should be addressed by LSTM through a review of the management of research; and
- other matters that should be investigated.

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

The Named Person will inform the following individuals of the conclusion of the formal investigation report: the Complainant, the Respondent, the relevant Dean, LSTM Director, the relevant Head of Department; and any relevant third parties.

If the respondent has collaborated with, (or had formal contractual arrangements with) members of staff from another institution on the matter in question, the Director or nominee will inform the head of that other institution of LSTM's investigation and later of its findings.

Where the final report contains recommendations and actions, the relevant Dean will be responsible for taking the recommendations forward, with the support of the Human Resources department and/or the Student Administration and Support department.

10. ACTIONS AND OUTCOMES

10.1 Sanctions

If all or any part of the allegations are upheld, the Named Person, in consultation with the Director of HR, or Dean of Education as appropriate, will decide whether the matter should be referred through LSTM's disciplinary processes or for other formal actions.

Should the allegations proceed to the disciplinary process, the report of the Investigation Panel will form part of the evidence that the Disciplinary Panel receives. All the information collected and brought to light through the Procedure will be transferred to the disciplinary process.

In the case where no further action is to be taken, and where the Respondent is a student, the Education Department will issue the student with a completion of procedures letter. The Respondent may then take any complaint about the process to the Office of the Independent Adjudicator (<https://www.oiahe.org.uk/>).

10.2 Appeals

Questions relating to the reports of both the Screening and Investigation Panels can only be raised with the Chair of either Panel over matters of fact. The Respondent should not have the option of appealing against the reports of either stage of the Procedure. Any formal steps taken to discipline or reprimand the respondent, or steps that may undermine their reputation, must be taken through the LSTM disciplinary process which provides the Respondent with the right of appeal. Only when allegations have been upheld through LSTM's disciplinary process and, where called upon, the appeals process, may it be appropriate to apply any sanctions to the Respondent.

10.3 Support provided to the Complainant

Where allegations have been upheld (in full or in part), or found to be mistaken but not frivolous, vexatious and/or malicious, then appropriate support, guidance and acknowledgment should be given to the Complainant, given that their role in the process will most likely have been stressful and may well have caused friction with colleagues. The Named Person should take whatever steps he/she considers

necessary to support the reputation of the Complainant. If the case has received any publicity, the Complainant should be offered the possibility of having an official statement released for internal and/or external purposes.

10.4 Support provided to the Respondent

Where allegations have not been upheld (in full or in part), the Named Person should take such steps as are appropriate, given the seriousness of the allegations, to support the reputation of the Respondent and any relevant research project(s).

Appropriate support and guidance should be given to the Respondent, given that their role in the process will most likely have been stressful and may well have caused friction with colleagues. If the case has received any publicity, the Respondent should be offered the possibility of having an official statement released for internal and/or external purposes.

10.5 Handling wrongful allegations

If the Screening Panel and/or Investigation Panel has found that the Complainant's allegations were frivolous, vexatious and/or malicious, the Named Person may consider recommending that action be taken against the Complainant, under the LSTM's disciplinary process. Those that have made allegations in good faith should not be penalised.

10.6 Other actions that may be required or be considered appropriate

Following the conclusion of the Procedure, the Investigation Panel may need to recommend additional measures in addition to those that may be taken by way of the LSTM's disciplinary process. These may include:

- Destruction of all data related to the project (if for example, the misconduct centred on failure to obtain appropriate permissions including all applicable ethical approvals)
- Retraction/correction of articles in journals
- Withdrawal/repayment of funding
- Notifying patients/patients' doctors of any potential medical issues that may arise
- Notification of misconduct to regulatory bodies (such as the MHRA, the Care Quality Commission, the Home Office [for research involving animals], General Medical Council, other professional bodies, etc.)
- Notifying other employing organisations
- Notifying other organisations involved in the research
- Adding a note of the outcome of the investigation to a researcher's file for any future requests for references; and/or
- Review internal management and/or training and/or supervisory procedures for research.

11. COMMUNICATIONS AND RECORD KEEPING

11.1 In accordance with the principle of integrity, appropriate confidential records should be maintained by the Research Governance Office of all stages of any proceedings under this Procedure.

11.2 The Chairs of the Screening and Investigation Panels should assume responsibility for keeping accurate records of the activities, deliberation and reporting of their

respective Panels and pass these records to the Named Person for inclusion in the archive of the case upon the completion of their Panel's work.

- 11.3 At the conclusion of the proceedings, the Research Governance Office should retain all such records for a period that accords with LSTM's policy on record retention. It is recommended that this period should not 10 years. Access to this archive should be limited to the Head of Research Governance, appropriate members of the HR Department (or Education Department where appropriate), the Named Person and their nominated deputy.
- 11.4 The Named Person is responsible for ensuring the accurate, timely and confidential transfer of information between all parties involved in any of the stages of the Procedure.
- 11.5 Upon the conclusion of the Procedure, at whatever stage, the Named Person is responsible for the accurate, timely and confidential transfer of information to any relevant parties, such as the relevant LSTM Disciplinary Panel, the Education Department or the HR Department.
- 11.6 If LSTM's Disciplinary Process is to be invoked as a result of the outcome of this Procedure, the report of the Investigation Panel should form the basis of evidence that the Disciplinary Panel receives. In such a case, all of the information relating to the Procedure should be transferred to the Disciplinary Panel.
- 11.7 Depending on the outcome of the Procedure, the Named Person should liaise with the Director of HR or Dean of Education to obtain any further relevant information from any relevant parties, such as relevant LSTM Disciplinary Panel, the Education Department or Human Resources Department, and add it to the confidential case archive.
- 11.8 The Named Person will seek feedback on the process from the panels at the close of the investigation, with the Respondent and Complainant also invited to provide their feedback. This will be used to revise the policy where appropriate.
- 11.9 Allegations of misconduct, without necessarily being proven or upheld by the Investigation Panel, may be required to be notified to funding bodies, The Head of Research Governance will undertake these notifications and retain all records.

11.10 Communication with Involved Parties

The Screening and Investigation Panels should be supported by a member of staff delegated by the Named Person or a member of staff from the HR Department, through whom all documentation and all other communication should be passed.

No direct communication, either written or oral, should take place between the members and support staff of the Screening and Investigation Panels and either the Respondent, Complainant or any other member(s) of staff concerned outside the formal process, for the duration of the Procedure and any subsequent disciplinary process.

Communication, either written or oral, by any party (to include Respondent, Complainant or any other member(s) of staff) directly with members of the either

Panel should not be admitted as part of the documentation relating to the case except when it takes place at the request of the Panel, or at formal meetings called by the Chair of either the Screening or Investigation Panel. Should the either party wish to appeal the decision, this should go through the standard appeals process within Human Resources or the Department of Education.

12. REFERENCES

Keeping Children Safe (2020) The International child safeguarding standards and how to implement them.

<https://www.keepingchildrensafe.global/wp-content/uploads/2020/02/KCS-CS-Standards-ENG-200218.pdf>

UKCDR (2020) Guidance on Safeguarding in International Development Research (April 2020)

<https://www.ukcdr.org.uk/resource/guidance-on-safeguarding-in-international-development-research/>

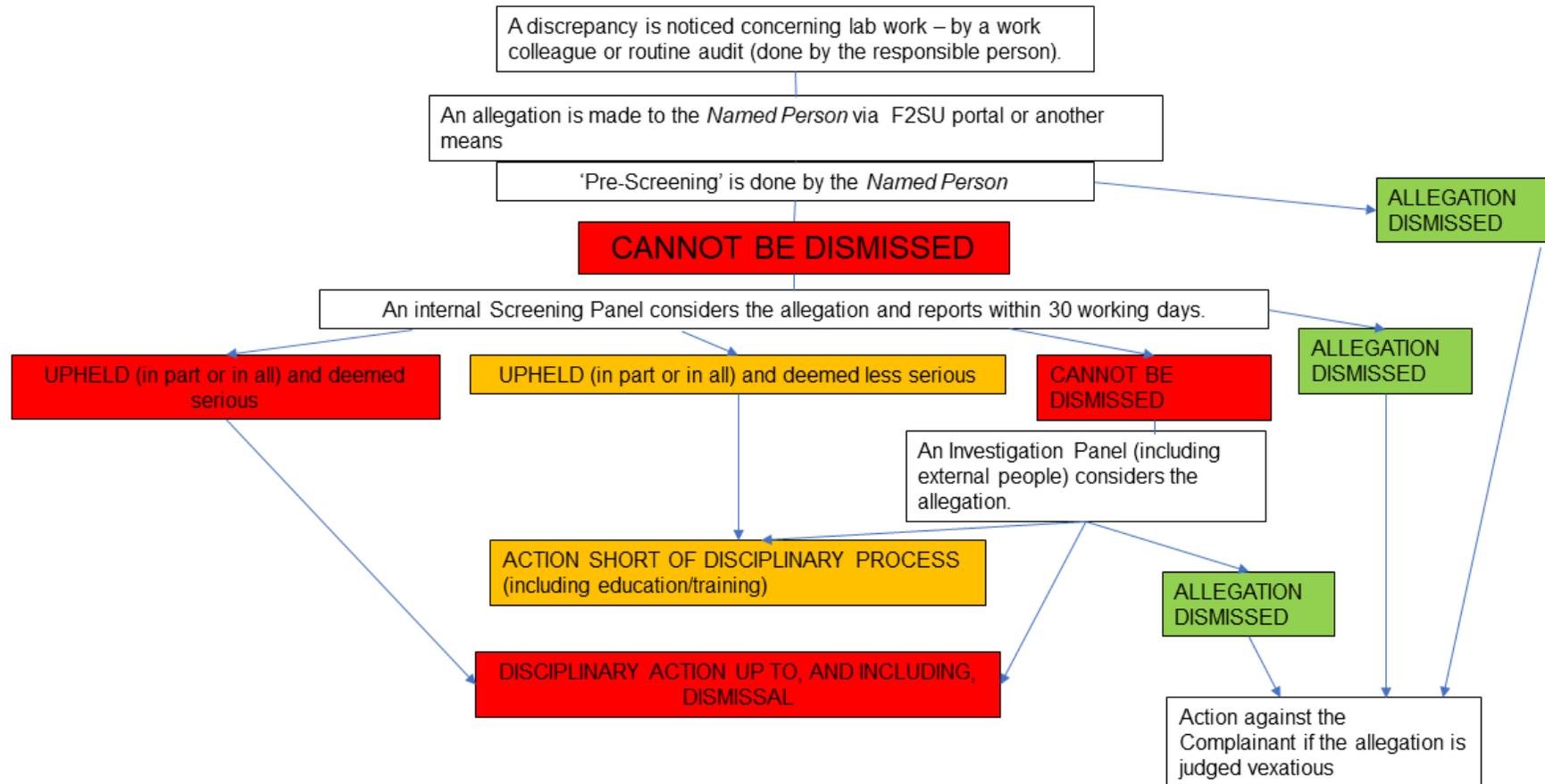
UKRIO (2008) Procedure for the Investigation of Misconduct in Research (August 2008)

<https://ukrio.org/publications/misconduct-investigation-procedure/>

Universities UK (2019) Concordat to Support Research Integrity. October 2019. Universities UK. London.

<https://www.universitiesuk.ac.uk/sites/default/files/field/downloads/2021-08/Updated%20FINAL-the-concordat-to-support-research-integrity.pdf>

Appendix One: Process Flow Chart



Appendix Two: Equality Impact Assessment (EIA) (Please refer to the [EIA guidance document](#))

Section 1 (to be completed for all Policies)

Title of policy/process:	Investigation of Allegations into Research Misconduct
Policy owner job title:	Research Governance Manager
Date of EIA V1	EIA V1 09.02.2022
Policy relevant to: Staff / students / visitors etc:	All
Summary of any consultation with stakeholders (e.g., date and type of consultation):	Research Integrity and Governance Committee -
This policy has been checked for accessibility on: (date)	23 rd March 2022
I confirm that this policy does impact people, and therefore does not require an EIA (delete as appropriate)	Does impact people (continue to Section 2)

Section 2: To be completed if your policy has an impact on people, or if you are unsure of the impact of a Policy or Procedure and need to engage with stakeholders

Ref.	Protected Characteristic (Equality Act 2010)	Yes: positive/negative or No	Potential issues to consider, any data obtained	Potential actions that can be taken to mitigate against impact
1.1	Is it likely that the policy or framework could have a positive or negative impact on a group depending on their <i>ethnicity</i> ?	<i>Possible</i>	Researchers from different social contexts and cultural backgrounds (who may be from the UK or non-UK countries) need to have confidence that the investigating manager and/or panel have experience and expertise in their individual social location and research context.	Ensuring that individuals or teams who review cases or carry out investigations into research misconduct are sufficiently diverse and where possible, the personal (protected) characteristics and social location and background of the respondent are taken into consideration. Cultural competency training, understanding microaggressions and active bystander training and research misconduct investigation training is required for managers/academics who will carry out this role.
1.2	Is it likely that the policy or framework could have a positive or negative impact on a group depending on their <i>gender</i> ?	<i>Possible</i>	Researchers from different genders (who may be from the UK or non-UK countries) need to have confidence that any investigation panel is sufficiently gender diverse.	Ensuring that individuals or teams who review cases or carry out investigations into research misconduct are sufficiently diverse and where possible, the personal (protected) characteristics and social location and background of the respondent are taken into consideration. Cultural competency training, understanding microaggressions and active bystander training and research misconduct investigation training is required for managers/academics who will carry out this role.
1.3	Is it likely that the policy or framework could have a positive or negative impact on people during <i>pregnancy or maternity</i> ?	<i>Possible</i>	People on leave for pregnancy or post-pregnancy may need additional consideration during any investigation due to reduced work contact during period.	If any respondent is on pregnancy and post pregnancy leave during the investigation of any research misconduct issue, the panel will be considerate and provide support to take into account any additional needs identified for the individual. However, investigations should still proceed with appropriate support in place.

1.4	Is it likely that the policy or framework could have a positive or negative impact on <i>people with disabilities</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
1.5	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>sexual orientation</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
1.6	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>religion, belief, or lack thereof</i> ?	<i>Possible</i>	Researchers from different religious and cultural backgrounds need to have confidence that the investigating manager and/or panel have experience and expertise in their individual social location and research context.	Ensuring that individuals or teams who review cases or carry out investigations into research misconduct are sufficiently diverse and where possible, the personal (protected) characteristics and social location and background of the respondent are taken into consideration. Cultural competency training, understanding microaggressions and active bystander training and research misconduct investigation training is required for managers/academics who will carry out this role.
1.7	Is it likely that the policy or framework could have a positive or negative impact on people who are <i>trans</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
1.8	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>age</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
1.9	Is it likely that the policy or framework could have a positive or negative impact on people due to <i>marriage or civil partnership</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		

Ref.	Other groups who could be impacted (acquired characteristics)	Yes (positive/negative) / no	Potential issues to consider, any data obtained	Potential actions that can be taken to mitigate against impact
2.1	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>contract type (part-time or full-time)</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
2.2	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>contract status (fixed-term or indefinite)</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
2.3	Is it likely that the policy or framework could have a positive or negative impact on people due to their <i>grade</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		
2.4	Is it likely that the policy or framework could have a positive or negative impact on <i>people with dependents or caring responsibilities</i> ?	<i>Not likely that this policy will directly disadvantage this group</i>		

Conclusion:

<p>a. What issues are highlighted by the EIA process? Summarise the action you will take to mitigate against them, or how you've changed your policy to remove the issues.</p>	<p>The EIA highlights that the make-up and choice of investigation manager or panel may have an impact on the investigation process and outcome. It will be important for the respondent to feel that any investigating manager or panel will be sufficiently experienced, trained and impartial and will understand the location and context in which the respondent works.</p>
<p>b. If you consider intersectionality of protected characteristics, are the issues compounded? Summarise the action you will take to mitigate against the issues.</p>	<p>Yes, the intersectionality of gender and race and religion/culture may further compound the respondents' confidence in a fair investigation process.</p>
<p>c. Are there are groups of people who aren't recorded so far, who may be adversely impacted by this policy/framework?</p>	<p>None known</p>
<p>d. Are there any opportunities within the policy/framework to particularly promote equity?</p>	<p>Opportunity to ensure that any/all research misconduct investigations are conducted equitably and fairly.</p>
<p>e. Does the policy/framework need amendment after the outcome of the EIA process?</p>	<p>Further guidance on diversity in the panels was included</p>
<p>f. Timeline for amendment, review and further consultation with key stakeholders.</p>	<p>Policy and EIA were reviewed by RIG Committee in February 2022</p>
<p>g. Any additional comments</p>	<p>None</p>