

Procedure for Investigating Potential Research Misconduct

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Section 1: Introduction

1. This document outlines the procedure for investigating allegations of research misconduct (Procedure), which is where conduct falls short of the University's commitment to the highest standards of research integrity as set out in its [Code of Good Research Conduct](#).
2. It fulfils the University's commitment to the [Concordat to Support Research Integrity](#) to have a robust, transparent and fair process for dealing with allegations of research misconduct, as well as meeting the requirements of national and international funding bodies and other organisations. This Procedure aligns with the UK Research Integrity Office's template [Procedure for the Investigation of Misconduct in Research](#) adopted nationally by research organisations.

Section 2: Roles and responsibilities

Named Person	The Named Person is the Vice-President for Social Responsibility. The Named Person, or their nominee, oversees the implementation of the Procedure including making decisions at key stages and subsequently reporting on the investigation to internal contacts and external organisations.
Head of Research Governance, Ethics and Integrity (Head of RGEI)	Supports the Named Person with the implementation of the Procedure and is responsible for ensuring that all cases are dealt with in accordance with the Procedure.
Case Manager	Co-ordinates the investigation on behalf of the Named Person and in accordance with the Procedure. They advise and support Investigators and Panel members with the process.
Research Integrity Assistant	Provides administrative assistance to the Case Manager and Head of RGEI and will act under their guidance.
Associate Vice President for Responsible Research Practice (AVP)	The AVP, or their nominee, chairs the panels convened under the Procedure to undertake a Formal Investigation. If the AVP has a conflict of interest in relation to any investigation, is unavailable or does not have capacity, the Named Person will identify a Panel chair.
Initiator	Is the person who raises concerns about potential research misconduct.
Respondent	Is the person who has had allegations made against them or is a subject of allegations in accordance with this Procedure.
Companion	Is someone identified to provide support to an Initiator or Respondent. The Companion can be a colleague, friend or Trades'/ Students' Union representative (but cannot be a Witness in the case). The Companion can accompany the Initiator/Respondent at any meeting under the Procedure but cannot act as their representative. It is important that the Investigator or Panel hears from the Initiator or Respondent in their own words so the Companion does not normally have the right to make statements or ask questions. Companions must adhere to the University's internal processes and confidentiality.
Witness	Is someone identified by the Initiator, Respondent, Investigator or Panel as having knowledge relevant to the allegations. The

	Investigator or Panel may choose to interview or obtain a statement from a Witness. A Witness cannot act as a Companion.
Head of School	The Head of School is responsible for assisting the Named Person with appointing appropriate individuals to act as Investigators or members of a Panel of Investigation. The Faculty Vice-Dean for Research along with the Vice-President and Dean of the faculty will usually support the Head of School in this role. If the Head of School has a conflict of interest in relation to an investigation, the Dean will identify individuals.
People Partner	If a Respondent is a member of staff, their People Partner will be involved in the process, directing them to available support. The People Partner will make the Case Manager aware of any other processes ongoing involving the Respondent.
Investigator	Undertakes the Initial Investigation. They will normally be an experienced member of academic staff from within the University. They must have no conflict of interest in any aspect of the complaint, the investigation, the area(s) of research in question, or any of the persons concerned. They will examine the evidence in the case to determine whether there is sufficient evidence of research misconduct to recommend to the Named Person that a Formal Investigation of the allegation(s) is warranted or whether alternative action(s) should be taken.
Panel of Investigation (the Panel)	The Panel of Investigation is convened by the Named Person to undertake the Formal Investigation in order to determine whether an allegation of research misconduct is upheld in full, in part or not upheld. It makes recommendations regarding further actions required to address any research misconduct, including correcting the record of research, and addressing other matters uncovered during its work (for example, where evidence of poor research practice is found). Panel members must have no conflict of interest in any aspect of the complaint, the investigation, the area(s) of research in question, or any of the persons concerned.
The Vice President for Research (VP for Research)	Is responsible for overseeing the appeal process including receiving requests for an appeal at the end of the Procedure, determining whether an Appeal Panel should be convened, receiving and implementing the outcome of an Appeal Panel's report.
Appeal Panel	Is convened by the VP for Research following a request for an appeal and if the VP for Research has determined that there are appropriate grounds for an appeal in accordance with Section 10 of this Procedure. The Appeal Panel reports its conclusions to the VP for Research.
Appeal Manager	Co-ordinates the appeal process in accordance with the Procedure and is the point of contact with Initiators, Respondents, Witnesses (where relevant) and the Appeal Panel.

Section 3: Scope

3. This Procedure is neither a disciplinary nor a legal process and must not be considered as such. However, if the investigation makes a finding of research misconduct, this Procedure may transfer to a disciplinary process (in accordance with point 11 below).
4. Allegations of research misconduct can only be investigated via this Procedure. Where an allegation of potential research misconduct is raised under the University's [Public Interest Disclosure \(whistleblowing\) Policy](#), the allegation will be referred to this Procedure.
5. This Procedure can only be used to investigate allegations that relate to the conduct of research. Allegations that do not fit within the purview of the Procedure will need to be investigated via the appropriate University procedures. Notably, allegations of bullying and harassment can only be investigated via the University's Dignity at Work and Study (DAWS) Policy and allegations of financial fraud or other misuse of research funds or research equipment would be addressed under the University's fraud response plan.
6. Where an allegation of research misconduct has been raised with someone other than the Head of RGEI or the Named Person, (including if the complaint is made via the Dignity at Work or Grievance procedures) that person must take responsibility for informing the Head of RGEI or Named Person.
7. For the purposes of this Procedure, research is defined as '*a process of investigation leading to new insights, effectively shared [...] It includes work of direct relevance to the needs of commerce, industry, 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*'.¹
8. This Procedure applies to any person conducting research under the auspices of the University, irrespective of who funded or sponsored the research in question, (other than in exceptional cases where, for example, a student is also a member of staff of another organisation which will undertake its own investigation). This includes research conducted solely or in conjunction with others in the University or other bodies, and includes (but is not limited to) research conducted by:
 - A member of staff or former member of staff.
 - A student or former student (including visiting students registered elsewhere who conducted research at the University).
 - An independent contractor or consultant.
 - Anyone carrying out research under the supervision/direction of a University member of staff.
 - A person with visiting, honorary or emeritus status.

¹ Taken from 'Annexe A: Definitions', The Concordat to Support Research Integrity (2019) which adopts the definition used in the Research Excellence Framework.

- A member of staff on a joint clinical or honorary contract.
9. Concerns about research misconduct relating to the assessed element of a current student's degree would normally be dealt with under Regulation XVII, in accordance with the procedures outlined in Academic Malpractice: Guidance on the Handling of Cases. However, this Procedure would apply if either the alleged research misconduct involves a published piece of research, the supervisor is implicated in the complaint, or the student is also a member of staff of the University.
 10. The University also reserves the right to investigate allegations of research misconduct of current members of staff or students for research conducted prior to their commencement at the University.
 11. In the case of current University employees or students, this Procedure may lead to a disciplinary process or, for former students, the procedures outlined in Ordinance XXXVIII.7 to revoke a degree.

Section 4: Definitions of research misconduct and poor research practice

12. For the purposes of this Procedure research misconduct includes, but is not limited to, the following, when proposing, carrying out or reporting the results of research:
 - a) **Fabrication** - making up results, other outputs (for example, artefacts) or aspects of research (including documentation and participant consent) and presenting or recording them as if they were real;
 - b) **Falsification** - the inappropriate manipulation or selection of research processes, materials, equipment, data, imagery or consents;
 - c) **Plagiarism** - using other people's ideas, intellectual property, or work (written or otherwise) without appropriate acknowledgement or permission;
 - d) **Failure to meet legal, ethical or professional obligations**, for example:
 - i. Not observing legal, ethical or other requirements for human research participants, animal subjects, human organs or tissue used in research, or for the protection of the environment.
 - ii. Breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent.
 - iii. Misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality
 - iv. Improper conduct in peer review of research proposals, results or manuscripts submitted for publication. This includes failure to disclose conflicts of interest; inadequate disclosure of clearly limited competence; misappropriation of the content of material; and breach of confidentiality or abuse of material provided in confidence for peer review purposes.
 - v. Improper conduct in an editorial role, e.g. as editor of a journal, journal issue, book series, or edited book.
 - vi. Misuse of research funds, equipment or premises.

- vii. Mismanagement or inadequate preservation of data or primary materials where this could have a significant impact on the research or research outputs.
 - viii. Deliberate prevention of the publication of research, for example by withholding data or by inappropriately withholding permissions.
 - ix. Failure to lead a research group in a way that upholds research integrity.
- e) **Misrepresentation of:**
- i. data, including suppression of relevant data; or knowingly, recklessly or by gross negligence, presenting a flawed interpretation of data.
 - ii. involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution.
 - iii. interests, including failure to declare competing interests of researchers or funders of a study.
 - iv. qualifications, experience or credentials.
 - v. Publication history, through undisclosed duplication of publication (self-plagiarism), including undisclosed duplicate submission of manuscripts for publication.
- f) **Improper dealing with allegations of research misconduct:** failure to address possible infringements, such as attempts to cover up misconduct and reprisals against whistle-blowers, or failing to adhere appropriately to agreed procedures in the investigation of alleged research misconduct accepted as a condition of funding. Improper dealing with allegations of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.
- g) **Multiple/serial instances of poor research practice** that collectively amount to significant deviation from accepted practice.

Honest errors and differences in, for example, research methodology or interpretation or the exercise of academic freedom/freedom of speech within the law do not constitute research misconduct.

13. For the purposes of this Procedure poor research practice includes, but is not limited to, the following:
- a) Failure to give appropriate recognition to others involved in research activity where this does not constitute plagiarism or misrepresentation of involvement as defined above. This Procedure can be used to investigate authorship disputes (including who should be included as co-authors, who is corresponding author and order of authorship);
 - b) Deviation from current accepted practice in carrying out research where this was not deliberate or negligent and does not fit into any category described above;
 - c) Mismanagement or inadequate preservation of data or primary materials where this would not have a significant impact on the research or research outputs.
 - d) Minor breaches of legal requirements or ethical review that are not deliberate or negligent.

- e) Failure to follow University policies or guidance that are relevant to research integrity where they do not constitute research misconduct as defined in Point 12 (for example, failure to follow the University's Research Data Management Policy where this does not involve personal data or other data subject to regulatory/legal restrictions).

Section 5: Standards for implementing this procedure

14. Those responsible for the operation of this Procedure must ensure that they are familiar with these Standards, as well as the Principles set out in Appendix 1, and should refer to them when making decisions and interpretations.
15. Once initiated, this Procedure will usually be carried out until conclusion.
16. The standard of proof used for investigations under this Procedure is "on the balance of probabilities." This means that the activity was more likely than not to have occurred.
17. The investigation is conducted with the presumption of innocence and is inquisitorial, not adversarial.
18. Initiators and Respondents can be accompanied by a Companion to any interviews conducted under this Procedure. Initiators, Respondents and Witnesses will only be present during the proceedings when giving evidence.
19. Where an Initiator, Respondent or other person involved in the investigation has difficulties at any stage of the procedure due to a disability, they should discuss this with the Case Manager/RI Assistant as soon as possible and reasonable adjustments will be made to ensure they are able to fully participate in the Procedure.
20. Every effort will be made to investigate allegations of research misconduct in the shortest possible timescale necessary to ensure a full and fair investigation. There are a range of factors which might be relevant to the applicable timescales, including the complexity of the matter, the volume and accessibility of evidence, the need to make adjustments to accommodate the requirements of the parties or witnesses, etc.
21. Notes will be made of all meetings and a confidential record maintained on all aspects, and during all stages, of the Procedure. The normal retention period for such records will be 6 years after the last entry in a record followed by first review or destruction. After the retention period, the University will retain anonymised summary information of investigations. Records must only be retained beyond the normal retention period if:
 - their retention can be justified for statutory, regulatory, or legal reasons; or
 - the research project to which the records relate is still ongoing; or
 - the retention period of the research project to which the records relate is longer.
22. Reports generated by this Procedure may be used in evidence by the University's disciplinary procedures; by subsequent investigations under this Procedure; and by other University processes. In addition, subject to data protection considerations, they may be released, in full, or in part or summary form, in reporting the matter to any appropriate external organisation.

23. The Respondent and Initiator will be invited to raise with the Case or Appeal Manager any concerns they may have regarding potential conflicts of interest in relation to the proposed Investigator or Panel members but neither has a right of veto over those nominated. The Named Person will consider any concerns raised and whether a declaration would exclude that person from involvement in the investigation.
24. Investigators and Panel members will confirm to the Case Manager, and Appeal Panel members will confirm to the Appeal Manager, in writing that:
 - a) Their participation involves no conflict of interest, seeking advice from the Case/Appeal Manager if unsure;
 - b) They will abide by the Procedure;
 - c) They will prioritise their responsibilities under the Procedure;
 - d) They will respect the confidentiality of the Procedure; and
 - e) They will adhere to the Principles and Standards of the Procedure.
25. If a case is linked to the Named Person or raises the potential for a conflict of interest for the Named Person, the VP for Research, or their nominee, will determine whether there is a conflict and will oversee the process, if necessary. The VP for Research will nominate a delegate to act on their behalf when necessary.
26. The Named Person has the authority to take immediate appropriate action to secure evidence pertinent to an investigation, ensure that any potential danger, illegal activity or risk is prevented or eliminated and to suspend the research or refer the matter to another process, if necessary. This authority includes ensuring there is appropriate support for the Initiator, Respondent and any staff or students impacted by an investigation, including moving them to a different supervisor, if appropriate.
27. Nothing in this Procedure shall limit the right of the University or a member of staff or a student of the University to exercise their rights under [Statutes XIII](#) and [Ordinances XXVIII](#) concerning discipline and grievance.
28. Nothing in this Procedure shall prevent the University from suspending a member of staff in accordance with University Statutes or a student in accordance with Regulation XVII.
29. In exceptional circumstances, such as the serious ill-health of the Initiator or Respondent, the Named Person has the discretion to vary the procedure. All those involved in the procedure shall be fully informed of the variation, and the rationale for the variation. Any serious objections shall be entertained by the Named Person together with the Head of RGEI and further modifications made or the objection overruled with clearly explained reason as necessary.
30. Where third parties (for example, funders, collaborative partners, co-authors, journals, regulators or professional bodies) have an interest in an investigation the University may be required to notify and liaise with those third parties. This would include where a Respondent is a former member of staff but is now an employee of another institution and cases that involve an institution where the Respondent was an employee or student prior to joining the University. In such circumstances, the University may notify and liaise with that institution to determine the most appropriate process to be followed (for example a joint investigation) in line with the

[Russell Group Statement of Cooperation](#) in respect of cross-institutional research misconduct allegations, including with non-Russell Group institutions.

31. Where the circumstances of a particular case involve a third party to whom the Respondent has, or has had, a contractual obligation (for instance in the case of research work undertaken by the Respondent as an employee of another institution e.g. people with visiting status) or the Respondent is based in more than one institution, the report of any inquiry undertaken by that third party may be accepted as admissible evidence if the Named Person is satisfied that the third party's inquiry was conducted in a manner consistent with the requirements of the University's Procedure.
32. If required, the University will comply with an investigation into research misconduct led by a legal or regulatory body, which will ordinarily take precedence over this Procedure. Investigations under this Procedure may continue in parallel but may have to be suspended or terminated by the Named Person.
33. Where alleged research misconduct could lead to criminal liability, the Named Person may refer the case to the police or another appropriate body.
34. If, at any stage of this Procedure, a Respondent or anyone else, whether involved in the matter or not, raises a counter-allegation of research misconduct or an allegation of research misconduct unrelated to the matter under investigation, these allegations will be addressed under this Procedure and forwarded to the Named Person for consideration. The Named Person will consider how these allegations should most appropriately be managed. That might involve the allegations being considered under one process (and if the concerns proceed to the Initial or Formal investigation stage, a joint investigation being conducted), with appropriate adjustments made to the Procedure.
35. If, at any stage of this Procedure, an Initiator, Respondent or other person raises a complaint about the use or operation of this Procedure or any decision or action proposed or taken under this Procedure, or raises any other grievance, then the Named Person will seek appropriate advice from relevant departments (for example from the Directorate of People or Student Services) in confidence, to determine an appropriate course of action.
36. If required to facilitate a full and fair investigation or the operation of any aspect of this Procedure, the Named Person and those conducting or supporting any investigation under this Procedure are free to seek confidential advice from persons with relevant expertise, both within the University and outside it. To address technical aspects raised by a matter, they may also employ relevant expertise and use of tools or computer software for assessing different forms of misconduct such as plagiarism, data manipulation and fabrication. The Named Person can authorise payment for expert advice, if necessary. Those seeking advice will, as far as is possible, anonymise the information provided to make no information available which could lead to the identification of the Initiator, Respondent or other individuals involved in the case. Persons consulted will be subject to the same requirements of confidentiality as others involved in the Procedure. Persons who might be consulted include but are not limited to:

- experts in particular disciplines of research; or
 - experts in particular aspects of the conduct of research, such as members of research ethics committees, statisticians, editors of academic journals or equivalent persons from relevant areas of dissemination in research; and/or experts in addressing research misconduct and poor practice; or
 - representatives of University departments such as: The Directorate of People, Student Services, Finance; or
 - the Advisory Service of the UK Research Integrity Office.
37. In the interests of transparency and upholding the highest standards of research integrity, the University may publish on its website summary reports of investigations into research misconduct where a finding of research misconduct has been made. The level of information to be included in such a statement will be considered and determined by the University on a case-by-case basis.
38. After an investigation into alleged research misconduct when a Respondent is not a current member of staff or student of the University (such as a former staff or student, visiting staff, those on honorary contracts and students from other institutions conducting research on the University's premises), the Named Person will determine the nature of any further action to be taken in relation to the investigation and its outcome. Similarly, after an investigation when a Respondent is deceased, the Named Person will determine the nature of any further action to be taken in relation to the investigation and its outcome.
39. This Procedure will be reviewed at least every five years, or when deemed necessary including to reflect any legal and regulatory developments, the requirements of appropriate third parties (such as funders) and good research and sector practice. Revisions will include consultation with staff networks, student and trade unions and the EDI Office.

Section 6: How to report concerns about research misconduct

40. Anyone may initiate a concern about research misconduct; it is not limited to members of the University.
41. The Initiator may, in the first instance and where appropriate, attempt to address the issue with either the individual concerned or an appropriate senior colleague rather than raise a concern via this Procedure. Advice should always be sought from the Head of RGEI regarding any informal processes utilised to resolve such a complaint to ensure that they do not breach Section 4 point 12 (f) of this Procedure. Where the Initiator is not satisfied with the outcome of an informal approach, or if they do not consider such an approach appropriate, they should raise their concerns as set out below.
42. A person making an allegation of research misconduct (the Initiator) will not be penalised, provided it is made without malice, in good faith, and in the reasonable belief that it is true. The [Public Interest Disclosure Act 1998](#) gives legal protection to workers against being dismissed or suffering any other detriment as a consequence of

raising, with appropriate personnel, concerns which they believe indicate malpractice within the organisation. In accordance with the Act, the position in the University of an individual raising a complaint of research misconduct which they reasonably believe to be true, in good faith and in accordance with this Procedure, should not be jeopardised as a result of raising those concerns.

43. All employees and students, including those holding honorary contracts, are required to report, and all other individuals working at the University (e.g. individuals with Visitor status or who are conducting research under contract for the University) have a responsibility to report, to the University any concerns about research misconduct (as defined in section 4 Point 12), whether this has been witnessed or for which there are reasonable grounds for suspicion. Failure by a member of staff or student to report potential or suspected research misconduct may constitute concealment of research misconduct as defined by Section 4, Point 12 (f) of this Procedure.
44. Concerns about research misconduct must be made in good faith and accompanied by relevant supporting evidence. They should be reported using the form provided at the following link ([reporting form](#)) and sent to:

Head of Research Governance, Ethics and Integrity
Directorate of Research and Business Engagement
2nd floor Christie Building,
University of Manchester,
Oxford Road,
Manchester M13 9PL.
Research.misconduct@manchester.ac.uk
45. Allegations should be reported succinctly, relate only to the conduct of research, and only evidence that substantiates the allegations should be provided with clear referencing. As far as possible, evidence should be in its primary form (e.g. complete saved emails, not email text copied into a pdf). Those implementing this Procedure can request that the Initiator revise their report form to ensure clarity of the concern(s) being raised and to remove inappropriate or unrelated information. Also, evidence may be edited by the Case Manager to remove sensitive or confidential information.
46. Initiators should normally put their name to any allegations they make. However, it is recognised that Initiators can be concerned about revealing their identity. Allegations raised which are anonymous, or matters identified where there is no specific Initiator, will be considered at the discretion of the Named Person, taking account of the seriousness of the concerns raised and the likelihood of confirming the concerns from alternative sources or evidence. Where appropriate, advice will be sought, and consideration given to whether the Respondent will be able to defend themselves. Those implementing the Procedure will not usually correspond with someone as an Initiator unless they identify themselves.

Section 7: Initial Screening

47. The purpose of the Initial Screening is to determine the most appropriate process to investigate or otherwise address allegations raised via this Procedure. The primary

aim is to determine whether the matter falls under this Procedure (in terms of both the matter raised and the individuals identified). Its purpose is NOT to investigate the substance of the complaint.

48. This stage of the Procedure is conducted by the Named Person and the Head of RGEI.
49. The Case Manager/RI Assistant will acknowledge receipt of the complaint, informing the Initiator that the allegations will be screened and providing them with a copy of the Procedure.
50. The Head of RGEI will assess the allegation(s) to determine whether they fall within the University's responsibility to address, utilising the following criteria:
 - a) Whether the Respondent(s) is or was conducting research under the auspices of the University, whether solely or in conjunction with others in the University or externally;
 - b) Whether the research project(s) to which the allegation(s) relate are being or were conducted under the auspices of the University, whether solely or in conjunction with other bodies; and
 - c) Whether the allegation(s) potentially fall within the definition of research misconduct or poor research practice described in Section 4.
51. The Head of RGEI may decide that it is necessary to contact the Initiator or the Respondent to seek information or ask questions to carry out the above review. Such contact will be in writing; the Initiator and Respondent would not normally be interviewed at this stage. If it is necessary to contact the Respondent, they should first be informed that allegation(s) of research misconduct have been made concerning them and that the allegation(s) is being assessed to determine what, if any, action should be taken.
52. The Named Person will determine whether immediate action is required in accordance with Point 26 of this Procedure or if any third parties need to be notified.
53. The Case Manager will determine whether the research project(s) to which the allegation(s) relate(s) include(s) legal or contractual obligations that require the University to undertake prescribed steps in the event of an allegation(s) of research misconduct being made, such as making reports to a regulatory or a funding body and take any actions necessary. Such obligations might be in:
 - a) a contract, agreement or guidance on research conduct from a regulator or funding body;
 - b) a partnership contract, agreement or Memorandum of Understanding; or
 - c) an agreement to sponsor the research.
54. The Named Person will help ensure that any such legal or contractual obligations are carried out by the University, seeking appropriate advice as necessary. It may be necessary to inform the Respondent about the steps taken.
55. At the conclusion of this stage, and considering that more than one course of action may need to be followed, the Named Person and Head of RGEI will determine whether the allegation(s) of research misconduct:

- a) falls under the definition of research misconduct and the scope of the Procedure and should advance to Initial Investigation; or
- b) falls within the scope of another formal process of the University and warrants referral directly to it; or
- c) warrants referral directly to an external organisation, including but not limited to the research organisation(s) under whose auspices the research in question took place; statutory regulators; or professional bodies, the latter being particularly relevant where there are concerns relating to fitness to practise; or
- d) presents as being related to potential poor research practice rather than to research misconduct, and therefore the initial approach to addressing the matter will be via informal measures, such as education and training, mediation or other non-disciplinary approach, rather than through the next stage of the Procedure or other formal processes; or
- e) should be dismissed because it does not fall under the remit of the Procedure and does not need to be referred elsewhere.

If necessary, they will also determine who the Respondent(s) should be.

- 56. The Head of RGEI shall write a note summarising the assessment of the allegation(s) and inform other University contacts as appropriate of the next steps from the outcomes.
- 57. Where it is determined that a case should proceed to Initial Investigation, the Case Manager/RI Assistant will provide the Respondent with the following, formally and in writing:
 - a) Notification that an allegation(s) of research misconduct has been made which involves them. That it has been determined that the matter will proceed to Initial Investigation. That they will be given the opportunity to respond to the allegation(s) and present their case.
 - b) The approximate timescales for the next steps in the process. The communication will be made empathetically emphasising the investigatory nature and that the University has drawn no conclusions at this point.
 - c) A copy of the complaint and evidence (redacted by the Case Manager in accordance with Section 6 point 45).
 - d) A copy of the Procedure.
 - e) Where possible, the identity of the Investigator and an indication of when they will be in contact to gain the Respondent's version of events.
- 58. When allegations have been made against more than one Respondent, the Case Manager/RI Assistant should inform each individual separately and, in so far as it is possible, not divulge the identity of any other Respondent.
- 59. The Respondent will normally be informed of the name of any Initiator(s) who has made the allegation(s) concerning them. In exceptional circumstances, at the discretion of the Named Person, the identity of the Initiator(s) may remain confidential.
- 60. For all other outcomes, the Procedure reaches its endpoint. Please refer to Section 11, Outcomes and Reporting Stage.

61. The Case Manager/RI Assistant will then inform the Initiator, formally and in writing, of the conclusion of the Initial Screening and an outline of the next steps.
62. This stage of the Procedure will normally be completed within ten working days of receipt of an allegation(s), provided this does not compromise the Standards and Principles of this Procedure and the full and fair assessment of the allegation(s). The Case Manager/RI Assistant will explain any delays to this timescale to the Initiator in writing, presenting an estimated revised date of completion.

Section 8: Initial Investigation

63. The purpose of the Initial Investigation is to determine whether there is sufficient evidence of research misconduct to warrant a Formal Investigation of the allegation(s) or whether alternative action(s) should be taken.
64. The Head of School will appoint an Investigator on behalf of the Named Person to undertake the Initial Investigation into the allegation(s). Where an allegation relates to a large body of work, or work carried out over a significant period, the Named Person will ensure there are adequate resources to carry out a sufficient investigation to reach a robust conclusion.
65. The Investigator will normally be an experienced member of academic staff from within the University and may be from within or outside the department concerned, depending on the circumstances of the investigation and at the discretion of the Named Person. The Investigator will be supported by the Case Manager.
66. The Investigator shall assess the information obtained and any additional information they require. If the Investigator is denied access to materials that they request, they should inform the Named Person who will decide how to proceed. The work of the Investigator will include:
 - a) determining whether the allegation was made in good faith;
 - b) a confidential review and assessment of the evidence provided;
 - c) reaching a conclusion on the allegation(s) in line with the possible outcomes set out in paragraph 69.
67. The Case Manager/RI Assistant will provide the Investigator with all relevant information including any correspondence and documentation already provided in support of the allegation(s).
68. The Investigator and Case Manager will then gather further information from the Initiator, Respondent and Witnesses in support of their investigation. Any individual to be interviewed as part of the investigation will usually be given 10 working days' notice. Interviews may take place in person or online. Individuals may be reinterviewed or asked to comment further, in writing, if necessary.
69. On conclusion of the Initial Investigation, the Investigator will determine whether the allegation(s) of research misconduct:
 - a) is sufficiently serious and has sufficient substance to warrant a Formal Investigation of the complaint; or

- b) has some substance but due to its relatively minor nature or because it relates to poor research practice rather than to research misconduct, should be addressed through education and training or another non-disciplinary approach, such as mediation, rather than through the next stage of the Procedure or other formal processes; or
 - c) warrants referral directly to another formal process of the University; or
 - d) warrants referral directly to an external organisation, including but not limited to statutory regulators or professional bodies, the latter being particularly relevant where there are concerns relating to fitness to practise; or
 - e) is unfounded, because it is mistaken or is frivolous or is otherwise without substance (this could include difference of opinion on methodology), and will be dismissed; or
 - f) is unfounded, because it is vexatious and/or malicious, and will be dismissed.
70. The Investigator, supported by the Case Manager, will produce a report setting out their findings and any other matters they wish to draw to the attention of the University. The report will be sent to the Initiator and the Respondent for comment on matters of factual accuracy. The Investigator will consider the responses received and, if they consider that the report includes errors of fact, will modify the report as necessary.
71. The Case Manager will then submit the final report and records/material relating to the investigation to the Named Person, the Initiator, the Respondent and such other persons or bodies as the Named Person has deemed appropriate.
72. The Named Person will then undertake the following actions depending on the conclusions of the Initial Investigation:
- a) If it is concluded that the allegation(s) is sufficiently serious and has sufficient substance to warrant a Formal Investigation of the complaint, then the process moves to Formal Investigation.
 - b) For all other outcomes, the investigation moves to the Outcomes and Reporting Stage (see Section 11).
73. The work of the Investigator is then concluded, and they play no further role in the Procedure or any subsequent disciplinary procedure, apart from clarifying any points in their report.
74. Any queries or requests for comment addressed to the Investigator should be referred to the Named Person or Case Manager.
75. The Initial Investigation stage now ends.

Section 9: Formal Investigation

76. The purpose of the Formal Investigation is to review the evidence collated, and findings made, by the Initial Investigation and carry out any further investigation (if considered necessary and appropriate by the Panel) in order to:
- a) conclude whether an allegation of research misconduct is upheld in full, upheld in part or not upheld; and

- b) make recommendations, as appropriate, for consideration by the relevant University authorities, regarding any further actions deemed necessary to address any research misconduct; correct the record of research, and/or address other matters uncovered during its work.
77. The Case Manager will inform the Initiator and the Respondent formally and in writing that the Procedure has moved to Formal Investigation.
78. The Named Person supported by the Head of School shall appoint a Panel of Investigation (the Panel):
- a) The Panel will usually consist of three persons. The AVP for Responsible Research Practice will usually chair the Panel. Depending on the circumstances and at the discretion of the Named Person, the Panel may consist of a greater number of persons, for example, to ensure that it contains sufficient expertise or diverse perspectives to reach a thorough and fair conclusion on the allegation(s).
 - b) One member of the Panel shall be from outside the University. At the discretion of the Named Person, the Panel may include multiple external members.
 - c) At least two members of the Panel shall be academic specialists in the general area within which the misconduct is alleged to have taken place, and where allegations concern highly specialised areas of research the Panel should have at least one member with specialised knowledge of the field. Such specialists can be drawn from within the University, bearing in mind the conflict of interest requirements, or from the Panel's external member(s).
 - d) For allegations that involve staff on joint clinical/honorary contracts it may be helpful to include representation from the other employing organisation(s). In these circumstances, they are not classified as the external member of the panel.
 - e) Once convened, the membership of the Panel should not normally be changed. If the membership falls below its initial number, the Named Person will determine whether to recruit additional members and continue the investigation from its current point or restart the investigation.
79. The Case Manager will provide the Panel with:
- a) a copy of this Procedure;
 - b) details of the allegation(s);
 - c) a copy of the note of the Initial Screening;
 - d) a copy of the report of the Initial Investigation;
 - e) other records from the Initial Investigation;
 - f) names of the Initiator(s) and the Respondent(s);
 - g) a summary of correspondence with the Initiator(s) and the Respondent(s) to date; and
 - h) a summary of any evidence secured.
80. The Chair of the Panel will be responsible for the conduct of the proceedings during the Formal Investigation. The Panel does not have any disciplinary powers. The Panel shall decide its way of working based on the provisions of this stage of the Procedure and the information that it has been given, as to what further information or evidence (if any) it might need to supplement that gathered during the Initial Investigation. The

Panel will normally meet with the Initiator and the Respondent who will usually be given at least 10 working days' notice of the meeting

81. When reaching its conclusions, the Panel will attempt to reach a consensus by discussion.
82. The Panel may decide, but is not required, to meet with relevant Witnesses. It is within the Panel's discretion to determine whether it is necessary and appropriate for further Witness evidence to be sought at this stage.
83. The Panel shall assess the information and evidence. The work of the Panel will include:
 - a) determination of whether the allegation is made in good faith;
 - b) a confidential review and assessment of the evidence provided;
 - c) reaching a conclusion on the allegation(s) in line with the possible outcomes set out in paragraph 84;
 - d) making recommendations on further actions which might be necessary to address what the Formal Investigation finds in line with the possible outcomes set out in paragraph 85.
84. On conclusion of the Formal Investigation, the Panel will determine whether the allegation of research misconduct:
 - a) is upheld in full; or
 - b) is upheld in part; or
 - c) has some substance but due to its relatively minor nature or because it relates to poor research practice rather than to research misconduct, will be addressed through education and training or another non-disciplinary approach, such as mediation; or
 - d) is unfounded, because it is mistaken or is frivolous or is otherwise without substance and will be dismissed; or
 - e) is unfounded, because it is vexatious and/or malicious, and will be dismissed; or
 - f) should be referred to another relevant University process, such as academic malpractice process or equivalent or the University's financial fraud investigation process; or
 - g) should be referred to an external organisation, including but not limited to the current employer, statutory regulators or professional bodies, the latter being particularly relevant where there are concerns relating to fitness to practise.
85. The Panel may also make recommendations, for consideration by the Named Person and/or appropriate University authorities, regarding any further action(s) which should be taken to address any misconduct the Formal Investigation may have found; correct the record of research, and/or address other matters uncovered. Such recommendations might include but are not limited to:
 - a) whether the matter should be referred to the University's relevant disciplinary procedure; and/or
 - b) what external organisations should be informed of the findings of the investigation, with appropriate confidentiality, including statutory regulators, relevant funding bodies, partner organisations and professional bodies, the latter being particularly relevant if concerns relate to fitness to practise; and/or

- c) whether any action will be required to correct the record of research, including informing the publishers and editors of any journals that have published articles concerning research linked to an upheld allegation of research misconduct to correct honest errors, or any relevant preprint or data repositories; and/or
 - d) whether procedural or University matters should be addressed through a review of the management of research; and/or
 - e) informing research participants or patients or their doctors or other responsible health care professionals; and/or
 - f) other matters that should be investigated, including allegations of research misconduct which are either unrelated to the allegation in question or alleged to have been committed by persons other than the Respondent and/or other forms of alleged misconduct.
86. After the Formal Investigation, the Panel will produce a report setting out its conclusions and recommendations, giving the reasons for its decisions.
87. The report of the investigation will be sent to the Initiator and the Respondent for comment on matters of factual accuracy. The Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.
88. The Panel will submit its final report to the Named Person, setting out its conclusions and recommendations regarding further actions to be taken and any other matters they wish to draw to the attention of the University.
89. The Case Manager, on behalf of the Named Person, shall convey the substance of the Panel's findings and recommendations to the Initiator and the Respondent also informing them:
- a) Of the actions arising from this stage of the Procedure and any relevant actions arising from earlier stages and, where relevant, the contact points for any follow-up communications regarding those actions.
 - b) Of the options for appeal open to them (see Section 10).
 - c) That, unless an appeal is raised, the investigation and the use of this Procedure have now concluded.
90. The Formal Investigation stage now ends and the Panel should be disbanded.
91. Those who have contributed to the disbanded Panel should have no further involvement in the Procedure unless formally asked to clarify a point in their written report at a subsequent stage or as part of any subsequent action or process. A role on the Panel rules out participation in any subsequent disciplinary or other processes. The Chair of the Panel, however, may be invited to present the Panel findings to a subsequent disciplinary or other process.
92. The Panel will normally reach its conclusions within three months of being established, provided this does not compromise the Standards and Principles of this Procedure and the full and fair investigation of the allegation. Any delays to this timescale will be explained to the Initiator and Respondent in writing, presenting an estimated revised date of completion.

Section 10: Appeal Process

93. The purpose of the Appeal Process is to permit the Initiator and/or the Respondent to appeal in certain circumstances against the findings of an investigation carried out under this Procedure.
94. The Initiator and/or the Respondent may appeal against the outcomes of the Procedure, including the decisions and/or recommendations associated with them. Appeals may be permitted only on the following grounds:
 - a) Material procedural irregularity in the conduct of the investigation up to and before the Appeal Process that could have affected the outcome.
 - b) Material fresh evidence becoming available which was not available to the Investigator and/or the Formal Investigation Panel.
 - c) There is substantiated evidence of bias or unfairness in the process or decisions taken impacting the outcome of the investigation.
95. Any appeal shall be made in writing to the VP for Research within 10 working days of being notified of the outcome of the Procedure. The written notice of appeal shall set out the grounds of appeal, and be accompanied, wherever possible, by supporting documentation.
96. The VP for Research will assess the appeal to determine whether it falls within one or more of the grounds for appeal set out above, seeking clarification from the person(s) submitting the appeal as necessary.
97. If the appeal does not fall within one or more of the grounds for appeal set out above, then the appeal will be dismissed and this decision will be communicated to the person who submitted the appeal. The Appeal Process now ends.
98. If the appeal does fall within one or more of the grounds for appeal, the VP for Research shall notify the Head of RGEI who will appoint an Appeal Manager and Appeal Panel to undertake the appeal process.
99. The Appeal Panel will normally consist of three persons. Depending on the circumstances of the investigation and at the discretion of the VP for Research, the Appeal Panel may consist of a greater number of persons, for example, to ensure that it contains sufficient expertise or diverse perspectives to reach a thorough and fair conclusion on the appeal. No individual involved in the Appeal Panel will have been involved at any stage previously as an Investigator or as a member of a Formal Investigation Panel or as the Named Person.
 - a) One member of the Appeal Panel shall usually be from outside the University.
 - b) Once convened, the membership of the Appeal Panel should not normally be changed. If the membership falls below its initial number, the VP for Research will determine whether to recruit additional members.
100. The VP for Research will select one of the internal members of the Appeal Panel to act as its Chair. In the event of the Chair becoming unable to participate in the Appeal Stage once it is underway, the VP for Research will select a new Chair from the members of the Appeal Panel and then consider the overall membership of the Appeal Panel.

101. Both the Respondent and Initiator may raise with the Appeal Manager concerns that they may have about those chosen to carry out the Appeal Process but neither has a right of veto over those nominated. The VP for Research will consider any concerns raised and whether new persons should be selected to carry out the Appeal Process.
102. All persons appointed to carry out the Appeal Process, and all persons allowed to observe it, will confirm to the Appeal Manager:
 - a) Their participation involves no conflict of interest, seeking advice from the Appeal Manager;
 - b) They will abide by the Procedure as it affects the work of the Appeal Process;
 - c) They will respect the confidentiality of the proceedings; and
 - d) They will adhere to the Principles and Standards of the Procedure.
103. When making any decisions about the conduct or conclusion of the Appeal Process, the Appeal Panel will do so by reaching a consensus.
104. The Appeal Panel will review the conduct of the investigation and any evidence submitted in support of the appeal in question, rather than carry out a re-investigation of the allegation(s) in question.
105. The Appeal Panel will decide whether it upholds, reverses or modifies the outcome in question, including the decisions and/or recommendations associated with it. The decision of the Appeal Panel is final.
106. The Appeal Panel shall write a report setting out its conclusions, giving the reasons for its decision and recording any differing views.
107. A summary of the conclusions will be sent to the Initiator and the Respondent for comment on matters of factual accuracy. The Appeal Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.
108. The Appeal Panel will then submit their final report to the VP for Research.
109. The Appeal Manager on behalf of the VP for Research shall convey the substance of the Appeal Panel's findings and recommendations to the Initiator, the Respondent and the Appeal Manager.
110. The VP for Research will then undertake the actions necessary to implement the conclusions of the Appeal Panel, following relevant provisions of the Outcomes and Reporting stage and liaising with the Head of RGEI and others, within and/or external to the University, as necessary.
111. The work of the Appeal Panel is then concluded and the Appeal Panel should be disbanded.
112. Any queries or requests for comment addressed to the Chair or members of the Appeals Panel should be referred to the Appeal Manager.
113. Those who have contributed to the disbanded Appeal Panel should have no further involvement in the Procedure unless formally asked to clarify a point in their written report at a subsequent stage or as part of any subsequent action or process.

114. A role as Chair or member of the Appeal Panel rules out participation in any subsequent disciplinary or other processes.
115. The Appeal Process now ends.

Section 11: Outcomes and Reporting Stage

116. The purpose of the Outcomes and Reporting Stage is to ensure that all necessary actions are taken at the conclusion of this Procedure.
117. The Head of RGEI is responsible for ensuring that any necessary actions are carried out. In general terms, these actions may include:
 - a) Referring the case to the University's relevant disciplinary procedure.
 - b) Referring the case to another relevant University process, such as academic misconduct or financial fraud.
 - c) Reporting the outcomes to relevant colleagues/ bodies within the University.
 - d) Making necessary disclosures to external organisations and other interested parties.
 - e) Fulfilling the University's duty of care to Initiators, Respondents and other involved parties, including but not limited to research participants.
 - f) Ensuring that appropriate efforts are made to correct the research record.
 - g) Addressing procedural or organisational matters uncovered during the investigation.
 - h) Taking appropriate steps to preserve the good reputation of the Respondent and/or Initiator (as necessary). If the case has received any adverse publicity the Respondent may be offered the opportunity to have an official statement released.
 - i) Recommending to the appropriate authorities that action be taken against anyone where there is clear evidence that a complaint was vexatious and/or malicious. This may include disciplinary action where the individual is internal to the University.
 - j) Communicating anonymised summary data on uses of this Procedure within a specific period. This includes reporting required in the Annual Statement on Research Integrity required under The Concordat to support Research Integrity and reports to relevant central committees/ departments.

Appendix 1: Principles

1. Introduction

118. Research Misconduct is a serious matter. The investigation of allegations of research misconduct must be conducted to the highest standards of integrity, accuracy, and fairness.
119. Those responsible for carrying out investigations of alleged research misconduct should always act with integrity and sensitivity.
120. The following principles of Data Protection, Fairness, Confidentiality, Integrity, Prevention of Detriment, and Balance as defined below must inform the use of this Procedure.

2. Data Protection

121. The use of this Procedure to investigate or otherwise respond to any allegation will constitute the processing of the personal data of living individuals. Such processing is regulated by the Data Protection Act 2018 and the UK General Data Protection Regulation ("Data Protection Legislation"). The University must comply with the Data Protection Legislation and accordingly any investigation or use of this Procedure will be carried out in accordance with it.
122. The University recognises that it may process special category data while carrying out the Procedure and it will do so in accordance with the Data Protection Legislation.

3. Fairness

123. The investigation of any allegations of research misconduct must be carried out fairly and in accordance with the statutory human rights of all parties involved.
124. Matters should be dealt with promptly - without unreasonable delay of meetings, decisions or outcomes.
125. Respondents should be dealt with consistently.
126. Those responsible for carrying out this Procedure should be mindful of their responsibilities for equality, diversity and inclusion, and ensure that all related obligations are met.
127. Where anyone is formally accused of research misconduct, that person must be given full details of the allegations in writing at the appropriate stage and a reasonable opportunity to set out their case and respond to the allegations against them.
128. They must also be allowed to:
 - a) ask questions;
 - b) submit evidence in their defence;
 - c) suggest Witnesses for the Investigator and/or Formal Investigation Panel to interview; the Investigator and/or Panel of Investigation may then choose to invite the suggested Witnesses to interview;

- d) raise points with the Investigator and/or Panel of Investigation, as appropriate, about any information given by any Witness (regardless of who has called the Witness in question).
129. The Respondent, Initiator and any Witnesses involved in an Initial or Formal Investigation may be accompanied by a Companion and seek confidential advice and assistance from someone of their choosing.
130. If the Initiator or Respondent does not wish to be interviewed, they should be asked to engage with the process through other means, such as providing written answers to questions posed by the Panel.

4. Confidentiality

131. The Procedure should be conducted as confidentially as is reasonably practicable to protect the Initiator, the Respondent and others involved in the Procedure.
132. The confidential nature of the proceedings should be maintained provided this does not compromise either the investigation, any requirements of health and safety or any issue related to the safety of research participants.
133. Nothing in this Procedure prevents anyone from making a disclosure under whistleblowing law (the Public Interest Disclosure Act).
134. The identity of the Initiator or the Respondent should not be made known to any third party unless:
- a) there is a contractual/legal/ethical requirement to do so;
 - b) it has been deemed necessary by those implementing this Procedure in order to carry out required/ necessary actions or disclosures during or at the outcome of the investigation;
 - c) it is necessary as part of the action taken against the Respondent if (at the end of the Procedure and/or any subsequent process, such as a disciplinary process, and after any appeals processes) the allegations have been upheld;
 - d) it is necessary as part of the action taken against a person who has been found to have made malicious, vexatious or frivolous allegations;
 - e) it is the stated policy of the funder/ other national body that the identity of individuals proved through appropriate disciplinary and appeals processes to have committed research misconduct should be made public;
 - f) any party to the Procedure is seeking legal advice or other advice from another third party who owes them a duty of confidentiality;
 - g) it is already in the public domain;
 - h) it is required by law or by the University's regulator.
135. Any disclosure to a third party of the identity of the Initiator or Respondent, or of any other details of the investigation, should be made on a confidential basis. The third-party should understand this, and that they must respect the confidentiality of any information received.
136. The University and/or its staff may have contractual/legal obligations to inform third parties, such as funding bodies or collaborating organisation(s), of allegations of research misconduct. In such cases, those responsible for carrying this Procedure out

should ensure that any such obligations are fulfilled at the appropriate time through the correct mechanisms, always keeping in mind the legal rights of the employees, students and others involved in the allegations.

137. While the allegations are under investigation using this Procedure (and/or the Organisation's disciplinary process), the Initiator, the Respondent, Witnesses or any other persons involved in this Procedure should not make any statements about the allegations to any third parties, unless formally sanctioned by the Named Person or otherwise required to by law.
138. Breaching confidentiality may lead to disciplinary action unless covered by the Public Interest Disclosure Act and/or other University procedures.

5. Integrity

139. An investigation conducted under this Procedure must be fair and comprehensive. The investigation should be conducted expeditiously although without compromising the fairness and thoroughness of the process.
140. Anyone asked to take part in the processes as an Investigator or a member of a Panel must make sure that the investigation is impartial and extensive enough to reach a reasoned judgement on the matter(s) raised.
141. Similarly, those who give evidence to the investigation should do so honestly and objectively following the Principles of the Procedure and should be provided with relevant sections of the Procedure before giving evidence.
142. All parties involved must inform the Named Person/VP for Research immediately of any interests that they have which might constitute a conflict of interest as regards any aspect of the allegations, the investigation, the area(s) of research in question, or any of the persons concerned.
143. To preserve the integrity of this Procedure, great care must be taken to ensure that all relevant information is transferred to those involved in the various stages of the Procedure, such as between the Initial Investigation and any Formal Investigation or between the Formal Investigation and any Appeal Process and/or Disciplinary Processes or any other proceedings or actions which might follow the conclusion of the Procedure.

6. Prevention of Detriment

144. In using this Procedure, and in any action taken as a result of using the Procedure, care must be taken to protect:
 - a) individuals against frivolous, vexatious and/or malicious allegations of research misconduct;
 - b) the position and reputation of those suspected of, or alleged to have engaged in, misconduct, when the allegations or suspicions are not confirmed; and
 - c) the position and reputation of those who make allegations of research misconduct in good faith, i.e., in the reasonable belief and/or based on supporting evidence that research misconduct may have occurred.

145. It is acknowledged that allegations may be made for what appear to be malicious reasons. The Procedure should still be used where the Initiator makes a formal complaint, to establish whether the allegations are of sufficient substance to warrant investigation.
146. Anyone accused of research misconduct is entitled to the presumption of innocence.
147. A Formal Investigation should establish, on the balance of probabilities, the truth of any allegations.
148. Any formal steps taken to discipline or otherwise reprimand the Respondent, or steps which might undermine their good name or reputation (or that of any other party), must be taken through the University's disciplinary process, unless the steps are necessary to correct the record of research. Only when allegations have been upheld through the University's disciplinary process and, where called upon, the Appeals Process, may it be appropriate to apply any sanctions to the Respondent.
149. The University must take all reasonable steps to ensure that the Respondent (or any other party) does not suffer because of unconfirmed or unproven allegations.
150. Involvement of the Respondent in the Procedure should not prevent the Respondent from being considered:
 - a) for promotion;
 - b) or the completion of probation;
 - c) or other steps related to their professional development.
151. The University may choose to suspend the implementation of any promotion, completion of probation or any similar step, for the period that allegations are investigated using the Procedure, rather than delay the actual consideration of such matters.
152. If the allegations are upheld at the end of the Procedure, subject to the University's disciplinary process and/or Appeals Process, the University's normal rules concerning steps related to professional development, such as those detailed above, should apply.
153. It should be made clear that any actions that might be taken by the Named Person in response to the notification of allegations of research misconduct are not to be regarded as a disciplinary action and do not in themselves indicate that the allegations are believed to be true by the University. The Named Person and any Investigators and members of any Investigation Panels should take steps to make it clear to the Respondent, Initiator and any other involved parties that these actions are necessary to ensure that the allegations of research misconduct can be properly investigated.
154. Appropriate action should be taken against:
 - a) Respondents where the allegations of research misconduct have been upheld, in full or in part, under this Procedure; and
 - b) anyone who is found to have made frivolous, vexatious and/or malicious allegations of research misconduct.

7. Respect

155. All those involved in the Procedure, including those implementing the Procedure, Initiators, Respondents, Witnesses and Companions are expected to always be courteous and respectful towards each other.
156. Initiators, Respondents and Witnesses who are members of staff or students of the University are required to respond promptly and politely to requests made by the Case Manager/RI Assistant, Appeal Manager or any Investigators/ Panel members.

8. Balance

157. Those responsible for carrying out this Procedure must be aware that there may be occasions when a balance must be struck in the application of the Principles and/or its Standards. In the event of a conflict between any of the Principle of this Procedure, those conducting the Procedure should use their judgement to choose the appropriate solution. For example, it may, in certain circumstances prove to be impracticable to undertake a thorough and fair Initial Investigation of the allegations without releasing the Initiator's identity to the Respondent.
155. The Named Person should be responsible for resolving any such conflicts between the Principles, between the Standards, and/or between the Principles and the Standards, keeping in mind at all times that the primary goal of this Procedure is to determine the truth of the allegations via a thorough and fair investigation, conducted in a timely and transparent manner, and with appropriate confidentiality. The Named Person can seek guidance from UKRIO and other bodies, as well as seeking legal advice.
156. In addition, the Named Person should be responsible for ensuring the integrity of this Procedure and any actions taken. The Named Person should decide the course of action to be taken in cases of doubt.

Document control box	
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Lead contact	Research Governance, Ethics and Integrity Officer (Dr Karen Lythe)