

# Research Misconduct

UPR RE02 version 07.1

## Policies superseded by this document

This document replaces version 07.0 of UPR RE02, with effect from 1 September 2022.

## Summary of significant changes to the previous version

Minor amendments have been made to reflect changes in organisational structures. References to GDPR legislation have also been updated.

## Glossary

A glossary of approved University terminology can be found in [UPR GV08](#).

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# 1 Introduction

- 1.1 This document has been approved by the Vice-Chancellor<sup>1</sup>.
- 1.2 The policy, regulations and procedures set out in this document are intended for use by members of staff and research degree students of the University. Therefore, individuals and/or organisations external to the University are not entitled to invoke them.
- 1.3 An individual or organisation external to the University wishing to raise an issue that they believe falls within the scope of the policy and regulations set out in this document may only do so by submitting a written summary of the matter to the Secretary and Registrar. The Secretary and Registrar will determine, at their absolute discretion, how the matter will be addressed by the University.
- 1.4 **Pro Vice-Chancellor (Research and Enterprise)**
- The Pro Vice-Chancellor (Research and Enterprise) has been designated by the Vice-Chancellor as the senior officer (the 'Named Person') responsible for ensuring good research conduct.

# 2 Definitions

## 2.1 'Research Misconduct'

For the purposes of this document any or all of the following (2.1.1 – 2.1.6) will constitute 'Research Misconduct':

(see UPR RE01<sup>2</sup> also)

### 2.1.1 'Fabrication'

including, but not limited to, the creation of false data or other aspects of research, including documentation and participant consent;

### 2.1.2 'Falsification'

including, but not limited to, the inappropriate manipulation and/or selection of data, imagery and/or consents;

### 2.1.3 'Plagiarism'

the misappropriation or use of others' ideas, intellectual property or work (written or otherwise), without acknowledgement or permission;

**(Note for guidance:**

for the avoidance of doubt, plagiarism may be intentional or unintentional.)

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<sup>1</sup> Approved by Action of the Chairman of the Academic Board on 7 November 2005 and 17 July 2015; **Academic Board Minute:** 47.2, 15 June 2011; 359, 12 March 2014; 402, 25 June 2014, refers; **Board of Governors Minute:** 572, 21 June 2011, refers.

<sup>2</sup> RE01 'Studies Involving the Use of Human Participants'

#### 2.1.4 'Misrepresentation'

including, but not limited to:

- a misrepresentation of data, for example suppression of relevant findings and/or data, or knowingly, recklessly or by gross negligence, presenting a flawed interpretation of data;
- b undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication<sup>3</sup>;
- c misrepresentation of interests, including failure to declare material interests either of the researcher or of the funders of the research;
- d misrepresentation of qualifications and/or experience, including claiming or implying qualifications or experience which are not held;
- e misrepresentation of involvement, such as inappropriate claims to authorship and/or attribution of work where there has been no significant contribution, or the denial of authorship where an author has made a significant contribution;

#### 2.1.5 'Mismanagement or inadequate preservation of data and/or primary materials'

(See UPR IM16<sup>4</sup> and Appendix III, UPR IM16<sup>5</sup>.)

including, but not limited to, failure to:

- a keep clear and accurate records of the research procedures followed and the results obtained, including interim results;
- b hold records securely in paper or electronic form;
- c make relevant primary data and research evidence accessible to others for reasonable periods after the completion of the research<sup>6</sup>;
- d manage data according to the research funder's data policy, and all relevant legislation;
- e wherever possible, deposit data permanently within a national collection;

#### 2.1.6 'Breach of duty of care'

which involves deliberately, recklessly or by gross negligence:

- a disclosing improperly the identity of individuals or groups involved in research without their consent, or other breach of confidentiality;
- b placing any of those involved in research in danger, whether as subjects, participants or associated individuals, without their prior consent, and without appropriate safeguards even with consent; this includes reputational danger where that can be anticipated;

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<sup>3</sup> This will be dependent upon the policy of the Journal concerned.

<sup>4</sup> UPR IM16 'Data Management Policy'

<sup>5</sup> Appendix III, UPR IM16 'University Guide to Research Data Management'

<sup>6</sup> Data should normally be preserved and accessible for ten (10) years, but for projects of clinical or major social, environmental or heritage importance, for 20 years or longer. UK Research and Innovation considers that responsibility for proper management and preservation of data and primary materials is shared between the researcher and the research organisation.

- c not taking all reasonable care to ensure that the risks and dangers, the broad objectives, and the sponsors of the research, are known to participants or their legal representatives, to ensure appropriate informed consent is obtained properly, explicitly and transparently;
- d not observing legal and reasonable ethical requirements or obligations of care for animal subjects, human organs or tissue used in research; or for the protection of the environment;
- e improper conduct in peer review of research proposals or results (including 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.

## **2.2 ‘Complainant’**

an individual making an allegation of Research Misconduct or a group of individuals, collectively, making an allegation of Research Misconduct;

## **2.3 ‘Respondent’**

the person against whom the allegation is made;

## **2.4 ‘Recipient’**

the member of staff to whom the allegation is made;

## **2.5 ‘Friend/Student’s Adviser’**

see section 8.2;

## **2.6 ‘University of Hertfordshire/University’**

unless indicated otherwise in the text, the University of Hertfordshire Higher Education Corporation and its wholly-owned subsidiary companies and their wholly-owned subsidiaries, excluding University Alliance.

# **3 Purpose and Scope**

3.1 The policies, regulations and procedures set out in this document apply to:

- i all research degree students of the University of Hertfordshire registered at the time the misconduct is alleged to have occurred;
- ii all employees of the University of Hertfordshire and its wholly-owned subsidiary companies and their wholly-owned subsidiaries working at the time the misconduct is alleged to have occurred, regardless of whether or not their research is part of their normal duties or is private research;
- iii visiting researchers and individuals who are not employees of the University of Hertfordshire but who are conducting research on University’s premises, under the University’s auspices or using the University’s research facilities;
- iv individuals delivering or supporting the delivery of programmes at Partner Organisations leading to awards of the University of Hertfordshire.

## 4 Principles and Policies

### 4.1 The University

- 4.1.1 expects that staff, students and other individuals permitted to work in the University will, at all times, observe the highest standards of integrity in relation to any research work which is supported by the University and/or conducted on its premises;
- 4.1.2 does not regard as Research Misconduct matters of honest difference of academic opinion between colleagues. Neither does it regard as Research Misconduct cases of honest error or honest differences in design, execution, interpretation or judgment in evaluating research methods or results or misconduct (including gross misconduct) unrelated to the research process;
- 4.1.3 is committed to investigating fully all allegations of Research Misconduct and where, at any stage, an allegation against an individual is made the subject of a formal discussion or Hearing both the Complainant and **Respondent** may each be accompanied by a Friend/Student's Adviser (see section 8.2);
- 4.1.4 reserves the right, at its absolute discretion, to investigate allegations made anonymously;
- 4.1.5 will normally consider each allegation individually although, depending on the circumstances, where a series of allegations involves the same subject matter or individual(s), the University may consider those allegations collectively;
- 4.1.6 is committed to protecting its staff, students and other individuals permitted to work in the University from malicious, frivolous or vexatious allegations of Research Misconduct (see section 9);
- 4.1.7 reserves the right to reject allegations which it determines to have been made maliciously, frivolously or vexatiously (see section 9);
- 4.1.8 will take action including, where appropriate, disciplinary action against any individual(s) who have brought malicious, frivolous or vexatious allegations;
- 4.1.9 will, in cases where an allegation has been made maliciously, frivolously or vexatiously, or where, following investigation and/or consideration under the provisions of this policy (UPR RE02), an allegation is not upheld, take reasonable steps to restore or repair any damage, real or perceived, to the professional reputation of the individual about whom such an allegation has been made;
- 4.1.10 will treat all Complainants equally, regardless of their status or seniority, and will not treat them adversely as a result of their having made an allegation in good faith (whether or not such allegations are upheld on investigation (Complainants are entitled to protection by the University from victimisation in connection with, or as a result of, the allegation));
- 4.1.11 expects all staff, students and other persons permitted to work on University premises to report possible Research Misconduct, whether witnessed or suspected.

- 4.2 The process whereby an allegation of Research Misconduct is investigated is set out in this procedure. This process is distinct from the University's disciplinary procedures (see UPR HR02<sup>7</sup> and UPR SA13<sup>8</sup>) and from the procedures for the consideration of students' Fitness to Practise (UPR SA15<sup>9</sup>). However, where an investigation into an allegation of

Research Misconduct leads to a hearing under the provisions of UPR HR02<sup>6</sup>, UPR SA13<sup>7</sup>, or UPR SA15<sup>8</sup>, that investigation will contribute to the investigation stage required by UPR HR02<sup>6</sup> or UPR SA13<sup>7</sup> or UPR SA15<sup>8</sup>. In the case of staff it will take the place of the investigation of the facts. The Complainant and the **Respondent** will be informed of the outcome of the investigation.

#### 4.3 Duty to report

- 4.3.1 A Regulator is a body authorised by the Privy Council to permit practise.

**(Note:**

The term 'Regulator' is used generically in UPR SA15<sup>8</sup> and should be construed as referring also to Professional Statutory Regulatory Bodies and to Professional Bodies, where appropriate/relevant.)

- 4.3.2 Regulators place responsibilities on individuals whom they have registered and on the University to inform them and/or existing and/or potential employers and/or other relevant external organisations, where an individual's Fitness to Practise is being considered under the provisions of University regulations, and of the outcome of any investigation and/or proceedings under the provisions of University regulations.
- 4.3.3 In certain circumstances, the requirement to report is a legal duty.
- 4.3.4 The University will, in all circumstances, meet its duty to report in cases where an allegation of Research Misconduct also calls into question the Fitness to Practise of the **Respondent**.

#### 4.4 Safety

The University will take action to protect Human Participants, patients and other individuals where it deems this to be warranted.

#### 4.5 Record of research

Where an investigation concludes that Research Misconduct has taken place, the University will take steps to ensure that the record of research is corrected (see section 8.8.2, iv). The Vice-Chancellor will consider whether, at the conclusion of the process, it is appropriate to inform journal editors or others of any finding, particularly in cases where the discovery of Research Misconduct involves published research.

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<sup>7</sup> UPR HR02 'Staff Disciplinary Policy'  
<sup>8</sup> UPR SA13 'Student Discipline'  
<sup>9</sup> UPR SA15 'Student Fitness to Practise'

#### **4.6 Respondents who have withdrawn from study or who have left the University's employment**

Where, at any stage in this procedure, a **Respondent** withdraws from study or leaves the University's employment prior to an allegation being resolved or otherwise dealt with, the University reserves the right, at its absolute discretion, to investigate the allegation and to take appropriate action in response to the findings of that investigation in accordance with the provisions of this document (UPR RE02).

#### **4.7 Mediation**

The University recognises that the investigation of allegations of Research Misconduct, whether or not such allegations are upheld, can adversely affect working relationships. In such circumstances the University will consider the provision of mediation in order to help facilitate a professional working environment. Such mediation would not normally be instigated until the completion of all relevant procedures.

### **5 Regulations**

#### **5.1 The individuals referred to in section 3:**

- i must, at all times, comply with the policy, regulations and procedures set out in this document and must not commit any act of Research Misconduct;
- ii are required to declare, in accordance with the procedures set out in UPR GV12<sup>10</sup>, any circumstances where the commitments and obligations owed by them to the University or to other bodies, for example funding bodies, are likely to be compromised by that person's personal gain. Such conflicts/potential conflicts of interest would include, but are not limited to, financial matters or non-financial matters or both; may relate to conflicts between the private interests of a research organisation and those of the researcher and conflicts between the interests of the researcher and the interests of research participants;
- iii must at all times comply with the requirements of UPR RE01<sup>11</sup> and will note that, failure to obtain ethics approval prior to undertaking work involving Human Participants and failure to comply with the terms and conditions of an ethics approval granted for work involving Human Participants, are regarded as research misconduct under the provisions of these regulations (UPR RE02).

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<sup>10</sup> UPR GV12 'Bribery and Corruption'

<sup>11</sup> UPR RE01 'Studies Involving the Use of Human Participants'

## **5.2 Memoranda of Understanding**

Memoranda of Understanding between entities within the University of Hertfordshire Group (as defined in UPR FR06<sup>12</sup>) will, where applicable, include specific clauses requiring compliance with the policies and regulations set out in this document (UPR RE02).

## **5.3 Academic Agreements**

Academic Agreements (as defined in UPR FR06<sup>11</sup>), including but not limited to, Memoranda of Agreement with collaborative partners, will, where relevant, include as a ground for termination, a clause to operate in circumstances where it is discovered that the other party or an employee of the other party may have committed Research Misconduct (where such Research Misconduct is relevant to the subject matter of the Academic Agreement) such that, at the absolute discretion of the University, it may terminate the relationship (provided always that the issue is not subject to remediation under the agreement).

# **6 Confidentiality/Data Processing**

- 6.1 All parties to the allegation and individuals who have been involved in any related investigation and/or the management and/or administration of the investigation process will observe the requirement for confidentiality. Whilst confidential information will need to be disclosed in order to consider the allegation, it will be disclosed only to those individuals involved in the consideration of the allegation. In addition, confidential information may be disclosed to governmental, police or regulatory authorities as required by the relevant governing law.
- 6.2 All personal information will be processed by the University in accordance with the Data Protection Act 2018.

# **7 Research Practice**

- 7.1 The following provide the framework for research:
- a all current, relevant guidance issued by external bodies (including, but not limited to, the Research Councils' UK Policy and Code of Conduct of Good Research Conduct') and
  - b the 'Concordat to Support Research Integrity';
  - c all current, relevant guidance issued by the University;
  - d the terms and conditions imposed by external funder(s) of the research concerned.
- 7.2 Members of staff, students and individuals permitted to work in the University are personally responsible for ensuring that their research is conducted within these parameters.

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<sup>12</sup> UPR FR06 'Corporate Governance and Financial Regulation'

## 8 Procedure

### 8.1 Notification of an allegation of Research Misconduct

- 8.1.1 The allegation must be made in writing and submitted by the Complainant to the relevant Associate Dean of School (Research), unless the following circumstances apply:

| <b>Circumstance:</b>   | <b>Allegation normally to be submitted in writing to:</b> | <b>Where the allegation [also] concerns the Pro Vice-Chancellor (Research and Enterprise), the allegation to be submitted in writing to:</b> |
|--|---|--|
| the allegation concerns the Associate Dean of School (Research) to whom the allegation would normally be submitted | Pro Vice-Chancellor (Research and Enterprise)             | Secretary and Registrar  |
| the Complainant is not located within a School   | Pro Vice-Chancellor (Research and Enterprise)             | Secretary and Registrar  |

**(Note for guidance:**

The University recognises that raising an issue that may be Research Misconduct is a serious matter but particularly so for students and early career researchers who are advised to seek advice, in the first instance, from the Director of the Doctoral College.)

#### 8.1.2 Director of the Doctoral College

- i Where an allegation is made against an individual who is involved in the supervision or support of research degree students, the **Recipient** will make a confidential report to the Director of the Doctoral College concerning the substance of the allegation. In these circumstances, the Director of the Doctoral College has absolute discretion to place restrictions on the activities of the individual against whom the allegation has been made insofar as that individual's involvement with research degrees students is concerned and will take account of the provisions of section 4.3. In considering such restrictions, the Director of the Doctoral College will consult the Pro Vice-Chancellor (Research and Enterprise), provided that they are not part of the subject of the allegation.

- ii Where the Director of the Doctoral College or the Pro Vice-Chancellor (Research and Enterprise) are part of the subject of the allegation, the **Recipient** will ensure that any restrictions necessary under the provisions of section 8.1.2, i, are implemented.

#### 8.1.3 Board of Governors

In exceptional circumstances, the Board of Governors may direct the Vice-Chancellor to investigate an allegation, regardless of whether or not a written allegation has been received.

### 8.2 **Respondent's Friend/Student's Adviser**

#### 8.2.1 Where the **Respondent** is an employee

For the purposes of this document a '**Friend**' is defined as:

"a person chosen by the employee to accompany him/her to a hearing and who is either a colleague employed by the University or an employee or official of a Trade Union. The Friend may present the employee's case and confer with the employee but will not be permitted to answer direct questions for the employee".

#### 8.2.2 Where the **Respondent** is a student

- i Where the **Respondent** is a student, they may either be accompanied by a Student's Adviser (see section 8.2.2, ii) or, where they wish to exercise the right to representation, be accompanied and represented by a member or nominee of the Students' Union Executive (see section 8.2.2, ii, b).
- ii Student's Adviser
  - a A student may invite another person to accompany them to, and to act as, their Adviser, at any Hearing or meeting (formal or informal) at which the matter is to be discussed.
  - b Although the student might, for example, invite a lawyer or a Trade Union representative to act as their Adviser, it should be noted that the person attends the meeting or Hearing purely in an advisory capacity and does not, therefore, act as the student's representative. However, the student may elect to be represented at the Hearing or meeting by a member or nominee of the Students' Union Executive.
  - c Where a student wishes to be accompanied by an Adviser at a meeting or Hearing, they should advise the University five (5) working days beforehand.

#### 8.2.3 The **Respondent** is solely responsible for providing their Friend/Student's Adviser or representative, with copies of any relevant documentation provided to the **Respondent** by the University, together with this and any other relevant University policies or regulations and the day, date, time, venue and any other relevant information relating to meetings or Hearings.

### 8.3 Preliminary informal investigation

8.3.1 Having determined whether, in their professional opinion, the allegation falls within the definition of Research Misconduct (see section 2.1), the **Recipient** will consider the allegation as necessary, seeking advice on a confidential basis from other individuals independent of the Complainant and within ten (10) working days, or as soon as possible thereafter, determine whether a formal investigation is warranted.

#### 8.3.2 Risk

- i Where an allegation concerns activities which may be placing humans, animals or the environment at risk, the **Recipient** will, in compliance with sections 4.3 and 4.4, take appropriate measures to ensure the effective management of that risk and, where necessary, seek advice from the Vice-Chancellor who may take such action as they deem appropriate.
- ii The **Recipient** will ensure that the risk is recorded in the appropriate Risk Register.

#### 8.3.3 Where an allegation may be vexatious or frivolous

Should the **Recipient** have reason to believe that the allegation may be frivolous or vexatious, they will refer the matter to the Secretary and Registrar (see section 9).

#### 8.3.4 Where the **Recipient** judges that a formal investigation is not warranted

- i Where, on the balance of probability, the **Recipient** judges that the allegation is unfounded and that a formal investigation is not warranted, they will record their reasons for that decision and, in writing, inform:
  - a the Complainant and
  - b the **Respondent** and
  - c where the Pro Vice-Chancellor (Research and Enterprise) is not the **Recipient**, the Pro Vice-Chancellor (Research and Enterprise) and,
  - d (where the matter has been reported to the Director of the Doctoral College (see section 8.1.2)), the Director of the Doctoral College who will withdraw any restrictions that they have imposed.
- ii The **Recipient** will ensure that the Risk Register is amended, as appropriate.
- iii The Complainant has no right to challenge the decision of the **Recipient** but has the right to make a further allegation in the event that they are able to present new supporting evidence.

#### 8.3.5 Where the **Recipient** judges that a formal investigation is warranted

- i Where, on the balance of probability, the **Recipient** judges that a formal investigation is warranted, the **Recipient** will:
  - a inform the **Respondent**, in writing, of the substance of the allegation, the outcome of the preliminary informal investigation (see section 8.3.1) and give them the opportunity to respond and,

- b without prejudice to the **Respondent** and/or the outcome of the investigation, arrange for the immediate sequestration of all relevant research records and materials whether held manually or electronically (where appropriate, these items will be returned to the **Respondent** after the investigation and any subsequent hearing);
- c provide the **Respondent** with a copy of this document (UPR RE02).

**(Note for guidance:**

The purpose of such sequestration is to ensure a fair and thorough investigation and, as far as is reasonably practicable, the Recipient will ensure that copies of sequestered documentation are provided to the Respondent.)

## **8.4 Formal investigation**

8.4.1 The purpose of the formal investigation is to:

- a examine and evaluate all relevant facts to determine whether or not there are sufficient grounds to support the allegation;
- b determine the seriousness of the alleged Research Misconduct;
- c identify the individual(s) who may be responsible.

8.4.2 The **Recipient** will:

- i notify both the **Respondent** and the Complainant, in writing, and remind them that they are expected to co-operate in the investigation and maintain confidentiality throughout;
- ii where the **Respondent** is registered for a research degree, also notify the **Respondent**'s Principal Supervisor that an allegation of Research Misconduct has been made and that an investigation is to be conducted, unless the **Respondent**'s Principal Supervisor is implicated in the allegation, in which case the Director of the Doctoral College will be notified and will take appropriate action;

**(Note for guidance**

As part of its investigation, the Investigation Panel (see section 8.5) would normally expect to interview and to consider the role of the Research Supervisor(s).)

- iii where the allegation is made by an individual or body external to the University, ensure that the individual or body concerned is made aware of the policies and procedures set out in this document (UPR RE02) and of the University's expectation that they will comply with its requirements;
- iv within thirty (**30**) days of their decision to proceed with a formal investigation, or as soon as possible thereafter, and having due regard to the distress allegations of Research Misconduct place on those directly involved, appoint an Investigation Panel (see section 8.5);
- v notify the **Respondent** and Complainant of the membership of the Panel;
- vi define the subject matter of the investigation for the Investigation Panel in a written Statement of Case;

- vii provide the **Respondent** with a copy of the Statement of Case and any relevant supporting documentation;
- viii where it is likely that the investigation will not be concluded within **45** days of the appointment of the Panel, advise the **Respondent** of the reasons for this and of the expected timescale for the completion of the investigation.

## **8.5 Investigation Panel**

### **8.5.1 In appointing the Panel, the Recipient will:**

- i ensure that its members have no conflicts of interest either with the **Respondent**, the Complainant or the area of research work concerned;
- ii ensure that the Panel has the expertise necessary to examine the evidence, interview the witnesses and conduct the investigation;
- iii have due regard for the need to maintain confidentiality (in particular, in relation to the intellectual property of the parties to the allegation, the University of Hertfordshire, its subsidiaries and clients) and will, therefore, ensure that any external member or consultant has entered into a confidentiality agreement prior to their being provided with any details of the allegation.

### **8.5.2 Composition of the Investigation Panel**

- i The Investigation Panel will normally be composed of not less than three **(3)** members.
- ii In determining the membership of the Panel, the **Recipient** will:
  - a take account of the risks to the **Respondent** in terms of the suspension or termination of their career and will, where appropriate, appoint at least one **(1)** external member to ensure transparency;
  - b ensure that one of the members is a member of the academic or research staff of the University;
  - c ensure that one of the members is an experienced researcher;
  - d appoint a member of University staff as Chair of the Panel;
  - e for the proper conduct of the investigation, appoint additional members to serve on the Panel.
- iii The decision of the **Recipient** as to the composition and membership of the Panel is final.
- iv The **Recipient** will appoint a member of staff of appropriate seniority to act as Clerk to the Panel.
- v Having regard for the requirements of section 8.5.1, iii, the Panel may seek the advice of internal and external consultants to inform its deliberations.
- vi Where required, the Panel will normally be advised on relevant Human Resources matters by the Head of Human Resources (or nominee) (for staff) and/or (for students) by the Dean of Students (or nominee).

## **8.6 Investigation Process**

### **8.6.1 Conduct and recording of interviews**

- i A narrative record (in summary rather than verbatim transcription) will be made of all interviews conducted by the Panel and a copy will be included as part of the Investigation Report.
- ii The audio recording of interviews by any of the parties involved is not permitted.
- iii The Investigation Panel will:
  - a normally commence its investigation within five (**5**) working days of its appointment or as soon as possible thereafter;
  - b normally examine all documentation including, but not necessarily limited to, relevant research data materials, proposals, publications, correspondence, memoranda and notes of telephone calls;
  - c interview the **Respondent**;
  - d whenever possible, interview all individuals involved in making the allegation and other individuals who might have information regarding key aspects of the allegation;
  - e where appropriate, re-interview the **Respondent** in order to allow them an opportunity to respond to matters which have arisen during the course of the investigation;
  - f conclude its investigation and submit an Investigation Report to the **Recipient**, normally within **45** working days of its appointment or as soon as possible thereafter (see section 8.7).

## **8.7 Investigation Report**

### **8.7.1 The Investigation Report must:**

- a include a copy of the Statement of Case (see section 8.4.2, vi);
- b state how the investigation was conducted and record the advice, data and documentation received by the Panel;
- c describe how and from whom information relevant to the investigation was obtained;
- d state the findings and, in doing so, identify any restrictions that might be placed on the future research activity of the individual(s) against whom the allegation has been made in the event that they remain in the University's employment;
- e explain the basis for those findings.

### **8.7.2 The **Recipient** will provide the **Respondent** with a copy of the report and evidence considered by the Investigation Panel.**

## **8.8 Further action by the Recipient**

### **8.8.1 Where the allegation is not upheld**

Where the findings of the investigation are such that, on the balance of probability, the allegation of Research Misconduct is not upheld, the **Recipient** will:

- i take no further action in the matter and will make a confidential, anonymised report to that effect to the Research Committee of the Academic Board;
- ii ensure that all references to the matter are expunged from the **Respondent's** personal file;
- iii notify, in writing:
  - a the Complainant(s) and
  - b where they are not the **Recipient**, the Pro Vice-Chancellor (Research and Enterprise) and
  - c where they are not the **Recipient**, the relevant Associate Director (Doctoral College) and
  - d as appropriate, the Director of the Doctoral College and
  - e all persons who have been interviewed or otherwise informed of the investigation, that the allegation has not been upheld;
- iv ensure that the Risk Register is amended, as appropriate.

### **8.8.2 Where the allegation is upheld**

- i notify, in writing:
  - a the Complainant(s) and
  - b where they are not the **Recipient**, the Pro Vice-Chancellor (Research and Enterprise) and
  - c where they are not the **Recipient**, the relevant Associate Director (Doctoral College) and
  - d all persons who have been interviewed or otherwise informed of the investigation,that the allegation has been upheld.
- ii Where the **Respondent** is a member of staff:  
the **Recipient** will seek advice from the Head of Human Resources regarding possible further action under the provisions of UPR HR02<sup>6</sup>.
- iii Where the **Respondent** is a student:  
the **Recipient** will send a copy of the Investigation Report to, and seek advice from, the Dean of Students regarding possible further action, as appropriate, under the provisions of UPR SA13<sup>7</sup> or UPR SA15<sup>8</sup> or other relevant procedure;

- iv In all cases:
  - a initiate any further investigations of alleged Research Misconduct that may be warranted by the findings of the initial investigation;
  - b ensure that the record of research is corrected, ensure that all actions are completed and create and retain a full and auditable record of the action taken;
  - d ensure that any action necessary to address and remedy the Research Misconduct has been taken;
  - e refer to the Vice-Chancellor and the Pro Vice-Chancellor (Research and Enterprise) any procedural or organisational issues that require consideration or review.

## 9 Malicious, frivolous and/or vexatious allegations

- 9.1 Where there is reason to believe that an allegation may have been made either maliciously, frivolously or vexatiously, the **Recipient** will refer the matter to the Secretary and Registrar who will conduct an investigation and take advice from appropriate officers of the University. Where, on the balance of probability, the Secretary and Registrar judges the allegation to be malicious, frivolous and/or vexatious, they will write to the Complainant, within ten (**10**) working days of its receipt or as soon as possible thereafter, rejecting the allegation.
- 9.2 Where, at any point, an allegation is found to be either malicious, frivolous or vexatious, the University reserves the right to institute disciplinary proceedings against Complainants who are members of staff or students of the University. The University may take legal action against other malicious, frivolous or vexatious Complainants.

## 10 Restoration of Reputation

The University of Hertfordshire will take reasonable action to restore the reputation of the **Respondent** where at any point, including any point in any subsequent disciplinary process, they are found not to have committed the alleged Research Misconduct.

## 11 Harassment and Bullying

Staff or students who believe they have been subjected to victimisation should refer to UPR EQ10<sup>13</sup>.

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<sup>13</sup>

UPR EQ10 'Bullying and Harassment'

## 12 External Funding Bodies

Where the research work concerned is funded wholly or partly through external funding, the University will have proper regard for the guidance issued by the relevant funding body and/or any relevant terms or conditions attached to the grant of funds in support of the research concerned and will make timely and appropriate

notification to such bodies of any decision to investigate an allegation of research misconduct in connection with work funded by the body concerned and of the outcome of that investigation.

## 13 Review of this document

This document will be subject to biennial review by the Research Committee of the Academic Board.

Sharon Harrison-Barker  
Secretary and Registrar  
Signed: **1 August 2022**

### Alternative format

If you need this document in an alternative format, please email us at [governanceservices@herts.ac.uk](mailto:governanceservices@herts.ac.uk) or telephone us on +44 (0)1707 28 6006.