

Code of Practice on Handling Allegations of Research Misconduct

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Related documents:	<p> Code on Good Research Practice Code of Practice for research degrees Public Interest Disclosure Policy (Whistleblowing Policy) University Ordinance 11.2 (Disciplinary Procedures for Academic Staff), Staff Disciplinary Policy and Procedure B2 Regulations for academic integrity B3 Student disciplinary regulations B6 Regulations for fitness to practise for students </p> <p>Appendix 1: Flowchart</p>

Approval History

Version	Reviewed by	Reason for review	Approved by	Date
1	Research Integrity & Governance Office (Gill)		University Research and Enterprise Committee (EB Sub-committee)	17 March 2015

1 Introduction

1.1 Purpose

- 1.1.1 The University of Surrey resolves to be an honest and ethical institution in the way it conducts its business and discharges its responsibilities. The University aims to promote and support an organisational culture in which high standards of personal and professional conduct in teaching and research are expected and achieved. To that end, the University will oppose academic misconduct and will take appropriate and robust action in instances where misconduct or fraud is discovered.
- 1.1.2 Because research misconduct is such a serious matter, those responsible for staff and postgraduate research students conducting research have a particular duty to ensure that those new to research or to the University receive appropriate training in the ethical, legal and other conventions concerning the conduct of research. The University seeks to sustain this approach by providing a research environment that fosters and supports honesty in research and also discourages unacceptable behaviour by dealing seriously and sensitively with all allegations of misconduct in research.
- 1.1.3 It is, therefore, a condition of conducting research under the auspices of the University that practice conforms to the University's [Code on Good Research Practice](#) and [Code of Practice for research degrees](#). Failure to comply with the provisions of those Codes will be grounds for action to be taken under this Code of Practice
- 1.1.4 Staff, postgraduate research students and all others conducting research under the auspices of the University are required to report misconduct in research where they have good reason to believe it is occurring. The University will investigate allegations or complaints about misconduct in research. Those making an allegation or complaint will not be penalised, provided that it is done without malice and in good faith, reasonably believing it to be true.
- 1.1.5 When an allegation of research misconduct is raised under the University's [Public Interest Disclosure Policy \(Whistleblowing Policy\)](#), the [Secretary & General Counsel](#) will refer the allegation of research misconduct to be dealt with under this Code of Practice on Handling Allegations of Research Misconduct.
- 1.1.6 The Code of Practice on Handling Allegations of Research Misconduct takes account of [University Ordinance 11.2 \(Disciplinary Procedures for Academic Staff\)](#), [Staff Disciplinary Policy and Procedure](#) for all other staff and [B3 Student disciplinary regulations](#).
- 1.1.7 This Code of Practice should be read in conjunction with the [Code on Good Research Practice](#) and [Code of Practice for research degrees](#).
- 1.1.8 Throughout this procedure, steps will be taken, as appropriate, to maintain the reputation of individuals involved in allegations of academic misconduct (see paragraphs 2.3.28, 2.3.29, 2.3.30).

1.2 Scope

- 1.2.1 The procedure set out in this Code of practice recognises that the investigation of allegations of research misconduct can involve complex issues and seeks to discharge the University's responsibilities in a sensitive and fair manner. It outlines the process to be followed when allegations of misconduct in research are brought against a researcher in relation to research conducted under the auspices of the University. [The University Statutes and Ordinances](#) take precedence over anything set out in this Code of Practice. Notwithstanding the arrangements which follow, the Vice-Chancellor or their nominee has the right to suspend a member of staff and the right to expel or exclude a student in accordance with the relevant University Statute(s) or Ordinance(s).
- 1.2.2 This Procedure applies to any person conducting research under the auspices of the University, whether solely or in conjunction with others in the University or other organisations or in conjunction with other organisations, including but not limited to:
- a member of staff;
 - a postgraduate research student (defined as any student registered for a Programme covered by Sections [A2 – A5 of the Regulations](#));
 - an independent contractor or consultant;
 - a person with visiting or emeritus status; and
 - a member of staff on a joint clinical or honorary contract.

If the allegation of misconduct concerns solely a taught element of a student's Programme, the case will be referred to [B2 Regulations for academic integrity](#).

- 1.2.3 For members of staff (including those with a visiting or emeritus status or on a joint clinical or honorary contract) the investigation will be carried out following the procedures for staff. For independent contractors or consultants the procedures for staff will also be followed where applicable. Allegations concerning postgraduate research students will follow the procedures for students.
- 1.2.4 In cases where an allegation is made against a postgraduate research student who is also a member of staff of the University, the investigation will be carried out according to the procedures for members of staff but a panel may also apply one of the penalties in paragraph 2.3.21, if appropriate, regarding the student status.
- 1.2.5 The University may choose to suspend the procedure set out in this Code of Practice and document it in the event that the individual(s) concerned has left or leaves the jurisdiction of the University, either before the operation of this procedure is concluded or before the allegation(s) of research misconduct was made. The decision to suspend the procedure should be escalated by the Associate Dean (Research & Innovation) (ADRI), or in the case of post graduate research students, the Director of Doctoral College (DDC) to the Vice-Provost (Research and Innovation) in the first instance. In cases where serious concerns about misconduct remain unresolved, the individual will be advised to continue to be part of the process until the conclusion stage. It should be noted that, where this is not possible (for example if the individual does not agree or is not contactable), details of the suspended case may be provided to a 'bona fide' enquirer such as future employer or passed on to regulatory or professional bodies.
- 1.2.6 Nothing in this Code of Practice shall limit the right of the University or a member of staff of the

University or a student of the University to exercise their rights under any Statutes, Ordinances and Academic Regulations concerning discipline and grievance.

- 1.2.7 Proven research misconduct may result in action being taken under the University's disciplinary procedures for staff or students, as appropriate, or other relevant process and may be considered good cause for: dismissal in the case of members of staff; programme termination in the case of registered students; and rescission of award in the case of graduates of the University. Reports generated by this procedure may be used in evidence by the University's disciplinary procedures and other processes and may be released in reporting the matter to any appropriate external organisation.
- 1.2.8 Financial fraud or other misuse of research funds or research equipment may be addressed under the relevant disciplinary procedure with reference to any financial guidelines instead of under the procedure set out in this Code of Practice

1.3 Definitions

For the purposes of these procedures, academic misconduct is defined as any breach of the University's [Code on Good Research Practice](#), [Code of Practice for research degrees](#), or other practices that seriously deviate from those that are commonly accepted within the research communities for proposing, conducting and/or reporting research. It specifically encompasses, but is not restricted to:

- Plagiarism: misrepresentation of the work, ideas and or concepts of others as one's own without permission or acknowledgement;
- Fabrication and/or misappropriation of data, including the creation of false data or other aspects of research, including documentation and participant consent;
- Falsification including the inappropriate manipulation and/or selection of data, imagery and/or consents;
- Misrepresentation of interests and/or data and/or involvement regarding, for example, qualifications and/or authorship;
- Intentional mismanagement or inadequate preservation of data and/or primary materials;
- Cheating or otherwise disclosing information with the intent of gaining for oneself or for another an unfair advantage;
- Intentional damage to, or removal of, the research-related property of another;
- Intentional non-compliance with the terms and conditions governing the award of external funding for research or with the University's policies and procedures relating to research, including ethical conditions governing research involving animal and human participants, health and safety regulations, human tissue and personal data.

1.3.1 Misconduct in research would not normally include professional/academic differences in interpretation or judgment of data.

1.3.2 For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission. In addition, allegations of misconduct in research will be judged by the standards prevailing at the date that the behaviour under investigation occurred.

2 Policy Principles

2.1 *Stage 1: Making an allegation*

- 2.1.1 The University acknowledges that academic misconduct can, if not properly addressed, have serious consequences. Academic misconduct can taint the University's reputation; damage the credibility of research and may, in extreme circumstances, cause harm to individuals or the environment in which the research is being conducted.
- 2.1.2 It is important, therefore, that any individual who suspects that academic misconduct is occurring feels empowered to report it without fear that their own position may be put at risk by doing so. It is expected that, in normal circumstances, the individual reporting the suspected academic misconduct would be willing to be named and provide evidence as appropriate under this Code of Practice. However, where an individual has reservations about reporting suspected academic misconduct directly, they may opt to do so through the Head of Department or Line Manager. If the individual wishing to make the allegation is a postgraduate research student, then they may opt to report their suspicion through their supervisor, Postgraduate Research Director or the Students' Union.
- 2.1.3 If an individual raises a concern by proxy, they accept that it might not be possible to progress the case if insufficient evidence is garnered from alternative sources.
- 2.1.4 The "Complainant" referred to in this procedure is the person making an allegation of misconduct in research, who need not be a member of staff or student of the University.
- 2.1.5 The "Respondent" referred to in this procedure is the person against whom an allegation of misconduct in research is made.
- 2.1.6 Allegations of academic misconduct concerning the actions of a member of staff of the University must be reported to an Associate Dean (Research & Innovation) (ADRI). Such allegations can be reported to any ADRI and not necessarily the ADRI of the Complainant's Faculty.
- 2.1.7 Allegations of academic misconduct concerning the actions of a postgraduate research student must be reported to the Director of Doctoral College (DDC).
- 2.1.8 In making an allegation of academic misconduct the Complainant is required to complete a written report detailing the nature of the suspected misconduct. The report should be made using the standard pro-forma available through the Research Integrity and Governance Office.
- 2.1.9 Upon receipt of an allegation of academic misconduct, the ADRI or DDC will inform the Research Integrity and Governance Office, in confidence, that they have received an allegation. The Complainant will also be notified in writing that the allegation has been received.

It is the responsibility of the ADRI, or in the case of postgraduate research student the DDC, to determine whether the allegation can proceed under this Code of Practice or whether it should be progressed under a different procedure such as, but not limited to [Staff Disciplinary Policy and Procedure](#), [B3 Student disciplinary regulations](#), [B6 Regulations for fitness to practise for students](#). In making this judgement, the Associate Dean (Research & Innovation) (ADRI) may seek the advice of [Human Resources](#), [Office of Student Complaints, Appeals and Regulations \(OSCAR\)](#), the [Research Integrity and Governance Office](#), [Legal Research Contracts](#) or the [Secretary & General Counsel](#) or any other department deemed appropriate.

- 2.1.10 If the allegation cannot be progressed under this Code of Practice then the Complainant will be notified of this in writing and will be advised of which procedure should be followed and to whom the allegation should be forwarded.
- 2.1.11 If, upon reviewing the allegation, the ADRI or DDC has reason to believe that the allegation of academic misconduct may also be a criminal offence because of a real or suspected risk of harm to others and/or surroundings, they should consult with the Head of Security and Human Resources.
- 2.1.12 In order to comply with the [UK Research and Innovation \(UKRI, formerly RCUK\) Policy and Guidelines on the Governance of Good Research Conduct](#), UKRI may be notified at the Screening Stage or as soon as deemed appropriate thereafter. Allegations that were found to be unfounded will not be reported. UKRI may need to be informed if the individual is funded by or engaged with UKRI even if the activities under investigation are not UKRI funded.
- 2.1.13 For non-UKRI funded research, the ADRI or DDC will check with Legal Research Contracts whether the funding terms stipulate how allegations of academic misconduct must be dealt with. If required by the funding terms, the Funder will be notified of receipt of an allegation or finding of academic misconduct.
- 2.1.14 The ADRI or DDC should take steps to ensure that all relevant evidence pertaining to the allegation of academic misconduct is secured for future investigation and cannot be tampered with. As far as is practicable, the evidence should be logged centrally through the Research Integrity and Governance Office.
- 2.1.15 It is expected that the actions described under Stage 1 should be completed as soon as possible but would not normally take longer than 10 working days.

2.2 ***Stage 2: Screening***

- 2.2.1 As soon as is practicable upon receipt of an allegation, normally within ten working days, the ADRI or DDC will initiate the screening stage. The purpose of the screening stage is to determine whether there is sufficient evidence of research misconduct to warrant a formal investigation of the allegation.
- 2.2.2 The ADRI or DDC will appoint a Screening Panel to conduct the preliminary investigation comprising two senior members of research and or teaching staff. These staff members are likely to include the Head of the School or Unit in which the misconduct is alleged to have occurred, but this is not a requirement. The ADRI or DDC will select one of the members of the Screening Panel to be its Chair.
- 2.2.3 The appointed members of the Screening Panel will confirm in writing that their participation involves no conflict of interest, seeking advice from the ADRI or DDC if unsure.
- 2.2.4 If the Head of the School or Unit in which the misconduct is alleged to have occurred is the Complainant or the Respondent, or is personally associated with the work to which the allegation relates or has any other conflict of interest, the ADRI or DDC will instead refer the allegation to another senior teaching or research staff member, including but not limited to the Head of a different School or Unit.
- 2.2.5 The ADRI or DDC will utilise the [Research Integrity and Governance Office](#) for suitable administrative and other support to assist the Screening Panel. The ADRI or DDC will be responsible for approaching other departments for support, such as Human Resources, if deemed appropriate. Those selected to provide such support will confirm in writing to the ADRI

or DDC that their participation involves no conflict of interest.

- 2.2.6 The ADRI or DDC will inform the Respondent in writing that: an allegation of misconduct in research has been made against him/her; it will be investigated under this Code of Practice by a named screening panel; and that the Respondent will be given the opportunity to respond to the allegation and set out his/her case. A written summary of the allegation will be provided to the Respondent together with a copy of this Code of Practice. The identity of the Complainant will normally be kept confidential until a Formal Investigation is launched unless this is incompatible with a fair and thorough investigation and/or there is an overriding reason for disclosure.
- 2.2.7 If an allegation is made against more than one Respondent, the ADRI or DDC will inform each individual separately and not divulge the identity of any other Respondent. Similarly, the ADRI or DDC will inform the Complainant that a named screening panel is conducting a preliminary investigation into the allegation.
- 2.2.8 When writing to the Respondent and Complainant, the ADRI or DDC will inform them that they may raise any concerns that they may have about the person(s) appointed to the Screening Panel. The ADRI or DDC will decide if any concerns raised by the Respondent and/or the Complainant warrant the exclusion of the person(s) concerned from involvement in the investigation, recording the reasons for the decision in writing. The ADRI or DDC will inform the person(s) concerned and the Respondent and/or the Complainant, as appropriate, of his/her decision in writing.
- 2.2.9 The Screening Panel will consider the evidence available concerning the allegation, including: the allegation and any supporting evidence from the Complainant; any comment and supporting evidence from the Respondent; and any other documentation and background information relevant to the allegation.
- 2.2.10 The Screening Panel would normally interview the Complainant, the Respondent and any other persons considered appropriate. The Respondent shall be given the opportunity to formally respond to the allegation made against him/her, set out his/her case and to present evidence at this interview. This may include evidence supporting the Respondent's opinion that someone else should ultimately be accountable for the activity/activities the allegation is made about.
- 2.2.11 The Complainant and Respondent may be accompanied at meetings by a workplace colleague or member of their Trade Union or the Student's Union.
- 2.2.12 The procedure set out in this Code of Practice is academic and not a legal procedure. Where the complainant or respondent insists on legal representation the University will similarly require that it is legally represented. Where the complainant or respondent attends a Screening Panel and is accompanied by a third party, having not previously notified the University that they wish to be accompanied, the person will be asked to identify themselves. If the person is a legal representative the Screening Panel will be adjourned until the University can also be legally represented.
- 2.2.13 The Screening Panel will aim to normally be concluded within 30 working days following instruction from the ADRI or DDC, provided this does not compromise a full and fair investigation of the allegation. Any delays to this timescale will be explained to the Complainant, the Respondent and the ADRI or DDC in writing.
- 2.2.14 At the conclusion of the screening stage, the Screening Panel will determine whether the allegation of misconduct in research is one of the following:

- **Is unfounded, because it is mistaken, frivolous, vexatious and/or malicious or is otherwise without substance, and will be dismissed.**

The ADRI or DDC will then take such steps, as are appropriate in the light of seriousness of the allegations, to sustain the reputation of the Respondent and the relevant research project(s) and, provided the allegation is considered to have been made in good faith, the Complainant. When a Preliminary Investigation has concluded that an allegation is vexatious and/or malicious, the ADRI or DDC will consider whether disciplinary proceedings should be initiated against the Complainant.

- **Has some substance but is considered to be the product of poor academic practice. Such cases will be addressed through education and training or other non-disciplinary approach, such as mediation, rather than through the next stage of the procedure or other formal processes.**

The ADRI or DDC will work with relevant University staff to establish a programme of training or supervision in conjunction with the Respondent and his/her line manager or supervisors in the case of postgraduate research students. This programme will include measures to address the needs of staff and students working with the Respondent. Students will also be referred to [B2 Regulations of academic integrity](#) where the academic practice affects taught units of assessment as part of their research degree programme. The use of the procedure set out in this Code of Practice will then conclude at this point.

- **Warrants referral directly to: the University's staff Disciplinary Policy and Procedure or [B3 Student disciplinary regulations](#); [B6 Regulations for fitness to practise for students](#) and other relevant policies as required; another relevant University process; or 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 and where students fall outside the scope of [Regulation B6](#) as they are already a full Registrant with a Registration Body.**

The ADRI or DDC will then initiate the appropriate University procedure(s) or inform the appropriate external organisation(s).

- **Is sufficiently serious and has sufficient substance to warrant a Formal Investigation of the complaint under Stage 3 of these procedures.**

The ADRI or DDC will then take steps to set up a Formal Investigation.

2.2.15 The Screening Panel may also decide that the allegation is (part) upheld but that other individuals are involved in or are ultimately accountable for the research misconduct, in which case a separate allegation against each of those individuals needs to be made.

2.2.16 The Screening Panel Chair will submit a confidential written record of the preliminary investigation, including any response from the Respondent, and the Screening Panel's conclusions, to the ADRI or DDC, who will then forward it to the Respondent and the Complainant for comment on its factual accuracy.

2.2.17 Any documentation used in the investigation, including a copy of the Preliminary Investigation report and a summary of any action taken, will be forwarded to the ADRI or DDC and copied to Research Integrity and Governance Office. The preliminary investigation is then concluded, although the Screening Panel may be asked by the ADRI or DDC to clarify any points or be called as a witness by any subsequent Formal Investigation.

2.2.18 Where an allegation is not progressed against a student to Stage 3 of these procedures a 'Closure of Procedures' letter will be issued to the Respondent by the Research Integrity and Governance Office.

2.3 **Stage 3: Formal Investigation by Panel**

2.3.1 If the allegation of academic misconduct is referred to a Formal Investigation by Panel then the ADRI or DDC will inform the Complainant and the Respondent of this. The Panel will normally be appointed within 30 working days of completion of the Screening stage. The composition of the Panel must be formally approved by the ADRI or DDC. Note that the composition and modus operandi of the Panel is set out in this section. These investigations are not dealt with under [B8: Regulation for hearing by panel](#).

2.3.2 The Panel will consist of:

- two members, one of whom will be external to the University in order to maintain independence;
- a Chair;
- and a Panel Secretary.

The members of the Panel will:

- not have been involved in the investigation of the allegation;
- not have had any involvement in the Respondent's research project;
- not have any other involvement with the Respondent or Complainant that may give rise to a conflict of interest
- in case of the external member, have broad academic expertise in the discipline of the research project.

2.3.3 If the research project is being conducted in collaboration with another organisation then it is preferable for a member of that organisation to fulfil the role of the external impartial panel member.

2.3.4 In the case of a Formal Investigation Panel for a postgraduate researcher, the Chair may be a Postgraduate Research Director (or their nominee) but should be from a Faculty other than that of the Respondent or Complainant.

2.3.5 In the case of a Formal Investigation Panel for a member of staff, the Chair should be from a Faculty other than that of the Respondent or Complainant will normally be a nominee of the Provost and Executive Vice-President or Vice-Provost Research and Innovation. Depending on the nature of the allegation, it may be necessary to ask the external to chair the panel.

2.3.6 In the case of Formal Investigation, subject to contractual agreement and funder requirements, the university may need to inform the funder and may allow, when requested, a funder's or regulator's observer/s to attend a formal investigation meeting.

2.3.7 The Secretary will be a member of the Research Integrity and Governance Office.

2.3.8 All members of the Formal Investigation Panel will be required to confirm in writing that they meet the eligibility criteria set out in paragraph 2.3.2 above. The Chair and Secretary are not required to have broad academic expertise in the discipline of the research project unless the role of Chair is fulfilled by the external member (2.3.2).

2.3.9 The role of the Panel Secretary is to:

- advise the Chair;
- ensure that proceedings are conducted in accordance with this Code of Practice;

- keep a written record of the Formal Investigation Panel’s deliberations and decisions which will be written up as a formal report.
- 2.3.10 The Panel Secretary also carries out the following administrative responsibilities:
- arrange the date, time and place of the Formal Investigation Panel meeting and advise all individuals called to attend of these details;
 - collect and distribute all relevant papers to members of the Formal Investigation Panel and the Respondent within minimum 5 working days prior to the date of the Formal Investigation Panel;
 - report the outcome of the Formal Investigation Panel in a written report to the ADRI or DDC.
 - inform and keep up to date the insurance officer of the current investigation to forewarn the University’s insurers of potential professional indemnity claim.
- 2.3.11 Panel Secretary informs the Respondent of the Formal Investigation by Panel advising them to raise any concerns in writing that they may have about the individuals selected to serve on the Panel. This opportunity is also open to the Complainant. The ADRI or DDC will consider any concerns raised and will decide, based on the evidence provided, whether any individual is to be excluded from the Panel. The Respondent and/or Complainant will be notified of the decision in writing.
- 2.3.12 The Complainant and the Respondent may submit evidence to the Panel orally and/or in writing with a preference for the latter so that the Respondent and others involved in the Formal Investigation Panel are able to read and consider the information and points made in advance of the meeting.
- 2.3.13 Both the Complainant and the Respondent may be supported by a colleague or member of their Trade Union, or the Students’ Union at the Formal Investigation Panel meeting. If they wish to be accompanied, then the Secretary to the Panel must be notified no later than 3 working days prior to the Formal Investigation Panel. The person supporting the Respondent and/or Complainant may only participate in proceedings at the invitation of the Chair of the Panel.
- 2.3.14 The procedure set out in this Code of Practice is academic and not a legal procedure. Where the complainant or respondent insists on legal representation the University will similarly require that it is legally represented. Where the complainant or respondent attends a Panel and is accompanied by a third party, having not previously notified the University that they wish to be accompanied, the Chair will ask the person to identify themselves. If the person is a legal representative the Chair will adjourn the Formal Investigation Panel until the University can also be legally represented.
- 2.3.15 The Panel will normally be conducted according to the following order of business:
1. introduction by the Chair of all individuals who are present and a description of their role in the proceedings, together with a reminder of the requirement for confidentiality
 2. the Chair will offer a description of the outline procedure for the Formal Investigation Panel meeting including its purpose; how its proceedings will be conducted, including what opportunities there will be for the Respondent and any companion to speak; that the proceedings will be recorded by the Secretary in writing; the possible outcomes; and the means by which the outcomes will be communicated to the Respondent and all others involved
 3. an oral presentation of the matter will be delivered by the Chair and heard by the Respondent introducing the written evidence and stating whether any witnesses are to

be called

4. an opportunity for the Respondent to set out their case, comment on the written evidence to the Panel, and respond to the allegation made against them
5. an opportunity for the Panel to clarify the Respondent's comments
6. an opportunity for witnesses to attend to provide specialist advice or accounts of the matter at hand for the Panel's information and consideration
7. an opportunity for the Panel and the Respondent to clarify their understanding of the information provided by any witnesses
8. an opportunity for the Respondent to remind the panel of relevant items from the written evidence and that provided by any witnesses and the Respondent's own comments on the written and witness evidence
9. an opportunity for the Chair of the Panel to summarise the evidence considered and identify the matters to be decided
10. a closing opportunity for the Respondent to present a summary statement to the Panel
11. the panel should inform the Respondent as soon as possible, preferably at the conclusion of proceedings, of their decision and the recommendation(s) it will be making.

2.3.16 The University endeavors to complete the Formal Investigation by Panel stage within 90 days of referral. Where, in the interest of allowing for a full and fair investigation, it is not possible to complete the Formal Investigation by Panel within 90 days, the Respondent and Complainant will be notified of this.

2.3.17 At the conclusion of the Formal Investigation by Panel, one of the following decisions will be made:

- that the allegation is upheld in full;
- that the allegation is upheld in part;
- that the allegation was not upheld and will be dismissed.

2.3.18 The Formal Investigation Panel may also decide that the allegation is (part) upheld but that other individuals are involved or are ultimately accountable, in which case a separate allegation against each of those individuals needs to be made. The Panel may dismiss an allegation as stated above because it is vexatious, malicious, mistaken, frivolous or is without substance.

2.3.19 Where the Panel determines that the allegation is not to be dismissed but was the result of poor academic practice, rather than upholding an allegation of academic misconduct, a programme of training to correct the practice should be recommended.

2.3.20 In making their decision, the Panel should bear in mind standard of proof. The standard of proof used by panels in coming to a decision about academic misconduct is that of "on the balance of probabilities".

2.3.21 Where an allegation is upheld in full or in part, the Panel may also wish to make one or more recommendations for further action in order to protect the reputation of the University. This might include but is not limited to:

Type of offence	Suggested recommendation
Students*	
For any misconduct relating to the execution and management of research	Refer to recommendation for students in this table and/or the other actions in this paragraph
For research misconduct by students who are eligible to apply for Registration or are already a Registrant on a Professional Body	Refer to a recommendation for students in this table and refer to paragraph B6 Regulations for fitness to practise for students or inform Registration Body and, where necessary, refer to the other actions in this paragraph
For research misconduct by University of Surrey students who are also employed as staff elsewhere in a role that involves research	Refer to a recommendation for students in this table and inform external employer and, where necessary, refer to the other actions in this paragraph
For a first research misconduct offence relating to the confirmation report	Fail first attempt at confirmation
For a second research misconduct offence relating to the confirmation report	Termination of registration
For a research misconduct offence relating to the final thesis	Termination of registration
Staff*	
For any offence relating to the execution and management of research	Refer to Staff Disciplinary Policy and Procedure
For any offence relating to the execution and management of research by Staff registered on Registration Body	Refer to Staff Disciplinary Policy and Procedure and inform Registration Body

* Staff and students are defined in paragraph (1.2.2 and 1.2.3)

In addition, the Panel can recommend one or a combination of actions from the following list or suggest any other actions they deem necessary

- recommendation of a programme of corrective training
- informing publishers or retraction/correction of articles in journals;
- removing the Respondent's name of any research output
- notifying any external organisations such as regulators, funders, partner organisations or additional professional bodies;
- informing research participants and/or patients and/or their doctors.

2.3.22 The Secretary will prepare a confidential written report of proceedings that:

- summarises the investigation including the justification for the decisions made;
- records the decision of the Formal Investigation Panel;
- records the recommendations of the Formal Investigation Panel.

2.3.23 The draft report will be circulated to the Respondent and the Complainant who will be asked to check it for factual accuracy. If the Complainant and/or Respondent wish to request any amendments to the report they must do so in writing. The Panel will decide if the requested amendments can be made to the reports and will notify the Complainant and/or Respondent of their decision in writing. The report will be drafted within 5 working days of the date of the Formal Investigation Panel.

- 2.3.24 A copy of the report will be provided to the ADRI or DDC.
- 2.3.25 At this point, the work of the Formal Investigation Panel comes to an end. The allegation should continue to be treated as confidential and members of the Formal Investigation Panel should make no further comment on the investigation, unless requested to do so by the University or legal authorities.
- 2.3.26 Following the conclusion of the Formal Investigation Panel's business, the ADRI or DDC will be responsible for ensuring the following:
- notifying the Complainant and Respondent in writing of the outcome
 - issuing a Closure of Procedures letter where an allegation is not upheld;
 - supplying the Research Integrity and Governance Office with a copy of the report for confidential records;
 - ensure the recommendations of the Formal Investigation Panel are carried out as deemed appropriate;
 - taking the necessary steps to ensure that all legal and ethical requirements are met; the funds of sponsors are protected; and any contractual obligations are fulfilled.
- 2.3.27 Where an allegation of misconduct is upheld against a member of staff, the ADRI or DDC should liaise with Human Resources to ascertain whether disciplinary procedures should be initiated.
- 2.3.28 Where an allegation is not upheld, the ADRI or DDC will take steps, as appropriate, to maintain the reputation of the Respondent. If there is publicity surrounding the case then the Respondent should be offered the possibility of having an official statement released to the media.
- 2.3.29 Where an allegation is not upheld, but was made in good faith, the ADRI or DDC will take steps, as appropriate, to maintain the reputation of the Complainant. Where the allegation is upheld, and there is publicity surrounding the case, then the Complainant should be offered the possibility of having an official statement released to the media.
- 2.3.30 Where an allegation is upheld, the ADRI or DDC will take steps, as appropriate, to maintain the reputation of the Complainant.
- 2.3.31 Where a Formal Investigation by Panel is not upheld because it is frivolous, vexatious or malicious, then the ADRI or DDC will consider whether disciplinary proceedings should be initiated against the Complainant.

2.4 **Reporting**

- 2.4.1 Where the Respondent is a member of staff, anonymous information of the Screening stage and the Formal Investigation by Panel stage can be incorporated into aggregated reports and provided to the University Research and Innovation Committee, upon request. This decision rests with the ADRI or DDC though it might be necessary to liaise with Human Resources in reaching a decision.
- 2.4.2 Where the respondent is a postgraduate research student anonymous information of the Screening stage and the Formal Investigation by Panel stage can be incorporated into aggregated reports and provided to the University Research Degrees Committee, under its Reserved Business. The Penalty to be applied will be reported to the Admission Progression and Examination Subcommittee at the earliest opportunity for ratification.
- 2.4.3 The University may also need to provide aggregated anonymous reports in response to legal,

governmental or other external requirements.

2.5 Appeals

- 2.5.1 Should a postgraduate research student wish to appeal against an outcome of these procedures, they may do so through the mechanisms set out in [B4 Regulations for academic appeals](#).

3 Governance Requirements

3.1 Implementation / Communication Plan

- 3.1.1 The dedicated [Research Integrity and Governance Office](#) (RIGO) manages this Policy and provides the infrastructure to abide by ethical and legal obligations as well as training and resources. Other departments within the University also provide training and education for staff and students on aspects of Good Research Practice which underpins this Policy.

- 3.1.2 The University will ensure that staff and students are made aware of updates to this Policy via the appropriate channels such as NetNews, the intranet and Leaders' Alert.

3.2 Exceptions to this Policy

- 3.2.1 Any persons or activities outside 1.2

3.4 Review and Change Requests

- 3.4.1 This Policy should be reviewed every 2 years, unless changes in regulations, other policies or improvements to its implementation require an interim update. Minor interim changes such as change of a role title or other titles or names or typos, which do not change the meaning of the Policy, will be handled by the operational owner. Major changes, i.e. anything that alters the meaning of the Policy or are substantial, will be submitted via the full approval route.

3.5 Legislative context

- 3.5.1 There is no legal requirement that dictates the University to have this Code in place. However, the UK research community acknowledges the need for such a Code in each Institution to underpin the Commitments outlined in [The concordat to support research integrity](#). An appropriate process to investigate research misconduct is also a [UKRI funder requirement](#). This Code has been produced with reference to the [UK Research Integrity's Office Procedure for the Investigation of Misconduct in Research](#) and with the support of the [UK Research Integrity Office](#).

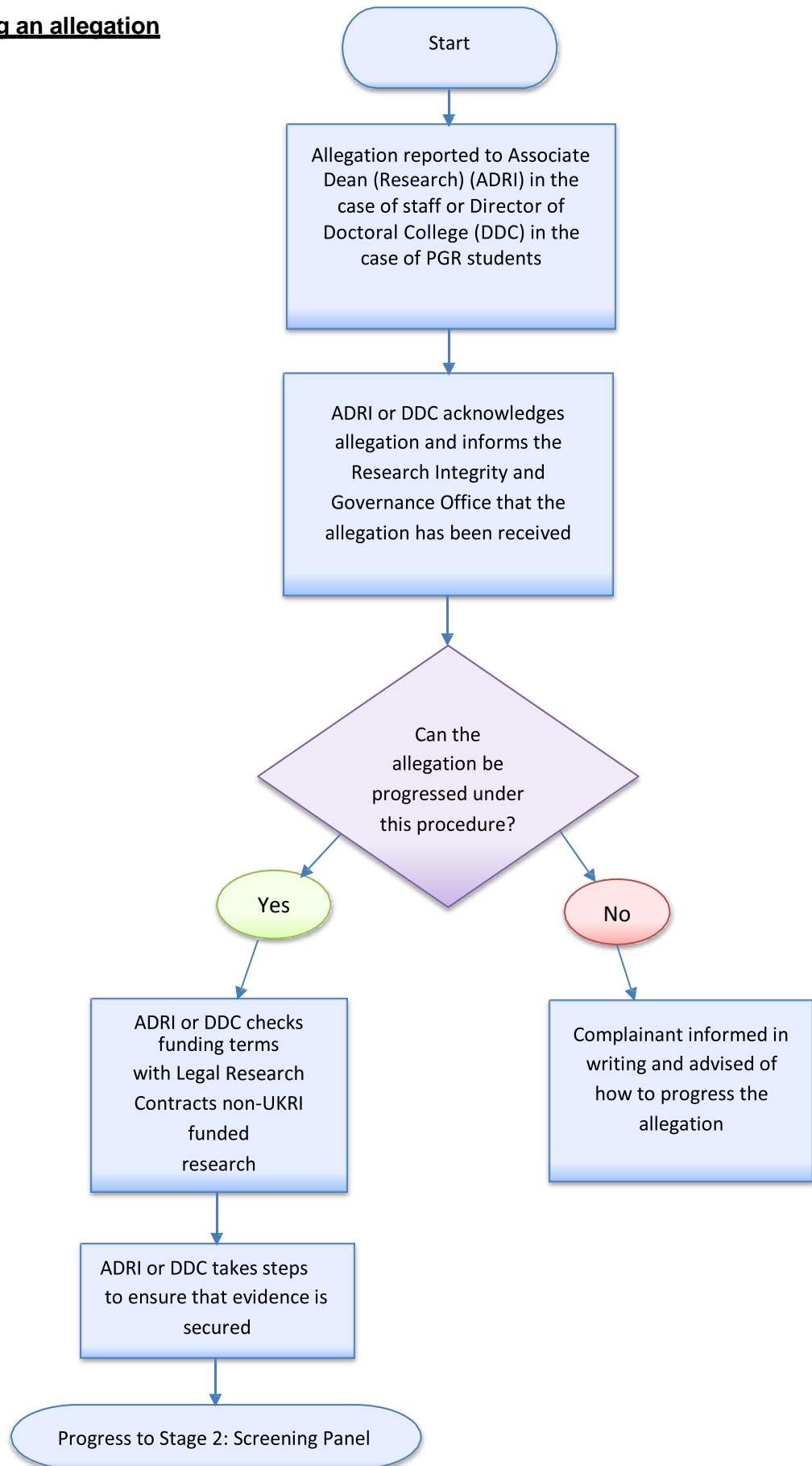
3.6 Stakeholder Statements

- 3.6.1 Equality: This policy has been reviewed for equality impact and it is not anticipated that this policy will have any negative effect on any protected groups under the Equality Act 2010.
- 3.6.2 Health & Safety: This policy supports the principles articulated in the Health and Safety Policy which apply to this context as well.

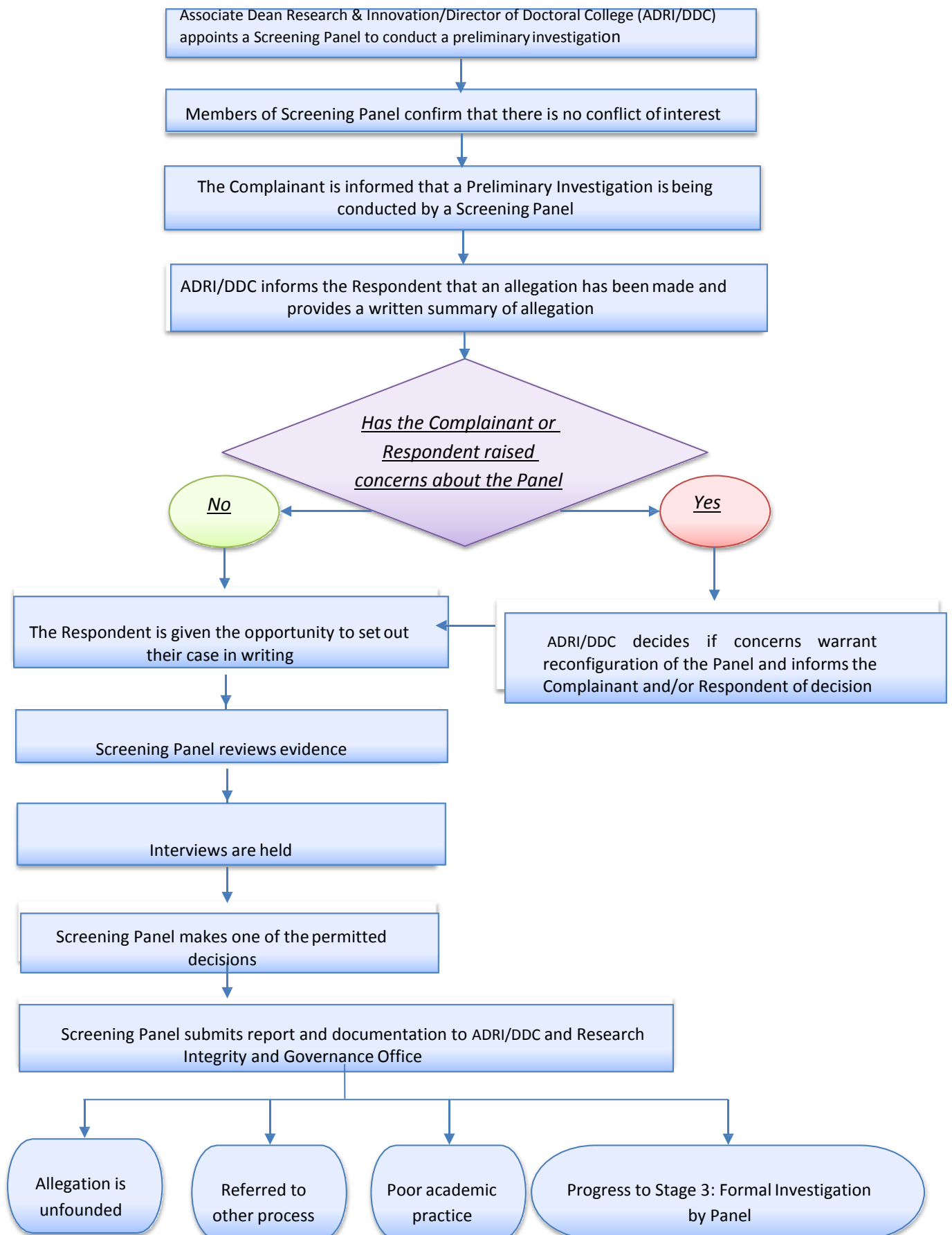
3.6.3 Unions: The University of Surrey Students' Union (USSU), University and College Union (UCU) and Joint Negotiating and Consultative Committee (JNCC) representing University staff and students have been consulted in writing this Code.

Appendix 1: Flowchart

Stage 1: Making an allegation



Stage 2: Screening Panel



Stage 3: Formal Investigation by Panel

