Procedure For Investigating Misconduct In Research

Approving committee/post:	Executive Board
Minute reference and date of approval:	EB/11/24/8
Document owner:	Academic Services - Research Support
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Consulted with:	Named Person
Equality Impact Assessment Outcome:	Positive impact
Last review date:	12/11/2024
Next review date:	11/11/2028
Changes since last review:	01/07/2025: *A new Nominated Alternate has been named (Annex 9).* 04/06/2025: *Addition of the retention schedule in Section 2.3.5.* 12/11/2024: *This procedure has been updated following the released of the revised UK Research Integrity Office (UKRIO) Procedure for the Investigation of Misconduct in Research (version 2.0). The major changes include the adaption of the various stages of the procedure and the introduction of the appeal process. The main stages of the procedure are now the receipt of allegations stage, initial investigation stage and the full investigation stage. A new Nominated Alternate has been named.*

0. Content

1.1 Purpose

The Institute of Cancer Research (ICR) is committed to providing an environment that supports the highest standards of research integrity, ensuring its researchers have ownership of the research process, adhere to the highest standards of rigor and integrity, and work according to applicable ethical legal and professional standards and frameworks. The ICR's Good Research Practice Guideline emphasise the importance of integrity and rigour in all research carried out at, and in partnership with, the ICR, and to help ensure that all researchers are aware of their obligations with respect to proper scientific conduct.

Misconduct in research can have wide-ranging and damaging consequences, harming the integrity of research, bringing the individuals involved and the organisation into disrepute and causing harm to those involved. It can also damage public confidence in research. It is therefore vitally important that organisations have robust procedures to investigate alleged misconduct fully and fairly.

The Procedure described here recognises that the investigation of allegations of research misconduct can involve complex issues and seeks to discharge the ICR's responsibilities sensitively and fairly. It outlines the process to be followed when allegations of misconduct in research are brought against a researcher concerning research conducted under the auspices of the ICR. The process described is aligned with the UKRIO Concordat to Support Research Integrity (2019) and the UKRIO Procedure for the Investigation of Misconduct in Research (2023). In addition, it addresses key organisational responsibilities for research, such as conditions of research funding and the Commitments of The Concordat to Support Research Integrity which the ICR upholds.

The objectives of the Procedure are to:

- ensure that an investigation is thorough and fair, conducted in a timely and transparent manner, and with appropriate confidentiality;
- provide an agreed standard process to reduce errors in the conduct of investigations; and
- reassure those raising concerns, those who are under investigation and other involved parties, that the process of investigation will follow a standard procedure adopted nationally by research organisations.

Glossary - see Annex I.

1.2 Scope

This procedure allows allegations of misconduct in research to be investigated once submitted to the Named Person formally in writing. Submission of formal allegations (Section 2.2), from both within and outside the Institute, should be sent to the Named Person (details in Annex 9).

This Procedure applies to the followings but not limited to:

- current or former Institute employees;
- research students (including visiting students registered elsewhere who are conducting research at the Institute);
  (Note: There is a separate Code of Practice for Plagiarism and Examination Offence that specifies the procedures which must be followed where an allegation of plagiarism or an examination offence is made against a student)
- visiting researchers performing research at or on behalf of the Institute;
- persons with honorary appointments or emeritus status.

A complaint of misconduct in research may be initiated by an individual (an Institute employee, an Institute student or someone outside of the Institute) or an external institution or organisation. The complainant 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 raising a concern via this Procedure; they may also wish to seek advice from the Named Person or to request that the issue is addressed via mediation.

Once initiated, the Procedure should progress to the natural end-point irrespective of:

- the Complainant withdrawing the allegations at any stage;
- the Respondent admitting, or having admitted, the alleged misconduct, in full or in part;
- the Respondent or the Complainant having left the ICR.

The Institute may decide to apply the Procedure in parallel with other relevant Organisational processes in any particular cases, for example, if an allegation include grievances or bullying / harassment in addition to allegations of research misconduct, this procedure and other relevant Organisational processes may be used in parallel.

Any formal steps taken to discipline or otherwise reprimand the Respondent, or take steps which might undermine their good name or reputation (or that of any other party), must be taken through the relevant Institute policy (Disciplinary Policy for employees and Code of Practice for Plagiarism and Examination Offences for students). In cases involving a honorary or a visiting appointment, a finding of Research Misconduct may result in the relevant appointment being terminated before the agreed end date. Only when allegations have been upheld through this process and, where called upon, the appeals process, may it be appropriate to apply any sanctions to the Respondent.

1.3 Roles and responsibilities

The ICR Executive Board is responsible for approving and agreeing the Procedure for Investigating Misconduct in Research.

The Named Person (details in Annex 9) has the responsibility for receiving any allegations of misconduct in research; initiating and supervising the Procedure for Investigating Misconduct in Research; maintaining the record of information during the investigation and subsequently reporting on the investigation to relevant internal stakeholders and external organisations; and taking decisions at key stages of the Procedure. The Named Person should ensure that, in using any part of the Procedure for Investigating Misconduct in Research, any required actions are carried out to protect the interests of staff and students of the Institute and colleagues and students of the Respondent and/or the Complainant.

There is a nominated alternate (details in Annex 9) to the Named Person who should carry out the role in their absence or in the case of any potential or actual conflict of interest.

1.4 Definition of Misconduct in Research

Research misconduct is characterised by The Concordat to Support Research Integrity ((2019), Commitment 4, pages 12- 13) as behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. The Concordat recognises that academic freedom is fundamental to the production of

excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily with individual researchers.

Research misconduct can take many forms, including but not limited to:

Fabrication

This includes the creation of false data or other aspects of research including documentation and participation consent.

Falsification

This includes inappropriately manipulating and/or selecting research processes, materials, data, imagery and/or consents.

Plagiarism

This includes the general misappropriation or use of others' ideas, intellectual property or work (written or otherwise), without acknowledgement or permission.

Misrepresentation of:

- data, including suppression of relevant results/data or knowingly, recklessly or by gross negligence presenting a flawed interpretation of data;
- involvement, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution (note see ICR Good Research Practice Guidelines for author dispute process);
- interests, including failure to declare competing interests of researchers or funders of a study;
- qualifications and/or credentials;
- publication history.

Mismanagement or inadequate preservation of data and/or primary materials, including failure to:

- manage, preserve and store data, documentations and/or primary materials according to the funders and all relevant legislation requirements.

Failure to meet legal, ethical and professional obligations, for example:

- not observing legal, ethical and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment;
- breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent;
- misuse of personal data, including inappropriate disclosures of the identity of research participants and other breaches of confidentiality;

- 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 the purposes of peer review.

Improper dealing with allegations of misconduct:

- failing 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;
- the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.

Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct.

For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission.

The standards by which allegations of misconduct in research should be judged should be those prevailing at the date that the behaviour under investigation took place when, for example, the requirements on the processing and storage of personal and research data may have been different. This is particularly important for allegations relating to research that was carried out many years previously.

The basis for reaching a conclusion that an individual or a group of individuals is/are responsible for misconduct in research relies on a judgement that there was an intention to commit the misconduct and/or recklessness in the conduct of any aspect of a research project.

2.1 General Principles

Misconduct in research is a serious matter. Equally, the investigation of allegations of misconduct in research must be conducted in accordance with the highest standards of integrity, accuracy and fairness.

The principles of Data Protection, Fairness, Confidentiality, Integrity, Prevention of Detriment and Balance, as defined in Annex 2, must inform the use of this Procedure for the investigation of allegations of misconduct in research.

2.2 Procedure for raising concerns relating to misconduct in research

(i) The complainant 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 raising a concern via this Procedure; they may also wish to seek advice from the Named Person or to request that the issue is addressed via mediation. Where the complainant is not satisfied with the outcome of an informal approach, or if they do not consider such an approach appropriate, then they should raise concerns via this Procedure as set out below.

(ii) A person 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.

(iii) When raising concerns, complainants should provide a summary of the allegation(s) in writing; enclose any evidence to support their concerns; state how the allegation(s) fits in with the definitions of research misconduct and state whether there has been any effort to resolve informally.

It is helpful if allegations are made in a single submission on a single occasion, as this facilitates a thorough assessment of the complainant's concerns. If a large amount of information is provided, the complainant should annotate their summary so that the Named Person can readily understand what aspect of the allegation the information relates to.

(iv) At the Initial Investigation stage, respondent(s) will normally be informed of the name of any complainant(s) who have made the allegation(s) concerning them at the discretion of the Named Person, in exceptional circumstances the identity of the Complainant(s) may not be disclosed to the Respondent(s). Any such decision will be made after seeking advice from human resources/ student and/or legal services; taking into account the ICR's Whistle-blowing (Public Interest Disclosure)- Policy and Procedure and the potential impact on the Respondent(s) ability to respond to the allegation(s) that have been made against them. No decision will be made that compromises the Principles and Standards of this Procedure or the thorough and fair investigation of the allegation(s) in question. The Complainant will be informed that their identity is being disclosed to the Respondent(s) at the Initial Investigation stage unless it has been determined that it should remain confidential.

(v) It is recognised that complainants can be concerned about revealing their identity. Allegations raised which are anonymous, or matters identified where there is no specific complainant, should 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/ evidence. Anonymous complaints must be made in writing and anyone

making an anonymous allegation should be aware that they will not be informed of the outcome of the investigation.

2.3 Procedure for Investigating Misconduct in Research

A summary on the Procedure for Investigating Misconduct in Research is shown below in Figure 1.

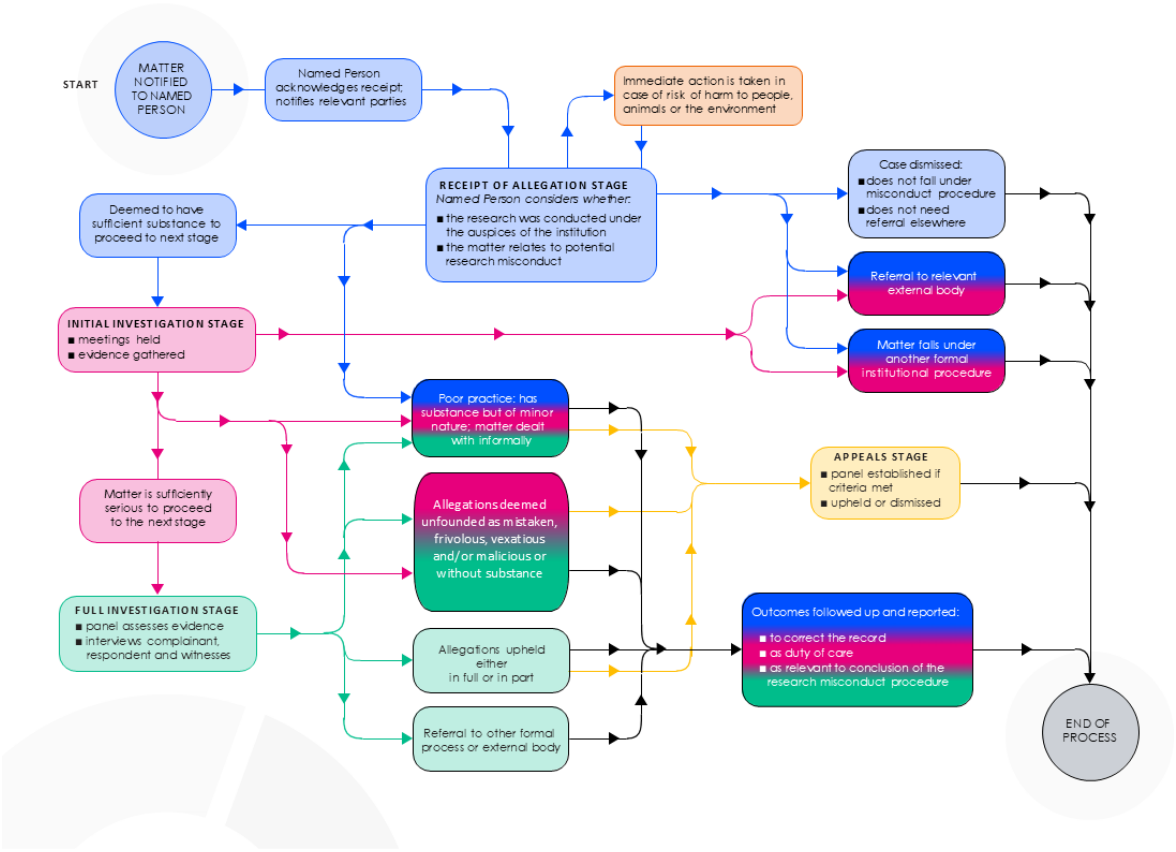

Figure 1: Summary on the Procedure for Investigating Misconduct in Research [(adapted from UKRIO Research Misconduct Flow Chart version 1.2)]**.**

2.3.1 Receipt of Allegations Stage

(i) Upon receipt of allegations of research misconduct, the Named Person should initiate the Receipt of Allegations Stage of the Procedure. The Named Person should acknowledge receipt of the allegations by the Complainant in writing, informing them that the allegation will be considered initially under the 'Receipt of Allegations' stage of the Procedure. A copy of the Procedure will be provided to the Complainant.

(ii) The purpose of the Receipt of Allegations Stage is to assess an allegation of research misconduct that has been received and to determine whether the matter falls under the Procedure for Investigating Misconduct in Research in terms of both the matter raised and if not, to determine the most appropriate process to investigate or otherwise address the allegation.

(iii) The Named Person:

- will carry out this stage of the Procedure;
- may identify suitable professional, administrative, and other support to assist them in carrying out the above actions;
- shall be free to seek confidential advice from persons with relevant expertise if required, both within and external to the Institute.

If the Named Person 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, they should instead refer the allegation to their nominated alternate who will notify the Complainant accordingly. The nominated alternate will then take on the role of the Named Person as regards the conduct of this Procedure and will be responsible for fulfilling the duties allocated to that role by this Procedure.

(iv) In carrying out the assessment, the Named Person should consider the information provided by the complainant. If needed the Named Person may contact the complainant in writing to seek additional information or clarification needed to carry out the assessment.

(v) The Named Person will determine whether the allegation of research misconduct:

a. falls under the definition of research misconduct and the scope of the Procedure and should advance to the Initial Investigation Stage of this Procedure;
b. falls within the scope of another formal process of the Organisation and warrants referral directly to it, including but not limited to examination regulations, bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary process; 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. clearly presents as being related to genuine mistakes or poor practice or practice was acceptable at the time when the research was performed rather than to misconduct, and therefore the initial approach to addressing the matter could be via informal measures, such as education and training, mediation or other non-disciplinary

approach (Annex 3), rather than through the next stage of the Procedure or other formal processes. If the allegations refer to an inadvertent mistake or error in a journal article or equivalent, where possible, the authors should submit an Erratum or Corrigendum to the journal; or

e. should be dismissed because it does not fall under the remit of the Procedure and does not need to be referred elsewhere.

The Named person may decide that more than one course of action needs to be followed.

(vi) This stage of the Procedure should be completed as soon as is practicable upon receipt of an allegation, usually within ten working days. The Named Person should explain any delays to this timescale to the Complainant in writing, presenting an estimated revised date of completion.

The Named Person should recognise that complainants may understandably be unfamiliar with the requirements of this Procedure and/or nervous about raising concerns. The priority should be a thorough and fair assessment of the complainant's concerns and at the discretion of the Named Person the timescale of this stage of the Procedure can be extended if necessary to gather more information from the Complainant. If this takes place, care should be taken to stay within the scope of this stage and not undertake actions which fall within the scope of subsequent stages of this Procedure, such as the Initial Investigation stage.

(vii) See Annex 4 for further details on the Receipt of Allegations Stage of the Procedure.

(viii) Conclusion of the Receipt of Allegation stage and next steps:
At the conclusion of this stage, the Named Person should write a note summarising their assessment of the allegation(s) and inform relevant internal stakeholders as appropriate of the next steps from the outcomes listed in Section 2.3.1.(v).

Where the allegations fall under the definition of research misconduct and the scope of the Procedure and will advance to the Initial Investigation Stage,

(ix) the Named Person should inform:

- The Chief Executive
- The Chief Research and Academic Officer
- The Chief People Officer

that allegations of misconduct in research have been received on a particular date and that it will be investigated using this Procedure. They should be provided in confidence with the following information:

- The identity of the Respondent

- The identity of the Complainant (if known)
- Details of all sources of internal and external funding
- Details of all internal and external collaborators for the research in question
- Other details that the Named Person considers appropriate.

The Named Person should emphasise to all involved parties that the allegation is to be investigated, is as yet unproven and that the information is confidential.

(x) The Named Person should then, in conjunction with the Chief People Officer and the Chief Research and Academic Officer investigate the contractual status of the Respondent and the contractual details specific to the research project(s) related to the allegations including any grant applications in progress.

If the Institute is not the Respondent's primary employer, the Respondent having only an honorary or secondary contract with the Institute, the Named Person should contact the Named Person of the Respondent's primary employer and inform him/her of the allegations.

(xi) The Named Person should determine whether the research project which the allegations relate to includes contractual obligations that require the Institute to undertake prescribed steps in the event of allegations of misconduct in research being made. Such an undertaking might be in:

- A contract from a funding organisation
- A partnership contract/agreement/Memorandum of Understanding
- An agreement to sponsor the research

An external sponsor, funding organisation and/or collaborators might have a valid interest in, or responsibility for, the way that the investigation is conducted. The Named Person should confirm whether the Institute has any contractual/legal obligations towards such organisations concerning any aspects of the investigation to ensure that any such obligations are fulfilled at the appropriate time through the correct mechanisms. The Named Person should liaise with the Chief People Officer to ensure that the rights of the Respondent and Complainant, and the integrity of the investigation are not compromised by any such actions.

(xii) The Named Person should inform the Respondent of the following, formally and in writing:

a. An allegation of misconduct in research has been made which involves them.

b. A summary of the allegation(s) and a copy of the Procedure.

c. That it has been determined at the Receipt of Allegations stage that the matter has sufficient substance and falls under this procedure and therefore will proceed to the 'Initial Investigation' stage.

d. That they will be allowed to respond to the allegation(s) and set out their case.

e. The conclusions of the initial assessment of the allegation(s), an outline of the next steps and approximate timescales. Where possible, this may include the identity of the investigator and an indication of when they will be in contact to gain the Respondent's version of events.
f. When allegations have been made against more than one Respondent, the Named Person should inform each individual separately and not divulge the identity of any other Respondent.

For all the other outcomes:
(xiii) Any outcome other than 2.3.1 (v)a, the Procedure reaches its endpoint. See **Outcomes and Reporting Stage** for follow-up actions for all the other outcomes (Section 2.3.5 and Annex 7).

(xiv) The Named Person should inform the Complainant, formally and in writing, of the conclusions of the review of the allegation(s) and an outline of the next steps.

(xv) The Receipt of Allegations stage now ends.

2.3.2 Prior to commencement of the Initial Investigation Stage

Dependent on circumstances, the Named Person will liaise with Human Resources and the relevant line manager(s) to:

- request the temporary suspension of the Respondent from duties on full pay
- request the temporary barring of the Respondent from part, or all, of the premises of the Institute and any of the sites of any partner organisation(s) and/or
- request a temporary restriction be placed on the Respondent requiring him/her not to have contact with some or all of the staff of the Institute and those of any partner organisation(s)

The Named Person should only take such actions in situations where there is a clear risk to individuals or that evidence might be destroyed and only after careful consideration of those risks and consequences. The reason(s) for taking any such actions should be recorded in writing and communicated to all relevant parties. In taking such action the Named Person will need to inform the Respondent that an allegation has been made against them. The Named Person should reassure the Respondent that it is not part of any disciplinary action and does not indicate that the allegations are believed to be true by the Institute; rather it should be stressed that it is essential to ensuring that the allegations of misconduct can be properly investigated. Steps to suspend or bar a member of staff should take into account their responsibilities for supervision, teaching and management and make alternative arrangements to meet those responsibilities. Any suspension or barring of the Respondent

should be reviewed throughout the Procedure to ensure that it is not unnecessarily protracted.

2.3.3 Initial Investigation Stage

(i) The Initial Investigation Stage should commence following instruction to that effect from the Named Person after the Receipt of Allegations stage.

(ii) The purpose of the Initial Investigation Stage is to determine whether there is sufficient evidence of research misconduct to warrant a Full Investigation of the allegation or whether alternative action(s) should be taken.

(iii) This stage should be conducted by an Investigator appointed, as soon as is practicable, by the Named Person. The Investigator cannot be the Named Person. The Named Person should identify suitable administrative and other support to assist the Investigator and the Investigator shall be free to seek confidential advice from persons with relevant expertise, both within the Institute and outside it. At the discretion of the Named Person, an Initial Investigation Panel may instead be appointed to carry out the Initial Investigation, consisting of two or three persons and chaired by 'The Investigator', for allegations that involve multiple disciplines of research and/or are especially complex.

(iv) The Named Person should provide the Investigator with all relevant information that have been obtained to date including any correspondence and information already provided by the complainant in support of the allegation(s).

(v) The Investigator:

- should assess the information obtained from the Named Person and determine any additional information they require.
- should contact the Complainant and the Respondent to gather information in support of their investigation, including the names of any relevant witnesses.
- may also contact relevant witnesses suggested by the Complainant or Respondent.
- should determine whether the allegation is made in good faith; conduct a confidential review and assessment of the evidence provided; and reaching a conclusion on the allegation(s) in line with the possible outcomes set out in Section 2.3.3 (vii) below.
- should keep a full record of the evidence received and of the proceedings.

(vi) As part of the process, in the interests of fairness and impartiality and to help ensure confidence in the process, both Complainants and Respondents will have the opportunity to provide input into the investigation at interview. Both parties can be accompanied to interviews by an ICR colleague or certified trade union representative (accompanying an

employee) or Student Committee representative (accompanying a student). External representatives such as solicitors and family members will not be permitted to attend, save in very exceptional circumstances. The Respondent will be allowed to respond to the allegations made against them during the interview.

If the Complainant 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. Individuals should be aware that that not participating by interview can make it difficult to ensure that the full context of their evidence is understood.

The Investigator should take all reasonable steps to inform the Respondent of the Initial Investigation and give the Respondent an opportunity to respond to the Complaint. Should it not prove possible, after a reasonable number of attempts, to contact the Respondent, or should the Respondent refuse to participate in the investigation, the investigation may continue without the Respondent's participation and decisions will be based on the evidence available.

(vii) At the end of the Initial Investigation Stage, the Investigator will determine whether the allegation of misconduct in research:

a. is sufficiently serious and has sufficient substance to warrant a Full Investigation of the complaint under this Procedure; or

b. has some substance but due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training, mediation or another non-disciplinary approach (Annex 3), but does not warrant a Full Investigation; or

c. warrants referral directly to another formal process of the Organisation, including but not limited to examination regulations; bullying/harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary procedure; 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, frivolous, vexatious and/or malicious or is otherwise without substance and will be dismissed.

(viii) The standard of proof used by the Initial Investigation is that of "on the balance of probabilities". This means that the activity was more likely than not to have occurred.

(ix) The Investigator should aim to complete the Initial Investigation Stage within 30 working days following instruction from the Named Person without compromising the General Principles of the Procedure (Annex 2). Any delays to this timescale should be

explained to the Complainant, the Respondent and the Named Person in writing, presenting an estimated revised date of completion.

(x) See Annex 5 for further details on the Initial Investigation Stage of the Procedure.

(xi) Conclusion of this stage and next steps:

- The Investigator should:
  - write a report of the outcome (where relevant, for each allegation) as set out in Section 2.3.3 (vii);
  - send a summary of the findings to the Complainant and the Respondent with a prescribed timeline for comment on matters of factual accuracy. The Investigator should consider the responses received and if they consider that the report includes errors of fact, the report should be modified as necessary; and
  - then submit the final report and records/material relating to the investigation to the Named Person, setting out the conclusions of the Initial Investigation Stage on the allegation(s) under investigation and any other matters they wish to draw to the attention of the Institute.

- The Named Person should:
  - convey the substance of the Investigator's report to the Complainant (and their representative by agreement), the Respondent (and their representative by agreement) and such other persons or bodies as they deem appropriate; and
  - undertake the following actions depending on the conclusions of the Initial Investigation stage on the allegation(s) under investigation:
    a. If it is concluded that the allegation(s) is sufficiently serious and has sufficient substance to warrant a Full Investigation of the complaint, then the investigation moves to the Full Investigation stage.
    b. For all other outcomes, the investigation moves to the **Outcomes and Reporting Stage** (Section 2.3.5 and Annex 7).

- The work of the Investigator or the Investigator/Investigation Panel is then concluded and they play no further role in the Procedure or any subsequent disciplinary process, apart from clarifying any points in their report. They should remember that all information concerning the case was given to them in confidence and they should not disclose any information relating the Investigation or make comment in response to internal or external enquiries, unless formally permitted by the Institute or otherwise required to by law. Any queries or requests for comment addressed to the Investigator should be referred to the Named Person.

- The Initial Investigation stage now ends.

2.3.4 Full Investigation Stage

(i) The Full Investigation Stage should commence following instruction to that effect from the Named Person after the Initial Investigation stage.

(ii) The purpose of the Full Investigation is to review all the relevant evidence and:
a. conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld; and
b. make recommendations as appropriate, for consideration by the Institute, regarding any further action the Full Investigation Panel ("the Panel") deems necessary to address any misconduct it may have found; correct the record of research, and/or address other matters uncovered during its work.

(iii) The Named Person should inform the following that a Full Investigation of the allegations is to take place:

- Respondent (and their representative by agreement)
- Complainant (and their representative by agreement)
- The Chief Executive
- The Chief Research and Academic Officer
- The Chief People Officer
- Where appropriate, Named Person of any Partner Organisation with which either the Respondent and/or Complainant has an honorary contract, and through their Heads of Organisation, Human Resources and Research

(iv) The Named Person should establish a Full Investigation Panel on which at least one member of the Panel must be from outside the Institute and identify suitable administrative and other support to assist the Panel. The Panel should be free to seek confidential advice from persons with relevant expertise, both within the Institute and outside it.

(v) The Named Person should inform the Complainant and the Respondent formally and in writing that the Procedure has moved to the Full Investigation Stage, that they will be interviewed as part of the process and that they may be accompanied to any meetings by a by an ICR colleague or certified trade union representative (accompanying an employee) or Student Committee representative (accompanying a student). External representatives such as solicitors and family members will not be permitted to attend, save in very exceptional circumstances.

If the Complainant 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. Individuals should be aware that not participating by interview can make it difficult to ensure that the full context of their evidence is understood.

The Investigator should take all reasonable steps to inform the Respondent and give the Respondent an opportunity to respond to the Complaint. Should it not prove possible, after a reasonable number of attempts, to contact the Respondent, or should the Respondent refuse to participate in the investigation, the investigation may continue without the Respondent's participation and decisions will be based on the evidence available.

(vi) The Respondent will be allowed to respond to the allegations made against them, set out their case and submit their evidence before the interview for consideration by the Panel.

(vii) The Panel can interview relevant witnesses. Both Respondent and Complainant can suggest witnesses for the Panel to interview; the Panel may then choose to invite the suggested witnesses to interview. If the witnesses do 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.

(viii) The Panel should reach a conclusion on the allegation(s) under investigation and may also make recommendations on subsequent actions which should be taken by the Institute and/or other bodies. After the Full Investigation, the Panel should conclude, giving the reasons for its decision and recording any differing views, whether the allegation of misconduct in research is:

a. made in good faith;

b. is upheld in full; or

c. is upheld in part; or

d. has some substance but due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training, mediation or another non-disciplinary approach (Annex 3), rather than through the next stage of the Procedure or other formal processes; or

e. warrants referral directly to another formal process of the Institute, including but not limited to examination regulations; bullying/ harassment procedure or equivalent; financial fraud investigation process or equivalent; disciplinary procedure; or

f. warrants referral directly 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; or

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

(ix) The Panel may also make recommendations, for consideration by the Named Person and/or appropriate institutional authorities, regarding any further action(s) which should be taken by the Institute and/or other bodies to address any research misconduct the Full Investigation may have found; correct the record of research, and/or address other matters uncovered. Such recommendations might include but are not limited to:

- whether the matter should be referred to the Institute's Disciplinary Policy (for employees) and Code of Practice for Plagiarism and Examination Offences (for students); and/or
- whether the matter should be referred to another relevant institutional process, such as the examination regulations, bullying/ harassment procedure or equivalent, or the Institute's financial fraud investigation process; and/or
- in cases involving a honorary or a visiting appointment, a finding of Research Misconduct may result in the relevant appointment being terminated before the agreed end.
- 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
- 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 misconduct in research or to correct honest errors; and/or
- whether procedural or organisational matters should be addressed by the Organisation or other relevant bodies through a review of the management of research; and/or
- informing research participants or patients or their doctors; and/or
- other matters that should be investigated, including allegations of misconduct in research 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.

(x) The Panel should aim to reach its conclusions within three months of being established, provided this does not compromise the General Principles of the Procedure (see Annex 2) and the full and fair investigation of the allegation. This is indicated as it will depend on the number and complexity of the allegations under investigation. Any delays to this timescale will be explained to the Complainant and Respondent in writing, presenting an estimated revised date of completion.

The Chair of the Full Investigation Panel should report the progress made by the Investigation Panel, by reference to criteria agreed by the Panel in advance, to the Named Person on a

monthly basis. The Named Person should also then provide appropriate information on the progress of the investigation to the respondents, complainants and other interested parties.

(xi) See Annex 6 for further details on the Full Investigation Stage of the Procedure.

(xii) Conclusion of this stage and next steps:
The Panel should reach a conclusion on the allegation(s) under investigation and write a report setting out their conclusions (where relevant, for each allegation), giving the reasons for its decision and recording any differing views. The standard of proof used by the Full Investigation is that "on the balance of probabilities." This means that the activity was more likely than not to have occurred. The potential outcomes are set out in Section 2.3.4 (viii).

In its report, the Panel may also make recommendations, for consideration by the Named Person and/or appropriate Organisational authorities, regarding any further action(s) which should be taken by the Institute and/or other bodies to address any misconduct the Full Investigation may have found; correct the record of research, and/or address other matters uncovered during the course of the Full Investigation. Please refer to Section 2.3.4 (ix) for the areas that may be covered.

(xiii) The outcome of the investigation should be sent to the Complainant and the Respondent (and their representatives by agreement) with a prescribed timeline for comment on matters of factual accuracy. The Panel should consider the responses received and if they consider that the report includes errors of fact, should modify the report as necessary.

(xiv) The Panel should submit their final report to the Named Person, setting out the conclusions of the Full Investigation stage on the allegation(s) under investigation, their recommendations regarding further actions to be taken and any other matters they wish to draw to the attention of the Institute. The Chair and Panel should also hand over to the Named Person or their nominated representative all records/ material relating to the Full Investigation.

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

(xvi) The Named Person should convey the substance of the Panel's findings and recommendations to the following:

- the Respondent and the Complainant (and their representatives by agreement)
- the Chief Executive, the Chief Research and Academic Officer, the Chief People Officer
- if the Respondent and/or the Complainant are employed on joint clinical/honorary contracts, the Named Person, the Head of Human Resources and the Head of Research of the other organisation(s)
- where appropriate, the responsible person within any relevant partner organisations, funding bodies and/or regulatory or professional bodies
- additionally, the Named Person may wish to inform UKRIO of the conclusion of the Full Investigation

(xvii) The Full Investigation stage is complete and the Procedure moves to the relevant section of the **Outcomes and Reporting Stage** (Section 2.3.5 and Annex 7).

(xviii) 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 as Chair or member of the Full Investigation Panel rules out participation in any subsequent disciplinary or other processes.

(xix) The Full Investigation stage now ends.

(xx) If all or any part of the allegations are upheld, the Named Person, the Chief People Officer and at least one other member of senior staff should then decide whether the matter should be referred to the Institute's Disciplinary Policy or for other formal actions.

(xxi) Should the allegations proceed to the Institute's Disciplinary Policy for employees and Code of Practice for Plagiarism and Examination Offences for students, the report of the Full Investigation Panel should form the basis of the evidence that the relevant disciplinary panel receives. All the information collected and brought to light through this Procedure should be transferred to the relevant disciplinary panel.

The relevant Disciplinary Panel should receive all information on the case in a meeting with the Chair of the Full Investigation Panel and the Named Person, to ensure that all relevant material is transferred.

(xxii) The Complainant and/or the Respondent have the option of appealing in certain circumstances against the findings of an investigation carried out under this Procedure.

2.3.5 Outcomes and Reporting Stage

(i) The purpose of the Outcomes and Reporting Stage is to ensure that all necessary actions are taken at the conclusion of this procedure, including but not limited to: actions arising following any Initial Investigation or Full Investigation that may have taken place; and ensuring that the research record is correct.

(ii) The Named Person is responsible for ensuring that the any necessary actions are carried out after the investigation is complete. Some actions may require the involvement of other divisions within the Institute and/or external organisations. In general terms, these actions may include:

a. Actions relating to the operation and conclusion (subject to any subsequent appeal) of this Procedure, including appropriate transfers of information to any subsequent Institute processes or informal measures (Annex 3), and/or to any relevant processes of external organisations.

b. Reporting the outcomes to relevant colleagues/ bodies within the Institute, for example, line managers, Human Resources and/or Registry, Academic Board or equivalent.

c. Making necessary disclosures on the outcomes of uses of the Procedure to external organisations and other interested parties.

d. Duty of care to Complainants, Respondents and other involved parties, including but not limited to research participants.

e. Ensuring that appropriate efforts are made to correct the research record.

f. Addressing procedural or organisational matters uncovered during the investigation.

(iii) The timescale of the Outcomes and Reporting stage will vary depending on the scale of action needed, but the Named Person should aim to ensure they are completed within three months of completion of the investigation. However, some actions may require longer to complete. Any delays to this timescale should be explained to the Complainant, the Respondent and other involved parties in writing, presenting an estimated revised date of completion.

(iv) See Annex 7 for further details on the Outcomes and Reporting Stage of the Procedure.

(v) Conclusion of this stage and the next steps:

- The Complainant and Respondent will be informed of:

  a. 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. The options for appeal open to them (see next stage).

  c. They should also be informed that, unless an appeal is raised, the investigation and the use of this Procedure have now concluded.

- The Outcomes and Reporting stage of the Procedure is then concluded, with the Named Person involved in follow-up actions, or receiving reports on them, as appropriate. As the matter may then give rise to disciplinary or other action, the Named Person should remember that all information concerning the allegation and investigation was given to them in confidence.
- A role as the Named Person rules out participation in any subsequent disciplinary process.
- The Outcomes and Reporting stage now ends and if applicable the Procedure moves to the Appeals stage.
- The ICR will keep records of the procedure for 6 full years (+1 year) following the date of the last entry. In the subsequent year (the +1 year), these records will be reviewed and securely destroyed as appropriate. After this retention period, the ICR will continue to retain anonymised summary information of the investigation.

2.3.6 Appeals Process

(i) The purpose of an Appeals Process is to permit the Complainant and/or the Respondent to appeal in certain circumstances against the findings of an investigation carried out under this Procedure. Appeals may be permitted on any or all of the following grounds:
a) procedural irregularity in the conduct of the case up to and before the submission of a formal appeal; or
b) fresh evidence becoming available which was not, and could not, have been made available to the Inquiry Panel; or
c) the recommendation is either excessive or inadequate in relation to the misconduct upheld.

(ii) Any appeal must be made in writing to the Alternative Named Person within 10 working days of being notified of the outcome of the Procedure. The written notice of appeal must set out the grounds of appeal, and be accompanied, wherever possible, by supporting documentation.

(iii) The Alternative Named Person will then 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.
a. If the appeal does not fall within one or more of the grounds for appeal set out above, then the appeal is dismissed and this decision should be communicated to the person who submitted the appeal. The Appeals stage now ends.

b. If the appeal does fall within one or more of the grounds for appeal, the Alternative Named Person should then, as soon as is practicable, appoint an Appeals Panel to undertake the appeals process.

(iv) The Appeals Panel will normally consist of three persons, with at least one person from outside the Institute (see Annex 8). Depending on the circumstances of the investigation and at the discretion of the Alternative Named Person, the Appeals 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 Appeals Panel will have been involved at any stage previously as an Investigator or as a member of a Full Investigation Panel or as the Named Person.

(v) The Appeals Panel has the power to uphold, reverse or modify the following outcomes of the Procedure, including the decisions and/or recommendations associated with them i.e.:
a. A conclusion of an Initial Investigation or a Full Investigation that an allegation is unfounded, because it is mistaken or is frivolous or is vexatious and/or malicious or is otherwise without substance, and will be dismissed; or
b. A conclusion of an Initial Investigation or of a Full Investigation that an allegation has some substance but due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training, mediation or other non-disciplinary approaches (Annex 3), rather than through the next stage of the Procedure or other formal processes; or
c. A conclusion of a Full Investigation that an allegation is upheld in full; or
d. A conclusion of a Full Investigation that an allegation is upheld in part.

(vi) Any appeal should normally be heard within two months of the outcome of the investigation. Any delays to this timescale will be explained to the Complainant and the Respondent in writing, presenting an estimated revised date of completion.

(vii) See Annex 8 for further details on the process of the Appeal Stage.

(viii) Conclusion of this stage and the next steps:
The Appeals Panel will decide whether it upholds, reverses or modifies the outcome in question by the Procedure, including the decisions and/or recommendations associated with it. The decision of the Appeal Panel is final.

(ix) The Appeals Panel shall write a report setting out its conclusions, giving the reasons for its decision and recording any differing views.

(x) A summary of the conclusions will be sent to the Complainant and the Respondent with a prescribed timeline for comment on matters of factual accuracy. The Appeals Panel will consider the responses received and if they consider that the report includes errors of fact, will modify the report as necessary.

(xi) The Appeals Panel will then submit their final report to the Alternative Named Person. The Appeals Panel will also hand over to the Alternative Named Person or their nominated representative all records/ material relating to the Full Investigation.

The Alternative Named Person shall convey the substance of the Appeals Panel's findings and recommendations to the Complainant, the Respondent and such other persons or bodies as they deem appropriate.

(xii) The Alternative Named Person will then undertake the actions necessary to implement the conclusions of the Appeals Panel, following relevant provisions of the **Outcomes and Reporting Stage** (Section 2.3.5 and Annex 7) and liaising with the others, within and/or external to the Organisation, as necessary.

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

(xiv) Any queries or requests for comment addressed to the Chair or members of the Appeals Panel should be referred to the Alternative Named Person.

(xv) Those who have contributed to the disbanded Appeals 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.

(xvi) A role as Chair or member of the Appeals Panel rules out participation in any subsequent disciplinary or other processes.

(xvii) The Appeals stage now ends.

2.4 Mechanisms for implementation

This Procedure is available to all Institute staff and student via the Research Integrity of Nexus Page https://nexus.icr.ac.uk/ouricr/Pages/Research-integrity.aspx. This Procedure is also sign-posted in ICR's Good Research Practice Guidelines, which is included in the induction of all new starters.

2.5 Reporting of significant incidents

The Named Person and Chief Research and Academic Officer will assess the following:

- Whether the matter should also be reported to the Office for Students.
- Whether it should also be reported on the Significant Incident Register for the ICR Audit and Risk Committee.

If an incident meets either of these criteria it should be escalated as per the Reporting of Significant Incident process via the Secretariat at Secretariat@icr.ac.uk . In addition, if the Chief Research and Academic Officer and Chief Finance Office consider the matter to be of a sufficient level of seriousness they will consult with the CEO, the Chair of the Board of Trustees and the Chair of the Audit and Risk Committee to advise them of the event and to seek their views.

3. Related documents

(i) ICR Good Research Practice Guidelines
(ii) ICR Grievance Policy
(iii) ICR Whistle-blowing (Public Interest Disclosure)- Policy and Procedure
(iv) ICR Challenging Bullying and Harassment Policy
(v) ICR Disciplinary Policy
(vi) Code of Practice for Plagiarism and Examination Offences for students
(vii) ICR Anti-Fraud Policy
(viii) 2019 Concordat to Support Research Integrity
(ix) 2023 UKRIO Procedure for the Investigation of Misconduct in Research
(x) UK Research Integrity Office - Advice and guidance provided by UKRIO is available to all, including research organisations and individual researchers.

ANNEX 1 – Glossary

Note: Where reference is made to defined roles or defined bodies in the Procedure, reference to the singular should be viewed to include the plural as appropriate.

Accepted Procedures (for research)

Accepted procedures include but are not limited to the following:

- gaining informed consent where required;
- gaining formal approval from relevant organisations where required;
- any protocols for research contained in any formal approval that has been given for the research, including submitting research for ethical review when required or appropriate and abiding by the terms of all ethical approvals for the research;
- any research protocols as defined in contracts or agreements with funding bodies and sponsors;
- any protocols set out by and/or approved by a regulatory authority such as the Medicines and Healthcare Products Regulatory Authority (MHRA) for a trial of medicinal products;
- any research protocols set out in the guidelines of the employing institution and other relevant partner organisations;
- any research protocols set out in the guidelines of appropriate recognised professional, academic, scientific, governmental, national and international bodies;
- any procedures that are aimed at avoiding unreasonable risk or harm to humans, animals or the environment;
- good practice for the proper preservation and management of primary data and materials;
- any existing guidance on good practice on research.

Note: As well as complying with accepted procedures, researchers must comply with all legislation that applies to their research.

Accepted procedures do **not** include:

- un-consented to/unapproved variations of the above;
- any procedures that would encourage, or would lead to, breaches in the law.

Although allegations of research misconduct are often raised as departures from accepted procedures in the conduct of research, investigations should aim to establish intentional and/or reckless behaviour as set out in the definition of misconduct in research (see Section 1.4 of this Procedure).

Appeals Process

The purpose of the Appeals Process in the Procedure is to permit the Complainant and/or the Respondent to appeal in certain circumstances against the findings of an investigation carried out under this Procedure.

Complainant

The Complainant is a person making allegations of research misconduct against one or more Respondents (see below). They need not be a member of the Institute.

Disciplinary Procedure

The disciplinary process refers to the Institute's mechanism for resolving disciplinary issues amongst its staff and students. At ICR the Disciplinary Policy applies to employees and the relevant policy for students is the Code of Practice for Plagiarism and Examination Offences.

Employer

The Employer is defined in this Procedure as the person or organisation who has retained the person (eg the Respondent (see below)) to carry out work at the time that the matter in question took place, usually, but not always, through a contract of employment.

Full Investigation Stage

The purpose of the Full Investigation Stage in the Procedure is to:

- conclude whether an allegation of misconduct in research is upheld in full, upheld in part or not upheld; and
- make recommendations, for consideration by the appropriate Organisational authorities, regarding any further action the Full Investigation Panel ("the Panel") deems necessary to: address any misconduct it may have found; correct the record of research, and/or address other matters uncovered during the course of its work.

Honorary Contract

Honorary contracts are used in a variety of circumstances. As a result, it is not possible to provide blanket guidance as to which organisation should lead an investigation into allegations of misconduct in research against someone holding such a contract.

Examples of arrangements that commonly involve the issue of an honorary contract are:

- for a clinical academic working in both the Institute and an NHS organisation, in which case the NHS organisation would issue the honorary contract
- for an NHS consultant with an arrangement to undertake teaching and/or research in the Institute, in which case the Institute would issue the honorary contract
- for a researcher employed by the Institute and undertaking a research project in an NHS organisation, in which case the NHS organisation would issue the honorary contract

There are different types of honorary contracts but organisations remain responsible for research carried out under the auspices of the institution regardless of whether they are the employer of the researcher(s) in question.
These are complex issues as the outcome of any investigation by one party might affect the contractual relationship of the individual investigated with the other party. It is recommended that legal advice or other forms of clarity is sought before any investigation commences and that partner organisations liaise closely.

Initial Investigation Stage
The purpose of the Initial Investigation Stage in the Procedure is to determine whether there is sufficient evidence of research misconduct to warrant a Full Investigation of the allegation or whether alternative action(s) should be taken.

Misconduct in Research
Misconduct in research is defined in Section 1.4 of this Procedure.

Named Person
The Named Person is defined in the Procedure as the individual nominated by the Organisation (see below) to have responsibility for receiving any allegations of misconduct in research; initiating and supervising the Procedure for Investigating Misconduct in Research; maintaining the record of information during the investigation and subsequently reporting on the investigation to internal contacts and external organisations; and taking decisions at key stages of the Procedure.
The Named Person should have a nominated alternate who should carry out the role in their absence or in the case of any potential or actual conflict of interest. The Named Person and the nominated alternate should not be the Chief Executive or the Head of any professional Services Directorate.

Organisation
The Organisation is defined in this Procedure as the establishment (The Institute of Cancer Research) that employs the Respondent, the Named Person and, on occasions, other parties involved in the proceedings and is the host and (most likely) the Sponsor for the research to which allegations of misconduct refer.

Outcomes and Reporting Stage
The purpose of the Outcomes and Reporting stage is to ensure that all necessary actions are taken at the conclusion of this procedure, including but not limited to: actions arising following any Receipt of Allegations, Initial Investigation or Full Investigation Stage that may have taken place; and ensuring that the research record is correct.

Poor Research Practice

Poor Research Practise is defined as the conduct of research that departs from Accepted Procedures (for research) but the cause is not considered either intentional or reckless behaviour.

The Procedure

The Procedure refers to this document - The Procedure for Investigating Misconduct in Research.

Professional Body

A professional body is an organisation with statutory powers to regulate and oversee a particular profession, such as doctors or solicitors. Examples relevant to the Procedure include the General Medical Council, the Nursing and Midwifery Council and the Health Professions Council.

Receipt of Allegations Stage

The purpose of the Receipt of Allegations Stage is to assess an allegation of research misconduct that has been received by the Institute, to determine the most appropriate process to investigate or otherwise address it. The primary aim is to determine whether the matter falls under the Institute's Procedure for Investigating Misconduct in Research (in terms of both the matter raised and the individuals identified). Its aim is NOT to investigate the substance of the matter raised.

Regulatory Authority

A regulatory authority is an organisation with statutory powers to regulate and oversee an area of activity, such as health and safety, or medicines to be used on humans. Examples relevant to this Procedure include the MHRA, the Healthcare Commission, the Health and Safety Executive, the Mental Health Act Commission and the Council for Healthcare Regulatory Excellence.

Respondent

The Respondent is the person against whom allegations of research misconduct have been made. They will be a present or past employee/research student of the Institute or an individual visiting the Institute to undertake research.

Sponsor

The Health Research Authority (HRA) UK Framework for Health and Social Care Research 2023 (Paragraph 9.10) defines a sponsor as the following:

- Individual, organisation or partnership that takes on overall responsibility for proportionate, effective arrangements being in place to set up, run and report a research

project. The sponsor is normally expected to be the employer of the chief investigator in the case of non-commercial research or the funder in the case of commercial research (The employer or funder is not automatically the sponsor; they explicitly accept the responsibilities of being the sponsor). Sponsors of clinical trials of investigational medicinal products have particular legal duties.

For full details of the responsibilities of the Sponsor, refer to the latest version of the UK Framework for UK Framework for Health and Social Care Research, available on the HRA website. The HRA definition of sponsor is used here rather than that defined by the MHRA, as it is broader in scope and relevant to research in health and biomedical sciences, rather than specifically to clinical trials.

ANNEX 2 – General Principles of the Procedure

(1) Data Protection

(i) 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 Institute must comply with the Data Protection Legislation and accordingly any investigation or use of this Procedure will be carried out in accordance with it.

(ii) The Institute 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.

(2) Fairness

(i) The investigation of any allegations of research misconduct must be carried out fairly and in accordance with the statutory rights of all parties involved.

Those responsible for carrying out this Procedure should do so with the knowledge of:

- the statutory obligations of the Institute and the rights of employees according to current law
- any additional rights and obligations particular to the Institute and/or its employees and/or its students – for example those bestowed by university statutes and ordinances.

Those responsible for carrying out this Procedure should be mindful of equality, diversity and inclusion, and also ensure that all related obligations are met. Where the allegations concern any equality, diversity or inclusion issues, those carrying out the Procedure should be appropriately trained or have relevant experience in dealing with equality, diversity and inclusion matters.

Matters should be dealt with promptly - without unreasonable delay of meetings, decisions or outcomes.

(ii) Respondents should be dealt with consistently - dealing with similar cases in different ways or by delivering very different outcomes creates a risk of unfair outcomes, claims and reputational damage for the organisation.

Where anyone is formally accused of research misconduct in research, that person must be given full details of the allegation in writing at the appropriate stage.

(iii) When someone is investigated for alleged research misconduct under this Procedure, they must be given a reasonable opportunity to set out their case and respond to the allegations against them.

They must be allowed to:

- ask questions;
- present information (evidence) in their defence;
- adduce evidence of witnesses;
- raise points about any information given by witnesses (regardless of who has called the witness in question).

(iv) The Respondent, Complainant and any witnesses involved in the Initial Investigation Stage or the Full Investigation may:

- if they are staff or students of the Institute, be accompanied by an ICR colleague or certified trade union representative (accompanying an employee) or Student Committee representative (accompanying a student). External representatives such as solicitors and family members will not be permitted to attend, save in very exceptional circumstances when they are required or invited to attend interviews or meetings relating to this Procedure.

  If they do 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.
- if they are external to the Organisation, while they will not have a contractual right to be accompanied when they are required or invited to attend interviews or meetings relating to this Procedure, it is strongly advised that they be offered the right to be accompanied by a person of their choosing. The chosen person is required to treat all information associated with the case as confidential.
- seek advice and assistance from anyone of their choosing. The chosen person is required to treat all information associated with the case as confidential.
- engage with the process through other means if they do not wish to be interviewed, such as providing written answers to questions posed by the Investigator or Panel.

(3) Confidentiality

(i) The Procedure should be conducted as confidentially as is reasonably practicable. This should be emphasised to all involved including Claimant and Respondent representatives and others consulted during the process. The confidential nature of the proceedings should be maintained provided that this does not compromise either the investigation of the misconduct allegations, any requirements of health and safety or any issue related to the safety of research participants in.

The confidential nature of the proceedings is essential to protect the Complainant, the Respondent and others involved in the Procedure. Nothing in this Procedure prevents anyone from making a disclosure under whistleblowing law (the Public Interest Disclosure Act).

It is important that in the conduct of an investigation using this Procedure that the principles of confidentiality and fairness are applied with appropriate balance for both the Respondent and the Complainant.

(ii) The identity of the Complainant or the Respondent should not be made known to any third party unless:

- it has been deemed necessary (by those conducting the investigation) to carry out the investigation and/or to carry out required/necessary actions or disclosures following the outcome of the investigation;
- it is necessary as part of action taken against the Respondent if (at the end of the Procedure and the Institute's disciplinary/ processes) the allegations have been upheld;
- it is necessary as part of action taken against a person who has been found to have made malicious, vexatious and/or frivolous allegations;
- it is the stated policy of the employer/funder/other national body that the identity of individuals proved through appropriate disciplinary and appeals processes to have committed misconduct in research should be made available when informing such employer/funder/other national body;
- any party to the Procedure is seeking legal advice or other advice from another third party who owes them a duty of confidentiality;
- it is already in the public domain (for example, on a website or social media);
- it is required by law or by the Organisation's regulator.
- the Institute and/or its staff has contractual/legal obligations to inform third parties, such as funding bodies or collaborating organisation(s), of allegations of misconduct in research. 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.

(iii) While the allegations are under investigation using this Procedure (and/or the Institute's disciplinary process), the Complainant, the Respondent, witnesses or other persons involved in this Procedure should not make any statements about the allegations to any third parties, unless formally sanctioned by the Institute or otherwise required to by law.

(iv) Breaching confidentiality may lead to disciplinary action, unless covered by the Public Interest Disclosure Act and/or the Institute's own grievance or whistle-blowing procedures.

(v) In the event of any conflict between the principle of confidentiality and any of the other principles of this Procedure, those conducting the Procedure should consider the principle of Balance (see Annex 2 (6)), and use their judgement to choose the appropriate solution.

(4) Integrity

(i) An investigation into allegations of research misconduct using the processes of Initial Investigation or Full Investigation of the Procedure should be conducted expediently without compromise to the fairness and thoroughness of the process.

(ii) Those who give evidence to the investigation should do so honestly and objectively in accordance with the Principles of the Procedure and should be provided with relevant Sections of the Procedure before giving evidence.

(iii) All parties involved must inform the Name Person immediately of any personal, professional or financial interests that they have which might constitute a conflict of interest as regards any aspects of the allegations, the investigation, the area(s) of research in question, or any of the persons concerned. Where the Named Person has any personal, professional or financial interest which might constitute a conflict, they should declare any such conflicts and refer the investigation to their nominated alternate, who should decide if they should be excluded from involvement in the investigation, recording the reasons for the decision.
Note: The declaration of an interest by an individual does not automatically exclude them from participating in the investigation. The Named Person should decide if an interest declared by the individual warrants exclusion from involvement in the investigation and record the reasons for the decision.

(iv) 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 Stage and any Full Investigation Stage or between the Full Investigation Stage and any disciplinary process or any other proceedings or actions which might follow the conclusion of the Procedure. Failure to transfer information at the appropriate time could lead to: (a) the process being unfair to the Respondent and/or the Complainant; (b) an appeal being made on the grounds of a failure to observe the Procedure or to the collapse of the investigation; and (c) be considered as improper dealing with an allegation, and so another instance of research misconduct.

(v) Confidential records should be maintained on all aspects and during all stages, of the Procedure. At the conclusion of the proceedings, all records should be retained by the Institute, or as long as the Institute's policy for maintaining such records requires. It is recommended that the file be given a six year review date.

(5) Prevention of Detriment

(i) In using this Procedure, and in any action taken as a result of using the Procedure, care must be taken to protect:

- individuals against mistaken, frivolous, vexatious and/or malicious allegations of research misconduct
- the position and reputation of those suspected of, or alleged to have engaged in, misconduct, when the allegations or suspicions are not confirmed; and

- 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 misconduct in research may have occurred.

(ii) The Receipt of Allegations and Initial Investigation Stages of the Procedure are intended to determine whether allegations are mistaken, frivolous, vexatious and/or malicious. Only allegations that are judged to be sufficiently serious and of sufficient substance will proceed to a Full Investigation.

(iii) The Institute must take all reasonable steps to ensure that the Respondent (or any other party) does not suffer because of unconfirmed or unproven allegations. Involvement of the Respondent in the Procedure should not prevent the Respondent from being considered:

- for promotion
- or the completion of probation
- or other steps related to their professional development

(iv) The Named Person and members of any investigation panels should take steps to make it clear to the Respondent, Complainant and any other involved parties that any actions that might be taken in response to the notification of allegations or 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 Institute and these actions are necessary to ensure that the allegations of misconduct in research can be properly investigated.

(6) Balance

Those responsible for carrying out this Procedure must be aware that there may be occasions when a balance has to be struck in the application of the General Principles; for example, it may prove to be impracticable to undertake a detailed and fair Initial Investigation of the allegations without releasing the Complainant's identity to the Respondent. In the event of any conflicts between the General principles, the Named Person should be responsible for resolving such conflicts and use their judgement to decide on the appropriate course of action. The Named Person should keep a written record of all decisions taken throughout all the steps of the Procedure.

Annex 3: Resolution using informal measures

One potential outcome of the use of this Procedure is a conclusion that the allegation(s) under investigation has some substance but, due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training or another non-disciplinary approach. This annex provides general guidance on the implementation of this type of outcome. They may be used after the Receipt of Allegations, the Initial Investigation or the Full Investigation Stage.
The ICR Good Practice Guidelines says that disputes over authorship rights should be resolved locally but where this is not possible anyone can refer a dispute to the Chair of the Research Strategy Board who will determine who on the Research Strategy Board should arbitrate. The decision of the arbitrator may be appealed to the Executive Board.

(1) Resolution through such measures - called 'informal' as opposed to resolution through a formal process of the Organisation, such as a disciplinary process or academic regulations - can be challenging. There are many types of informal measures and they can be applied to many potential situations. Those operating this Procedure will need to determine what informal measures follow the outcome of a particular investigation.
a. The Named Person may need to seek advice from colleagues to determine the best course of action and can also contact UKRIO.
b. Decisions made concerning the implementation of informal measures, and the reasoning behind those decisions, should be recorded in a brief format, in case they need to be referred to at a later date.

(2) Informal measures can take many forms and some examples are given below. This list should not be taken as exhaustive and Organisations should devise and implement other informal measures as needed for the situation in question.
a. Mediation between involved parties.
b. Education, training and other development activities.
c. Enhanced supervision/ oversight of research activities.
d. Restriction of research activities.
e. Mentoring.
f. Awareness-raising of relevant issues of good research practice.
g. Pastoral care and support.
h. Revision of relevant research practices, systems and/or policies relating to the allegation(s) in question. Such revision may be limited to a particular team or have a wider scope, covering a department or the entire organisation, and should be supported by appropriate training and awareness-raising.
i. Where possible, requesting that an Erratum or Corrigendum be submitted to a journal to correct an inadvertent mistake in a published article.

(3) Implementing resolution using informal means - Six key features of an effective system of resolution using informal measures are set out in the following paragraphs:
a. The nature and scope of the informal measures should be clearly defined.
b. A designated person should be responsible for carrying out the agreed measures.
c. Their duration should be clearly set out.
d. The designated person, working with others, should ensure that the informal measures are delivered.
e. Appropriate documentation should record the delivery and outcomes of the informal measures, and any next steps.
f. Once completed, there should be discussion by the Named Person and others about any learning points for the Organisation.

(4) The Institute should determine who ('a designated person') will carry out and/or oversee the informal resolution, what resources will be made available to support them, and to whom they will give updates on the progress of the informal resolution.

(5) The person designated to carry out the informal measures can also request implementation of formal measures instead, and this should be considered by the Named Person as above.

(6) The nature and scope of the informal measures should be defined in writing. This should be communicated by the Named Person to the persons involved, in writing and including those who will be responsible for carrying out the informal measures.

(7) The duration of informal measures should be set out at the onset, including a proposed start date, and communicated to all involved parties The designated person should make the Named Person aware if there is a significant delay in starting or completing the informal measures.

(8) Notes should be kept by the designated person on: the nature and scope of the informal measures; who has responsibility for their delivery; the proposed and actual duration of the measures; and their delivery and associated outcome(s).

When informal measures are concluded, involved parties (e.g., Complainant and/or Respondent; Named Person; line managers/ supervisors; Human Resources or Student Services) should be informed in writing, summarising the delivery and outcome(s) of the informal measures and any next steps.

(9) Records should be retained in line with the provisions given earlier in this Procedure.

ANNEX 4 – Additional information for the Receipt of Allegations Stage

(1) The Named Person should determine whether the allegation(s) and/or the research project(s) in question concern situations that require immediate action to prevent further risk or harm to staff, research participants or other persons, suffering to animals or negative environmental consequences (where this might contravene the law or fall below good practice). If so, the Named Person should take immediate appropriate action to ensure that any such potential or actual danger/illegal activity/risk is prevented/eliminated. It may be necessary to notify legal or regulatory authorities or relevant professional bodies, and/or relevant partner organisations, publishers and funders. As a consequence of such notification, the Institute may be required to comply with an investigation led by a legal or regulatory body, which will ordinarily take precedence over this Procedure. The Procedure may continue in parallel but may have to be suspended, to be concluded later, or may have to be declared void by the Named Person. The Respondent may also need to be informed when carrying out any such actions whether because they will be involved in some or all the actions and/or because they will become aware of them.

(2) The Named Person should then ensure that all legal or contractual obligations are carried out by the Institute, seeking advice from the relevant teams within the Institute as necessary. It may be necessary to inform the Respondent when carrying out any such legal or contractual obligations. Where allegations include behaviour subject to defined sanctions in the Institute's Disciplinary Policy (staff) or Code of Practice for Plagiarism and Examination Offences (students), then the Named Person should take steps to contact the relevant team within the Institute to initiate the disciplinary process. As above, the Procedure may continue in parallel with the disciplinary process but may have to be suspended, to be concluded later, or be declared void by the Named Person.

ANNEX 5 – Additional information for the Initial Investigation Stage

(1) All persons appointed to carry out the Initial Investigation should confirm to the Named Person in writing that:

a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure;

b. They will abide by the Procedure;

c. They will respect the confidentiality of the proceedings; and

d. They will adhere to the Principles and Standards of the Procedure.

The Respondent and Complainant may raise with the Named Person concerns that they may have about the person chosen to carry out the Initial Investigation but neither has a right of veto over those nominated. The Named Person should consider any concerns raised and whether new person should be selected to carry out the Initial Investigation Stage.

In the event of the Investigator becoming unable to participate in the Initial Investigation Stage once it is underway, the Named Person should determine whether a new person should be selected to take on the role of the Investigator and continue the investigation from its current point or if the Initial Investigation Stage should be restarted.

(2) Where the Complainant has raised an allegation relating to a large body of work, or work carried out over a significant period, the Investigator would need to carry out a sufficient investigation to reach a robust conclusion on the allegation(s). This can take time and resources, and advice should be sought from the Named Person on how to best approach this.

ANNEX 6 – Additional information for the Full Investigation Stage

(1) The Named Person should, as soon as is practicable, appoint a Full Investigation Panel ("the Panel") to undertake a Full Investigation into the allegation(s).

a. The Panel will normally consist of three persons. Depending on the circumstances of the investigation 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) under investigation.

b. At least one member of the Panel shall be from outside the Organisation, as required by The Concordat to Support Research Integrity. At the discretion of the Named Person, the Panel may include multiple external members. This may be advantageous when allegations involve multiple disciplines of research and/or are especially complex and can help involved parties that the investigation process will be transparent, rigorous and fair.

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 Institute, bearing in mind the conflict of interest requirements below 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.

(2) The Named Person will select one of the members of the Panel to act as its Chair. In the event of the Chair becoming unable to participate in the Full Investigation Stage once it is underway, the Named Person will select a new Chair from the members of the Panel and then consider the overall membership of the Panel. At the discretion of the Named Person, the Chair may be selected from the Panel's external members; this can help reassure involved parties that the investigation process will be transparent, thorough and fair.

(3) All persons appointed to carry out the Full Investigation, should confirm to the Named Person that:

a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure;

b. They will abide by the Procedure;

c. They will respect the confidentiality of the proceedings and data protection requirements; and

d. They will adhere to the Principles and Standards of the Procedure.

(4) The Respondent and Complainant may raise with the Named Person concerns that they may have about those chosen to carry out the Full Investigation but neither has a right

of veto over those nominated. The Named Person should consider any concerns raised and whether new persons should be selected to carry out the Full Investigation Stage.

(5) The Chair should keep a full record of the evidence received and of the proceedings and should be supported in this by the administrative and other support identified by the Named Person to assist the Panel. The Named Person or suitable administrative support should provide the Chair and each member of the Panel with:

a. a copy of this Procedure;
b. details of the allegation(s) which will be considered under the Full Investigation stage;
c. a copy of the Named Person's note of the Receipt of Allegations Stage;
d. a copy of the report of the Initial Investigation Stage;
e. all records from the Initial Investigation Stage;
f. names and contact details of the Complainant(s) and the Respondent(s);
g. a summary of correspondence with the Complainant(s) and the Respondent(s) to date; and
h. a summary of any evidence secured by the Named Person during the Receipt of Allegations stage or by the Investigator during the Initial Investigation stage.

(6) The Chair of the Panel will be responsible for the conduct of the proceedings during the Full Investigation. The Panel does not have any disciplinary powers. The Panel should 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 information it needs and whom it wishes to interview/ take statements from in addition to the Complainant and the Respondent, who should be interviewed. When making any decisions about the conduct or conclusion of the Full Investigation, the Panel will attempt to reach a consensus by discussion.

If the Complainant 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. Individuals should be aware that not participating by interview can make it difficult to ensure that the full context of their evidence is understood.

(7) The Panel must separately interview the Complainant and the Respondent. Where there are multiple Complainants and/or Respondents, each must be interviewed separately. Note that Complainants and Respondents are never interviewed together unless the Procedure has adopted a formal hearing approach.

(8) Where the Complainant has raised an allegation relating to a large body of work, or work carried out over a significant period, the Panel will need to carry out a sufficient investigation to reach a robust conclusion on the allegation(s). This can take time and resources, and advice should be sought from the Named Person and their advisers/support on how to best approach this.

ANNEX 7 – Process for the Outcome and Reporting Stage

(1) The Named Person working with others as necessary, should take any further action(s) they deem necessary to address any misconduct the investigation may have found, correct the record of research, and/or address other matters uncovered during the course of the investigation. Such recommendations might include but are not limited to:

a. whether following the conclusion of the operation of this Procedure, the matter should be referred to the Institute's Disciplinary Policy; and/or

b. whether following the conclusion of the operation of this Procedure, the matter referred to another relevant Organisational process/policy, such as the examination regulations or the Institute's Anti-Fraud Policy; and/or

c. what individuals and/or divisions within the Organisation should be notified of the findings of the investigation, such as line managers, Human Resources and/or Registry, a central committee with responsibility for research quality, or equivalents; and/or

d. what external organisations should be informed of the findings of the investigation, with appropriate confidentiality, such as statutory regulators, relevant funding bodies, partner organisations and professional bodies, the latter being particularly relevant if concerns relate to Fitness to Practise; and/or

e. informing research participants and other involved parties; and/or

f. whether any action will be required to correct the record of research, including but not limited to informing the editors of any journals that have published articles concerning research linked to an upheld allegation of misconduct in research and/or by a person against whom an allegation of misconduct in research has been upheld; and/or

g. whether procedural or organisational matters should be addressed by the Organisation or other relevant bodies through a review of the management of research and other measures as appropriate; and/or

h. other matters that should be investigated, including allegations of misconduct in research 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; and/or

i. communication of 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, reports to relevant committees/ divisions within the Institute, and dissemination of anonymised learning points within the Institute as appropriate.

When considering the above, the Named Person should take into account any recommendations on such actions made by the Full Investigation Panel and any need to involve other elements of the Organisation and/or external bodies in carrying out agreed actions. The Named Person should keep a record of these actions.

Possible outcomes and actions required:

(2) Actions required following the conclusion from the Initial Investigation or the Full Investigation that the allegation(s) is unfounded because it is mistaken or is frivolous or is otherwise without substance:

a. The Named Person should take appropriate steps to preserve the good reputation of the Respondent. If the case has received any adverse publicity the respondent may be offered the opportunity to have an official statement released by the Institute.

b. Those who have raised concerns/ made allegations in good faith will not be penalised and the Named Person should take appropriate steps to preserve the good reputation of the Complainant.

c. Appropriate communications to all parties involved on the outcome and the reasons for it will be important to ensure a good understanding of the process and outcome.

d. The Named Person should keep a record of these actions.

(3) Actions required following the conclusion from the Initial Investigation or the Full Investigation that the allegation(s) is unfounded because it is vexatious and/or malicious:

a. The Named Person may consider 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 Institute.

b. The Named Person should take appropriate steps to preserve the good reputation of the respondent. If the case has received any adverse publicity the Respondent may be offered the opportunity to have an official statement released by the Institute.

(4) Actions required following the conclusion from the Receipt of Allegations Stage, the Initial Investigation or the Full Investigation that the allegation(s) warrants referral directly to another formal process of the Institute:

Where this is necessary, the Named Person will inform the Complainant in writing of:

a. the reasons why the allegation cannot be investigated using this Procedure;

b. which process for dealing with complaints is appropriate for handling the allegation; and

c. that the allegation will be referred to the relevant team/ process.

The Named Person should then refer the matter to the relevant department/ process.

(5) Actions required following the conclusion from the Receipt of Allegations Stage that the allegation(s) warrants referral directly to an external organisation:

- When the Named Person has determined that the allegation does not relate to researchers or research under the auspices of the Institute, the Named Person should inform the Complainant, in writing, of:

a. The reasons why the Institute is not an appropriate body to investigate the allegation;

b. Which external organisation(s) might be an appropriate body to investigate the allegation;

c. Relevant information relating to contacting the external organisation(s).

- When the Named Person has determined that, while the allegation does relate to researchers or research under the auspices of the Institute, the allegation warrants referral directly to an external organisation, the Named Person should:

a. Contact the relevant external organisation(s), in writing, to inform them of the allegation and ask them to investigate or otherwise address it. The Named Person should also explain why the Institute has concluded that the allegation warrants referral directly to the external organisation in question.

b. Inform the Complainant, in writing, that the allegation is being referred directly to the external organisation(s) in question and provide the Complainant with relevant information so that they can contact the external organisation(s) in question if they so wish.

(6) Actions required following the conclusion that the allegation(s) has some substance but due to its relatively minor nature or because it relates to poor practice rather than to misconduct, will be addressed through education and training or other non-disciplinary approaches: The Named Person should ensure that the relevant education and training or other informal measures are provided either directly or by referring the matter to the relevant department. The Named Person should keep a record of these actions.

Further advice on addressing matters using informal measures, rather than a punitive/ disciplinary approach, is provided in ***Annex 3: Resolution using informal measures.***

(7) Actions required following the conclusion that the allegation(s) is upheld in full or in part:

The Named Person in conjunction with relevant colleagues should decide whether the matter should be referred to the Institute's Disciplinary Procedure or for other formal actions.

a. Should the allegations proceed to the Institute's Disciplinary Procedure, the report of the Full Investigation Panel should form the basis of the evidence that the disciplinary panel receives.

b. Relevant information collected and brought to light through the Procedure should be transferred to the disciplinary process.

The Named Person should take such steps as are appropriate, given the seriousness of the allegations, to support the reputation of the Complainant and, if the allegation has been upheld in part rather than in full, the Respondent as appropriate, and any relevant research project(s).

(8) Following the conclusion of the Procedure, the Named Person may need to recommend further measures in addition to those that may be taken by way of the relevant Institute disciplinary process. Examples of potential actions that an Organisation may consider include, but are not limited to, the following:

a. Recommendations for retraction/correction of published research, via notification of findings to editors/ publishers;
b. withdrawal/repayment of funding;
c. notifying research participants and other involved parties;
d. notification of findings to relevant employers, statutory, regulatory, professional, grant-awarding bodies or other public bodies with a relevant interest;
e. notifying other employing organisations;
f. notifying other organisations involved in the research;
g. adding a note of the outcome of the investigation to a researcher's file for any future requests for references;
h. review internal management and/or training and/or supervisory procedures for research; and/or
i. revocation of any degrees awarded based on research that is the subject of a research misconduct finding.

(9) Where an investigation has established research misconduct relating to a significant body of work over some time, the Organisation will wish to consider whether it needs to review other work carried out by the individual or individuals concerned, including work not specifically flagged up in the course of the investigation.

ANNEX 8: Process for the Appeals Stage

(1) Composition of the Appeals Panel:

a. One member of the Appeals Panel shall be from outside the Organisation. At the discretion of the Appeals Named Person, the Appeals Panel may include more than one external member. This may be advantageous where the appeal involves multiple disciplines and/or is especially complex, and can help reassure involved parties that the process will be transparent, rigorous and fair.

b. One member of the Appeals Panel shall be an academic specialist in the general area within which the misconduct is alleged to have taken place (where allegations concern highly specialised areas of research they should instead have specialised knowledge of the field). Such a specialist can be drawn from within the Organisation, bearing in mind the conflict of interest requirements or from the Appeals Panel's external member(s). When allegations involve multiple disciplines of research, it may be necessary to increase the membership of the Appeals Panel so it contains sufficient expertise.

c. For matters 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.

d. Once convened, the membership of the Appeals Panel should not normally be changed. If the membership falls below its initial number, the Alternative Named Person will determine whether to recruit additional members and continue the investigation from its current point or restart the investigation.

(2) The Alternative Named Person will select one of the members of the Appeals Panel to act as its Chair. In the event of the Chair becoming unable to participate in the Appeals Stage once it is underway, the Alternative Named Person will select a new Chair from the members of the Appeals Panel and then consider the overall membership of the Appeals Panel. At the discretion of the Alternative Named Person, the Chair may be selected from the Appeal Panel's external members; this can help reassure involved parties that the investigation process will be transparent, thorough and fair.

(3) All persons appointed to carry out the Appeals stage, and all persons allowed to observe it, will confirm to the Alternative Named Person that:

a. Their participation involves no conflict of interest, seeking advice from the Named Person if unsure;

b. They will abide by the Procedure as it affects the work of the Appeals stage;

c. They will respect the confidentiality of the proceedings; and

d. They will adhere to the Principles and Standards of the Procedure.

(4) Both the Respondent and Complainant may raise with the Alternative Named Person concerns that they may have about those chosen to carry out the Appeals stage but neither has a right of veto over those nominated. The Alternative Named Person will consider any concerns raised and whether new persons should be selected to carry out the Appeals Stage.

(5) The Chair is responsible for keeping a full record of the work of the Appeals Panel and should be supported in this by the administrative and other support identified by the Named Person to assist the Panel.

(6) When making any decisions about the conduct or conclusion of the Appeals Stage, the Appeals Panel will do so by reaching a consensus.

(7) The Appeals Panel will then review the conduct of the investigation and any evidence submitted in support of the appeals(s) in question, rather than carry out a re-investigation of the allegation(s) in question.

ANNEX 9 - Contact Details

Any allegations under the Institute's Procedure for Investigating Misconduct in Research should be made in writing and addressed to the Named Person and the Nominated Alternate c/o of the Institute's solicitors. Currently these are:-

Named Person	Nominated Alternate
Professor Clare Isacke	Professor Robert Huddart
Dean of Academic and Research Affairs	Clinical Consultant
The Institute of Cancer Research	The Institute of Cancer Research
c/o Veale Wasbrough Vizards LLP	c/o Veale Wasbrough Vizards LLP
24 King William Street	24 King William Street
London	London
EC4R 9AT	EC4R 9AT