Policy on the Governance of Good Research Practice

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Guide to this policy

For **definitions** of what is meant by research integrity and where practice and governance can fall short, see **Section 2** and **Annex 1.**

If you are **directly involved in conducting research** (e.g. researchers and technicians), **paragraphs 3.1-3.6** lay out the responsibilities for individuals involved in UKRI research, including involvement in peer review and expectations for those in research leadership positions.

If you are **in a leadership position in a research organisation**, **paragraphs 3.7 – 3.23** set out our expectations as they apply to organisations which receive UKRI funding.

If you are **involved in a research misconduct allegation or investigation**, **paragraphs 3.18-3.33** outline how organisations should respond and how UKRI will respond to allegations. **Section 5** outlines the reporting requirements on organisations we fund.

Policy Statement

UK Research and Innovation (UKRI) is committed to maintaining high standards of research practice within the research communities we support.

A commitment to good research lies at the heart of an effective research system. High standards of research integrity underpin the quality of the research outcomes generated, as well as decisions made in the light of those outcomes and ultimately, public trust in research.

This policy is one way in which we support individuals and organisations to take responsibility for good research practice and contribute towards a positive research and innovation environment for high integrity outcomes. Although significantly revised in format, this policy is rooted in the principles, commitments and responsibilities of the now retired RCUK Policy and Guidelines on the Governance of Good Research Conduct.

This policy applies to the following seven UKRI Councils:

- Arts and Humanities Research Council (AHRC)
- Biotechnology and Biological Sciences Research Council (BBSRC)
- Economic and Social Research Council (ESRC)
- Engineering and Physical Sciences Research Council (EPSRC)
- Medical Research Council (MRC)
- Natural Environment Research Council (NERC)
- Science and Technology Facilities Council (STFC)

Innovate UK and Research England support the guidance provided in this document. Most Research England funding is deployed by higher education providers at their discretion and consequently research projects funded from higher education providers' distribution of Research England funding (i.e. quality-related funding) cannot be attributed directly to Research England funding. It is already a condition of Research England funding that recipients will have in place procedures for governing good research practice, and for reporting and investigating unacceptable research conduct, that meet the requirements of the Concordat to Support Research Integrity[1]. Research England also has its own Policy and guidelines on the reporting of formal investigations of research misconduct which is consistent with this policy. Innovate UK fund a wide range of organisations from charities to universities but are focused on helping businesses develop new products, services and processes through innovation. Innovate UK has assurance processes including monitoring and impact managers to ensure responsible use of their funding. As such, Research England and Innovate UK funding are out of scope of this policy.

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[1] The Concordat to Support Research Integrity: https://ukcori.org/research-integrity-concordat/

Management Statement

The UKRI People, Finance and Operations Committee (reporting to the Executive Committee) has responsibility for agreeing this policy.

Version Number	Status	Revision Date	Summary of Changes
Version 1.0	Approved	January 2022	Revised UKRI policy, based on previous RCUK Policy and Guidelines on the Governance of Good Research Conduct.
Version 1.1	Approved	April 2024	• Alignment of section headers and ordering to UKRI policy template • Improved clarity on UKRI funding and direct/indirect costs on grants • Added signposting to the UKRI position statement on funding ethical research
Version 1.2	Approved	April 2025	• Removed or amended references to outdated resources

1. Purpose

Aim of the policy

1.1 By meeting the expectations set out in this policy, we anticipate that:

1.1.1 Organisations will:

- have policies and activities in place to support a positive environment within which all individuals involved in the research process can discuss, adopt and develop good research practice

- be better equipped to recognise and take steps to avoid poor research practice

- be better equipped to recognise and take steps to avoid intentional research misconduct

- have fair, transparent and robust policies and procedures in place to enable them to respond to and address incidents of research misconduct when they do occur

1.1.2 Individuals will:

- understand UKRI's expectations concerning good research practice and conduct

- be better equipped to contribute to developing an environment which supports good research practice

1.2 While this policy specifically concerns UKRI-related activity we expect that the organisations we fund will take a consistent approach to supporting good research practice, and preventing and handling research misconduct, irrespective of a link to UKRI.

Scope of the policy

1.3 This policy applies to all:

1.3.1 UKRI-funded[1] activities, and applications for funding, irrespective of whether they take place in the UK or overseas;

1.3.2 organisations that apply for and/or receive funding from UKRI irrespective of whether they are based in the UK or overseas, or whether they apply for and/or receive funding from UKRI through a partner organisation;

1.3.3 organisations that receive UKRI funding in-kind, for example through the use of UKRI facilities or collaborations with UKRI researchers;

1.3.4 individuals engaged in research or innovation activities (including making funding applications) at such organisations, whether directly employed by them or not;

1.3.5 individuals employed by UKRI including those directly involved in research in centres, institutes, units and facilities; supported by local policies as appropriate;

1.3.6 individuals undertaking duties (such as peer review or panel membership) on behalf of UKRI or providing strategic advice to UKRI (such as Council members and other strategic advice streams);

1.3.7 funding activities managed by UKRI, including partnerships and collaborations with other funding partners, it also sets out our expectations for joint programmes co-funded with partners;

Related policy areas

1.4 This policy complements the UKRI policies and programmes of work on ethical guidance; open research; bullying and harassment; equality, diversity and inclusion; preventing harm (safeguarding); trusted research and innovation; and responsible research and innovation.

1.5 Workplace bullying and harassment of staff, students or any associated personnel by other staff, students or associated personnel is covered by UKRI Preventing Harm (Safeguarding) in Research and Innovation Policy In that policy, we set out our expectations that UKRI-funded organisations will have in place an organisation-wide approach with effective preventative and response strategies, together with clear communication to give confidence that issues will be dealt with effectively. These expectations are aligned with the expectations set out in this policy.

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[1] Note that all references to UKRI refer to the seven research councils as detailed in the Policy Statement on page 1.

1.6   If there is reason to believe that any staff, student, associated personnel or research and innovation participant involved directly in a UKRI-funded research and innovation activity have been exploited, abused or harmed as a result of personal misconduct (rather than unacceptable research conduct), we expect all organisations which are involved and receiving UKRI funding to follow the procedures set out in the UKRI Preventing Harm (Safeguarding) in Research and Innovation Policy. Individuals employed by UKRI should refer to the UKRI [policies for staff][2] on Safeguarding, Whistleblowing, and Grievance, Harassment and Bullying.

2.   Definitions

2.1   UKRI, as a signatory to [the Concordat to Support Research Integrity](), uses the description of research integrity as outlined within that document with core principles of honesty, rigour, transparency and open communication, care and respect, and accountability.

2.2   Research can fall short in terms of its integrity for a number of reasons, many of which do not reflect the intent of researchers. It is helpful to recognise different categories of issue:

- **Honest errors** such as miscalculation, mismeasurement or mislabelling.

- **Poor research practices** such as poor research design, weak procedures or analysis, inadequate documentation or record-keeping, and insufficient attention to quality assurance; and **questionable research practices** such as selective publication of results or hypothesising after the results are known; both of which may happen inadvertently through lack of training or knowledge of the consequences for the integrity of the research.

- Intentional **research misconduct** (as defined in the Concordat, see **Annex 1** for full definitions): fabrication; falsification; plagiarism; failure to meet legal, ethical and professional obligations; misrepresentation; improper dealing with allegations of misconduct.

3.   Responsibilities
For individuals involved in UKRI-related activities

3.1   All those involved in research have a responsibility to support the highest levels of research integrity. All staff, students and any associated personnel involved in UKRI-related research and innovation activities, applications for funding and funded activities have a role to play in setting and maintaining standards and a positive culture, in responding adequately when concerns are raised to them, and reporting concerns or incidents where appropriate.

3.2   We expect staff, students and any associated personnel involved in a UKRI-related research and innovation activity to:

- Abide by the principles set out in the Concordat to Support Research Integrity, and to work with due respect for one another within a supportive environment.

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[2] Staff employed in MRC institutes should refer to equivalent MRC guidelines and policies.

- Observe the highest standards of integrity, honesty and professionalism and embed good practice in every aspect of their work. This includes study design and record-keeping, the interpretation and presentation of research results, contributions to the peer review process, the training of visiting researchers and new staff and students as well as the undertaking of the research itself. That is, individual actions must comply with the principles of honesty, rigour, transparency and open communication, care and respect, and accountability for a research environment in which individuals and organisations are empowered and enabled to own the research process.

- Adhere to the highest level of research ethics, in line with requirements set out by national and international regulatory bodies and legislation, professional and regulatory research guidance and research ethics frameworks issued in appropriate areas. This includes considering ethics issues throughout the lifecycle of a research project from planning to dissemination and archiving and/or future use, and promoting a culture of ethical reflection, debate and mutual learning.

- Be aware of relevant policies and procedures within their organisation and know how to respond adequately and (where appropriate) report concerns about poor research practice or research misconduct.

- Raise any concerns that they have regarding research integrity, or those that are reported to them, through the appropriate channels in their organisation.

3.3 We expect UKRI grant holders to take a leadership role in developing and role-modelling a positive and learning culture within their research and innovation teams: to prioritise learning and development; to foster an environment in which colleagues can freely discuss good research practice and ask questions, raise concerns or admit errors; and to ensure that poor or questionable research practices are addressed, corrected and learned from. We expect this leadership role to include having conversations with staff at all levels of seniority, and supporting others in their teams to do likewise, where this is necessary to improve the culture within which the research and innovation is taking place.

3.4 Further resources to support high integrity research are available on the UKRI Good Research Resource Hub, including guidance on ethics, open research, public engagement, co-production, and equality, diversity and inclusion.

3.5 When seeking UKRI funding, applicants must ensure that the information submitted is in accordance with good practice as outlined in this document, and that it is clear and accurate; all individuals associated with an application[3] share this responsibility. In UKRI grant review processes, applicants must not attempt to identify or approach peer reviewers, panel members or UKRI staff directly or indirectly to interfere with the peer review process.

3.6 Individuals who undertake or administer peer review for UKRI are expected to help safeguard the highest standards of research integrity and to raise any concerns with UKRI that they identify during the review process. They are required to treat the material they are reviewing in confidence: it may be disclosed to a third party only

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[3] Including applicants, co-applicants, heads of department, research managers, finance officers etc.

with the explicit permission of UKRI and for clear, documented reasons. Peer reviewers must declare any interests, including professional, personal or commercial conflicts, must not download, store or share grant applications beyond the purposes of peer review as limited by UKRI or otherwise take advantage of any information received as a result of their peer reviewing role. Further information can be found in the UKRI Principles of Assessment and Decision Making and related guidance from each Council[4].

For organisations that apply to UKRI and/or that we fund

Organisational policies, processes and support for the research environment

3.7   Whilst the onus lies with the individual to ensure (and be able to demonstrate) that they meet and promote the highest standards of research integrity, it is the responsibility of the employing organisation to ensure that systems are in place to support and reinforce this.

3.8   Organisations which employ or train researchers are expected to have in place systems to promote best practice and a positive research culture that supports open discussion around research integrity issues. We recognise the diversity of the organisations that we fund, and that therefore the systems that are put in place will look different depending on scale and nature of research activity.

3.9   To be effective such a system should incorporate:

- Clear policies, practices and procedures to support researchers and foster a high-integrity research culture;

- Robust management systems to ensure that policies relating to research, research integrity and researcher behaviour are implemented;

- Clear arrangements for the management of research integrity and ethical issues, and for the reporting by individuals of any concerns about poor practice in these areas; and

- A formal programme of training, and suitable learning, training and mentoring opportunities to support the development of staff skills throughout their careers in the following areas[5]:

  - research ethics

  - research integrity

3.10   Policies should clearly explain how concerns relating to research integrity should be raised, and both policies and practice should foster a safe environment in which no stigma should attach to individuals who raise concerns or otherwise seek assistance. Organisations must have in place procedures for whistle-blowers, in line with The Public Interest Disclosure Act (1988) and associated or superseding legislation: individuals making an allegation in good faith must be protected and supported. Similarly, all engaged in the research process must be protected from malicious allegations.

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[4] https://www.ukri.org/apply-for-funding/how-we-make-decisions/
[5] Guidance and resources on training: UKRI Good Research Resource Hub: Research integrity

3.11 Documentation setting out the organisation's policy and procedures on research integrity must be:

- Drawn to the attention of all staff on appointment, and all new research students and visiting research staff.

- Easily available at all times in guidance manuals and on websites, ideally publicly.

3.12 In line with the requirements of the Concordat to Support Research Integrity, and to support UKRI's assurance processes, we expect organisations to:

- identify a named senior member of staff to oversee research integrity (and where appropriate in departments or subsets of the organisation), and a named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity; and to ensure that contact details are publicly available[6].

- produce a short annual statement on research integrity[7].

Research ethics

3.13 UKRI does not grant ethical clearance for research projects as part of its grant approval processes, and responsibility for detailed ethical scrutiny and approval lies with the relevant organisation undertaking the research. The UKRI position statement on funding ethical research[8] outlines a set of high-level ethical principles providing an overview of UKRI's approach.

3.14 Ethical approval procedures are pertinent to many existing and emerging areas of research. All organisations employing researchers should have processes to review and determine which research areas require ethical approval; and where relevant:

- Clear and full policies on ethical standards, referencing relevant national and international regulatory and professional guidelines as appropriate[9]

- Clear procedures for obtaining ethical approval for research, which are communicated effectively to all relevant staff

- Appropriate training and support for those involved in ethics approval, particularly in relation to emerging areas or disciplines without experience of ethical approval procedures

- Appropriate procedures for considering and advising on the wider ethical concerns connected to the research or its potential outcomes

- Appropriate procedures to obtain, record and manage clearly informed consent from research participants

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[6] See Concordat Commitment 3
[7] See Concordat Commitment 5
[8] UKRI position statement on funding ethical research, https://www.ukri.org/what-we-do/good-research-resource-hub/ethical-research-and-innovation/ukri-position-statement-on-funding-ethical-research/
[9] See Good Research Resource Hub for more information: https://www.ukri.org/about-us/policies-standards-and-data/good-research-resource-hub/

3.15 Where ethical approval is delegated to departments or subsets of the organisation, procedures should be in place to ensure the quality and equity of ethical approach across the whole of the research organisation, and there should be clear supervisory arrangements for delegated procedures.

International, collaboration, and due diligence

3.16 Research is increasingly collaborative, involving individuals from different organisations within and beyond the UK. In establishing research and innovation collaborations researchers should ensure that research partners and their employing organisations are able to meet the required expectations of research practice. Further information on due diligence and equitable partnerships is available on the UKRI website[10].

3.17 The expectations outlined in this policy will inform the development of international and collaborative funding partnerships, managed by UKRI and/or by our partners. We will work with our partners to address these issues in relevant funding terms and conditions and related guidance.

How organisations should respond to unacceptable research conduct

3.18 We expect all organisations receiving UKRI funding to:

- investigate any allegations of research misconduct against any member of staff or student in an impartial, fair and timely manner. Such investigations must:

  – protect the rights of all individuals involved by handling information confidentially

  – listen and take concerns seriously, and provide appropriate support (or communication if the individual is outside the organisation) for both the individual(s) raising the issue, and the respondent(s) against whom the allegation is made

  – result in appropriate action (see paragraph 3.22)

- have processes and procedures in place to review and manage the risks associated with the continued involvement of an individual in a UKRI grant application or UKRI-related activity while an allegation of research misconduct by that individual is investigated.

3.19 Research conduct investigation procedures should be developed and reviewed in light of, and be consistent with, the Concordat to Support Research Integrity, including the use of independent external members on the panel at formal investigation stage. UKRI has set out the minimum requirements in separate guidance.

3.20 UKRI may wish to seek observer status on formal investigations by exception if circumstances warrant it – for example if there has been a pattern of issues at the investigating organisation or if there are implications for the reputation of UKRI.

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[10] https://www.ukri.org/about-us/policies-standards-and-data/good-research-resource-hub/equitable-partnerships/

3.21　If procedures are terminated at any stage (for example by the resignation of an individual) without the dismissal of the allegations, the organisation should consider if serious unresolved concerns about misconduct remain. If so, the respondent[11] should be advised of this and be asked to see the investigation or hearing through to conclusion. If they do not agree to this, then the organisation should, where possible, continue to progress its investigation without the input of the respondent. The respondent should be given every opportunity to participate in the investigation, whether in person or by sending written submissions. If an allegation of misconduct is upheld in these circumstances, or the respondent leaves the organisation before completing appropriate remedial measures after an allegation is upheld, the organisation must give consideration as to whether it is necessary to report these findings to the individual's new employer or to any relevant regulatory or professional supervisory bodies.

3.22　If an organisation wholly or partially upholds an allegation of research misconduct against a member of staff, or student, UKRI expects the organisation to:

- apply appropriate remedial measures and/or disciplinary procedures in accordance with their policies and procedures.

- review the risks and impacts associated with the individual's continued involvement in any UKRI-related activities or applications for funding, and to put in place proportionate measures to manage these risks, including, where appropriate,

  - removing the individual from a UKRI grant or application.

  - barring, for a defined period, the individual from future UKRI-related activity.

Previously upheld allegations

3.23　It is for the submitting organisation(s) to judge who it is appropriate to include in a UKRI funding application, in line with the organisation's robust policies and processes to manage research misconduct and risk (see also paragraph 5.9). This includes taking all reasonable steps to:

(a) know whether individuals named in funding applications to UKRI have had an allegation of research misconduct against them wholly or partially upheld, and, if such

(b) ensure that the individual(s) concerned will not repeat behaviour(s) that could lead to such allegations.

How UKRI responds to allegations of research misconduct

3.24　Allegations of research misconduct should always be reported to the employing or enrolling organisation of the person against whom the allegation is being made. It is the employing or enrolling organisation's responsibility to investigate. UKRI has no responsibility nor standing to investigate unless they are the employer.

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[11] The respondent is the individual(s) against whom the allegation(s) are made.

3.25 UKRI is not a designated body for whistle-blowers under the Public Interest Disclosure Act and individuals are not protected if they disclose allegations to us, unless they are direct employees of UKRI.

3.26 UKRI is not an appeal body for individual cases, nor is UKRI able to provide expertise to organisations in conducting investigations, or advice to individuals involved in investigations or bringing allegations to our attention.

3.27 UKRI is not able to act on behalf of individuals dissatisfied with outcomes of previous investigations by organisations in order to re-open such cases or intervene directly on their behalf in any ongoing investigation.

3.28 If an allegation is made directly to UKRI, we will recommend the individual making the allegation to report it to the employing or enrolling organisation of the individual against whom the allegation is being made. Note this does not apply if the allegation is in relation to a current UKRI application or assessment process (see 3.31-3.34).

3.29 If UKRI identifies a risk or allegation of research misconduct through independent means, for example media reports, or an anonymous complaint, we will refer the matter to the employing or enrolling organisation.

3.30 To monitor and respond to patterns or long-term trends UKRI will gather anonymised high-level data on allegations and may retain information on issues brought to our attention.

Allegations related to UKRI employees

3.31 For information about how UKRI investigates allegations of research misconduct relating to our employees, please refer to the UKRI Investigating Allegations policy[12] for employees.

Allegations arising within the UKRI application and assessment process

3.32 If an individual acting on behalf of UKRI as an expert reviewer, panel or board member suspects research misconduct in an application to UKRI, or the peer review of such an application, they should inform UKRI directly. Contact details can be found on the UKRI webpages[13].

3.33 If allegations of research misconduct arise in relation to applications for UKRI funding or the expert review of those applications, UKRI:

- will undertake due diligence to determine whether the allegation has merit. This may involve seeking clarification from the relevant applicant(s) or expert assessor(s); or consulting with a member of the expert review panel or committee

- may inform the submitting or employing organisation and provide them with information relating to the allegation so that they may undertake a review (or investigation as required) and inform us of the results

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[12] https://www.ukri.org/wp-content/uploads/2020/10/UKRI-081020-InvestigatingAllegationsOfMisconductInResearchPolicy.pdf
[13] https://www.ukri.org/about-us/policies-standards-and-data/good-research-resource-hub/research-integrity/

- may choose not to award a grant until the matter is sufficiently resolved, in cases where the alleged misconduct within an application is judged to be serious

3.34   If allegations are upheld, UKRI may take actions as outlined in Section 5.

4.   Approval and Review

4.1   This policy will be reviewed every 18-24 months; or following changes in legislation or business need.

4.2   Approval of this policy rests with the UKRI People, Finance and Operations Committee.

5.   Reporting and Compliance

Reporting requirements

5.1   Organisations must inform UKRI (see section 7) of any allegation of research misconduct where it relates to an individual(s) associated with:

- a UKRI grant application under consideration

- any funded UKRI research activity.

- UKRI activity such as acting as an expert reviewer or strategic advisor (e.g. panel, committee, council member)

5.2   This should be within one month of deciding to undertake a formal investigation (and must be reported at this stage at the latest) unless the case is deemed high-risk or an allegation is demonstrably irrefutable at an earlier stage, in which case UKRI should be informed immediately.

5.3   The report to UKRI should be marked as confidential and should provide:

- a brief factual statement about the nature of the concern or allegation

- respondent's involvement with UKRI of any type (including whether the allegation concerns research or training directly supported by UKRI and if so, whether the funding is current or historic)

- any action taken or further actions planned to mitigate or manage risk (e.g. mitigating steps that the organisation has taken if work on a grant has been disrupted)

5.4   UKRI does not normally need to know the name of the individual(s) (the "respondent") but the organisation should disclose this if doing so would aid risk mitigation or management for UKRI. UKRI reserves the right to request identifying information (including names or information such as grant references which may indirectly identify a respondent) but recognises the sensitivities involved in research misconduct cases, and the wellbeing considerations that organisations are managing. Where there are serious concerns related to disclosing identifying information where requested, the organisation should first contact the relevant integrity lead within UKRI (see section 7) to confidentially discuss the case.

5.5 Following the completion of the formal investigation the organisation must immediately notify UKRI of the decision. Notification should include:

- the findings of the investigation including whether the allegation(s) were upheld (either partially or fully) or not upheld

- what, if any, disciplinary or remedial action is being taken, including any retraction or amendment requests to publishers on published outputs, or where UKRI may need to update information on Gateway to Research or similar platforms

- where appropriate: what measures are being taken to reduce the impact on colleagues / ongoing research and what, if any, assistance is required from UKRI in this regard

- what, if anything, will be communicated publicly about the case

- what, if any, changes to policy and practice have been implemented in response to this case and what assurances will be put in place as to their effectiveness

5.6 Where an allegation is wholly or partly upheld, UKRI will require cooperation from the organisation to identify if any non-publication outcomes previously reported to UKRI may have been compromised.

5.7 UKRI reserves the right to request a copy of the full report where that information would inform UKRI actions.

5.8 UKRI will work with the organisation to minimise the impact on any UKRI grant applications or UKRI-related activities that are affected.

- If it transpires that an individual named on a successful application for UKRI funding has had an allegation of research misconduct against them wholly or partially upheld, and that subsequent risk mitigation measures recommended/agreed as a result of the investigation have not been fully implemented (see paragraph 3.23), UKRI reserves the right to take appropriate action as set out in section "Actions in relation to individuals".

5.9 UKRI may choose to include questions relating to research misconduct in the appointments process for UKRI committees, panels or peer reviewing activity. Applicants may be asked to declare if they have had an allegation of research misconduct against them wholly or partially upheld. We reserve the right to reject any application where such issues are considered an impediment to the individual holding a public appointment. We also reserve the right to suspend or de-select an individual from undertaking any peer review or advisory duties for UKRI where an upheld allegation of research misconduct arises subsequently.

Why we ask to be informed

5.10 Informing us when a formal investigation is underway allows us to ensure proper use of public funds by:

- monitoring that complaints are being dealt with appropriately and in a timely manner

- receiving assurances that individuals involved in current projects receive the support they need

- enabling consideration of the potential impact on relevant activities across UKRI, including sharing of information across UKRI teams where necessary, and within robust data handling protocols

- being aware of the potential impact on UKRI-related activities and the steps being taken by organisations taken to manage that impact

- (where identifying information is given/requested): making responsible funding decisions, for example delaying the issue of an award if any applications are live during the investigation in order to reduce the risk to the project and/or reduce the impact on other people who would be involved in the project

- monitoring and responding to patterns or long-term trends

How UKRI will monitor compliance with this policy

5.11 UKRI will, through our funding assurance processes[14], organisational audits and other review processes:

- ask for relevant information about an organisation's risk management framework and evidence of how it has been applied to mitigate and address the risks of poor research practice or research misconduct in UKRI-related research and innovation activities.

- review how organisations receiving and managing funds from UKRI on behalf of a partnership ensure appropriate policies and procedures are in place across all partners as well as throughout the lifecycle of the partnership, including asking for evidence of how risk is monitored and managed.

5.12 UKRI is not a regulator, and therefore does not have a remit to investigate the management of specific research misconduct cases as a result of complaints received, however through our assurance processes we will:

- check that an organisation has appropriate policies and procedures in place and is following them, asking for evidence of how they have applied their policies and procedures when responding to an allegation of research misconduct.

- ask for summary information about the number of allegations of research misconduct, categorised by the nature of the allegation, whether the allegation was subject to a formal investigation, the outcomes of such investigation and the number of weeks taken to conclude the process.

5.13 Where we identify that an organisation does not have sufficient policies and procedures in place to meet the expectations set out in this policy, or are not following their policies and procedures, UKRI will work with the organisation to identify an improvement plan. The organisation must undertake the remedial action plan in a timely manner.

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[14] For further information: https://www.ukri.org/about-us/policies-standards-and-data/funding-assurance-programme/

5.14 Where an organisation fails to comply with the improvement plan, UKRI reserves the right to apply an escalating series of actions in order to mitigate the risk of research misconduct, until the remedial action plan has been completed. See 'actions against organisations'.

Actions in relation to individuals

5.15 Research misconduct as defined in this policy covers a broad range of activity of varying severity, therefore any action taken by UKRI in consequence will be on a case-by-case basis.

5.16 If an allegation of research misconduct against an individual is partially or wholly upheld, UKRI reserves the right to:

- reject any application under consideration on which the individual is a named applicant or researcher; and/or

- require further oversight of any UKRI funded research being carried out by the individual, or in more serious cases require the removal of the individual from the funding, and as a last resort to terminate any funding which the organisation is receiving from UKRI in connection with research being carried out by the individual; and/or

- prevent the individual from submitting any further applications for funding to UKRI for any period of time, including indefinitely; and/or

- prevent the individual from acting for UKRI as an expert reviewer or member of advisory committee for any period of time, including indefinitely; and/or

- reclaim from the organisation any and all unspent money awarded by UKRI for projects involving that individual.

5.17 In deciding what actions to take, UKRI will take into account the findings of the investigating organisation and the remedial actions and/or sanctions that they intend to apply.

5.18 Where an organisation removes an individual from a UKRI-related activity or application for funding, we will work with the organisation to minimise the impact on any other staff, student or any associated personnel involved in the affected grant(s). This may include transferring the grant to another grant holder.

Actions in relation to organisations

5.19 UKRI will work with any organisation receiving funding from us in order to mitigate the risk of research misconduct occurring as a result of our funded activities while they improve their systems and processes.

5.20 UKRI may take action if we find that an organisation has:

- systemic failures in governance or oversight of research integrity and the handling of research misconduct, including failure to respond to allegations of research misconduct involving a member of staff or student promptly and objectively in line with their policies and procedures

- failed to keep UKRI informed as outlined in 'Reporting and compliance'

- not complied with a remedial action plan

5.21 Action will be taken by UKRI on a case-by-case basis and therefore may vary in length and type. Actions will be both proportionate and focused on reducing risks to the research record and the use of public money. Actions we may apply include:

- working with the organisation through the UKRI funding assurance programme to make improvements to their policies and practices

- sending a formal letter setting out our concerns and areas for improvement which we would expect to be addressed in a timely manner

- where there are severe risks to one or more areas of research:

    - suspending a grant(s) for a limited period of time until a remedial action plan is agreed and implemented

    - restricting applications for specific grant types or relevant disciplinary areas, until a remedial action plan is agreed and implemented

    - suspending all payments from UKRI to the organisation until a remedial action plan is agreed and implemented

    - terminating a grant(s) if it is not possible to identify a remedial action plan to mitigate the risks.

5.22 If UKRI receives a notification that an allegation of research misconduct has been upheld against an individual directly involved in a UKRI-related activity or application for funding, we reserve the right to confidentially request additional information, for example about the investigation process to document that the organisation has followed its policies and procedures.

6. Storage

6.1 All information provided to UKRI relating to allegations or captured through the funding assurance process will be managed in accordance with the purposes outlined in Section 4 and handled confidentially, securely and sensitively, and managed in line with relevant policies and retention schedules. Access will be managed on a need-to-know basis in line with appropriate data handling protocols.

6.2 We recognise that the required disclosures under this policy may include personal data and such data will be processed in line with relevant data protection requirements[15]. Organisations should not provide sensitive personal information (such as special category personal data, as defined in the UK GDPR) or information relating to criminal offences or convictions. Personal details about other people, such as the person making the claim, should not be provided.

6.3 It is the organisation's responsibility to ensure that they have the appropriate measures in place to enable them to share the required information with UKRI.

6.4 UKRI may disclose information relating to allegations, in confidence, to relevant statutory bodies, regulators or funding partners. Decisions on disclosure will be informed by the seriousness of the allegations and requirements to ensure appropriate consistency in approaches, investigations and actions to mitigate risk

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[15] See UKRI privacy notice: https://www.ukri.org/about-us/privacy-notice/

undertaken by partners. UKRI will inform organisations where information they have provided is shared.

6.5   All information held by UKRI, as a public body, is subject to request under the Freedom of Information and Data Protection Acts. We treat each request on its own merits and will consult with all relevant organisations as appropriate however, decisions on disclosure will remain the responsibility of UKRI.

7.   Further Information and Contacts

7.1   The Good Research Resource Hub provides a range of guidance and useful resources related to good research practice.

7.2   UKRI has individuals responsible for research integrity within each of the nine constituent councils. Details can be found on the research integrity page of the Good Research Resource Hub. Research organisations should use the contact details on that page to report research misconduct allegations.

Annex 1 – Defining research misconduct

As outlined in the policy, the integrity of research can be threatened by honest errors and poor or questionable research practices as well as research misconduct. Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct. Poor research practices, such as weak procedures, inadequate documentation of procedures, or inadequate record-keeping, might only require further training or development rather than formal disciplinary action, and are normally a matter solely for the employer. This definition therefore concentrates on entirely unacceptable types of research conduct as defined in the Concordat to Support Research Integrity.

Research misconduct can take many forms, including:

- **fabrication**: making up results, other outputs (for example, artefacts) or aspects of research, including documentation and participant consent, and presenting and/or recording them as if they were real

- **falsification**: inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents

- **plagiarism**: using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission

- **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

- **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
  - interests, including failure to declare competing interests of researchers or funders of a study
  - qualifications, experience and/or credentials
  - publication history, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication

- **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. Improper dealing with allegations of misconduct includes the inappropriate censoring of parties through the use of legal instruments, such as non-disclosure agreements.