

Royal Northern College of Music

**GOOD
RESEARCH
CONDUCT**

Policy & Procedure

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RNCM
ROYAL NORTHERN
COLLEGE of MUSIC

Introduction

The Royal Northern College of Music expects all members of staff and students to observe the highest ethical and professional standards in their research. Research councils and charities require that the research they fund must adhere to the highest standards of integrity and that institutions have in place formal written procedures for the investigation of allegations of research misconduct. All member institutions of Conservatoires UK (CUK), including RNCM, have adopted the [RCUK Policy and Guidelines on the Governance of Good Research Conduct](#) (2017) and [the Concordat for Research Integrity](#) (2019). These form the standard of practice to which CUK institutions expect their researchers to adhere.

The College's expectations of its researchers

The College expects the highest standards of research integrity from its researchers. This includes, but is not limited to, staff who conduct research, research students and visiting researchers irrespective of the sources of their funding, their area of research and their experience as researchers. External colleagues who are conducting research on RNCM's premises, using RNCM's research facilities, or conducting research involving the participation of staff and/or students at RNCM are expected to abide by the Code of Conduct, although should research misconduct occur, the case would be referred to the researcher's employing institution.

It is the responsibility of all engaged in or supporting research to conduct their research in accordance with the principles of research conduct detailed below and in compliance with relevant College policies.

What researchers can expect of the College

Support to help researchers comply with the standards of good research conduct

The College will provide advice and administrative support to enable researchers to conduct their research in accordance with the standards of good research conduct.

Support to develop excellent researchers

The College is committed to providing suitable learning, training and mentoring opportunities to encourage the development of its researchers.

A robust and fair approach to dealing with allegations of research misconduct

The College has a clear procedure for dealing with allegations of research misconduct and mechanisms to protect staff from malicious allegations.

Research and equal opportunities

All individuals involved in research should be able to pursue their work in an atmosphere free from prejudice and harassment. RNCM is committed to ensuring equality of opportunity for all within all of its activities. If individuals feel they may be experiencing discrimination at work, then there are a number of external organisations that can offer them advice and support in addition to RNCM Human Resources staff.

Access to security-sensitive or extremism-related research material

In accordance with the Prevent responsibilities of higher education bodies, intended to prevent radicalisation/extremism, research students and staff will need to declare their intention to undertake research into security-sensitive areas including extremism (using the Security-Sensitive Research Declaration Form) and seek approval from the Director of Research before starting research and before gaining access to electronic or other material

related to subjects concerning radicalisation and extremism. Colleagues will be required to keep their declaration of research-sensitive research up to date and will report on an annual basis as part of the Research Activity Review process and whenever they are planning to undertake security-sensitive research. Such approval/access will not be withheld where the student or member of staff has good academic reasons to pursue such research and access such material, in accordance with the principles of academic freedom.

Where access is provided, the institution will advise researchers how to store sensitive material on the RNCM core server (the Safe Store) with password protection for the named researcher(s). They will also advise on methods of secure disposal when no longer needed.

The institutional contact for requests to access such material will be the Director of Research.

RNCM will be guided by the Universities UK guidance in this area, updated in November 2019 and currently available at: <https://www.universitiesuk.ac.uk/policy-and-analysis/reports/Pages/security-sensitive-research-material-UK-universities-guidance.aspx>. It 'concerns the storage and circulation of security-sensitive research material. If circulated carelessly, such material is sometimes open to misinterpretation by the authorities and can put researchers at risk of arrest and prosecution under counter-terrorism legislation.'

PROMOTION OF GOOD RESEARCH CONDUCT

Principles of good research conduct

The RCUK Policy and Guidelines on Governance of Good Research Conduct (2017) and [the Concordat for Research Integrity](#) (2019) set out in detail the principles by which researchers and institutions should conduct research. The core elements of research integrity are:

- **honesty** in all aspects of research, including in the presentation of research goals, intentions and findings; in reporting on research methods and procedures; in gathering data; in using and acknowledging the work of other researchers; and in conveying valid interpretations and making justifiable claims based on research findings
- **rigour**, in line with prevailing disciplinary norms and standards, and in performing research and using appropriate methods; in adhering to an agreed protocol where appropriate; in drawing interpretations and conclusions from the research; and in communicating the results
- **transparency and open communication** in declaring potential competing interests; in the reporting of research data collection methods; in the analysis and interpretation of data; in making research findings widely available, which includes publishing or otherwise sharing negative or null results to recognise their value as part of the research process; and in presenting the work to other researchers and to the public
- **care and respect** for all participants in research, and for the subjects, users and beneficiaries of research, including humans, animals, the environment and cultural objects. Those engaged with research must also show care and respect for
- the integrity of the research record
- **accountability** of funders, employers and researchers to collectively create a research environment in which individuals and organisations are empowered and enabled to own the research process. Those engaged with research must also ensure that individuals and organisations are held to account when behaviour falls short of the standards set by the Concordat (Concordat, Commitment 1, p. 6).

UNACCEPTABLE RESEARCH CONDUCT

According to the [RCUK Policy and Guidelines on the Governance of Good Research Conduct](#), the spectrum of inappropriate behaviour is wide, ranging from minor misdemeanours which may happen occasionally and inadvertently to significant acts of misappropriation or fabrication. 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.

The RCUK GRP Policy and Guidelines therefore concentrates on entirely unacceptable types of research conduct. Individuals involved in research must not commit any of the acts of research misconduct specified here.

Unacceptable conduct includes each of the following:

Fabrication

This comprises the creation of false data or other aspects of research, including documentation and participant consent

Falsification

This comprises the inappropriate manipulation and/or selection of data, imagery and/or consents.

Plagiarism

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

Misrepresentation, including:

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

Breach of duty of care

- Disclosing improperly the identity of individuals or groups involved in research without their consent, or other breach of confidentiality
- Placing any of those involved in research in danger without their prior consent and without appropriate safeguards even with consent; this includes reputational danger where that can be anticipated
- Not taking all reasonable care to ensure that the risks and dangers, the broad objectives and the sponsors of the research are known to participants or their legal representatives, to ensure appropriate informed consent is obtained properly, explicitly and transparently
- Not observing legal and reasonable ethical requirements or obligations of care for animal subjects, human organs or tissue used in research, or for the protection of the environment

- Improper conduct in peer review of research proposals or results (including manuscripts submitted for publication); this includes failure to disclose conflicts of interest; inadequate disclosure of clearly limited competence; misappropriation of the content of material; and breach of confidentiality or abuse of material provided in confidence for peer review purpose.

Improper dealing with allegations of misconduct

- Failing to address possible infringements including attempts to cover up misconduct or reprisals against whistle-blowers.
- Failing to deal appropriately with malicious allegations, which should be handled formally as breaches of good conduct.

Reporting and investigating unacceptable research conduct

The RNCM has a responsibility to investigate allegations of unacceptable research conduct. The Unacceptable Research Conduct procedure links to the College's staff Disciplinary Policy and the Student Conduct and Discipline Policy and complements the Public Interest Disclosure Policy.

This procedure applies to allegations about RNCM staff and research students from inside and outside the College.

The unacceptable research conduct procedures are guided by the following key principles:

- The procedures are driven by the requirement for the even-handed treatment of both the complainant and the respondent
- The presumption of innocence should be maintained throughout the investigation
- The complainant and respondent should expect a just decision following a fair and speedy process involving an impartial, informed and independent investigation
- The responsibilities of those dealing with the allegation must be clear and understood by all interested parties
- Proper records of the proceedings should be kept while ensuring that the confidential nature of the allegation and investigation safeguard the rights to confidentiality, and to disclosure, of the interested parties.

How to report unacceptable research conduct

Individuals with a concern are encouraged, in the first instance, to attempt to address it informally with either the individual concerned or their line manager or research supervisor. The line manager/supervisor may seek to initiate an informal resolution process, in liaison with Human Resources e.g. via a facilitated meeting. This approach may be relevant where the issue appears to be basic or minor or where there appears to be a potential misunderstanding or dispute between individuals.

In the event that the individual is not satisfied with the outcome of an informal approach, then the matter should be addressed formally.

A record of any informal concerns raised and outcomes should be made and retained by the relevant line manager/supervisor (copied to the Associate Director of Research for monitoring purposes).

A line manager/supervisor should immediately forward all allegations they are made aware of, that they deem to be serious, to the Associate Director of Research, as informal resolution would not be appropriate in such cases.

Allegations found to be made frivolously, maliciously or vexatiously may result in a recommendation for referral of the complainant to the disciplinary procedure or other appropriate action

Investigation of unacceptable research conduct

Stage 1: Informal enquiries

It is the responsibility of the Associate Director of Research to make a preliminary investigation into all allegations of unacceptable research conduct made against staff or research students. This also applies to visiting researchers while based at the RNCM and RNCM staff and/or students while based in another institution.

The Associate Director of Research shall notify the Director of Research and the Head of Human Resources as soon as an allegation of unacceptable research conduct has been received. The Associate Director of Research would normally complete the investigation within one month.

In the event that the Associate Director of Research is directly involved with the research, the Director of Research will initiate an investigation into the allegation in as timely a manner as possible.

The research project may be halted when appropriate, and as long as it is safe to do so, until the allegation has been investigated.

The Associate Director of Research will determine whether the allegation falls within the scope of this procedure, and whether an investigation is warranted. This should involve informing the respondent of the substance of the allegation and giving them the opportunity to respond.

If the Associate Director of Research decides that an investigation is not warranted, he/she will request that their justification for that decision be noted in the member of staff's Research Activity Review form for that year and inform the complainant, respondent and Director of Research of this outcome.

Formal Investigation

If the Associate Director of Research decides that an investigation is warranted, he/she will notify both the respondent and the complainant in writing, the Director of Research and the Head of Human Resources.

The purpose of the investigation is to examine and evaluate all relevant facts to determine whether unacceptable research conduct has been committed, and if so, the responsible person(s) and the seriousness of the misconduct.

The Associate Director of Research will appoint a Panel of up to three senior and appropriate individuals to undertake the investigation. The Panel should not have any conflicts of interest with the respondent or the case in question, and they must have the necessary expertise, including research expertise, to examine the evidence and conduct the investigation effectively.

The investigation will not be conducted by the Director of Research or any other person who may have to reach a final decision or consider a review of the case.

The investigation will be conducted as sensitively and speedily as possible, but with due regard to concepts of natural justice and to the need to safeguard individual reputations from unfair damage.

The investigation will include examination of all relevant documentation, including but not limited to: relevant research data; research notes; computer files; proposals; publications; correspondence; memoranda and email correspondence.

Interviews will be conducted with the respondent and the complainant and any other individuals who might have information relating to key aspects of the allegation. All individuals interviewed during the investigation will be expected to respect the confidential nature of the investigation. Interviews will be minuted.

Where the research is carried out in collaboration with another party or with an external funder, then the other party involved may be notified of the allegation if it is considered appropriate or necessary to do so by the Associate Director of Research. Where an investigation is about someone funded by or engaged with UKRI (including acting as a supervisor for an UKRI postgraduate student or engaged with peer review activities), even if it is about work not connected with a grant from a UK Research Council, the case must be reported to the relevant Council at this stage. The Councils reserve the right to take appropriate action, after consultation with the research organisation, about any duties being performed for UKRI.

The panel will be charged with producing an investigation report. The report will include a summary of the procedures under which the investigation was carried out, from whom information was obtained, the evidence considered, a summary of the views of the respondent and complainant and the findings of the investigation, including whether unacceptable research conduct has been committed or not. If unacceptable conduct is identified, the report should make clear the responsible person(s) and the seriousness of the unacceptable conduct.

The report shall normally be produced within 30 working days of the commencement of the investigation. A summary of the outcome shall be distributed in strict confidence to, as a minimum the respondent, the complainant, the Associate Director of Research, Director of Research and Head of Human Resources.

The Associate Director of Research will decide on the basis of the investigation report how any recommended actions should be implemented, including, if appropriate, invoking the College's disciplinary procedures. This decision shall normally be made within five days of production of the report.

The Associate Director of Research shall notify the respondent in writing of this decision, as well as the Head of Human Resources and any collaborating parties where applicable.

The Associate Director of Research shall give consideration to informing other interested parties of the outcome of the investigation, including but not limited to any journals in which the research was published.

Right of Appeal

The respondent has the right to a review of the decision and/or actions recommended in the investigation report. The complainant has no right to a review.

The respondent may request an appeal within five days of receiving the investigation report. The request must be in writing to the Director of Research and state the basis for the review.

The Director of Research may appoint an appeal board consisting of three people not associated with the original investigation.

In the event that the Director of Research led the original investigation, another member of the Executive Team will oversee the review process.

The appeal will normally include examination of all evidence called into question in the original investigation. The respondent will be invited to attend to give oral evidence and may submit any relevant supplementary evidence in support of their case.

The appeal shall normally be completed within 30 days of its initiation, unless there are documented reasons for delay.

The appeal report shall state how the review was carried out, from whom further information was obtained, and the findings of the review. A summary of the outcome shall be distributed in strict confidence to, as a minimum, the respondent, the Associate Director of Research, Director of Research and member of the Executive Team. It may be distributed to any collaborating party or funder involved if appropriate or necessary, at the discretion of the member of the Executive Team.