Royal Northern College of Music

# Good Research Conduct

Policy & Procedure

**Department: Academic** 

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# 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 will take a consistent approach to supporting good research practice, and preventing and handling research misconduct, irrespective of funding for individual projects. This means that institutions must have in place procedures for governing good research practice, and for reporting and investigating unacceptable research conduct in line with the Codes of Conduct, Policy and Concordat documents below.

As a <u>member institution of Conservatoires UK (CUK)</u>, the RNCM adheres to the principles and guidance set out in:

- The UK Research Integrity Office's Code of Practice for Research and
- The Misconduct Investigation Procedure.

All RNCM researchers must work in line with:

• The Concordat for Research Integrity (2019, updated August 2023).

These Codes of Practice are aligned with the <u>UKRI Policy on the Governance of Good</u> <u>Research Practice (2022, revised 2023)</u> which all UKRI directly funded projects must adhere to.

The UKRIO Code of Practice for Research defines Research in line with REF2020 guidance (REF 2019/20 Guidance on Submissions, revised October 2020, Annex C) as follows:

"...a process of investigation leading to new insights, effectively shared.

It includes work of direct relevance to the needs of commerce, industry, culture, society, and to the public and voluntary sectors; scholarship\*; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction."

#### The College's expectations of its researchers

Staff at the College who have a role in research including research-led teaching are required to know, understand and follow the College's Good Research Conduct Policy. It is the responsibility of all engaged in or supporting research to conduct their research in accordance with the principles of research outlined in this policy and in compliance with relevant College policies. The College expects its researchers to conduct any research activity in line with the policies linked above.

"Researchers" include, but are not limited to, staff who conduct research, (research) students, visiting and emeritus researchers, an independent contractor or consultant, and research administration and support staff 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. Before commencing a research study, researchers should familiarise themselves with the <u>UKRIO Recommended Checklist for</u> <u>Researchers</u> (extracted from p.3 of the UKRIO Code of Practice for Research linked above) and use this to design their research study.

#### What researchers can expect of the College

#### Research Strategy and Policy

The College will ensure that good research practice is integral to the institution's research strategy and any concomitant policies. It will offer clear procedures and ensure that policies and procedures are aligned with wider organizational policies.

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

The College will provide resources, advice and 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. The College will regularly review its research culture and environment and consider feedback from researchers on processes and practices that influence positively and negatively on good practice in research.

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

The College will foster a positive, fair research environment and will encourage all researchers to consider good practice in research as a routine part of their work. The College has a fair, transparent and robust procedure (set out below) 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 security-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 December 2022 and currently available at: <u>https://www.universitiesuk.ac.uk/policy-and-analysis/reports/Pages/security-sensitive-research-material-UK-universities-guidance.aspx</u>. 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 UKRIO Code of Practice for Research (2023) and The Concordat for Research Integrity (2019, updated August 2023, p.6) 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 this concordat

### UNACCEPTABLE RESEARCH CONDUCT (MISCONDUCT IN RESEARCH)

According to <u>The Concordat for Research Integrity (2019, updated August 2023, p.12)</u>, 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: 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
  - Disclosing improperly the identity of individuals or groups involved in research without their consent, or other breach of confidentiality
  - breach of duty of care for humans involved in research whether deliberately, recklessly or by gross negligence, including failure to obtain appropriate informed consent; this includes 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
  - 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
  - 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

#### Procedure for the Investigation of Misconduct in Research

The RNCM has a responsibility to investigate allegations of unacceptable research conduct. The procedure for the investigation of misconduct in research links to the College's Staff Disciplinary Policy and the Student Conduct and Discipline Policy and complements the Public Interest Disclosure Policy (Whistleblowing).

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 misconduct in research

The institutional contact person responsible for any investigation into misconduct in research is the Associate Director of Research, Prof. Jane Ginsborg (Jane.ginsborg@rncm.ac.uk).

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. They should log that they are intending to do so with the Associate Director of Research and, if in doubt, check who their appropriate contact person is (i.e. line manager/ 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 misconduct in research

#### 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 implicated in 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.

Possible outcomes of the Informal Enquiry are:

- a) Sufficiently serious and of sufficient substance to warrant formal investigation
- b) Has some substance but is relatively minor and/or relates to poor practice rather than intentional misconduct and should be addressed through training/ education or other approach such as mediation
- c) warrants referral to another organisational policy and procedure such as Exam Regulations, Academic Misconduct, Staff Disciplinary or Student Conduct Policies
- d) is unfounded because it is mistaken or without substance
- e) is unfounded because it is vexatious and/or malicious and will be dismissed

The Associate Director of Research shall take action according to the 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 (see Possible Outcomes below).

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.

Possible outcomes of the Formal Investigation are that the allegation of misconduct in research:

- a) is upheld in full
- b) is upheld in part
- c) has some substance but is relatively minor and/or relates to poor practice rather than intentional misconduct and should be addressed through training/ education or other approach such as mediation
- d) warrants referral to another organisational policy and procedure such as Exam Regulations, Academic Misconduct, Staff Disciplinary or Student Conduct Policies as the infringement lies outside of misconduct in research
- e) is unfounded because it is mistaken or without substance
- f) is unfounded because it is vexatious and/or malicious and will be dismissed

The Associate Director of Research will decide on the basis of the investigation report how any recommended actions should be implemented, with outcomes a) and b) normally leading to the invocation of the College's disciplinary procedures, and outcome c) to be actioned by the Associate Director of Research. Any 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 appeal. 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 due the ADR's direct implication in the research, another member of the Executive Team will oversee the appeals 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.