Innovative Caring Inclusive Collaborative

Handling Research Misconduct Policy and Process

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1. Purpose

1.1. This policy sets out how the University will receive, assess, investigate and respond to concerns or allegations of research misconduct. It supports a culture of research integrity, fairness, accountability and learning, and aligns with the UK Concordat to Support Research Integrity, UK Research Integrity Office guidance, UK Research and Innovation expectations, and Scottish Funding Council requirements for Scottish higher education institutions.

1.2. This policy should be read in conjunction with the Research Ethics Policy and Practice, information on Abertay's commitment to the UK Concordat to Support Research Integrity, and the Abertay Complaints Handling Procedure.

2026.11/016/262

2. Scope

2.1. This policy applies to all research conducted under the auspices of the University, including research undertaken by staff, postgraduate research students, undergraduate and postgraduate taught students, visiting researchers, honorary appointees, contractors, consultants and collaborators where the University has responsibility for research governance. It applies to all stages of the research lifecycle, including proposal development, ethical approval, data collection, analysis, authorship, publication, dissemination, impact, knowledge exchange and research commercialisation.

2.2. Where a concern relates primarily to student academic misconduct, staff conduct, bullying, harassment, safeguarding, financial irregularity, equality and diversity, whistleblowing, or information governance, the University may refer the matter to the relevant policy while ensuring that any research integrity aspects are addressed under this policy.

3. Principles

- Integrity: Research must be conducted honestly, rigorously, transparently and with respect for participants, communities, collaborators, funders and the public.
- Fairness: Allegations will be handled impartially, proportionately and without presumption of misconduct.
- Confidentiality: Information will be shared only with those who need it to assess, investigate or act on the matter, subject to legal, regulatory and funder obligations.
- Protection from detriment: Those who raise concerns in good faith will be protected from retaliation, victimisation or disadvantage.
- Timeliness: The University will progress cases without avoidable delay while allowing sufficient time for robust assessment and investigation.
- Learning and improvement: Outcomes will be used to strengthen research culture, training, supervision, governance and practice.

4. Definitions

4.1. **Research misconduct** involve behaviours and deliberate actions that fall short of the five key principles of research integrity (honesty, rigour, transparent and open communication, care and respect, and accountability) required to maintain the highest standards of research integrity, occurring at any point in the research lifecycle. It may include, but is not limited to: fabrication; falsification; plagiarism; misrepresentation of data, interests, qualifications, experience, authorship or

contribution; failure to meet legal, ethical or regulatory requirements; improper dealing with allegations of misconduct; inappropriate destruction, concealment or withholding of research records; and serious breach of duty of care to research participants, animals, the environment or the public.

4.2. **Questionable research practices** are minor infractions or research practices, including avoidable errors, which fall short of the definition of intentional research misconduct. They may undermine the quality, trustworthiness or reproducibility of research but may not, on their own, amount to research misconduct. They may arise due to a lack of knowledge or attention to detail, negligence, or deliberate action, and may occur where there is no evident intention to deceive. Such matters may be addressed through education, supervision, management action or improvement measures where appropriate.

4.3. **Good-faith concern** means a concern raised honestly and with reasonable grounds, even if it is not subsequently upheld. Concerns raised maliciously, vexatiously or knowingly without foundation may be addressed under the relevant University disciplinary or conduct procedure.

5. Roles and Responsibilities

- **All researchers** are responsible for maintaining high standards of research integrity and raising concerns promptly where appropriate.
- **Principal investigators and supervisors** must promote good research practice, maintain appropriate records, support research staff and students, and respond to concerns constructively.
- **The Vice Principal Research & Innovation** will receive allegations, oversee the operation of this policy, ensure appropriate expertise is involved, and maintain separation between advisory, investigatory and decision-making roles. In cases where there may be a real or perceived conflict of interest, the Chair of the University Research Ethics Committee or the Faculty Vice Principals, may take full or partial responsibility for this role.
- **Complaints@abertay.ac.uk** will provide procedural advice, coordinate case management, maintain records and support annual reporting.
- **People Services, Student and Academic Services, Governance, the University Research Ethics Committee, the Graduate School, and the Research, Innovation & Enterprise Support** office may provide specialist advice where relevant.

- **The University Executive or delegated senior officer** will receive all final investigation reports and if required determine any additional institutional actions following investigation outcomes.
- **External reports** will be submitted by the **Vice Principal Research & Innovation** or the **Research, Innovation and Enterprise Support (RIES)** office with the support of Complaints@abertay.ac.uk.

6. Raising a Concern

6.1. Concerns should normally be raised in writing with the Vice-Principal Research & Innovation, the Chair of the University Research Ethics Committee (via ResearchEthics@abertay.ac.uk), or the relevant Faculty Vice-Principal, and copied to Complaints@abertay.ac.uk . A concern should include, where possible, the names of those involved, the research project or output affected, the nature of the concern, relevant dates, any supporting evidence, and whether any funder, regulator, journal, collaborator or external organisation has informed us of the concern or has already been informed.

6.2. Anonymous concerns may be considered where sufficient information is provided to allow meaningful assessment. The University will not normally disclose the identity of a person raising a concern without their consent unless required by law, funder requirements, regulatory obligations, or the need to conduct a fair process.

7. Initial Assessment

7.1. The Vice-Principal Research & Innovation, the Chair of the University Research Ethics Committee (via ResearchEthics@abertay.ac.uk), or the relevant Faculty Vice-Principal, will conduct an initial assessment to determine whether the matter falls within this policy, whether urgent protective measures are required, whether evidence should be secured, and whether the matter can be resolved through informal or corrective action. The assessment will be completed within a reasonable timeframe, taking account of the complaint's nature, investigation pathway(s), and any relevant University complaints or misconduct procedures and timescales. The initial assessment does not determine whether misconduct has occurred.

7.2. Where there is a risk to participants, patients, animals, the environment, public safety, legal compliance, research records, funding, intellectual property, or the integrity of published outputs, the University may take immediate proportionate action. This may include pausing recruitment, securing data, notifying ethics or regulatory bodies, informing a funder, or issuing an interim publication notice.

8. Preliminary Investigation

8.1. Where the initial assessment indicates that research misconduct may have occurred, the University will appoint a preliminary investigator or panel with appropriate independence and expertise. The purpose of the preliminary investigation is to establish whether there is a prima facie case to answer and whether the matter should proceed to full investigation.

8.2. The respondent will normally be informed of the allegation, the process, expected timescales, their right to respond, and available support unless doing so would compromise evidence, safety, legal obligations or the integrity of the assessment. The complainant will be informed of progress as appropriate and consistent with confidentiality obligations.

8.3. All communication will be copied to Complaints@abertay.ac.uk for reporting purposes.

9. Full Formal Investigation

9.1. If a full investigation is required, the University will appoint an investigation panel that is impartial, appropriately skilled, free from unmanaged conflicts of interest, and normally includes at least one member external to the University or otherwise independent of the relevant research area. The panel will review evidence, interview relevant individuals where appropriate, consider explanations and context, and determine whether allegations are upheld, not upheld, or partially upheld on the balance of probabilities unless another standard is required by law or applicable regulation.

9.2. The respondent will be given a fair opportunity to respond to the allegations and evidence. The panel may recommend corrective action, training, supervision, publication correction, data management actions, referral under staff or student procedures, funder or regulator notification, or other proportionate measures.

9.3. Full Formal Investigation will be managed and reported through Complaints@abertay.ac.uk.

10. Outcomes and Actions

10.1. The full formal investigation will recommend one or more of the following outcomes, which will be communicated to all relevant parties:

1. No case to answer and no further action.
2. No misconduct, but recommendations for training, supervision, mentoring, process improvement or clarification of expectations.

3. Questionable research practice requiring corrective or improvement action.
4. Research misconduct upheld in whole or in part, with referral to relevant disciplinary, capability, academic, student, contractual or governance procedures.
5. Correction, retraction, expression of concern or notification to journals, publishers, repositories, collaborators, funders, regulators, professional bodies or partner organisations, where appropriate.
6. Institutional learning actions, including review of policies, systems, approvals, supervision, data management, authorship practice or training provision.
7. Other (and actions stated).

11. Reporting to Funders, Regulators and External Bodies

11.1. The University will meet all contractual, legal, regulatory and funder reporting obligations. For research funded by UKRI, SFC, charities, government departments, industry sponsors, international or other funders, the University will follow applicable notification and reporting requirements, including reporting proven research misconduct where required.

11.2. Abertay submits an annual research integrity statement to the UK Committee on Research Integrity (UKCORI). This submission does not include data on undergraduate or postgraduate taught programme cases involving potential breaches of the Concordat to Support Research Integrity.

11.3. The Scottish Funding Council (SFC) requires the University to inform SFC of the outcomes of any full formal investigation of research misconduct (this does not apply to undergraduate or postgraduate taught programme cases). SFC should be informed immediately following the conclusion of any investigation, with a maximum delay of one month. The SFC is not an appeals body for individual cases and should not be contacted in this respect.

11.4. Reports on the outcomes of formal investigations will be submitted by Complaints@abertay.ac.uk to the University Executive and the Vice Principal Research & Innovation marked as confidential. External reporting by the Vice Principal Research & Innovation or the RIES office will be marked as confidential and sent to researchintegrity@sfc.ac.uk . Each report should provide the following information using the template:

- a brief factual statement about the nature of the allegation(s). The statement should cover the broad disciplinary area and time period in which the alleged misconduct took place and specify if the allegation(s) related to fabrication, falsification, plagiarism, failure to meet legal, ethical and professional

obligations, misrepresentation, improper dealing with allegations of misconduct, a form of research misconduct not included in the Concordat definition, or multiple areas of concern.

- the findings of the investigation including whether the allegation(s) were upheld (either partially or fully) or not upheld.
- a timeline summarising key stages of the investigation process from the point an allegation was first received, commenting as appropriate on how this aligns with timescales set out in relevant institutional policies.
- what actions are being taken if the allegation(s) were upheld. This may include referral for potential disciplinary action, retraction or amendment requests to publishers, and/or actions to mitigate the impact on ongoing research projects or other researchers.
- what, if any, changes to policy and practice may be implemented in response to this case and what assurances will be put in place as to their effectiveness.
- what, if anything, will be communicated publicly about the case.
- If allegation(s) were upheld and the formal investigation findings are known to be being appealed, this should be noted in the report, and an update should be submitted to SFC if the outcome of any formal investigation changes following an appeal.
- It is also expected that institutions disclose if a formal investigation has related, in whole or in part, to research supported by one of SFC's strategic research investments or to research conducted by a member of SFC's Research & Knowledge Exchange Committee.

12. Appeals

12.1. Following our normal appeals processes, a respondent may appeal the outcome of a full investigation on specified grounds, including procedural irregularity, new evidence that could not reasonably have been provided earlier, or evidence that the outcome was unreasonable in light of the findings. Appeals must be submitted in writing within the timescale specified in the outcome letter. An appeal is not a rehearing of the case.

13. Records, Data Protection and Confidentiality

13.1. The University will maintain secure records of concerns, assessments, investigations, decisions, actions and learning outcomes in accordance with data protection law, records management requirements and funder obligations.

Personal data will be processed lawfully, fairly and transparently. Records will be retained only for as long as necessary and in line with the University's retention schedule.

14. Support and Wellbeing

14.1. The University recognises that research misconduct processes can be stressful for complainants, respondents, witnesses, supervisors, students and research teams. Appropriate signposting to staff wellbeing, student support, trade union representation, independent advice, pastoral support and management support will be provided as appropriate.

15. Monitoring, Review and Annual Statement

15.1. The University will monitor the operation of this policy, report anonymised information as required for institutional governance and external accountability, and publish or contribute to an annual research integrity statement in line with sector expectations. This policy will be reviewed at least every three years, or sooner where required by changes to legislation, funder requirements, the Concordat, Scottish Funding Council policy, UKRIO guidance, or institutional experience.

16. Related Policy Documents and Supporting Documents

Legislation	SFC Research Integrity Policy; UK Concordat to Support Research Integrity
Strategy	University Research, Knowledge Exchange & Innovation Strategy
Policy	Research Ethics Policy and Practice;
Procedures	Abertay Complaints Handling Procedure
Guidelines	N/A
Local Protocol	N/A
Forms	N/A

17. Additional Information

Audience	Public
Applies to	All University Members
Classification	Academic Governance
Category	Research and Research Degrees
Subcategory	Conduct and Research Ethics
Approving Authority	Senate
Approval Date	4 November 2026
Effective Date	1 December 2026
Review Date	30 November 2029
Policy Document Author	Vice-Principal (Research and Innovation)
Policy Document Owner	Vice-Principal (Research and Innovation)

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