

PROCEDURE FOR THE INVESTIGATION OF AN ALLEGATION OF RESEARCH MISCONDUCT

Approved by Grace 1 of 14 February 2024

With effect from 23 February 2024

1. Overview

1.1 The University of Cambridge is committed to the highest standards of rigour and integrity in its research. For further information, please see the University's information relating to research integrity at <https://www.research-integrity.admin.cam.ac.uk/>.

1.2 The University is committed through the adoption of this procedure to ensuring that allegations of Research Misconduct are investigated with all possible thoroughness, transparency and sensitivity and in a robust, fair, consistent and timely manner. This is in compliance with and part of the University's commitment to the Concordat to Support Research Integrity.¹

1.3 This procedure will be reviewed every three years.

1.4 Appendix A of this procedure provides additional guidance on the implementation of this procedure and should be read alongside the main procedure.

2. Scope

2.1 This procedure applies where there is an allegation of Research Misconduct (as defined in section 3) against any person undertaking research either as a member of or whilst connected to a University institution or using University facilities or funding. This includes, but is not limited to, University employees and workers (staff), students, visiting scholars, emeritus staff, individuals with an honorary contract or voluntary research agreement with the University, and those holding honorary clinical contracts. (See paragraph 4.3.) This procedure does not apply to staff engaged for employment under Statute J 6 when undertaking research in the service of the Press and Assessment Department.

2.2 The University may also consider under this procedure allegations of Research Misconduct made against individuals where they relate to research carried out at a time when they were employed by or otherwise associated with the University, including former students. Allegations relating to individuals who have left the University may be investigated or acted upon, having regard to the seriousness of the issue raised, the credibility of the allegation, and the prospects of being able to investigate the matter fully and fairly.

2.3 This procedure does not apply to allegations of bullying, harassment, discrimination, sexual misconduct and victimisation as set out in the University's Dignity at Work Policy.² These should be raised informally or formally via the relevant grievance or disciplinary procedure³ for employees as appropriate. If an investigation under this procedure uncovers evidence of these types of inappropriate behaviour, this will be referred to the relevant disciplinary procedure.

2.4 This procedure does not apply to allegations relating to student work being prepared for examination or assessment. Such allegations should be handled according to the procedures and policy for investigating academic misconduct.⁴ This procedure also does not apply to complaints about the conduct of employees or other students, which are dealt with under other student procedures.⁵

2.5 This procedure is not part of the University's formal disciplinary procedures, nor does it override such procedures. However, the outcome of an investigation under this procedure may be to initiate other University procedures, including the relevant University disciplinary procedure. Allegations concerning the conduct of research will normally be considered first under this procedure, prior to any referral to a disciplinary procedure, unless the person responsible for the disciplinary procedure directs that the investigation is to be dealt with under that disciplinary procedure. Any evidence identified or produced through this procedure and the report of the Formal Investigation may be considered as part of any subsequent disciplinary process.

2.6 In cases involving a University employee, a finding of Research Misconduct may be considered serious or gross misconduct or, in the case of University officers, 'good cause' for dismissal under Section 4 of Chapter I in the Schedule to Statute C. Information gathered as part of an investigation conducted under this procedure, along with any findings, may be taken into account for the purposes of any disciplinary, capability or other University procedure, which could lead to formal disciplinary sanctions, up to and including dismissal. In cases involving a worker or a visiting scholar, a finding of Research Misconduct may result in the assignment or relevant visitor agreement (as appropriate) being terminated before the agreement end date.

¹ UUK, The Concordat to Support Research Integrity (2019), <https://www.universitiesuk.ac.uk/topics/research-and-innovation/concordat-support-research-integrity>.

² <https://www.hr.admin.cam.ac.uk/policies-procedures/dignity-work-policy>.

³ <https://www.hr.admin.cam.ac.uk/policies-procedures/disciplinary-action-grievances-and-appeals-0>.

⁴ See: <https://www.plagiarism.admin.cam.ac.uk/investigating>.

⁵ <https://www.studentcomplaints.admin.cam.ac.uk/harassment-sexual-misconduct/i-want-know-more-about-university-policies>.

2.7 In cases involving students or former students, a finding of Research Misconduct may be considered a breach of the University's Rules of Behaviour for Registered Students or Formerly Registered Students.⁶ Information gathered as part of an investigation conducted under this procedure, along with any findings, may be taken into account for the purposes of any disciplinary or other University procedure, which could lead to formal disciplinary sanctions, up to and including removal of University membership, removal of academic awards and permanent exclusion.

2.8 Allegations of misconduct unrelated to or having no impact on the research process do not fall under the remit of this procedure. Allegations relating to the misuse of research funds or equipment will not fall under the remit of this procedure unless the conduct complained of affects the manner in which research is conducted.

2.9 Complaints under this procedure may be made by any individual, regardless of whether that individual is employed by or is a student of the University, or by any organisation.

3. Definitions

In this procedure, the following terms shall have the following meanings:

Terms	Meaning
<i>Appeal Manager</i>	A University officer appointed by the Academic Secretary to hear an appeal.
<i>Appeal Stage</i>	The part of this procedure described in section 13.
<i>Appellant</i>	The Respondent or Complainant who is making the appeal.
<i>Complaint</i>	A report of alleged Research Misconduct that it has been decided should be investigated under this procedure, as set out in section 6.
<i>Complainant</i>	An individual or individuals who, or organisation or organisations which, raises a Concern or makes a Complaint.
<i>Concern</i>	A matter relating to potential Research Misconduct that has not yet been formally classed as a Complaint as set out under section 6.
<i>Dispute Resolution Process</i>	The process for handling Concerns that do not require investigation under this procedure, as set out in Appendix B.
<i>Formal Investigation</i>	An investigation under Stage 3 of this procedure (see section 10).
<i>Formal Investigation Committee</i>	A Committee consisting of at least three persons, at least one of whom should be external to the University, appointed by the relevant University committee to undertake a Formal Investigation as set out in sections 10 and 11.
<i>Head of Institution</i>	A Head of Department, Chair of Faculty Board or head of any other University Institution under the supervision of either the Council or the General Board.
<i>Independent Investigator</i>	An individual or individuals appointed by the Responsible Person to undertake an Initial Screening Review and/or Preliminary Investigation as set out in sections 8 and 9. The Independent Investigator will normally be a University officer and must have appropriate expertise, and experience in the relevant field, to investigate the case (see section A5). Where there are two Independent Investigators, they act jointly as an Investigatory Panel.
<i>Preliminary Investigation</i>	An investigation under Stage 2 of this procedure (see section 9).
<i>Research⁷</i>	A process of investigation leading to new insights, effectively shared. It includes work of direct relevance to the needs of commerce, industry, and to the public and voluntary sectors; scholarship ⁸ ; 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.
<i>Research Governance and Integrity Team</i>	A team within in the University Research Office designated to offer support to the Responsible Person in handling investigations under this procedure (email: researchintegrity@admin.cam.ac.uk).

⁶ See Ordinances, Chapter II (*Statutes and Ordinances*, p. 195).

⁷ The definition of Research adopted here is that given in: UUK, *The Concordat to Support Research Integrity* (2019), p. 18.

⁸ Scholarship is defined as the creation, development and maintenance of the intellectual infrastructure of subjects and disciplines, in forms such as dictionaries, scholarly editions, catalogues, and contributions to major research databases. UKRIO, *Procedure for the Investigation of Misconduct in Research* (2008), p. 30, see <https://ukrio.org/wp-content/uploads/UKRIO-Procedure-for-the-Investigation-of-Misconduct-in-Research.pdf>.

Terms	Meaning
<i>Research Misconduct</i> ⁹	<p>Behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld.</p> <p>Research Misconduct includes, but is not restricted to:</p> <ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ○ 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 the duty of care for humans involved in research, 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: <ul style="list-style-type: none"> ○ 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 whistleblowers, 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. <p>For the avoidance of doubt, Research Misconduct includes acts of omission as well as acts of commission. It also includes actions meeting the definitions above undertaken through recklessness or gross negligence.</p> <p>The standards by which allegations of Research Misconduct shall be judged are those applicable at the date that and for the discipline in which the behaviour under investigation took place. As such, no individual may be found guilty of Research Misconduct for systematic problems or failings. Any such issues should be handled through recommendations for action as set out in paragraph 14.1(e) below.</p> <p>Honest errors and differences in, for example, research methodology or interpretations do not constitute research misconduct.</p> <p>Research Misconduct does not include any alleged failure to meet legal, ethical or professional obligations not directly related to the research process (such as financial fraud, copyright or IP infringement, or export control violations), which will be handled under different University policies.</p>

⁹ The definition of Research Misconduct adopted here has been adapted from that given in: UUK, *The Concordat to Support Research Integrity* (2019), pp. 12–13.

Terms	Meaning
<i>Respondent</i>	An individual or individuals about whom a Complaint is made.
<i>Responsible Person</i>	The head of the University Institution in which the Research Misconduct is alleged to have occurred, or where the Respondent is not a member of a University institution, the Chair of the Board, Syndicate, or other body which is chiefly concerned with the Respondent's research. Where there is more than one University Institution involved or in the event of doubt, the Secretary of the Process will decide who is the Responsible Person.
<i>Secretary of the Process</i>	<p>(a) In any case where all potential Respondents are assistant staff, the Secretary of the Process shall be the Secretary of the Human Resources Committee.</p> <p>(b) In all other cases the Secretary of the Process shall be either of the following:</p> <p>(i) Where the Complaint concerns a University institution under the supervision of the General Board or postgraduate students registered with the University but working at a University Partner Institution recognised by the General Board, the Academic Secretary or a deputy appointed for this purpose (email academic.secretary@admin.cam.ac.uk).</p> <p>(ii) In the case of all other University institutions, the Registry or a deputy appointed for this purpose (email registry@admin.cam.ac.uk).</p> <p>(c) A member or members of the Research Governance and Integrity Team may act on behalf of the Secretary of the Process at any stage at the request of the Secretary of the Process.</p>
<i>Student</i>	Any student pursuing a course of study at the University of Cambridge, including those studying for a University of Cambridge qualification at another institution, who has undertaken research where that research does not form part of work prepared for examination or assessment (see paragraph 2.4).
<i>University Institution</i>	A Faculty, Department or other body under the supervision of the Council or the General Board.
<i>Working Day</i>	Any day excluding UK public holidays and weekends.

4. Procedure

4.1 The Secretary of the Process is responsible for overseeing the application of this procedure in relation to any Complaint. The Research Governance and Integrity Team supports the administration and running of the procedure.

4.2 The Research Governance and Integrity Team may, where necessary in the interests of fairness (for example, to resolve conflicts, inconsistencies or other practicalities), propose to the Secretary of the Process the variation of this procedure in a particular case. This may include the suspension or termination of an investigation under this procedure where necessary, for example where another procedure is more appropriate for handling a Complaint. The Secretary of the Process shall have discretion to approve variations where the Secretary judges that fairness to all parties is maintained and the objective of this procedure, as defined in paragraph 1.2, is achieved. Where the procedure is varied, a formal record of this decision and the reasons for it will be kept by the Research Governance and Integrity Team. Reasonable adjustments will be made to enable the full participation of any person involved in the procedure.

4.3 Where a Complaint concerns collaborative Research with other institutions, for example another University or NHS Trust, or where it concerns a Student registered with the University whilst pursuing a course of study at an approved University Partner Institution, an appropriate investigatory procedure will be determined between the relevant institutions. This will, where possible, be carried out according to the principles established in the Russell Group Statement of Cooperation in respect of cross-institutional research misconduct allegations.¹⁰ The resultant approach may be as laid out in a formal agreement between the institutions, or as determined on a case by case basis by the Secretary of the Process in liaison with the other institution. This may, where appropriate, include a joint investigation.

¹⁰ Russell Group Statement of Cooperation in respect of cross-institutional research misconduct allegations, <https://russellgroup.ac.uk/policy/policy-documents/research-integrity-statement-of-cooperation/>.

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4.4 Any breaches of statutory or regulatory requirements will be handled as required by the relevant statutory or regulatory framework. The nature of a Complaint may mean that it is necessary to notify legal or regulatory authorities, which may require the University to comply with an investigation led by a legal or regulatory authority, which will ordinarily take precedence over this procedure. This procedure may continue in parallel, but the Secretary of the Process may suspend the procedure, terminate it or take such other action as may be appropriate under the discretion in paragraph 4.2 above.

4.5 This procedure is designed to feed into other established University procedures where appropriate. Should a matter being investigated under this procedure be referred at any stage to an alternative University procedure, the alternative procedure shall be followed to the exclusion of this procedure, save for the matters set out in sections 14–16 and section A4, unless the involvement of other Respondents requires that investigation under this procedure continues in parallel. In such circumstances, information obtained through this procedure may be admitted in the parallel procedure, and vice versa.

4.6 No Complainant should be penalised by, or suffer any detriment within, the University for bringing a Complaint, unless that Complaint is found to be malicious or vexatious (see 4.8 below). Any employee or student who has made a Complaint and who feels that, as a result, they have suffered adverse treatment may submit a formal complaint under the relevant Grievance Procedure¹¹ or Student Complaint Procedure¹². In the case of workers or visiting scholars the matter will be dealt with according to the University Payment System (UPS) handbook¹³ or the relevant visitor agreement.

4.7 Where a member of staff feels unable to raise Concerns through this procedure, for example where they have reason to believe that doing so may lead to their suffering detrimental treatment, they may alternatively make an initial allegation under the process set out in the University's Whistleblowing Policy.¹⁴ Allegations made under the Whistleblowing Policy must be made in the public interest. Where an allegation is made under the Whistleblowing Policy, it shall be open to the person to whom the allegation is made to determine whether any internal investigation to be undertaken is carried out according to this procedure.

4.8 If a Complaint is found to be malicious or vexatious at any stage of the procedure, appropriate action may be taken against the Complainant, which may in some cases include referral to the relevant disciplinary procedure if the Complainant is an employee.¹⁵

4.9 At each stage of the procedure, the Responsible Person may recommend that the Respondent should be suspended, excluded from University premises, and/or required to carry out restricted duties. Any such recommendation should be taken in accordance with the guidance on suspension provided in section A1.

4.10 Counter-allegations of Research Misconduct made during the course of the procedure will be handled as separate Complaints under this procedure.

4.11 Where there are multiple Respondents, each Respondent will be kept informed through separate meetings and separate written correspondence. Throughout the procedure every effort will be made to keep matters confidential to each Respondent and distinct where practical.

4.12 The Secretary of the Process may seek confidential advice in relation to any aspect of this procedure from those with relevant expertise, including on behalf of the Responsible Person or the Formal Investigation Committee.

5. Raising Concerns informally

5.1 The University promotes an open culture which supports confidential discussion of any concerns about standards of conduct in Research at the earliest opportunity.

5.2 Should any individual or organisation have a Concern of any sort but be unsure whether there are grounds to make a formal Complaint, they are strongly encouraged to raise their Concern at the earliest opportunity informally with the relevant Head of Institution. For the avoidance of doubt, seeking informal advice is not a required stage of this process; a formal Complaint under section 6 of this procedure may be made without seeking informal advice.

5.3 Informal and confidential advice may alternatively be sought from the Research Governance and Integrity Team by contacting researchintegrity@admin.cam.ac.uk. Specialist advice is also available from the Human Resources Division and the Office of Student Conduct, Complaints and Appeals Office in accordance with section A8.

¹¹ <https://www.hr.admin.cam.ac.uk/policies-procedures/disciplinary-action-grievances-and-appeals-0>.

¹² <https://www.studentcomplaints.admin.cam.ac.uk/student-complaints>.

¹³ See the key documents on the following webpage: <https://www.hr.admin.cam.ac.uk/information-workers>.

¹⁴ <https://www.hr.admin.cam.ac.uk/policies-procedures/whistleblowing-policy-public-disclosure-university-employees>.

¹⁵ A vexatious complaint is one that is made with the intention to harass, annoy or subdue somebody, or that is unreasonable, without foundation, frivolous, repetitive, burdensome or unwarranted.

A malicious complaint is one that is made with the intention to intimidate, to lower the reputation of, or otherwise injure or harm to an individual, through knowingly providing false or misleading information or withholding information about an incident or issue.

6. Raising Concerns formally

6.1 Concerns may be raised formally by an individual or organisation contacting the relevant Head of Institution in writing. Where the Complainant believes that the Head of Institution may have a conflict of interest in the matter, Concerns may be raised with the Secretary of the Process. Concerns relating to Research Misconduct received through other means will be referred to the Head of Institution, the Research Governance and Integrity Team, or the Secretary of the Process as appropriate.

6.2 Where a Concern has been raised with a Head of Institution, the Head of Institution shall decide whether the matter relates solely to their University Institution. In such cases, the Head of Institution will normally become the Responsible Person for implementing this procedure. Where a Concern has been raised directly with the Secretary of the Process, or the Head of Institution has a conflict of interest in the matter (see section A5), the Secretary shall identify an appropriate Responsible Person.

6.3 Upon receipt of a Concern, the Responsible Person will first consider whether it would be more effective to handle the Concern through the Dispute Resolution Process (as set out in Appendix B) than for it to be investigated under this procedure.

6.4 It may be appropriate to refer a Concern to the Dispute Resolution Process where:

- (a) the Concern is one brought to seek redress or to settle a dispute (such as a Concern regarding unfair authorship practices or seeking a correction to a published article); and
- (b) it remains possible to address the Concern (e.g. through an agreement by the Respondent to take particular action to address the Concern, such as correcting a published article); and
- (c) the Responsible Person is satisfied that, should the Concern have substance, corrective action would be sufficient to address the Concern (i.e. disciplinary action against the Respondent would not be appropriate).

6.5 Should the Responsible Person decide that a Concern would most effectively be handled through the Dispute Resolution Process, the Responsible Person shall write to the Complainant to seek consent for this process to be used. Concerns may only be referred to the Dispute Resolution Process with the written consent of the Complainant. Should the Complainant agree, the Dispute Resolution Process may be followed to the exclusion of this procedure (please refer to Appendix B).

6.6 Should the Responsible Person decide that the Dispute Resolution Process would not be appropriate or the Complainant does not consent to its use, the Concern shall henceforth be considered a Complaint of Research Misconduct and this procedure will continue to be followed.

7. Investigation stages

7.1 Summary table

	<i>Name of stage</i>	<i>Purpose</i>	<i>Carried out by</i>	<i>Approximate timeline</i>
Stage 1	Initial screening review	To determine whether the Complaint falls within the scope of the procedure, meets the definition of Research Misconduct, and is not trivial or clearly without foundation, and therefore should be subject to a Preliminary Investigation.	Independent Investigator	Complete within approximately 15 Working Days of receipt of the Complaint.
Stage 2	Preliminary Investigation	To evaluate the facts of the Complaint in order to ascertain whether there is sufficient evidence of a case of Research Misconduct to require a Formal Investigation.	Independent Investigator	Complete within approximately 30 Working Days from the date a decision is taken to move to Stage 2.
Stage 3	Formal Investigation	To examine and evaluate all the relevant evidence and conclude whether Research Misconduct took place and if so, who was responsible.	Formal Investigation Committee	Complete within approximately 40 Working Days from the date a decision is taken to move to Stage 3.

8. Stage 1 – Initial screening review

8.1 Once it has been decided that a Concern will be handled under this procedure, the Responsible Person will inform and seek advice from the Secretary of the Process and the Research Governance and Integrity Team. Advice should also be sought from a HR Business Partner or HR Adviser or, in the case of a Respondent who is a current or former Student, the Senior Tutor of the Student's College and the Head of the Student Conduct, Complaints and Appeals Office (see section A4).

8.2 The Responsible Person shall determine whether the Complaint identifies a situation where immediate action is needed to prevent risk of harm to humans, animals or to the environment, or to prevent illegal activity, and if necessary take such action as the Responsible Person thinks fit and in accordance with section A1. Where the Responsible Person identifies potential for serious reputational harm to the University, they shall inform the Academic Secretary of the risk.

8.3 The Responsible Person, or the Research Governance and Integrity Team on the Responsible Person's behalf, shall acknowledge receipt of the Complaint in writing and provide the Complainant with a copy of this procedure.

8.4 The Responsible Person will appoint an Independent Investigator (or two Independent Investigators acting jointly as an Investigatory Panel in more complex cases) to conduct the initial screening review (see section A5).

8.5 The Independent Investigator will then carry out an initial screening review. The review will normally take the form of a paper review of the evidence provided as part of the Complaint. The Independent Investigator may request further information from the Complainant if this is required to make a judgement. The purpose of the initial screening review is to determine that:

- (a) the Complaint falls within the scope of this procedure as set out in section 2 above;
- (b) the subject-matter of the Complaint falls within the definition of Research Misconduct, as set out in section 3 above; and
- (c) the Complaint is not trivial or clearly without foundation.

8.6 The initial screening review should be completed as soon as possible, normally within 15 Working Days of receipt of the Complaint. This is an indicative deadline and may be extended where the Responsible Person judges this necessary. Nonetheless, the Responsible Person will acknowledge receipt of the Complaint within 15 Working Days and will inform the Respondent and the Complainant if the initial screening will take longer than set out above and the reasons for this.

8.7 The Independent Investigator shall inform the Responsible Person of the outcome of the initial screening review. The Independent Investigator's findings should be provided to the Responsible Person in writing, but not necessarily in the form of a formal report, and should clearly set out whether, in the opinion of the Independent Investigator, the Complaint meets all of the requirements set out in paragraph 8.5. Where two Independent Investigators have been appointed and they disagree on whether those requirements are met, the nature and reasons for the disagreement shall be set out in writing.

8.8 Should the initial screening review conclude that the Complaint does not meet all of the requirements set out in paragraph 8.5, the Responsible Person may dismiss the Complaint or refer the Complaint to an alternative internal or external procedure or authority, as appropriate.

8.9 If the initial screening review concludes that the Complaint meets all of the requirements set out in paragraph 8.5, the Responsible Person shall establish a Preliminary Investigation under Stage 2.

8.10 The Responsible Person shall inform the Complainant, the Secretary of the Process and the Research Governance and Integrity Team of their decision in writing.

8.11 The Complainant may appeal a decision to dismiss a Complaint under section 13.

9. Stage 2 – Preliminary Investigation

9.1 Once a decision has been made to establish a preliminary investigation, the Responsible Person will, seeking confidential advice where necessary:

- (a) comply with any requirement under grant conditions, law, or other obligations, to report the establishment of a Preliminary Investigation to funders of Research, publishers, regulators and professional and/or statutory bodies (see paragraph A4.6). Reports to such bodies may also be required at subsequent stages of the procedure.
- (b) take all possible steps to ensure that relevant Research, records or materials which might be required for evidentiary purposes or which may have been compromised by the alleged Research Misconduct, are preserved and if appropriate secured.

9.2 The Responsible Person will ask the Independent Investigator to conduct the Preliminary Investigation. If required, for whatever reason, the Responsible Person may choose to appoint a new or a second Independent Investigator at this stage (see section A5).

9.3 The Responsible Person will:

- (a) inform the Complainant in writing that the Complaint will be subject to a Preliminary Investigation, providing the identity of the Independent Investigator, a copy of this procedure and any materials necessary for the Complainant's involvement in the investigation, and explain the next steps and timescales;

- (b) inform the Respondent of the intention to establish a Preliminary Investigation, providing details of the Independent Investigator, copies of the materials and a copy of the written findings of the initial screening review (subject to paragraph A2.5), a copy of this procedure, and explain the next steps and timescales, including the opportunity for the Respondent to respond to the Complaint and provide additional information or evidence, and the potential consequences should the Complaint be upheld. Where possible this should be done at a confidential meeting to which the Respondent may be accompanied as set out in section A3. Where this is not possible (for example, because the Respondent is no longer based in the University), this should be done through a formal confidential letter (delivered by post or electronically);
- (c) advise the Complainant and the Respondent on the circumstances in which they may request the replacement of the Independent Investigator as set out in paragraph A5.4.

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

9.5 The Responsible Person will provide the Independent Investigator with copies of all materials necessary to undertake the Preliminary Investigation. The Secretary of the Process will arrange administrative support for the Preliminary Investigation, which will usually be provided by the Research Governance and Integrity Team.

9.6 The purpose of the Preliminary Investigation is to evaluate the facts of the Complaint in order to ascertain whether there is sufficient evidence of a case of Research Misconduct to require a Formal Investigation under Stage 3 of this procedure. The Independent Investigator will need to be satisfied that the information is sufficiently complete to be able to reach an informed decision. The Preliminary Investigation will normally include interviewing the Complainant and the Respondent. Any new evidence collected by the Independent Investigator, including notes of interviews, will be provided to the Respondent. The Complainant will receive any materials necessary for their involvement in the investigation.

9.7 The investigation should normally take no more than 30 Working Days from the date of the decision to establish a Preliminary Investigation until the delivery of the draft report to the Respondent (see paragraph 9.9 below). Should the Independent Investigator determine that more time will be needed to complete the Preliminary Investigation, the Independent Investigator may seek the permission of the Secretary of the Process to extend this deadline. The Secretary of the Process will inform the Respondent and the Complainant of any extension to the deadline and the reasons for this.

9.8 The Independent Investigator will prepare a written report, setting out the evidence which has been evaluated and a conclusion as to whether in their opinion there is sufficient evidence of a case of Research Misconduct to require a Formal Investigation under Stage 3. Where the investigation has identified systemic challenges to research integrity or identified potential improvements to University policies, procedures or support, these should also be clearly set out in the report.

9.9 The Independent Investigator will provide the Respondent with a draft copy of the report and give the Respondent an opportunity to comment in writing on the factual accuracy of the report within 10 Working Days. The Respondent's written comments will be attached as an annex to the report. Only where the Independent Investigator judges that the report contains errors of fact should the Independent Investigator modify the report. If changes are made, the Independent Investigator will provide the Respondent with an amended copy of the report, with amendments clearly identified, and will give a further opportunity to the Respondent to comment on the changes made.

9.10 The Independent Investigator will provide the Responsible Person and the Respondent with the final version of the report. The report will set out the outcome of the Preliminary Investigation, which will be one or more of the following findings:

- (a) There is insufficient evidence of a case of Research Misconduct and the matter should be closed.
- (b) It is not appropriate to consider the matter under this procedure and it should be referred for consideration under another University procedure or be dealt with by other means. This could include a referral for consideration under another disciplinary procedure, in which case the Responsible Person would consider whether any actions are necessary under section 14 after the conclusion of that disciplinary procedure.
- (c) There is insufficient evidence of a case of Research Misconduct for the matter to require further investigation under this procedure, but there is evidence of a lesser infraction or an honest error, with no evident intention to deceive and not the result of recklessness or gross negligence, that should be addressed through mentoring, education and training or other non-disciplinary approaches.¹⁶ The Responsible Person must consider the advice of the Secretary of the Process before concluding that a case may be dealt with through non-disciplinary measures.
- (d) There is sufficient evidence of a case of Research Misconduct to require a Formal Investigation under Stage 3 (see section 10 below).

¹⁶ For example, an accidental failure in referencing caused by a poorly managed drafting process or an infraction clearly attributable to lack of appropriate training might be dealt with in this fashion.

9.11 The Responsible Person will inform the Secretary of the Process and Research Governance and Integrity Team in writing of the Independent Investigator's decision, providing them with a copy of the report. Where the Responsible Person is not the Respondent's Head of Institution, the Head of Institution should also be informed and provided with a copy of the report. Where any Respondent is a member of staff, the Director of Human Resources or their nominated deputy shall also be provided with a copy of the report. Where the Respondent is a Student, the Senior Tutor of the Student's College shall also be provided with a copy of the report. The Responsible Person shall write to the Complainant and to the Respondent to inform them of the outcome of the Preliminary Investigation and explain the next steps.

9.12 If an investigation is closed at Stage 2, the Complainant may appeal that decision under section 13. If the decision is a finding under paragraph 9.10(b), (c) or (d) above, the Respondent may appeal that decision under section 13.

10. Stage 3 – Formal Investigation

10.1 If it is established that there is evidence of a case of Research Misconduct the Responsible Person shall refer the case to the Secretary of the Process and the Research Governance and Integrity Team to establish a Formal Investigation.

10.2 The purpose of a Formal Investigation is to examine and evaluate all the relevant evidence and whether it is sufficient to support a decision by the Responsible Person that Research Misconduct has taken place and, if so, who was responsible and what action should ensue.

10.3 The Secretary of the Process shall ask the relevant University committee to appoint a Formal Investigation Committee to undertake a Formal Investigation.

- (a) The relevant University committee shall be the Human Resources Committee where the Respondent is a member of assistant staff, the General Board where the Complaint concerns a University Institution under the supervision of the General Board or a postgraduate Student registered with the University but working at a University Partner Institution recognised by the General Board, and the Council where the Complaint concerns any other University Institution. In any instances where it is unclear which body should appoint the Formal Investigation Committee, the Secretary of the Process shall decide the most appropriate means of doing so. The Secretary of the Process may, where the Secretary considers this necessary, ask the Chair of the relevant University committee to appoint the members of the Formal Investigation Committee by Chair's action, for subsequent report to the University committee.
- (b) The Formal Investigation Committee shall consist of at least three persons, one of whom shall be appointed as the Chair and at least one of whom shall be an external member.¹⁷ Those members of the Formal Investigation Committee who are not external shall be University officers and shall not hold an affiliation or appointment in the same University Institution as either the Respondent or the Complainant. The Chair will not normally be an external member. All members must have appropriate expertise to investigate the case, experience in the relevant field, and must have no conflict of interest in, or previous involvement with, the case (see section A5).

10.4 The Secretary of the Process will:

- (a) define in writing the Complaint to be investigated;
- (b) inform the Respondent and the Complainant in writing of the Complaint to be formally investigated, the names of the members of the Formal Investigation Committee and details of next steps and timescales;
- (c) explain to the Respondent and the Complainant the circumstances in which they may request the replacement of members of the Formal Investigation Committee under paragraph A5.3;
- (d) inform the Complainant that they will be invited to be interviewed and the Respondent that they will be invited to a hearing in due course, explaining the arrangements for these meetings (including that the Respondent will be able to ask questions about the evidence, provide additional information and call witnesses as part of the hearing).
- (e) appoint an individual to act as secretary to the Formal Investigation Committee, who will usually be a member of the Research Governance and Integrity Team.

10.5 The Formal Investigation should normally take up to 40 Working Days from the date of the decision to establish a Formal Investigation until the delivery of the draft report to the Respondent (see paragraph 10.11 below). Should the Chair of the Formal Investigation Committee determine that more time will be needed to complete the Formal Investigation, they may seek the permission of the Secretary of the Process to extend this deadline. The Secretary of the Process will inform the Respondent and Complainant of any extension to the deadline and the reasons for this.

¹⁷ For the purposes of this procedure, the definition of 'external member' in Special Ordinance A (viii) 6 shall apply, i.e. any person who at the time of appointment is not qualified to be a member of the Regent House except under Special Ordinance A (i) (a)(ii) nor is an employee of the University or any of its companies or a College. For allegations involving staff on honorary clinical contracts the Committee may include members from the employing NHS Trust, but those members will not be considered external members.

10.6 The Formal Investigation Committee will:

- (a) examine all relevant documentation from Stages 1 and 2 of the procedure;
- (b) identify whether it requires further information and obtain this;
- (c) interview the Complainant, as well as any other individuals whom the Formal Investigation Committee believe may possess knowledge or information relevant to the Complaint. With the exception of the Complainant, individuals interviewed at the Preliminary Investigation Stage will not be interviewed again unless the Chair of the Committee considers this necessary;
- (d) provide the Respondent with all evidence, including notes of interviews, subject to paragraph A2.5; and
- (e) provide the Complainant with all evidence necessary to participate in the Formal Investigation.

10.7 Once all interviews have been completed and all notes and evidence have been shared with the Respondent, the Formal Investigation Committee will then invite the Respondent, in writing, to a hearing, which will be held without unreasonable delay. The Respondent will be provided with a reasonable amount of time to prepare their case in advance of the hearing. The Respondent may submit additional evidence in advance of the hearing and will be invited to call witnesses to support their case. The Respondent must provide reasonable advance notice to the secretary of the Formal Investigation Committee of any intention to call witnesses. Witnesses called by the Respondent or the Formal Investigation Committee may attend the hearing to provide their statement in person or instead provide a witness statement in advance of the hearing if they attend but prefer not to present their own statement or if they are unable to attend (hearings will not be delayed to enable witnesses to attend in person). The Respondent should make every effort to attend the hearing.

10.8 At the hearing the Formal Investigation Committee will explain the Complaint, discuss the evidence, and ask the Respondent questions. The Respondent will be given the opportunity to set out their response to the Complaint, ask the Committee questions, present their own evidence, call witnesses to support their case and raise points about the information provided by witnesses. The Respondent is encouraged to provide any new written evidence in advance of the meeting. If the Chair of the Formal Investigation Committee considers that it is in the interest of fairness to do so, the Respondent may introduce new additional evidence (including the calling of additional witnesses) after circulation of the papers for the hearing or at the hearing. The Chair of the Formal Investigation Committee may at their discretion decide to adjourn the hearing, provided that any adjournment will not lead to an unreasonable delay.

Following the hearing, the Formal Investigation Committee will consider its conclusions in private. The Formal Investigation Committee will aim to make a unanimous decision, failing which a majority decision will be acceptable.

10.9 The Formal Investigation Committee will prepare a final written report. The report will summarise the evidence collected by the Formal Investigation Committee (and by the Respondent, if applicable) and provide its conclusions, with the reasons for these, and may make recommendations for actions to be taken by the Responsible Person (see paragraph 11.3). Where the Formal Investigation Committee is unable to reach a definitive conclusion, it will give its reasons and make recommendations on possible methods for closure.

10.10 The Formal Investigation Committee may also make any further recommendations as it sees fit. This might include measures to safeguard Research participants, correct the Research record or investigate other matters of possible misconduct. Where the Formal Investigation has identified systemic challenges to research integrity or identified potential improvements to University policies, procedures or support, these shall also be clearly set out in the report.

10.11 The secretary to the Formal Investigation Committee shall provide the Respondent with a draft copy of the report and an opportunity to comment in writing on the factual accuracy of the report within 10 Working Days. The written comments will be attached as an annex to the report. Only where the Formal Investigation Committee judges that the report contains errors of fact should it modify the report. If changes are made, the secretary to the Formal Investigation Committee shall provide the Respondent with an amended copy of the report, with amendments clearly identified, and give the Respondent a further opportunity to comment on the changes made.

10.12 The secretary to the Formal Investigation Committee shall provide the final version of the report to the Respondent, the Secretary of the Process, the Responsible Person and the Research Governance and Integrity Team.

11. Action on receipt of a Stage 3 report

11.1 The Responsible Person, taking the advice of the Secretary of the Process and the Research Governance and Integrity Team, will consider the report and will take such action as they deem appropriate in light of the findings of the Formal Investigation Committee.

11.2 Actions taken by the Responsible Person will be one or more of the following:

- (a) a determination that Research Misconduct has not taken place, and the Complaint should be dismissed;
- (b) a determination that Research Misconduct has taken place such that it will be referred for consideration under the applicable University disciplinary procedure (see section 12). For the purposes of reporting and other consequential actions under section 14, this will be considered a finding of Research Misconduct on the balance of probabilities against the Respondent. Results of any investigation undertaken under this procedure, including the final report and any evidence collected, may be taken into account for the purposes of any disciplinary procedure;

- (c) a determination that Research Misconduct has not taken place, but the evidence does indicate a lesser infraction or an honest error, with no evident intention to deceive and not the result of recklessness or gross negligence, that should be addressed through mentoring, education and training or other non-disciplinary approaches. The Responsible Person must consider the advice of the Secretary of the Process before concluding that a case may be dealt with through non-disciplinary measures;
- (d) a determination that Research Misconduct has not taken place, but the Formal Investigation has identified matters that should be referred for consideration under another University procedure or be dealt with by other means;
- (e) in the case of a Complaint relating to a Respondent who is not a University employee or a Student, a recommendation as to the appropriate next step bearing in mind the status of the Respondent.

11.3 The secretary to the Formal Investigation Committee shall provide the Respondent and the Complainant with written confirmation of the decision following the Final Investigation and the actions being taken, which should summarise the reasons for those decisions.

11.4 If the Complaint is dismissed at Stage 3, the Complainant may appeal the decision under section 13.

11.5 If the decision following the Formal Investigation is any of the actions under paragraph 11.3(b)–(e), the Respondent may make an appeal under section 13.

12. Referral to a disciplinary procedure

12.1 Should there be a decision at the Formal Investigation stage of this procedure (Stage 3) that the matter should be referred for consideration of the appropriate sanction under the University disciplinary procedure applicable to the Respondent, the matter shall proceed according to that disciplinary procedure. Where more than one procedure may be appropriate, the Secretary of the Process shall take advice from HR or, in the case of students, the Office of Student Conduct, Complaints and Appeals.

12.2 In the case of University officers, for whom the relevant disciplinary procedure is contained in Chapter III of the Schedule to Statute C, a decision will be made by the Responsible Person under that disciplinary procedure as to whether the matter should be addressed within the Department or other institution under sections 2 or 3, or referred to the Vice-Chancellor under section 5, of that chapter (<https://www.admin.cam.ac.uk/univ/so/>). The Responsible Person may ask the Formal Investigation Committee to provide an additional report assessing its findings against the higher standard of proof (beyond reasonable doubt) where the matter has or may be referred to the Vice-Chancellor under Chapter III of the Schedule to Statute C.

12.3 For unestablished academic and academic-related staff (including contract research staff), the matter will be handled according to the Statement of the University's policy and procedures relating to disciplinary action, grievances and appeals in respect of unestablished academic and academic-related staff (<https://www.hr.admin.cam.ac.uk/policies-procedures/disciplinary-action-grievances-and-appeals-0/disciplinary-grievances-and-appeals>).

12.4 In the case of assistant staff, the matter will proceed according to the Disciplinary Procedures set out in the Assistant Staff Handbook (<https://www.hr.admin.cam.ac.uk/hr-staff/information-staff/assistant-staff-handbook/disciplinary-procedures>).

12.5 In the case of clinical staff, the matter will proceed according to the disciplinary procedures relevant to both the University and the relevant NHS Trust where the postholder holds an honorary clinical contract. The report on the Formal Investigation and any relevant information including the outcome of any disciplinary process will be shared with the relevant NHS Trust and regulatory body (GMC/NMC/HCPC) where appropriate.

12.6 In the case of University Students or former Students, the matter will proceed according to the University Student Disciplinary Procedure (<https://www.studentcomplaints.admin.cam.ac.uk/student-discipline>).

12.7 In cases in which the Respondent is not an employee, Student or former Student of the University, it will not be possible for the University to take disciplinary action. In the case of workers employed by the University or visiting scholars, the matter will be dealt with according to the UPS handbook or the relevant visitor agreement as appropriate and may lead to the termination of the assignment or visitor agreement.

12.8 The decision following a Formal Investigation under this procedure resulting in an action under paragraph 11.2(b) will not be retrospectively affected by any subsequent disciplinary procedure. For the avoidance of doubt, a determination under paragraph 11.2(b) shall not be reversed by the decision in subsequent disciplinary proceedings. The Respondent may appeal the findings of an investigation undertaken under this procedure as part of an appeal against the decision following the Formal Investigation under section 13.

13. Appeal

13.1 Should either the Respondent or Complainant wish to appeal the outcome of this procedure, they can do so by making written representations to the Secretary of the Process within 15 Working Days of receipt of the decision. For the purpose of this Appeal Stage, the outcome is the decision that concludes the procedure as described in previous sections, including but not limited to any actions the Responsible Person decides to take under paragraph 11.2. The Respondent or Complainant will set out the grounds of appeal and state whether the appeal is in respect of the whole or any specified part of any finding of fact or decision.

13.2 The Academic Secretary will appoint an Appeal Manager, who will be a University officer of seniority equivalent to or greater than the Responsible Person, and who has no conflict of interest and has had no previous involvement in the case. A member of the Research Governance and Integrity Team and an HR representative will be appointed to provide procedural advice to the Appeal Manager. The Appeal Manager will receive all documents relied upon by the Responsible Person in reaching a decision.

13.3 During the appeal proceedings, the Appellant will not be entitled, except with the agreement of the Appeal Manager, to rely on any grounds of appeal not specified in their written appeal.

13.4 Where the appeal directly affects another person (for example, the Complainant, if the Respondent submits an appeal, or vice versa), that person should be advised of the appeal, the likely timescale for considering it, and the outcome of the appeal. If new information is required from that person in order to decide the outcome of the appeal, they will be provided with the necessary information and an opportunity to respond to the points made in the grounds of appeal. The person affected will be told if anyone else is to be informed about the appeal outcome and about the type of information they will be given.

13.5 An appeal hearing should be arranged without unreasonable delay. Notes will be taken at the appeal hearing.

13.6 The Appellant may make representations in person and/or in writing at the appeal hearing.

13.7 Unless the Appellant has indicated they do not wish to make representations in person, they must make every effort to attend the hearing. If the Appellant fails to attend without good reason, or is persistently unable to do so, the Appeal Manager may proceed on the evidence available in the Appellant's absence.

13.8 Others involved in the investigation (e.g. the Responsible Person, the Investigator or witnesses) may be asked to attend the appeal hearing, or to provide written representations in advance of the hearing, to respond to questions raised by the Appeal Manager. Anyone attending the appeal hearing may be accompanied as set out in section A3.

13.9 The Appeal Manager may set time-limits for each stage of the appeal proceedings, including a time-limit within which the hearing will take place, so that the appeal will be heard and determined as expeditiously as is reasonably practicable. The Appeal Manager may at their discretion decide to adjourn the appeal hearing, provided that any adjournment will not lead to an unreasonable delay.

13.10 Following the appeal hearing, the Appeal Manager will consider the facts of the case and may uphold or dismiss the appeal, in whole or in part.

13.11 The Appeal Manager will notify the Appellant of their decision in writing, setting out reasons for the decision. This should occur without unreasonable delay and wherever possible within 10 working days of the appeal hearing. A copy of the letter will be sent to the Secretary of the Process. In cases where the Respondent is not the Appellant, the Respondent should be advised of any parts of the Appeal Manager's decision relevant to them.

13.12 The Appeal Manager may decide to vary the above Appeal Stage procedure as they deem appropriate, provided the appeal is dealt with fairly and impartially and without unreasonable delay.

13.13 There is no further right to appeal the outcome of this procedure.

14. Completion of the procedure

14.1 Following the issue of a decision in writing concluding the procedure, or the referral of the matter for consideration under another procedure (following, if appropriate, the conclusion of any appeal under section 13), the Responsible Person shall ensure that the following actions are taken, aiming to complete them within three months of completion of the Formal Investigation:

- (a) the notification of all regulatory, funding or other bodies required to be notified of the outcome of the procedure under grant conditions, by law or other obligations;
- (b) the notification of Research participants or patients (and their doctors) as circumstances, contractual and ethical obligations and statutory requirements dictate;
- (c) the notification of any third parties deemed by the Responsible Person to have a legitimate interest in the outcome of the procedure, for example, other employing institutions;
- (d) the recommendation of any changes to the internal management procedures governing the Research concerned, including training and enhanced supervision where appropriate;
- (e) discussion with the Research Governance and Integrity Team of any recommendations or lessons learnt that suggest the need for changes to University policies, procedures or support. Where serious systemic research integrity issues have been identified, the Research Governance and Integrity Team will inform the Pro-Vice-Chancellor with responsibility for Research and agree steps for action to address these;
- (f) the rectification of the Research record where required, including but not limited to informing the editors of any journals that have published articles concerning Research linked to a Complaint which has been upheld.

14.2 If, at any stage of the procedure, a Complaint is dismissed, withdrawn or found to be unsubstantiated, the Responsible Person shall take any action they deem necessary to protect the interests and reputation of the Respondent and the University. This may include ensuring that all those who had been made aware of the Complaint are informed in writing that the Complaint has been investigated and that no further action is to be taken. If the Complaint or the substance of the Complaint was published, the University will make public the outcome of the procedure.

14.3 In handling the outcome of this procedure, or of any procedure to which a Complaint made under this procedure is referred, the Responsible Person will not make inappropriate use of legal instruments, such as non-disclosure agreements, to censor parties.

14.4 Where the decision under Stage 2 or Stage 3 of this procedure is that the Respondent is to undertake mentoring, education, training or another activity, the Respondent's failure to participate in such activity may result in disciplinary action being taken.

15. Continuation of investigation

15.1 The Responsible Person may decide to take no further action at any point during this procedure for good cause, including the receipt of new information about the Complaint. The Respondent resigning from, or otherwise leaving, the University before the conclusion of this procedure alone shall not constitute good cause. The Respondent should also be advised that the University may inform, and in some cases may be legally obliged to inform, future employers, regulatory, funding or professional bodies that a Complaint has been made, irrespective of whether the procedure has concluded.

15.2 Where the Respondent admits the Complaint made against them, or otherwise admits Research Misconduct, the Responsible Person, with the advice of the Secretary of the Process, will decide whether to continue with this procedure or to refer the matter for consideration under a University disciplinary procedure as set out in section 12.

15.3 Where the Complainant withdraws the Complaint or fails to participate in the procedure, the Responsible Person, with the advice of the Secretary of the Process, will nevertheless seek, wherever possible, to complete the procedure.

16. Record-keeping

16.1 On the completion of any investigation under this procedure, the Responsible Person and, if appropriate, the secretary to the Formal Investigation Committee will provide the Research Governance and Integrity Team with all substantive records in their possession relating to the investigation procedure, including notes of meetings. A record of every Complaint, its outcome and the location of all records relating to that Complaint will be kept by the Research Governance and Integrity Team.

16.2 The Research Governance and Integrity Team will ensure that proper records of all stages of the procedure are kept in accordance with the University's Statement of Records Management Practice and Master Records Retention Schedule.¹⁸

Procedure Owner: Research Governance and Integrity Team
Date Last Reviewed: 14 February 2024
Date of Next Review: 14 February 2027

¹⁸ <https://www.information-compliance.admin.cam.ac.uk/records-management>.

Appendix A: Supplementary Information on the Implementation of the Procedure for the Investigation of an Allegation of Research Misconduct

A1. Suspension, exclusion and/or modified duties

A1.1 At any stage of the procedure, the Responsible Person may recommend that the Respondent should be suspended from work on full pay or from study, excluded from all or part of the University premises¹, and/or required to carry out modified duties. This recommendation should be made with the advice of the Secretary of the Process and the HR Division² or, for Students, the Office of Student Conduct, Complaints and Appeals. The suspension, exclusion and/or modified duties will be taken in accordance with the relevant procedure for the Respondent.

A1.2 Suspension, exclusion and/or modified duties are not disciplinary decisions, although in some cases, the procedure for making such decisions is part of a disciplinary procedure. Imposing such conditions does not imply that any decision has been made about whether or not Research Misconduct has been committed.

A1.3 In the case of a University officer, the Responsible Person shall refer the matter to the Vice-Chancellor, in accordance with Section 5 of Chapter III of the Schedule to Statute C, and the Vice-Chancellor shall determine whether or not suspension, exclusion and/or modified duties is appropriate pursuant to Section 7 of Chapter III of the Schedule to Statute C. Thereafter, the procedure in Chapter III of the Schedule to Statute C shall be followed in relation to the Complaint against that individual Respondent, subject to paragraph 4.5 of the Procedure for the Investigation of an Allegation of Research Misconduct.

A1.4 In the case of an employee who is not a University officer, if the Responsible Person considers that suspension, modified duties and/or exclusion from University premises is appropriate, they shall refer the question to the Respondent's Head of Institution, who shall in each case determine whether the action should be taken in accordance with the relevant disciplinary procedure, and if so, be responsible for informing the Respondent and monitoring the decision until such time as it comes to an end.

A1.5 In the case of a Student, the Responsible Person shall refer the matter to the Head of the Student Conduct, Complaints and Appeals Office for consideration under the appropriate procedure.³

A1.6 In relation to any other Respondent, the Responsible Person may consider whether suspension, exclusion and/or modified duties would be appropriate in relation to the status of the Respondent and what, if any, procedure would be applicable.

A1.7 If an individual is suspended, placed on modified duties or excluded from University premises, this situation should be monitored and if, at any stage, the conditions imposed on the individual concerned are considered no longer to be necessary, the Responsible Person shall remove the condition.

A1.8 During a suspension or exclusion, should the Respondent require access to excluded resources for the purpose of taking copies of relevant evidence for use in their response, the Respondent will normally be permitted to do so if accompanied by the Responsible Person or another member of University staff appointed by the Responsible Person for this purpose. For the avoidance of doubt, being provided with access to resources under this provision entitles the Respondent to review or obtain only information to which they would otherwise already have access, and while the Respondent may take copies of relevant information, no information may be altered, removed or deleted.

A1.9 If required, any suspension, exclusion and/or modified duties should be reported to funders or other authorities according to paragraph A4.7 below.

A1.10 The Responsible Person will normally recommend suspension, modified duties or exclusion from University premises only in cases where the Responsible Person reasonably believes that:

- (a) there is a serious risk that the Respondent may hinder or prejudice the investigation; and/or
- (b) the Respondent may pose a serious risk to the integrity of the evidence to be used in the investigation or to other Research data or materials; and/or
- (c) the Respondent's continued involvement in their duties or presence on University premises has the potential to pose a risk to humans or animals; and/or
- (d) it would be difficult for the Respondent, or others with whom they come into contact in the course of their work/study, to perform their duties while the investigation is being conducted.

¹ University premises are here defined as those University-occupied locations where the Respondent would normally be expected to conduct their studies or work on behalf of the University.

² Normally advice will be taken from the HR Business Partner.

³ For registered students, this will be under Special Ordinance D (v) concerning precautionary action.

A1.11 Unless otherwise specified, suspension normally means that the Respondent is required not to visit any work premises and not to perform the duties of their role. In some situations less significant temporary adjustments to working arrangements can remove the need to suspend. Examples of such adjustments include:

- (a) placing the individual on restricted duties;
- (b) excluding the individual from part of the University's premises;
- (c) restricting or removing access to particular equipment, software, digital spaces or services (e.g. email or share data storage);
- (d) temporarily transferring the Respondent to different a role (which should be of a similar status to their normal role and on the same terms and conditions of employment).

If the Respondent is a Student and subject to precautionary action under Special Ordinance D (v), in addition to suspension from studies, the Student may also be excluded from all or part of the University's facilities or premises, and conditions may be imposed on the use of facilities or on the Student's contact with other persons.

A1.12 The Responsible Person will consider whether any temporary adjustments can be made and will only make a decision to suspend the Respondent where such adjustments are not practical. The Responsible Person will take care to ensure that any conditions imposed on the Respondent's working arrangements are proportionate to the risk that they are designed to address (and effectively address that risk). Except in respect of University officers, the adjustments may be taken by the Head of Institution on the basis of their own authority, provided that it is justified in the circumstances. However, the Head of Institution is advised to consult with the HR Division before taking such action so that appropriate advice and support can be provided. The HR Division must be consulted before any such adjustments to working arrangements are made in respect of University officers.

A2. Anonymity and redaction

A2.1 Complainants are encouraged to put their name to any Complaint. If a person making a Complaint identifies themselves to the person to whom the Complaint is made, but wishes to remain anonymous, their identity will be kept confidential so far as is possible provided that this is compatible with a proper investigation. In the interests of transparency and fairness, the University wishes to avoid, where possible, keeping the names of those making key contributions to the investigation confidential.

A2.2 If the University receives an anonymous Complaint, a Complaint by an individual or group operating under a pseudonym, or any other Complaint with no specific Complainant (for example made anonymously online or where strong evidence of misconduct is provided by a Complainant who subsequently withdraws their Complaint), such Complaints may be investigated or acted upon as the Secretary of the Process sees fit, having regard to the seriousness of the issue raised, the credibility of the Complaint, and the prospects of being able to investigate the matter fully and fairly.

A2.3 In circumstances in which there is no specific Complainant or the Complainant has not identified themselves to the person to whom the Complaint is made, the Investigation will normally proceed without a Complainant. To help ensure the confidentiality of the investigation procedure, the Responsible Person may limit the information provided to anonymous or pseudonymous Complainants regarding the investigation as they see fit.

A2.4 As part of any investigation process, it will not be possible to interview those Complainants who have chosen to withhold their identify from the person receiving the Complaint and remain fully anonymous. Individuals who have identified themselves, but wish to remain anonymous, will be interviewed wherever possible.

A2.5 In some circumstances it may be necessary to redact documents and/or meeting notes. Redacting may happen when information is presented that is not directly relevant to the investigation, or which could cause offence, or is inflammatory, or financially or commercially sensitive, or contains personal data and/ or is otherwise confidential. Any redaction must not affect the right of the Respondent to understand the nature of the Complaint and have sufficient details to be able to respond to the Complaint. Any redacting is usually done by the Research Governance and Integrity Team and HR Schools team in conjunction with the Responsible Person.

A3. Attendance at meetings

A3.1 Any Respondent, Complainant or witness attending a meeting (including a hearing or interview) as part of this procedure (interviewee) may be accompanied by another person as defined below.

A3.2 Where the interviewee is an employee or worker of the University, the accompanying person will be an employee or worker of the University, a trade union representative or an official employed by a trade union. Where the interviewee is a student, they may be accompanied by a representative of their College, an individual acting in an official capacity as a Student Union official, or an employee of the University. Where the interviewee is not an employee of the University, they may be accompanied by an appropriate companion (although not a legal representative). Other individuals may accompany the interviewee to investigatory meetings with the agreement of the Secretary of the Process, not to be unreasonably withheld.

A3.3 The interviewee should notify the University of the name of the accompanying person in enough time for the University to prepare for the accompanying person's attendance at the meeting. If the accompanying person is not available at the time proposed for the meeting, this should be raised immediately so that an alternative time can be arranged. Meetings will be postponed to allow an accompanying person's attendance provided that the alternative time is reasonable and ideally not more than five Working Days after the date originally proposed.

A3.4 The accompanying person will be required to maintain appropriate confidentiality. The accompanying person will be allowed to address the meeting, to put and sum up the interviewee's case, confer with the interviewee during the meeting and respond on their behalf to views expressed at the meeting. The accompanying person does not, however, have the right to address the meeting if the interviewee does not wish it, or prevent any other individual at the meeting from speaking or making a case.

A3.5 An accompanying person does not have to agree to attend a meeting if invited. The role is voluntary. If the accompanying person is a University employee, that person will receive paid time off work to attend the meeting.

A3.6 Although it is preferable for interviewees to attend meetings in person, the Secretary of the Process may approve the use of teleconferencing or other remote attendance where appropriate. Reasonable adjustments will be made to interview processes if required on the basis of disability.

A4. Confidentiality and formal reporting

A4.1 Complaints will be dealt with under this procedure as confidentially as is reasonably practicable. Details of the Complaint (including the names of the Complainant and the Respondent) must only be disclosed on a 'need-to-know' basis. Breach of confidentiality in either an informal or formal resolution process may give rise to disciplinary action under the relevant disciplinary procedure. The confidential nature of the proceedings will be maintained provided this does not compromise either the investigation, any health and safety requirement, any legal, contractual or regulatory obligation of the University, or any issue related to the safety of participants in Research. Personal data, including any special category data, collected during the course of the procedure will be used and stored in accordance with current data protection legislation and the University's Data Protection Policy,⁴ and will only be shared where necessary to carry out this procedure.

A4.2 The substance of a Complaint and evidence provided will be disclosed to the Respondent in full except in exceptional circumstances, and to the extent it is lawful to do so.

A4.3 The Complainant, Respondent, and all those involved in the procedure for investigating a Complaint, including witnesses, representatives and persons providing information, evidence and/or advice, have a duty to maintain strict confidentiality, unless otherwise required by law or to the extent that the consent of the University and any other relevant parties has been obtained.

A4.4 In exceptional circumstances, the Secretary of the Process may approve limitations on the information provided to individuals, other than the Respondent, involved in an investigation. For the avoidance of doubt, this includes the Complainant and, exceptionally, may include undertaking an investigation without informing or involving the Complainant.

A4.5 The number of Preliminary and Formal Investigations undertaken by the University on an annual basis, together with information on the type of issue investigated and whether Research Misconduct was found to have taken place, will be reported, in an anonymised form, in the University's annual public research integrity report.

A4.6 The University will report Complaints, investigations, and suspensions to funders, collaborators, co-employers, publishers, regulators and professional and/or statutory bodies if and as required by grant/contractual conditions, legal requirements or other obligations. Information may also be made available to the University's professional advisers and insurers as required. Reporting will be carried out by the Research Governance and Integrity Team on behalf of the Responsible Person. The Research Governance and Integrity Team will be responsible for advising the Responsible Person and the Secretary of the Process on reporting requirements.

A5. Experience, delegation and conflicts of interest

A5.1 All persons undertaking a decision-making, investigatory or formal advisory role under the procedure must possess appropriate experience and knowledge to be able to undertake their role. They must not have a conflict of interest in the matters under investigation. They must also have undertaken unconscious bias training. Where possible the Formal Investigatory Committee will include at least one member who has received training in investigation best practice.

A5.2 Any reference in this procedure to a University officer or other named role (other than the Respondent or Complainant) includes a deputy appointed by that officer or roleholder or by the Registry to exercise the functions assigned to that officer or roleholder under this procedure.

⁴ <https://www.information-compliance.admin.cam.ac.uk/data-protection>

A5.3 A conflict of interest can be defined as a set of circumstances that creates a risk that professional judgement or actions regarding one interest will be unduly influenced by another interest. Conflicts of interest may include personal interests (such as friendships or close personal relationships), financial interests (such as investments that may be impacted by the outcome of an investigation) or professional interests (such as having supervised or published with an individual involved in an investigation). Minor connections, such as sharing a College, Department or Faculty, or having met or been acquainted with a Respondent or Complainant, would not normally be considered conflicts of interest.

A5.4 Any individual with a conflict of interest that might impair their ability to perform their role or who has concerns about conflicts of interest held by others must provide information on that conflict directly to the Secretary of the Process or through the Research Governance and Integrity Team. The Secretary of the Process shall determine whether a conflict of interest exists and, if so, shall recommend steps to mitigate it, which may include the replacement of any individual with a decision-making, investigatory or formal advisory role in the procedure.

A5.5 Where the Secretary of the Process determines that the person who would normally act as the Responsible Person has a conflict of interest, or that person is unable to act in this role for any other reason, the Secretary of the Process shall determine who is to be the Responsible Person. For the avoidance of doubt, being Head of the Institution in which the Respondent holds an affiliation or appointment should not, in itself, be considered sufficient to constitute a conflict of interest barring an individual from serving as the Responsible Person.

A5.6 At various stages of this procedure the Respondent and the Complainant will be informed of the identities of those who are undertaking an investigatory or decision-making role in the procedure. Upon receipt of notification of the identity of those persons, the Respondent or the Complainant may, if they consider that the provisions of paragraph A5.1 are not fulfilled, request that these individuals be replaced. Any such challenge must be made in writing to the Secretary of the Process within five Working Days of receipt of the notification of the identities of the individuals concerned. The Secretary of the Process may replace the individuals concerned if the Secretary is satisfied that the Respondent or the Complainant has presented reasonable grounds why the individuals concerned are not appropriate.

A6. Recording of interviews

A6.1 The Secretary of the Process or the Research Governance and Integrity Team shall arrange for a notetaker to be present at any interview to take a note of the interview. The interview notes will provide a summary of the key discussion points and are not intended to be a verbatim record.

A6.2 A draft of the interview notes will be agreed by the notetaker and the Independent Investigator or the Formal Investigation Committee. The Investigator or the secretary of the Formal Investigation Committee will send the agreed draft to the person interviewed, who will be asked to confirm whether it is a factually accurate note of the interview. The interviewee should provide any proposed amendments to the notetaker within five Working Days of the interviewee receiving the notes.

A6.3 The notetaker will ask the Independent Investigator or the Formal Investigation Committee to consider whether they agree with the proposed amendments. Should the amendments be agreed, the notetaker will provide the agreed notes for inclusion in the evidence. Where it is not possible to agree a single set of notes, both versions will be included in the evidence.

A6.4 No party may make an electronic recording (whether audio or video) of any interview held under this procedure. If a University employee or Student makes such a recording without consent, this may result in disciplinary action.

A7. Support for Respondents and Complainants

A7.1 Respondents and Complainants who are members of University staff may seek advice and support from the University's HR Division, from their trade union, or from a legal representative.

A7.2 Support for University Students is available from their College Tutor and the Students' Union's Advice Service (<https://www.studentadvice.cam.ac.uk/>).

A7.3 Those involved in investigations under this procedure may seek the support of the University Counselling Service (<https://www.counselling.cam.ac.uk/>) and the Staff Counselling Service (<https://staff.counselling.cam.ac.uk/>)

A7.4 Further details of the support services available at the University can be found on the following webpages:

- <https://www.hr.admin.cam.ac.uk/hr-services/wellbeing/support-services-university>
- <https://www.studentwellbeing.admin.cam.ac.uk/>

A7.5 Support will be given as required if English is not the first language of those involved in this procedure.

A8. Further advice

A8.1 Confidential advice on this procedure or on matters of potential Research Misconduct may be sought at any time from:

- Research Governance and Integrity Team: researchintegrity@admin.cam.ac.uk
- Human Resources Division – please contact your School's HR Adviser or HR Business Partner: <https://www.hr.admin.cam.ac.uk/hr-services/hr-business-partnering>
- Office for Student Conduct, Complaints and Appeals: <https://www.studentcomplaints.admin.cam.ac.uk/>

Appendix B: Dispute Resolution Process

B1. Scope

B1.1 This is a sub-process of the Procedure for the Investigation of an Allegation of Research Misconduct (Research Misconduct Procedure). All terms used should be understood according to the definitions set in that procedure.

B1.2 The process is designed to allow the proportionate handling of Concerns regarding Research practice at the University of Cambridge that do not require the use of the Research Misconduct Procedure. Its purpose is to enable Concerns to be handled through mediation and to avoid the need for the full investigatory procedure.

B1.3 Specifically it is intended for the handling of Concerns for which:

- (a) the Concern is one brought to seek redress or to settle a dispute (such as a Concern regarding unfair authorship practices or seeking a correction to a published article); and
- (b) it remains possible to address the Concerns raised (e.g. through an agreement by the Respondent to take particular action to address the Concern, such as correcting a published article); and
- (c) the Responsible Person is satisfied that, should the Concern have substance, corrective action would be sufficient to address the Concern (i.e. disciplinary action against the Respondent would not be appropriate).

B1.4 Concerns may only be referred to the dispute resolution process with the written consent of the Complainant.

B1.5 This process is voluntary for all involved, although should the Respondent and Complainant agree to this process, they will be asked to provide written confirmation that they will commit to participate until the conclusion of the process.

B2. Process

B2.1 Where a decision has been made to refer a Concern to the dispute resolution process, the Responsible Person will, seeking confidential advice where necessary:

- (a) inform the Secretary of the Process and the Research Governance and Integrity Team of the decision; and
- (b) write to the Respondent to ask them to participate in the dispute resolution process, providing them with details of the Concern raised and a copy of this process. It should be made clear to the Respondent that this process is designed to settle the dispute or Concern without requiring investigation under the Research Misconduct Procedure.

B2.2 Should the Respondent refuse to participate in the dispute resolution process or fail to respond to the Responsible Person within a reasonable time period, the Responsible Person shall write to the Complainant to inform them of the Respondent's decision or failure to respond. The Complainant may, as appropriate, inform the Responsible Person that they wish that their Concern to be considered as a Complaint of Research Misconduct as set out under paragraph 6.6 of the Procedure for the Investigation of an Allegation of Research Misconduct or choose not to take the matter any further.

B2.3 Should the Respondent agree to participate in the dispute resolution process, the Responsible Person will appoint an independent person to conduct the process. The independent person will normally be a University officer. The independent person should have appropriate expertise to handle the matter under consideration, experience in the relevant field, and no conflict of interest in, or previous involvement with, the case.

B2.4 The Responsible Person should advise both parties of the identity of the independent person. Either party may request the replacement of the independent person by following the process in section A5 of the Research Misconduct Procedure.

B2.5 The Responsible Person will arrange administrative support for the independent person, which may be provided by the Research Governance Integrity Team or another suitably qualified member of University administrative staff. The independent person should also take advice from the HR Division and/or, for cases involving students, the Student Conduct, Complaints and Appeals Office, as required.

B2.6 The process should take up to approximately 30 Working Days from the date of the agreement by the Respondent to participate in the process.

B2.7 The independent person shall:

- (a) meet with or speak to the Complainant about the Complainant's Concern and identify any evidence that needs to be collected;
- (b) meet with or speak to the Respondent to gauge their response to the Concern and identify any further evidence that needs to be collected;
- (c) work with their administrative support to collect all relevant evidence;
- (d) where possible and acceptable to all parties, arrange a meeting or meetings involving themselves, the Complainant and the Respondent, with the aim of reaching a settlement.

B2.8 Notes will be made of the outcomes of the meetings, which will be provided to the participants in those meetings for confirmation of their accuracy.

B2.9 Should the Complainant and Respondent be able to reach agreement as a result of the meeting(s), the independent person will produce a written version of the agreement and a short summary of the process by which it was reached. Both parties will be provided with a draft copy of the agreement and will be asked to agree to the written version. Where necessary to reach the agreement of both parties, the independent person should make alterations to the written agreement. Once agreed, the written agreement will be provided to the Responsible Person who will require that the Respondent and Complainant abide by its contents. Should it not be possible to produce a written version of the agreement that is satisfactory to both parties, the matter shall proceed according to B2.10.

B2.10 Should an agreement not be reached, the independent person will write a short report for the Responsible Person that will summarise the discussions they held with the Respondent and Complainant and provide a recommendation as to how the matter is best resolved together with any other relevant information.

B2.11 On the basis of the recommendation from the independent person, the Responsible Person will come to a conclusion on how to proceed, which may include:

- (a) that the Concern has no substance and the matter should be closed;
- (b) that specific actions should be taken by the Respondent and/or Complainant to address the Concern;
- (c) that it has not been possible to address the Concern through this process and that it should be referred for consideration under another University procedure, including but not limited to the Research Misconduct Procedure.

B2.12 The Responsible Person will write to the Complainant, Respondent and Secretary of the Process to inform them of their decision. Where the Responsible Person has concluded that actions should be taken by the Respondent and/or Complainant to address the Concern, they shall inform both parties that they are expected to undertake those actions.

B2.13 Should a Complainant refuse to follow the actions required by the Responsible Person, any expectations on the Respondent shall become void and the matter shall be closed.

B2.14 Should the Respondent refuse to follow the actions required by the Responsible Person, the Responsible Person may refer the matter for consideration under another University procedure, including but not limited to the Research Misconduct Procedure.

B2.15 Should the Respondent or Complainant dispute the conclusions of this process, they may make written representations to the Secretary of the Process, within 10 Working Days of receipt of the decision. The Secretary of the Process will consider their review, and may, in exceptional circumstances, require the Responsible Person to reconsider the matter.