



# Process for managing breaches of good research conduct

## CU-RIO-PRO-4.0 V7

## Purpose

As outlined in the [Research Integrity Policy](#), **every employee and student of the University has a duty to inform the appropriate authorities if they know or suspect that there has been a breach of good research conduct.**

Under the [UUK Concordat to Support Research Integrity](#), the University is committed to maintaining fair and transparent processes in relation to investigating 'questionable' research practice and potential research misconduct, including providing a confidential reporting mechanism through a named point of contact, managing conflicts of interest, using external advisers where needed, and offering appeals processes.

The following procedure for investigating allegations of breaches of good research conduct at Cranfield University meets all of the institutional commitments under the Concordat to Support Research Integrity.

## Scope

This process applies to University staff, and individuals conducting research whilst holding honorary roles at the University, including Emeritus Professors, Visiting Professors, Visiting Fellows and Visiting Researchers.

For allegations of potential misconduct involving students, the process and guidance set out in the [Senate Handbook on Academic Misconduct](#) should be followed.

It may be difficult to tell the difference between questionable research practices and research misconduct. This often needs to be determined through an investigation and therefore all suspected or known incidences of breaches of good research conduct should be reported via the appropriate route.

Research misconduct committed by staff members is a disciplinary offence. Findings of research misconduct by staff will be referred to the relevant People and Culture Business Partner for action via the processes outlined in the [Cranfield University Ordinances Part B: Staff](#).

Individuals who raise concerns or allegations in good faith and with a reasonable belief in their accuracy will be supported and will not face any form of penalty or retaliation. However, making vexatious or malicious allegations (i.e. solely to harass, annoy or subdue somebody; or solely with the aim of causing harm or damage to a person or their reputation) constitutes a disciplinary offence for Cranfield staff and students.

# Process

## 1. Raising concerns and allegations

Cranfield's Named Contact for raising concerns and allegations is the Pro-Vice-Chancellor, Research and Innovation (PVC R&I), Cranfield University, Cranfield, MK43 0AL, [researchintegrity@cranfield.ac.uk](mailto:researchintegrity@cranfield.ac.uk)

In the absence of the PVC R&I, or in the case of any potential or actual conflict of interest involving the PVC R&I, the Academic Registrar and University Secretary ([gregor.douglas@cranfield.ac.uk](mailto:gregor.douglas@cranfield.ac.uk)) is the Alternative Named Contact, who will carry out the duties of the PVC R&I as detailed below.

Allegations of breaches of good research conduct may be made by any person either in writing, orally or by e-mail to the PVC R&I.

Complainants will normally be expected to put their name to any allegations they make. Allegations raised which are anonymous, or matters identified where there is no specific complainant, will be considered at the discretion of the PVC R&I, taking account of the seriousness of the concerns raised, and the likelihood of obtaining verifiable sources/evidence to enable an investigation.

## 2. Participation in an investigation

1. All parties are expected to participate in all parts of the process.
2. All parties must support the investigation process by making available any relevant materials and information in a timely manner.
3. All parties are obliged to facilitate an investigation through structural support (where practical) which might include space and resources to assist an investigation.
4. The participating parties have a duty to collect and preserve information and data relevant to the investigation.

## 3. Investigation procedure

The investigation procedure will be conducted with an appropriate level of confidentiality for all parties involved (respondent, complainant, witnesses):

All material relating to the allegation and its investigation will be submitted to the Research and Innovation Office and will be held securely in a central electronic file.

Those involved in the review of allegations will be trained and supported by experienced staff within the Research and Innovation Office.

At all stages of the investigation process (as outlined below), those responsible for reviewing and assessing allegations may identify suitable professional, administrative, and other support to assist them in carrying out the required actions, and shall be free to seek confidential advice from persons with relevant expertise, both within the University and outside it, if required to facilitate a robust and fair investigation. Those seeking advice will, so far as is possible, anonymise the information provided to make no information available which could lead to the identification of the Complainant, Respondent or other individuals involved in the case.

### 3.1 Investigation stages and timeframes

It is in the interests of all parties involved to conclude the investigation process as soon as reasonably possible, whilst ensuring a thorough and robust review of the evidence. Those conducting investigations therefore have a duty to prioritise the investigation to ensure timely resolution, and those providing evidence should do so as soon as reasonably possible.

#### Stage 1: Preliminary Screening

The PVC R&I will review the allegation to determine whether it falls within the scope of this procedure and the definition of questionable research practice or research misconduct. Allegations that fall within scope will progress to Stage 2: Initial Assessment. Allegations that fall outside of these definitions may be referred to other relevant University processes or dismissed.

*Timeframe:* A decision should be reached and communicated to the complainant and other relevant parties within 10 working days of receipt of the allegation.

#### Stage 2: Initial Assessment

On behalf of the PVC R&I, the Research and Innovation Office will appoint an Investigating Officer to review the allegation evidence and to determine whether there is a sufficient substance to the allegations to progress to a Panel Investigation.

The Investigating Officer must be a senior individual, of at least equivalent grade or senior to the respondent(s) involved in the allegation, and should be independent of the respondent's direct management structure to ensure impartiality and fairness.

The Investigating Officer will gather relevant evidence and documentation and assess the credibility of the evidence. This may involve interviewing the complainant, the respondent and witnesses and may require rapid action to secure information and evidence pertinent to the investigation.

The Investigating Officer will submit a written report to the PVC R&I with details of their findings and one of the following recommended courses of action:

1. *Allegation dismissed* – where there is no credible evidence of questionable research practice or research misconduct found.
2. *Informal measures to address questionable research practice* - where there is evidence of questionable research practice with no more than a minor impact (i.e. caused minimal disruption, limited consequences and no lasting reputational damage), that could be addressed via local informal measures, such as education and training of those involved.
3. *Remedial actions required to address questionable research practice* - where there is evidence of a breach of good research practice solely due to lack of institutional training, policies or guidance, but the respondent is not found individually culpable.
4. *Refer for panel investigation* – where there is evidence of either (a) potential research misconduct or (b) questionable research practice with a moderate or severe impact (i.e. causing reputational or financial harm, injury or safety concerns).

The PVC R&I will make the final decision on the outcome of Stage 2.

*Timeframe:* The investigation should commence within 10 working days of instruction from the Research and Innovation Office.

### **Stage 3: Panel Investigation**

On behalf of the PVC R&I, the Research and Innovation Office will convene a Research Misconduct Review Panel (RMRP) and will inform the appropriate People and Culture Business Partner(s) that a Panel Investigation has commenced.

The Research and Innovation Office will make all data plus the Initial Assessment and Initial Review documentation and findings available to the RMRP.

The Research Misconduct Review Panel (RMRP) will comprise of:

- A senior academic Chair (minimum Head of Centre level)
- A member of the Cranfield Research Ethics and Integrity Committee (CUREIC).
- Additional members, as appropriate.

Membership of the Panel will be disclosed to the respondent. The RMRP will be able to draw on the advice of subject matter experts. The identity of the experts will not be disclosed to the respondent, but their statements will be shared anonymously. The RMRP will review all material available to it and will be able to interview those involved in the allegation, including the respondent, the Investigating Officer (Stage 2), and any witnesses. Should there be a conflict of interest with the panel members or chair, the respondent may request that a replacement is appointed.

The RMRP will prepare a written report for the PVC R&I, summarising its findings and recommendations, backed by evidence:

1. *Allegation dismissed* – where the evidence does not support findings of questionable research practice or research misconduct.
2. *Questionable research practice found* - where there is evidence of questionable research practice but falling short of the definition of research misconduct. The report should address recommendations for informal measures and or/remedial actions that reduce the risk of reoccurrence.
3. *Research misconduct found* – where there is evidence of research misconduct that meets the assessment criteria in Section C. The report should also address any recommendations for remedial actions that reduce the risk of reoccurrence. Cases of research misconduct must be referred to the relevant People and Culture Business Partner.

The report should also advise when it may be appropriate or required to inform external organisations (institutions, funding bodies, societies, journals) of the outcome of the investigation and any resulting actions.

**Timeframe:** The Panel Investigation should commence within 10 working days of instruction from the Research and Innovation Office.

If, during the investigation process, there are concerns that the respondent may seriously impede the investigation or cause significant further harm by remaining active in their role, the matter must be immediately referred to the relevant People and Culture Business Partner.

Individuals who raise concerns or allegations in good faith and with a reasonable belief in their accuracy will be supported and will not face any form of penalty or retaliation. However, if evidence arises during the investigation that the allegations were brought in a vexatious or malicious manner by the complainant, this should be referred to the relevant internal process for Cranfield staff or students, or the complainant's current organisation may be notified.

## 3.2 Allegation Evaluation

In gathering information relevant to the case, the Investigating Officer and PVC R&I will undertake:

Assessment of the allegation for:

- The nature of the matter (is it included within a definition of misconduct or a questionable research practice – see section 5);
- The seriousness of the matter, in terms of actual or potential impact on individuals and organisations;
- Whether other authorities should be notified;
- Whether there are previous allegations that may indicate a pattern of behaviour.
- Leading to a decision as to whether there is sufficient evidence to support further investigation.

The RMRP will undertake:

Inquiry and investigation in order to determine if research misconduct was committed in accordance with the definitions set out in Section 5. This assessment will be based on an established burden of proof (preponderance of evidence) regarding:

1. The Act: Establishing how serious the action was, to respond to the question: Is the act sufficiently serious in scope, impact, or effect to be considered research misconduct?
2. The Intent: Evaluating the evidence to assess the intent with which the act was committed and determine if that level meets the threshold for a finding of research misconduct.
3. Determine if both the assessments of the act and the intent meet the agreed standard of proof for a finding of research misconduct.

The RMRP will also determine if there is evidence of a pattern of behaviour and/or any mitigating circumstances.

## 3.3 Adjudicative phase

This phase ensures that actions and/or sanctions are proportionate to the offence, consistent between cases, and proportionate against individuals. This may include:

- **Formal disciplinary hearing:** where the RMRP conclude that research misconduct has occurred, this will trigger a formal disciplinary hearing, led by People and Culture in accordance with the Staff Ordinances (Ordinance 22).
- **Appeals process:** appeals against the findings of the Investigative Phase may be submitted (following the conclusion of the process) by either the Complainant or the Respondent on the basis of at least one of the following criteria:
  - i. *Procedural Irregularity:* those conducting the investigation failed to follow the established procedures, leading to an unfair or biased outcome.
  - ii. *Disproportionate sanctions/recommendations:* The recommendations made as part of an outcome of the investigation process are either excessive or inadequate in relation to the findings of the investigation.
  - iii. *New Evidence:* relevant information or evidence has come to light that was not available during the original investigation and could materially affect the outcome.
  - iv. *Perverse Finding:* the decision reached was unreasonable or unsupported by the evidence presented.
  - v. *Bias or Conflict of Interest:* those involved in conducting the investigation had a personal or professional conflict that may have influenced the decision-making process.

- vi. *Misinterpretation of Facts*: those involved in conducting the investigation misunderstood or misrepresented key facts or evidence that materially affected the outcome.

Appeals must be submitted within 20 working days of being notified of the outcome of the process. The appeal will be heard by a panel constituted of at least one member of Senate and an external member of CUREIC, who have not previously been involved in any part of the investigation.

Appeals against the outcome of any formal disciplinary hearing must be submitted in accordance with the relevant procedures outlined in the Staff Ordinances.

- **Complaints process:** If the matter is not resolved following appeal, or if the complainant remains dissatisfied with the outcome, they may submit a complaint to the external complaints regulator for the UK higher education sector.

## 4. Reporting

Upon conclusion of the investigation, the Initial Assessment report and any Panel Investigation report will be made available to the respondent and their line manager. A copy will be kept on file within the Research and Innovation Office for seven years (in accordance with the University Retention Schedule for Personal Data). The outcome and any resulting informal and/or remedial actions will be reported to the complainant.

Where applicable, notification of misconduct will be made to all relevant parties including those defined or identified in any collaborative agreement, for example funders, national offices, legal authorities, professional bodies or other interested organizations as soon as possible. Steps may also need to be taken to correct the research record.

The University's Research Ethics and Integrity Committee, CUREIC will receive a summary of any cases following completion of an investigation.

A top-level statement on any research misconduct investigation will be given to the University's governing body and will be published as part of the Annual Statement on Research Integrity, making it available to the general public via the University website in line with the requirements of the Concordat to Support Research Integrity. The statement will not include individual's details, in order to maintain confidentiality in line with GDPR.

## 5. Definitions

**Research:** Research includes all original investigations to gain knowledge and understanding including that related to commerce, industry, the public, and voluntary sectors, as well as 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. Research includes research in natural sciences, mathematics, life sciences, engineering, behavioural and social sciences, and humanities. (references for all these)

**Research record:** The record of data or results that embody the facts and observations arising through the study of the subject, and includes but is not limited to research proposals, laboratory and study records both physical and electronic, artefacts, images and models, progress reports, abstracts, theses, oral presentations, internal reports and official publications.

**Questionable research practices** refer to minor infractions in relation to good research practice, which fall short of the definition of intentional research misconduct. This can include avoidable errors. Questionable research practices may arise due to a lack of knowledge or attention to detail, negligence, or deliberate action, and may occur where there is no evident intention to deceive.

**Research misconduct** is defined as behaviours that deliberately or recklessly fall short of the standards expected in the conduct of research, as outlined in the Research Integrity Policy. Misconduct can occur at any point in the research lifecycle, from the ideation of research proposals, through to the reporting of research findings, and reviewing the work of others.

Research misconduct can take many forms, and examples include (but are not limited to):

1. **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.
2. **Falsification:** inappropriately manipulating and/or selecting research processes, materials, equipment, data, imagery and/or consents.
3. **Plagiarism:** using other people's ideas, intellectual property or work (written or otherwise) without acknowledgement or permission.
4. **Failure to meet legal, ethical and professional obligations**, for example:
  - not observing legal, ethical, and other requirements for human research participants, animal subjects, or human organs or tissue used in research, or for the protection of the environment
  - breach of duty of care for humans involved in research, 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 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
5. **Misrepresentation of:**
  - **data**, including suppression of relevant results/data or knowingly, recklessly, or by gross negligence presenting a flawed interpretation of data
  - **involvement**, including inappropriate claims to authorship or attribution of work and denial of authorship/attribution to persons who have made an appropriate contribution
  - **interests**, including failure to declare competing interests of researchers or funders of a study
  - **qualifications, experience, and/or credentials**
  - **publication history**, through undisclosed duplication of publication, including undisclosed duplicate submission of manuscripts for publication.
6. **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.

**Intent:** The intent required for a case of research misconduct is that of a deliberate attempt to fabricate, falsify or mislead during the research process; or of serious negligence or recklessness in carrying out the research protocol.

**Burden of proof for both the act and intent:** A preponderance of the evidence constitutes a burden of proof.

**Standard of proof for both the act and intent:** the standard of proof is the balance of probabilities.

**Vexatious allegation:** an allegation that is pursued, regardless of its merits, solely to harass, annoy or subdue somebody. An allegation may be regarded as vexatious where the complainant:

- persists in pursuing an allegation which has already been investigated and provides no new or material information; or
- seeks to prolong contact by continually changing the substance of an allegation or by continually raising further concerns or questions whilst the allegation is being addressed; or
- fails to clearly identify the substance of an allegation, or the precise issues which may need to be investigated despite reasonable efforts by the Investigating Officer or Research Misconduct Review Panel to assist them; or
- complains solely about trivial matters to an extent which is out of proportion to their significance; or
- makes excessive contact with the Investigating Officer/ Research Misconduct Review Panel or seeks to impose unreasonable demands or expectations on resources, such as responses being provided more urgently than is reasonable or necessary.

**Malicious allegation:** an allegation raised without substance, solely to cause harm to or damage the reputation of the respondent. A malicious complaint is:

- one that the investigation has shown to be without foundation; and
- one where the investigation evidence demonstrates that the complainant knowingly lied or misled the Investigating Officer or Research Misconduct Review Panel; and
- where there is sufficient evidence to demonstrate this at a disciplinary hearing on the basis of the balance of probabilities.

## Further guidance

Contact: [researchintegrity@cranfield.ac.uk](mailto:researchintegrity@cranfield.ac.uk)

## Document control

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## Document Review

Version	Amendment	By	Date
V7	<p>Name of document changed from 'Process for Monitoring the Research Integrity Policy' to 'Process for managing questionable research practice and potential misconduct'.</p> <p>New template to mirror updated policy template for 2025.</p> <p>All content unrelated to the process for investigating potential misconduct moved to the Integrity Policy. Included discretionary permission for PVCR&amp;I to consider anonymised complaints.</p> <p>Updated secondary nominated contact to the Academic Registrar and University Secretary.</p> <p>Introduced a Stage 2 initial assessment process prior to panel investigation</p> <p>Revised membership for panel investigation process.</p> <p>Terminology aligned to updated Research Integrity Concordat 2025, and UKRIO guidance procedures for the investigation of misconduct in research.</p> <p>Definitions added for vexatious and malicious allegations.</p>	Emma Hare Head of Research Excellence (RIO)	14.08.25