



# Procedure for Investigating Allegations of Research Misconduct

Effective from 01/04/26

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## 1. Purpose

This procedure should be read alongside the University's [Policy for Investigating Allegations of Research Misconduct](#), which includes definitions of named roles and responsibilities.

A flow chart illustrating the procedure is provided in [Appendix 1](#).

Any allegations of research misconduct raised via the University's [Policy and Procedure on Public Interest Disclosure \(Whistleblowing\)](#) will be investigated in accordance with this policy and the outcome reported to the University Registrar.

## 2. Stage 1: Receipt and initial assessment

- 2.1 Colleagues are expected to raise any concerns about research misconduct with the individual concerned, their Line Manager or the appropriate Head of Academic Unit in the first instance. Concerns can also be raised with the Responsible Officer via email: [research.integrity@ncl.ac.uk](mailto:research.integrity@ncl.ac.uk). This may include matters raised in the media or external reports. In research, situations arise that might present as research misconduct but are the result of either a misunderstanding or a dispute between individuals. In these cases, it may be possible to resolve such differences locally through mediation, external arbitration or dispute resolution. A formal complaint may be submitted due to the serious nature of the allegation(s), or if it is not possible to reach an informal resolution. Complaints from parties external to the University should also be submitted via the formal route described below. Note that the University has developed a separate procedure for students, and any allegations relating to the research undertaken by students will be re-routed to the University's [Student Assessment Irregularities Procedure \(Academic Misconduct\)](#).
- 2.2 Formal complaints should be submitted in writing using the **Reporting Allegations of Research Misconduct Form** ([Appendix 2](#)) and submitted to [research.integrity@ncl.ac.uk](mailto:research.integrity@ncl.ac.uk). Complainants are expected to put their name to any allegation they make. Anonymous allegations will be considered at the discretion of the Named Person; taking into consideration the seriousness of the concerns raised and the credibility of the evidence.
- 2.3 The Responsible Officer will formally acknowledge receipt of the allegation in writing. A copy of the policy and procedure will be provided to the Complainant for information.
- 2.4 An initial assessment will be carried out by the Responsible Officer in consultation with the Named Person and a designated People Services Advisor (where appropriate) to determine whether the allegation falls within the scope of this policy and the most appropriate means of investigating or otherwise addressing it e.g. via the University's [Grievance Procedure](#), [Investigation Protocol for Discrimination, Harassment and Hate-Related Misconduct](#) or [Bullying and Harassment Policy](#).

- 2.5 An assessment will also be made to determine whether immediate action is required to eliminate illegal activity or prevent harm to people, animals or the environment. If action is required, the Respondent will be formally notified in writing. The University may also be required to notify external employers, funders, legal, regulatory or professional bodies of the nature of the allegation(s) on the understanding that it is not yet proven.
- 2.6 Following the initial assessment, the Responsible Officer will write to the Complainant to confirm the decision and the reasons for this. Details of any follow-on actions will also be communicated to the Complainant. Stage 1 outcomes:
- a) **Dismiss allegation** – if the allegations are judged not to fall within the scope of the Research Misconduct Policy, the case will be dismissed. If the allegations relate to questionable research practices, the details will be referred to the relevant Head of Academic Unit to address through non-disciplinary measures such as mediation, education and training. Where appropriate, the allegation may also be dismissed and referred for investigation under an alternative University procedure.
  - b) **Refer to external organisation** – in the event that a statutory, regulatory or professional body decides to undertake an external investigation, a dual review will not be carried out by the University. However, the findings of the external investigation may result in disciplinary action.
  - c) **Proceed to Stage 2** – if the allegations are judged to fall within the scope of the Research Misconduct Policy, the decision will be taken to proceed.

### 3. Stage 2: Preliminary screening

- 3.1 The purpose of this stage is to establish what has happened, determine whether the allegations have substance, and whether there is sufficient evidence to proceed to a Formal Investigation.
- 3.2 The Named Person will appoint the relevant Faculty Dean of Research and Innovation as Lead Investigator to undertake a preliminary assessment of the evidence with the support of a Professional Services colleague. In complex cases, the Professional Services Colleague may invite two additional senior academics to join a Screening Panel to collate and review the evidence. If the Respondent is employed on a joint clinical / honorary contract, an appropriate member of staff from the joint employing organisation(s) may be approached to support the investigation. Members of the Screening Panel will be asked to declare any potential conflicts of interest and complete a Declaration Form to confirm that they have completed General Data Protection Regulation (GDPR) and Equality, Diversity and Inclusion (EDI) training.
- 3.3 The Responsible Officer will formally notify the Respondent and their Head of Academic Unit of the allegation(s) in writing; including details of any evidence cited in the complaint. A copy of this policy and procedure will also be provided for information.
- 3.4 The Respondent will be invited to attend a confidential meeting with the Lead Investigator where they will be given the opportunity to respond to the allegation(s) and set out their case. Initial meetings will also be held with the Complainant and key Witnesses identified by the Complainant / Respondent in order to collate evidence. These meetings may be recorded in order to produce a written transcript. If required, a Supporter may be invited to attend the meeting. For more information, please refer to the University's [Guidelines for Supporters](#).

- 3.5 A **Preliminary Screening Report** summarising the findings and recommendations will be completed by the Lead Investigator with the support of a member of Professional Services. The Respondent and the Complainant will be invited to comment on the factual accuracy of the draft report before it is finalised, although this does not amount to a right of veto over the report or its conclusions. The Lead Investigator will assess the validity of comments and, where relevant, seek the agreement of the Screening Panel before making any amendments.
- 3.6 A copy of the final report will be provided to the Named Person, the Complainant and the Respondent. Potential outcomes:
- a) **Dismiss allegation** – if the allegations are deemed to be mistaken, the case will be dismissed. If the allegations are deemed to be frivolous, malicious or vexatious, the case will be dismissed and referred to People Services to investigate in accordance with the University's [Disciplinary Policy](#).
  - b) **Refer to supervision / training** – if the allegations have some substance, but due to a lack of intent to deceive or due to their relatively minor nature, the case will be referred to the relevant Head of Academic Unit to address through non-disciplinary measures such as supervision, education and training.
  - c) **Proceed to Stage 3** – if the allegations are deemed to have substance and are sufficiently serious in nature, the decision will be taken to proceed to a formal investigation.

#### 4 Stage 3: Formal Investigation

- 4.1 The purpose of this stage is to appoint a Formal Investigation Panel to assess the evidence and determine whether, on the balance of probabilities, the evidence upholds the allegation(s). Where a complaint is fully or partly upheld the Panel will also be invited to recommend corrective actions to preserve the academic reputation of the University.
- 4.2 If a formal investigation is warranted, the Respondent's Head of Academic Unit and Faculty People Services Business Partner will be notified. Where relevant, funders and regulatory bodies will also be notified on the understanding that the allegation has not yet been proven. The outcome will also be communicated following the conclusion of the investigation.
- 4.3 Depending on the nature and complexity of the allegation, the Named Person may take action in consultation with People Services and IT Services to ensure that all relevant evidence and information is secured in order to complete a full investigation. This action may include:
- Securing research records, data, materials, locations.
  - The temporary suspension of the Respondent from all / some duties on full pay.
  - A temporary restriction is placed on the Respondent requiring them not to have contact with University staff / partner organisations.
- 4.4 The Named Person will appoint a Formal Investigation Panel consisting of a Chair and two other senior academics with relevant knowledge and expertise; including one individual who is external to the University. If the Respondent is employed on a joint clinical / honorary contract, an appropriate member of staff from the joint employing organisation(s) will also be invited to join the Panel. The Panel will be supported in its work by the Responsible Officer. Members of the Formal Investigation Panel will also be asked to complete a [Declaration Form](#) <<insert link when available>>.

- 4.5 The Complainant and Respondent will be notified of the panel constitution. Any concerns regarding perceived conflicts of interest should be raised by the Complainant/Respondent within five working days to avoid any delays to the procedure.
- 4.6 The Full Investigation Panel will examine the evidence collected during the preliminary assessment and investigate further as required. This may include further interviews with the Complainant and Respondent. The Complainant and Respondent have the right to invite a Supporter to attend the formal interview. Please refer to the University's [Guidelines for Supporters](#) for more information. The Panel may also interview Witnesses or seek confidential advice from internal / external experts in the subject discipline.
- 4.7 A **Formal Investigation Report** summarising the findings and recommendations will be completed by the Panel with the support of the Responsible Officer. The report will:
- Summarise the conduct of the investigation
  - State whether the allegations have been upheld fully or in part, giving the reasons for the decision and recording any different views
  - Make recommendations for corrective actions
  - Address any procedural matters that the investigation has brought to light.
- 4.8 The Respondent and the Complainant will be invited to comment on the factual accuracy of the draft report, although any feedback will be restricted to errors rather than judgements. The Chair should seek the agreement of all panel members before modifying any details in the draft report.
- 4.9 Once the factual accuracy of the report has been agreed by all parties, the Chair will arrange a meeting with the Named Person and the relevant People Services Manager to discuss the report findings, ratify the decision and agree outcomes and actions.

## 5. Outcomes and reporting

- 5.1 The following internal stakeholders will be notified of the conclusion of the formal investigation:
- Complainant
  - Respondent
  - Head of Academic Unit
  - Faculty Dean of Research and Innovation
  - Faculty People Services Business Partner
  - Other relevant members of staff
  - The Responsible Officer
- 5.2 Where appropriate, relevant external stakeholders will also be formally notified of the outcome of the investigation. Including statutory, regulatory and professional bodies, funders, collaborating institutions and other organisations at which the Respondent is employed.
- 5.3 If the allegation is upheld fully or in part, the Named Person will decide whether the matter should be referred to a Disciplinary hearing under the University's [Disciplinary Policy](#). All information collected and brought to light during the Research Misconduct procedure will be transferred to People Services alongside a copy of the **Formal Investigation Panel Report**.
- 5.4 Other corrective actions that may be taken by the University include:

- Amendments to project management / research governance arrangements
- Notifications to patients / patients' doctors of any potential medial issues that may arise
- Retractions / corrections to research publications
- Local monitoring / supervision / training to avoid reoccurrence

A note regarding the outcome of the investigation will also be added to the Respondent's People Services file for future reference.

- 5.5 If the allegation is not upheld, the case will be dismissed. The University shall take whatever steps are considered necessary, in the light of the seriousness of the allegation, to preserve the reputation of the Respondent and the relevant research project(s).
- 5.6 If the allegation is deemed to have been made in good faith, the University will also take steps to prevent any detriment to the Complainant. However, if the Panel concludes that the allegation is frivolous, malicious or vexatious, the case may be referred to People Services to investigate under the University's [Disciplinary Policy](#). In the event of an external complaint, the University may decide to share the findings of the investigation with the employing organisation.

## 6. Appeals

- 6.1 Appeals on the grounds of procedural irregularity or new evidence not previously considered may be submitted to the Pro-Vice Chancellor Research and Innovation within 10 working days of the outcome having been communicated.
- 6.2 If there are grounds for appeal, an Appeal Panel will be appointed by Pro-Vice Chancellor Research and Innovation. The Appeal Panel should consist of a minimum of three senior academics who were not involved in the original investigation.
- 6.3 The purpose of the Appeal Panel is to re-assess the evidence alongside any new evidence provided. The Appeal Panel may decide to uphold the original decision or recommend an alternative outcome.
- 6.4 In the event that a case is referred to be considered under the University Disciplinary Policy, the Respondent and Complainant have a statutory right to appeal any outcome under the [Disciplinary Policy](#).

## 7. Support available to colleagues

- 7.1 Complainants and Respondents may wish to seek support from a colleague or Trade Union representative. To support colleague wellbeing, the University also provides the following services:
- [Just Ask](#) - a confidential peer support service for University colleagues who are feeling stressed at work. The service is managed by the Colleague Health and Wellbeing Team and made-up of trained volunteers who can provide a listening ear and effective support for stress related issues as well as signposting to professional help.
  - [Employee Assistance Programme](#) – a 24-hour confidential helpline and online web portal to provide support to University colleagues through any of life's issues or problems.

## 8. Timescales

- 8.1 Every effort will be made to investigate allegations of research misconduct in the shortest possible timescale necessary to ensure a full and fair investigation. This will vary according to the time required to investigate a specific allegation. However, indicative timescales are provided below for information:
- **Stage 1** – 10 working days following receipt of the allegation.
  - **Stage 2** – 40 working days following the appointment of a Lead Investigator / Screening Panel.
  - **Stage 3** – 40 to 50 working days following the appointment of a Formal Investigation Panel.
  - **Appeals** – 30 working days following the appointment of an Appeal Panel.
- 8.2 Depending on the nature and complexity of the allegation, reasonable adjustments to the timescales identified within the procedure may be implemented by the Named Person or Lead Investigator. In such cases, this will be communicated as appropriate to relevant parties.
- 8.3 All colleagues are expected to co-operate fully with the investigation to ensure a timely resolution to proceedings.

**Appendix 1** – Flow chart illustrating procedure

**Appendix 2** – Reporting Allegations of Research Misconduct Form

**Appendix 3-** Compliance with funder specific requirements

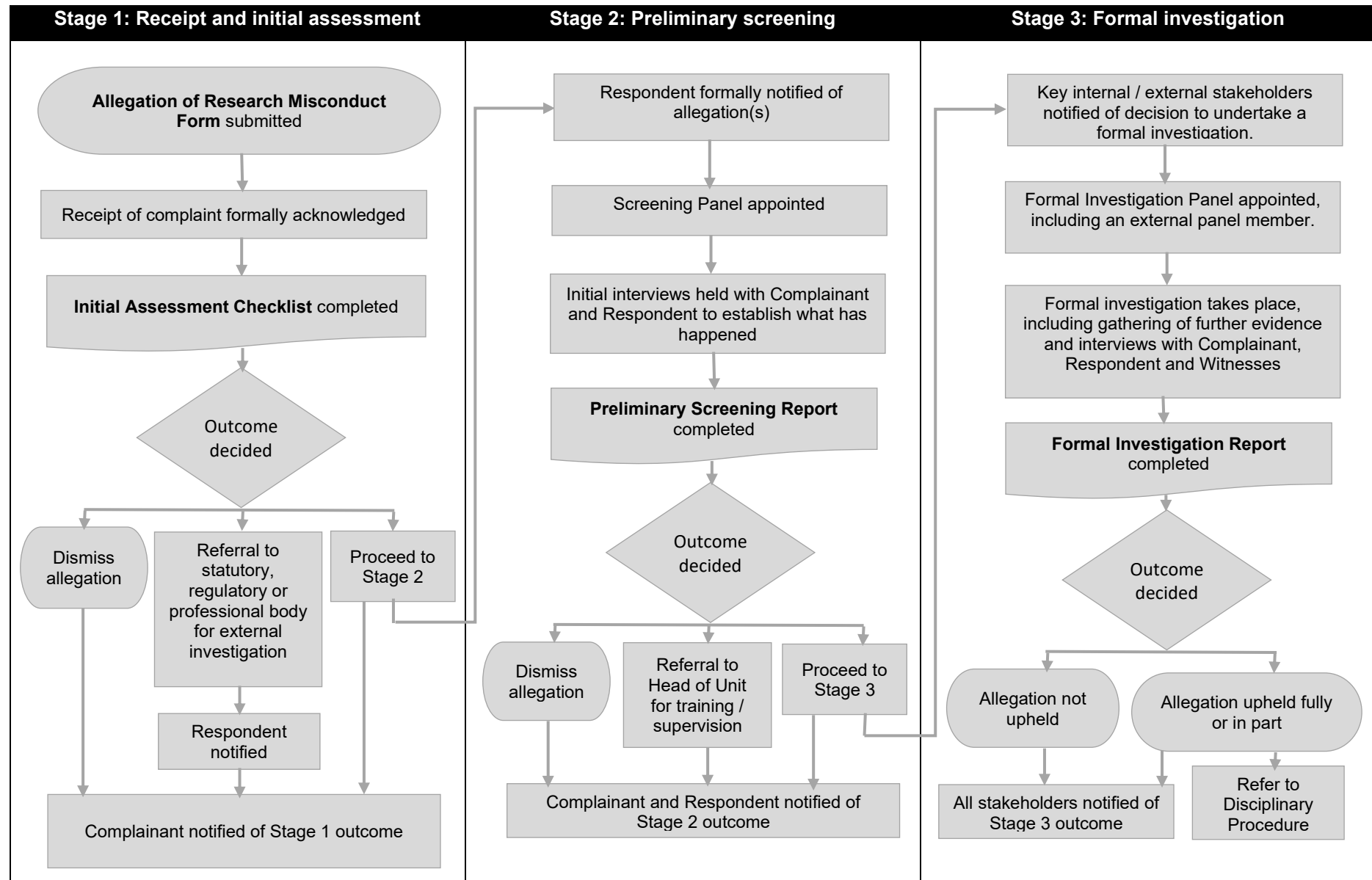
**Approved by:**

**University Research and Innovation Committee: 17<sup>th</sup> February 2026**

**University Executive Board: 21<sup>st</sup> April 2026**

**University Council: 1<sup>st</sup> June 2026**

## Appendix 1 – Flow chart illustrating procedure



## Appendix 2 – Reporting Allegations of Research Misconduct Form

### STRICTLY CONFIDENTIAL

## Reporting Allegations of Research Misconduct Form

Please refer to the University's [Policy on Investigating Allegations of Research Misconduct](#) before completing this form.

### Summary of allegation(s)

|                                                                                                                                                                                    |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name(s) of Complainant(s)                                                                                                                                                          |  |
| Email address(es) of complainant(s)                                                                                                                                                |  |
| Employment status of complainant(s)                                                                                                                                                |  |
| Name(s) of respondent(s)                                                                                                                                                           |  |
| Employment status of respondent(s)                                                                                                                                                 |  |
| Relationship between complainant(s) and respondent(s)                                                                                                                              |  |
| Funding details relating to the complaint (if known/applicable)                                                                                                                    |  |
| Details of third parties who may have a vested interest in the complaint (partner organisations, commercial /clinical partners, etc.)                                              |  |
| Brief background to the research (provide here any details you think may be relevant, e.g. involvement of research participants, use of animal testing, risk level of the project) |  |

Please list below all the issues of potential research misconduct in chronological order and attach supporting evidence / identify where supporting evidence may be obtained.

| Ref | Date | Allegation | Supporting evidence |
|-----|------|------------|---------------------|
| 1   |      |            |                     |
| 2   |      |            |                     |
| 3   |      |            |                     |
|     |      |            |                     |
|     |      |            |                     |

### Declaration

I/We declare that the information I/we have provided is true and accurate. I/we make this complaint in good faith and without malice. I/we understand that to make a frivolous or malicious allegation may be considered a serious disciplinary matter. I/we also understand that victimisation of anyone involved in a complaint of research misconduct may be considered a serious disciplinary offence.

Signed .....  
Print name .....  
Date .....

Completed forms should be forwarded to the Research Integrity and Compliance Manager at:  
[research.integrity@ncl.ac.uk](mailto:research.integrity@ncl.ac.uk).

### **Appendix 3- Compliance with funder specific requirements**

The University is committed to ensuring that all research misconduct concerns are managed in full compliance with the requirements of the relevant research funder(s). Where a funder has published its own procedures, expectations, or reporting obligations relating to research misconduct, these will be adhered to in addition to this Procedure.

This may include, where applicable, following the specific requirements of funders such as, but not limited to:

- Public Health Service (PHS) of the U.S. Department of Health and Human Services (including compliance with the *PHS Policies on Research Misconduct*), which sets out prescribed steps for notification, inquiry, investigation, timelines, record retention, and reporting to the Office of Research Integrity (ORI).
- UK Research and Innovation (UKRI), which requires timely reporting of allegations, regular updates during investigations, and submission of final outcomes in accordance with UKRI guidance.
- Charitable, industry, or international funders whose award terms include specific obligations relating to the handling, escalation, or reporting of misconduct concerns.

Where a funder's requirements differ from, add to, or conflict with this Procedure, the University will incorporate the funder's mandatory requirements into the handling of the case. The Responsible Officer will advise on the applicable processes, ensure that required notifications are made, and maintain appropriate communication with the funder throughout the investigation.

Researchers and relevant staff must cooperate with any additional steps required to meet a funder's conditions, including providing information necessary for funder reporting or audit purposes.