**Research Integrity Action Plan**

**Background**

1. Cardiff University is committed to upholding the principles of the [Concordat to Support Research Integrity](https://www.universitiesuk.ac.uk/sites/default/files/field/downloads/2021-08/Updated%20FINAL-the-concordat-to-support-research-integrity.pdf) and to fostering a research environment which enables and encourages all of its researchers to maintain the highest standards of integrity in all aspects of research. **Appendix 1** contains a list of the five commitments contained in the Concordat and our respective obligations as a research institution/employer of researchers.
2. Whilst the University has robust governance arrangements and support structures to help achieve the principles of the Concordat, it is imperative that the University regularly reflects on whether its systems for supporting Research Integrity remain fit for purpose.
3. During 2021 and 2022, the University’s Research Integrity, Governance and Ethics (‘RIGE’) team co-ordinated a detailed Research Integrity review and gap analysis, utilising the [UKRIO Self-Assessment Tool](https://ukrio.org/wp-content/uploads/UKRIO-Self-Assessment-Tool-for-The-Concordat-to-Support-Research-Integrity-V2.pdf). This tool aims to help institutions identify areas of their research practice, policy and culture that may benefit from revision to fully embed the principles of the Concordat. The tool poses an extensive list of questions (over 100), each mapped to one or more of the commitments contained in the Concordat.
4. In collaboration with stakeholders across the University, including those responsible for relevant policy areas and governance arrangements, RIGE has reflected on each question contained in the Self-Assessment Tool and has developed this Action Plan to address the areas that would benefit from improvement. It is important to note that some of the actions relate to Self-Assessment questions to which the University responded positively (i.e. the University satisfies the requirement/recommendation). This is important in demonstrating that the review was not treated simply as a compliance exercise, but an opportunity to reflect on achievable improvements and opportunities to exceed minimum standards to help truly embed a culture of Research Integrity.
5. The review and Action Plan represent a step change in the University’s approach to Research Integrity, moving towards a system of improved integration and collaboration, underpinned by the concept of shared responsibility and understanding. It is hoped that this approach will help to ensure that Research Integrity is embedded within the research ecosystem, resonates with researchers, and ultimately helps to foster an environment where good research practice is not only enabled, but valued.
6. This Action Plan has been shared with the University’s Directors of Research for input and endorsed by the Open Research Integrity and Ethics Committee (‘ORIEC’), as the body with oversight responsibility for ensuring the University meets the requirements of the Concordat. It has also been noted, discussed and/or approved by various other University groups and committees as appropriate including the University’s Executive Board and Council. Feedback from all of these groups has been incorporated into this Action Plan. Progress against the Action Plan will be reviewed annually.
7. In the pursuit of continuous improvement, ORIEC has endorsed a 5-year Research Integrity review cycle, to align with the review cycle for the Concordat itself. The University will therefore aim to re-visit the questions contained in the Self-Assessment Tool (or a future iteration of it) every 5 years. It is anticipated that the next review will commence in 2026/2027.

**Acknowledging our historic efforts**

1. It is important to acknowledge the hard work and progress that has already been made by the University in establishing governance systems and support structures to help foster Research Integrity. For example:
* The University has a publicly available institutional policy for Research Integrity (the Research Integrity and Governance Code of Practice (‘RI CoP’)) and a suite of policies, procedures, training and guidance in topic-specific areas. The RI CoP has existed in one form or another since 2002 (it was originally titled the “Research Governance Framework”) and is subject to regular review by a wide reviewer pool.
* There is a University-level committee (ORIEC) responsible for the oversight of Research Integrity, Research Ethics and Open Research and this work falls within the portfolio of the Pro Vice-Chancellor for Research, Innovation and Enterprise (Chair of ORIEC and the University’s named senior academic lead for Research Integrity).
* The University engages closely with external bodies in areas of relevance to Research Integrity and is a member of [UKRIO](https://ukrio.org/), [UKRN](https://www.ukrn.org/local-network-leads/), and various sector groups, including the Russell Group Research Integrity Forum.
* There is a professional services team (RIGE) that provide dedicated support in the area of Research Integrity. There are also teams that provide support in topic-specific areas such as Human Tissue Research, Animal Research, Data Protection and Safeguarding.
* Research Integrity messaging is embedded within various documents and programmes for new starters (staff and research students).
* The University has developed its own Research Integrity online training programme (‘RI Training’), currently mandatory for all Academic Staff and for Doctoral, MRes and MPhil students. The RI Training was first introduced in 2017.
* The University has published Annual Statements on Research Integrity since 2017.
* The University has publicly available named points of contact for Research Integrity, Academic Research Misconduct (‘ARM’) and Whistleblowing.
* Every Academic School has a School Research Ethics Committee (‘SREC’) and there are local points of contact for Research Integrity, Research Ethics and Human Tissue Research (amongst other areas). Local Research Integrity Leads were first introduced in 2017

**Action already taken during the Self-Assessment/Research Integrity review period**

1. The University adopted a pro-active approach when conducting the Self-Assessment exercise and, as such, a number of action areas that were identified early on (and would have appeared in the Action Plan) were accomplished during 2022. For example:
* Revisions were approved and/or incorporated into the University’s ARM Procedure, Academic Integrity Policy, and Academic Misconduct Procedure (Research Students) to reflect the bolstered definition of research misconduct contained in the Concordat, plus other key Concordat requirements relating to the investigation of such cases.
* Institutional endorsement of the “PREPARE” guidelines (Planning Research and Environmental Procedures on Animals: Recommendations for Excellence).
* A review of all RI Training feedback submitted since the start of 2020 up to September 2022. This resulted in the identification of some areas for improvement.
* Engaging with relevant stakeholders to help improve completion rates of the University’s RI Training (particularly Academic Staff completion rates).
* Establishing a Task and Finish Group to recommend an alternative robust and proportionate process for the ethical review of Undergraduate and Postgraduate Taught student projects involving human participants, human data or human material.
* Updating the Annual Ethics Report proforma submitted by SRECs to capture feedback on strengths and trends and a random sample of approved SREC applications.
* A review of UKRIO’s recommendations for the content of Annual Statements.
* Integration of Research Integrity into the University’s broader Research Culture work, including RIGE representation on the University’s Research Culture Development Group and sub-groups, and inclusion of a “Research Integrity and Ethics” section in the University’s first ever Research Culture Survey (October-November 2022).

**Activity NOT in the Action Plan**

1. This Action Plan does not include matters of minor update/correction or:
* actions that are already listed (or will be listed) in another institutional Action Plan e.g. the Open Research Action Plan, Trusted Research Action Plan, and Academic Integrity Charter Action Plan.
* areas that will be explored through the University’s “Thrive” project for transforming Research Culture.

**Interaction with other Action Plans**

1. It is important to acknowledge that this Action Plan is one of a number of action plans of relevance to the University’s research portfolio. RIGE has been involved in helping to develop and/or providing feedback on a number of such action plans in recent years and is confident that this Research Integrity Action Plan will complement existing action plans (particularly those in the areas of Open Research, Researcher Development, Trusted Research and Research Culture). All of these action plans are mutually reinforcing and will ultimately help to create a culture underpinned by best practice. RIGE will continue to engage and collaborate with the teams and individuals responsible for the action plans listed above to help ensure that opportunities for efficiency and collaboration are identified.

**Note:** There is an “Acronym Key” to support this Action Plan contained at **Appendix 2.**

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| **Pillar 1: Policies and Procedures**  |
| **Actions** | **Owner(s)** | **Target date** |
| Review the ‘Research involving animals’ section of the UKRIO Code of Practice and the UKRIO Primer on Research involving Animals and consider whether any action is required by the University to reflect these documents.  | BSO | April 2023 |
| Complete the second phase of the ARM Procedure review, ensuring it captures all “phase 2” areas for improvement identified through completion of the UKRIO Self-Assessment Tool. *See* ***Endnote 1****.* | Compliance and Risk (CaR) | April 2023 |
| Review and update the RI CoP to address all areas for improvement identified through completion of the UKRIO Self-Assessment Tool. *See* ***Endnote 2****.* | RIGE | May 2023 |
| Establish a Task and Finish Group to review the University’s *“Framework for the ethical review of Research involving Publicly Available and/or Secondary Data only”* and consider improvements that can be made in this area (including simplification of the ethical review process for such projects and improved guidance on the use of social media data).  | September 2023 |
| Identify any improvements for signposting and (where necessary) alignment between the Academic Integrity Policy, ARM Procedure and the Academic Misconduct Procedures (Research Degrees), including clear named contact points. | CaR **&** PGR Quality **&** SCS | September 2023 |
| Review and update the Ethics Policy for Human Research to address the policy improvements identified through completion of the UKRIO Self-Assessment Tool. *See* ***Endnote 3****.*  | RIGE | June 2024 |
| Ensure the RI CoP and CU Ethics Policy for Human Research are subject to review at least once every three years.  | June 2024 R3[[1]](#footnote-1) |
| Review, updating as necessary, the relevant Student Conduct policies and/or procedures relating to Academic Integrity to address all areas for review (and that may benefit from improvement) identified through completion of the UKRIO Self-Assessment Tool. *See* ***Endnote 4****.* | PGR Quality **&**SCS **&** Education Governance (EdGov) | September 2024 |
| Ensure the following are adequately addressed within the University’s Student Conduct policies and/or procedures relating to Academic Integrity: (1) the University’s record keeping requirements and retention schedule for student administration and support; (2) the declaration, and appropriate management, of conflicts of interest by anyone with a role under the relevant procedures. | September 2024 |
| Improve signposting between relevant student policies/procedures and the whistleblowing policy and contact points. | CaR **&** PGR Quality **&** SCS | September 2024 |
| Conduct a review of the ARM Procedure, Academic Integrity Policy and Academic Misconduct Procedures against the revised UKRIO Procedures for the Investigation of Misconduct in Research (once published). | TBC Awaiting publication |
| To consider the extent to which corresponding updates may be required to the Student Complaints Regulations and procedures in light of any updates made to relevant Student Conduct policies and/or procedures arising from actions above (given that allegations of misconduct by students can be raised through the Student Complaints process).  | EdGov | September 2024 |

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| **Pillar 2: Guidance and Resources**  |
| **Actions** | **Owner(s)** | **Target date** |
| Update the University’s template Participant Information Sheet to include a signpost to the University’s research integrity and ethics external webpages and to incorporate suggested updates from data protection colleagues.  | RIGE | September 2023 |
| Improve clarity and guidance to researchers on what is considered poor research practice/questionable research practice (as opposed to ARM)) and how any discovered poor/questionable practice (short of ARM) will be handled. | CaR **&** RIGE | September 2023 |
| Develop succinct guidance/integrity-related considerations when conducting research overseas/outside of the UK. | RIGE | January 2024 |
| Consider the development of guidance on handling of authorship disputes and/or providing clarity on the extent to which authorship disputes are captured by the University’s ARM Procedure. | CaR **&** RIGE | September 2024 |
| Explore whether complementary guidance on responsible innovation/responsible practice in knowledge exchange is required (specifically whether there are best practice expectations specific to these activities). | Impact and Engagement | September 2024 |
| Prepare draft guidance on completion of the ORIEC-approved SREC Application Form template and distribute to SRECs for comment and suggestions on next steps/roll-out. | RIGE | September 2024 |
| Develop guidance and/or a checklist on device trials. | JRO | September 2024 |
| Develop guidance or tools for the research community on ‘environmental protection’, ‘environmental impact’ and ‘sustainability’ and considerations/expectations in these areas. | ESC | September 2024 |
| Develop (or otherwise make available) a range of discipline-specific Research Integrity resources to help improve relevancy, promote best practice and capture the interest of all researchers e.g. guidance notes, case studies, videos.  | RIGE | May 2025 |
| Develop guidance on research falling under the Nagoya Protocol. | May 2025 |

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| **Pillar 3: Training and Support** |
| **Actions** | **Owner(s)** | **Target date** |
| Review any new feedback from staff and students on the RI Training and identify any key improvements required.  | RIGE | August 2023 R1 |
| Update the University’s RI Training to address: (1) any key changes to the RI CoP (following its revision); (2) common misconceptions about ethics review/where researchers go wrong (utilising information gained from SRECs); (3) any improvements to existing content identified through the review of RI Training feedback from staff and students. | September 2023 |
| Explore the purchase and/or internal development of Research Ethics-specific training for staff and student researchers, to replace the historic Epigeum modules currently accessible to staff and postgraduate students.  | September 2023 |
| Develop a training framework and/or clear competency expectations for SREC Chairs, SREC Members and RI Leads.  | September 2023 |
| Prepare short case studies based on CU ARM investigations and/or common investigation areas over the last 3 years, for inclusion or reference within the University’s RI Training. | CaR | September 2023 R1  |
| Explore relevant training opportunities and/or requirements for the following individuals involved in the ARM Procedure: (1) Professional services staff; (2) Named Persons; (3) Members of ARM panels. | September 2023 |
| Explore if there is an appetite or need for more specific training on reporting concerns about misconduct in research (to potentially include information on ARM, student misconduct procedures, HR procedures and whistleblowing). | September 2023 |
| To directly engage with any School that has not secured at least a 75% Academic Staff completion rate of the University’s RI Training by the Target Date and to identify remedial actions.  | RIGE | September 2023 |
| Incorporate learning points from ARM investigations into the University’s RI Training. | RIGE | January 2024 R1 |
| Consider support requirements for panel members and those operating the ARM Procedure.  | CaR | September 2024 |
| Review, and consider the utility of, UKRIO’s Research Integrity online training programme. | RIGE | TBC Awaiting publication |

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| **Pillar 4:** **Strategy,** **Systems and Governance** |
| **Actions** | **Owner(s)** | **Target date** |
| Consider whether the ‘named point of contact’ (contained on the University’s website) for ARM and Whistleblowing need to be revised to the ‘Named Person’ under the relevant Policy/Procedure itself as well as, or instead of, the current Professional Services contact. | CaR | April 2023 |
| Consider internal audit programme for animal research, specifically whether any additional audit activity is necessary and/or feasible (i.e. mid-term reporting, random checks etc). | BSO | April 2023 |
| Explore improvements to the way in which the University’s internal processes around animal research governance are formally documented and shared.  | July 2023 |
| Introduce a proportionate (and yet robust) process for the ethical review of UG and PGT activity involving human participants, human data or human material. | RIGE | September 2023 |
| Incorporate completion of the University’s RI Training into all internal research funding and award applications. | September 2023 |
| Explore what steps could be taken within existing probation and PDR processes to help ensure RI Training completion by Academic Staff.  | RIGE **&** HR | September 2023 |
| Prepare a plan[[2]](#footnote-2) for the proposed review of all applications proceeding to an NHS REC that involve Human Tissue. | HTA Compliance  | September 2023 |
| Take steps to ensure there are appropriate internal mechanisms to identify whether a student alleged to have committed Academic Misconduct is in receipt of research funding (to facilitate adhering to funder reporting rules).  | PGR Quality **&** SCS | September 2023 |
| Provide data and summary information[[3]](#footnote-3) about the following, as part of the Annual Statement on Research Integrity: (1) All investigations conducted during the relevant Academic Year under the Academic Misconduct Procedures (Research Degrees); (2) Investigations reaching the formal Academic Integrity Panel stage under the Academic Misconduct Procedures (Taught Students) that related to alleged misconduct during (or relating to) research activity during the relevant Academic Year. | September 2023 R1 |
| Identify whether there are any common themes arising from cases reported under the above that may warrant action by the University and/or the preparation of short cases studies for inclusion in the University’s RI Training. | September 2023 R1 |
| That data on the number of UG/PGT Academic Misconduct cases arising on modules with ‘Research’ in their title, compared to other modules, is looked at annually to help the University understand the scale of UG/PGT misconduct on research modules (compared to other modules) and to help identify any spikes or trends.  | SCS | September 2023 R1 |
| Explore the feasibility of establishing a ‘pool’ of ARM panel members, which could provide continuity, expertise, and efficiency benefits. | CaR | September 2023 |
| Explore the extent to which the University’s future research sub-strategy could be bolstered in relation to the recognition of “Research Integrity” | RIGE & PVC-R | December 2023 |
| Explore what steps could be taken to ensure that Doctoral, MRes and MPhil students do not progress and/or that research cannot be submitted for assessment until completion of the University’s RI Training. | PGR Quality **&** EdGov | May 2024 |
| Conduct a review of the University’s ethical review process against the four principles of competence, facilitation, independence, and openness using the checklist for each of these principles contained within the UKRIO and ARMA framework for research ethics support.  | RIGE | June 2024 |
| Establish a Task and Finish Group to review the Standard Operating Procedures/Ethics Protocols developed by SRECs for one of the University’s “full review criterions”. | RIGE | September 2024  |
| Introduce a system to review all applications proceeding to an NHS REC that involve Human Tissue. | HTA Compliance  | September 2024  |
| Explore whether an expectation of RI Training completion could be integrated into the University’s reward, recognition, and promotion schemes for Academic Staff. | RIGE **&** HR | September 2024 |

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| **Pillar 5: Culture** |
| **Actions** | **Owner(s)** | **Target date** |
| Develop a new content area (within the RI Training or intranet) to provide ideas to staff with management and supervisory responsibilities about how they can help to embed a positive culture of Research Integrity and to deliver ideas about what can be done locally to facilitate peer discussion of Research Integrity. | RIGE | September 2023 |
| Review the data/responses from the “Research Integrity and Ethics” section of the 2022 Research Culture Survey and to have identified any additional Research Integrity-related actions and priority areas arising from this data.  | RIGE **&** RCDG | September 2023 |
| Consider the extent to which local ARM champions are required and/or whether functions in this area could be embedded within existing structures or roles.  | CaR | September 2023 |
| Explore the creation of “safe spaces” or other mechanisms to enable and support staff and students in raising Research Integrity concerns. | RIGE | September 2024 |
| Explore the extent to which demonstrating excellence in supporting and/or embedding Research Integrity locally could be better reflected in the University's systems around reward and recognition, academic promotion, and professional banding. | RIGE **&** HR **&** RCDG | September 2024 |
| Explore whether the ‘Research’ section of the Cardiff Academic could be improved/bolstered to include a reference to Research Integrity (conducting research to the highest standards of integrity), to help embed Research Integrity into broader employment values.  | RIGE **&** HR | September 2024 |
| Explore ways of integrating Research Integrity core values into the University’s mentoring schemes for Academic Staff. | RIGE **&** HR | May 2025 |

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| **Pillar 6: Engagement, Communication and Transparency** |
| **Actions** | **Owner(s)** | **Target date** |
| Invite knowledge exchange, impact and engagement colleagues to feed into the next revision of the RI CoP and to consider whether a specific paragraph on these activities is required. | RIGE | April 2023 |
| Publish the University’s Ethics Policy for Human Research on the University’s externally facing website. | RIGE | April 2023 |
| Consider whether the Animals@Cardiff Policy could be made publicly available on the University’s website.  | BSO | April 2023 |
| Communicate, and raise awareness of, the Research Integrity Action Plan with key stakeholders across the University, including local Research Integrity Leads and the Directors of Research.  | RIGE | July 2023 |
| Hold an annual review meeting between SREC and ORIEC representatives, following each SREC reporting cycle.  | RIGE | July 2023 R1 |
| Consider ways in which the ARM Procedure and reporting process could be better clarified and publicised. | CaR | September 2023 |
| To identify an appropriate means of (or forum for) seeking feedback from the CU research community on: * whether they feel they have the skills and resources needed to meet Research Integrity standards
* whether there is anything happening locally that disincentivises good research practice and/or the creation of a positive research culture underpinned by integrity;
* the prevalence of research integrity concerns locally, and the extent to which such concerns are reported;
* researcher confidence levels in reporting concerns about research integrity/research conduct without fear of stigma or detriment, and confidence levels that such concerns are properly addressed.
 | RIGE | September 2023 |
| Explore the extent to which local Academic Misconduct Co-ordinators could be more made more visible/accessible[[4]](#footnote-4).  | SCS | September 2024 |
| Explore ways of improving direct engagement with research students and technicians to further bolster the impact and relevancy of the University’s research integrity policies and systems. | RIGE | September 2024  |
| Explore ways in which messaging around responsible practice in research and responsible practice in knowledge exchange/impact/engagement/innovation could be better aligned and integrated into existing programmes and resources | Impact and Engagement **&** RIGE | September 2024 |

**Endnote 1:** Various areas for review/improvement identified including, but not limited to: conducting a review against other relevant policies, procedures and legislative areas; signposting improvements; considering scope (independent contractors, consultants etc), roles, responsibilities and points of contact; inclusion of specific statements/guidance on predatory journals; review against the COPE guidelines on co-operation between research institutions and journals; to consider adding a table of alternative procedures to assist with understanding about parameters of the procedure; addition of information about initiating other investigations/effective referrals process; to consider making provision for remedial training, mentoring and monitoring; to consider making an institutional commitment to avoiding the inappropriate use of legal instruments (such as non-disclosure agreements).

**Endnote 2:** Signposting improvements, review against updated external frameworks (UKRIO and UKRI), extension of scope to research-related activity such as editorial and peer review functions, content updates and the development of new content in various areas including: reproducibility expectations and the University’s membership to UKRN; best practice in respect of editorial and peer review functions; information on “Raising a concern about Research Integrity”.

**Endnote 3:** Various areas for review/improvement identified including, but not limited to: Improving clarity regarding the need to check local ethics customs and processes for research being conducted outside of the UK; review of the policy against the ARMA/UKRIO “Framework for Research Ethics Support and Review” to identify any improvements required.

**Endnote 4:** Various areas for review/improvement identified including, but not limited to: inclusion of a clear commitment to the objective, thorough, fair, transparent and timely investigation of research misconduct concerns; a reference to the key principles that inform the operation of the procedures; ensuring that confidentiality and support options for all those involved in an investigation are addressed; review against updated external frameworks (UKRI); consideration of broader actions required as a result of the alleged misconduct (proven or dismissed); provisions relating to the referral and/or reporting to external bodies (where relevant to the student).

**Appendix 1**

**Concordat Commitments and institutional responsibilities**

***COMMITMENT 1***

*We are committed to upholding the highest standards of rigour and integrity in all aspects of research*

As an institution/employer of researchers, we are responsible for:

* maintaining a research environment that develops good research practice and embeds a culture of research integrity, as described in Commitments 2 to 5
* supporting researchers to understand and act according to expected standards, values and behaviours
* defending researchers when they live up to the expectations of the Concordat in difficult circumstances
* demonstrating that we have procedures in place to ensure that research is conducted in accordance with standards of best practice; systems to promote research integrity; and transparent, robust and fair processes to investigate alleged research misconduct

***COMMITMENT 2***

*We are committed to ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards.*

As an institution/employer of researchers, we must:

* have clear policies on ethical review and approval that are available to all researchers
* make sure that all researchers are aware of, and understand policies and processes relating to ethical approval
* support researchers to adopt best practice in relation to ethical, legal and professional requirements
* have appropriate arrangements in place through which researchers can access advice and guidance on ethical, legal and professional obligations and standards

***COMMITMENT 3***

*We are committed to supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers.*

A research environment that helps to develop good practice and embeds a culture of research integrity must have:

* clear policies, practices and procedures to support researchers
* training on research ethics and research integrity with suitable learning, training and mentoring opportunities to support the development of researchers’ skills throughout their careers
* robust management systems to ensure that policies relating to research, research integrity and researcher behaviour are implemented
* awareness among researchers of the standards and behaviours that are expected of them
* systems within the research environment that identify potential concerns at an early stage
* mechanisms for providing support to researchers in need of assistance
* policies that ensure there is no stigma attached to researchers who find they need assistance from the University
* clear processes for any staff member to raise concerns about research integrity

As an institution/employer of researchers, we must:

* embed the above features in our systems, processes and practices
* reflect recognised best practice in our own systems, processes and practices
* implement the Concordat within our research environment
* participate in an annual monitoring exercise to demonstrate that we have met the Concordat commitments
* promote training and development opportunities to research staff and students, and encourage uptake
* identify a named senior member of staff to oversee research integrity and ensure that this information is kept up to date and publicly available on the institution’s website
* identify a named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity, and ensure that contact details for this person are kept up to date and are publicly available on the institution’s website

***COMMITMENT 4***

*We are committed to using transparent, timely, robust and fair processes to deal with allegations of research misconduct when they arise.*

As an institution/employer of researchers, we must:

* have clear, well-articulated and confidential mechanisms for reporting allegations of research misconduct
* have robust, transparent and fair processes for dealing with allegations of misconduct that reflect best practice. This includes the use of independent external members of formal investigation panels, and clear routes for appeal
* ensure that all researchers and other members of staff are made aware of the relevant contacts and procedures
* act with no detriment to whistle-blowers who have made allegations of misconduct in good faith, or in the public interest, including taking reasonable steps to safeguard their reputation. This should include avoiding the inappropriate use of legal instruments, such as non-disclosure agreements
* take reasonable steps to resolve any issues found during the investigation. This can include imposing sanctions, requesting a correction of the research record and reporting any action to regulatory and statutory bodies, research participants, funders or other professional bodies as circumstances, contractual obligations and statutory requirements dictate
* take reasonable steps to safeguard the reputation of individuals who are exonerated
* provide information on investigations of research misconduct to funders of research and to professional and/or statutory bodies as required by their conditions of grant and other legal, professional and statutory obligations
* support researchers in providing appropriate information when they are required to make reports to professional and/or statutory bodies
* provide a named point of contact or recognise an appropriate third party to act as confidential liaison for whistle-blowers or any other person wishing to raise concerns about the integrity of research being conducted under our auspices.

***COMMITMENT 5***

*We are committed to working together to strengthen the integrity of research and to reviewing progress regularly and openly*

As an institution/employer of researchers, we must:

* take steps to ensure that our environment promotes and embeds a commitment to research integrity, and that suitable processes are in place to deal with misconduct
* produce a short annual statement, which must be presented to the governing body, and subsequently be made publicly available, ordinarily through the institution’s website. This annual statement must include:
	+ a summary of the actions and activities undertaken to support and strengthen understanding and the application of research integrity issues (e.g. postgraduate and researcher training, or process reviews)
	+ a statement to provide assurance that the processes the institution has in place for dealing with allegations of misconduct are transparent, timely, robust and fair, and that they continue to be appropriate to the needs of the organisation
	+ a high-level statement on any formal investigations of research misconduct that have been undertaken, including data on the number of investigations.
	+ a statement on what the institution has learned from any formal investigations of research misconduct, including what lessons have been learned to prevent the same type of incident re-occurring
	+ a statement on how the institution creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct

 A link to the annual statement should be sent to the secretariat of the signatories to the Concordat.

* periodically review our processes to ensure that these remain fit for purpose

**Appendix 2**

**Acronym Key**

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| **ARM** | Academic Research Misconduct |
| **ARMA** | Association of Research Managers and Administrators |
| **BSO** | Biological Standards Office |
| **CaR** | Compliance and Risk team |
| **COPE** | Committee on Publication Ethics |
| **CU** | Cardiff University |
| **Ed Gov** | Education Governance  |
| **ESC** | Environmental Sustainability Committee |
| **HR** | Human Resources |
| **HTA** | Human Tissue Act |
| **JRO** | Joint Research Office |
| **MRes** | Master of Research |
| **MPhil** | Master of Philosophy |
| **NHS REC** | National Health Service Research Ethics Committee |
| **ORIEC** | Open Research Integrity and Ethics Committee |
| **PDR** | Performance Development Review |
| **PGR** | Postgraduate Researcher |
| **PGT** | Postgraduate Taught |
| **PVC-R** | Pro Vice-Chancellor for Research, Innovation and Enterprise |
| **RCDG** | Research Culture Development Group |
| **RI** | Research Integrity |
| **RI CoP** | Research Integrity and Governance Code of Practice |
| **RIGE** | Research Integrity, Governance and Ethics team |
| **SCS** | Student Cases team |
| **SREC** | Schools Research Ethics Committee |
| **UG** | Undergraduate |
| **UKRI** | UK Research and Innovation |
| **UKRIO** | UK Research Integrity Office  |
| **UKRN** | UK Reproducibility Network |

1. R indicates a rolling action. The number after the R indicates how regularly the action must be undertaken i.e. 3 = every 3 years, 1 = annually. [↑](#footnote-ref-1)
2. To include at least the timescales for the introduction of this review system, the actions required to embed this within the current Sponsorship process and internal procedures to be followed when conducting such reviews. [↑](#footnote-ref-2)
3. To include at least the nature of the alleged misconduct, the outcome and any lessons learned. [↑](#footnote-ref-3)
4. It is possible that this action will be addressed naturally through work connected to the University’s Academic Integrity Charter Action Plan. [↑](#footnote-ref-4)