Template: annual statement on research integrity

If you have any questions about this template, please contact: RIsecretariat@universitiesuk.ac.uk.

Section 1: Key contact information

Question	Response		
1A. Name of organisation	Queen's University, Belfast		
1B. Type of organisation: higher education institution/industry/independent research performing organisation/other (please state)	Higher Education Institution		
1C. Date statement approved by governing body (DD/MM/YY)	09/04/2024		
1D. Web address of organisation's research integrity page (if applicable)	https://www.qub.ac.uk/Research/Governance-ethics-and-integrity/Research-integrity/		
1E. Named senior member of staff to oversee research integrity	Name: Professor Archie Clements		
	Email address: a.clements@qub.ac.uk		
1F. Named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity	Name: Louise Dunlop		
	Email address: l.h.dunlop@qub.ac.uk		

Section 2: Promoting high standards of research integrity and positive research culture. Description of actions and activities undertaken

2A. Description of current systems and culture

Please describe how the organisation maintains high standards of research integrity and promotes positive research culture. It should include information on the support provided to researchers to understand standards, values and behaviours, such as training, support and guidance for researchers at different career stages/ disciplines. You may find it helpful to consider the following broad headings:

- Policies and systems
- Communications and engagement
- Culture, development and leadership
- Monitoring and reporting

Policies and systems

Queen's University, Belfast, has in a place a range of regulations, policies, and procedures to ensure research is appropriately governed. The full suite of documentation can be found on the <u>Research Governance</u>, <u>Ethics and Integrity webpages</u>.

The University wants to support its research community - staff and students – in the delivery of high-quality research. One mechanism to achieve this is through the development and availability of Standard Operating Procedures (SOPs) in human participant, human tissue, and animal research. These SOPs provide a framework for the specific stages of research or procedures to be undertaken. During this past year the SOPs were simplified to introduce flow diagrams supported by narrative, enabling them to be used as quick reference documents.

Governance processes span many areas of the University, with various Directorates taking the lead in the development and maintenance of specific regulations, policies or procedures. These include, *inter alia*, Intellectual Property Policy (Research and Enterprise), Research Data Management (Library Services), Whistle Blowing (Registrar's Office), Bullying and Harassment complaints procedure (People and Culture), etc. Policies and procedures are kept under regular review to ensure they

remain fit for purpose. More recently new policies have been developed to support the requirements of Trusted Research and Global Compliance.

Several systems are in place to support the management of specific areas such as human tissue compliance, research ethics, sponsorship of health and social care research, data management, export control, compliance with the Nagoya Protocol, and the contracting involved in research.

PURE is used to facilitate transparency as academics and researchers upload their outputs onto this public platform.

Communications and Engagement

Various formats of communication are used to facilitate engagement, ranging from on-line newsletters to Town Halls targeted to those involved in undertaking or supporting research. The Town Hall format enables the presentation and discussion of key updates relating to research quality, compliance, integrity and updates on new policies and procedures. This format works well when informing researchers around legislative requirements, for example, updates to compliance with the Animal (Scientific Procedures) Act, Trusted Research, Export Control, Bullying and Harassment. In addition, members of the Research Enterprise Team are proactive at attending the Faculty Research Committees, School Management Boards, and School Boards to facilitate two-way communications.

Induction events are another widely used tool enabling messaging to postdoctoral students, research, and academic staff. These are often delivered using on-line platforms and this has had a positive impact on attendance.

Culture, development, and leadership

Queen's University Belfast's (Queen's) institutional Research Culture Action Plan (RCAP) launched in January 2021. Developed through surveys and workshops with the research community, it identified five strategic priorities and three cross-cutting themes. Queen's was recognised as one of a number of early adopters of institutional research culture strategies in the UK R&D People and Culture Strategy.



RCAP is nearing the end of an initial three-year implementation plan and outcomes include, a

- New institutional Postdoctoral Development Centre,
- New network for research 'professional' staff, a series of 'research culture conversations' to discuss 'taboo' topics,
- Seed fund to support nascent research culture initiatives from within the research community.

These activities have largely been driven by strategic use of institutions funds. A funding gap relative to the rest of the UK is compounded by a lack of dedicated investment in research culture. For example, there is no hypothecated funding for research culture similar to Research England's 'Enhancing research culture' fund through which universities of the same size and shape as Queen's and Ulster University receive £550k and £250k per annum.

Despite this structural imbalance, Queen's has applied for £660k funding from the Wellcome Trust's Institutional Funding for Research Culture. If successful, this will enable the delivery of a regional research culture initiative across Northern Ireland, which will see Queen's lead a network including Ulster University, funders, government departments, and industry partners. The project will seek to address several key issues and challenges unique to the region and will put Queen's at the cutting-edge of innovative research culture developments in the UK and Ireland.

Monitoring and reporting

The University has a robust approach to governance with committee structures in place. This enables due consideration of policies and processes, oversight of action plans aimed at enhancing compliance monitoring of progress, in particular, using audits in areas such as human tissue and compliance with the UK Policy Framework for Health and Social Care. During the year all premises holding and processing human tissue were subject to premises audits. The Biological Services Unit was also subject to internal audits and external inspections. During this reporting period one Research Licence (12049) was inspected by the Human Tissue Authority using a remote inspection methodology. All application HTA standards were assessed as having been fully met.

The findings of all audit reports are brought to the relevant committees to facilitate an assurance function.

2B. Changes and developments during the period under review

Please provide an update on any changes made during the period, such as new initiatives, training, developments, also ongoing changes that are still underway. Drawing on Commitment 3 of the Concordat, please note any new or revised policies, practices and procedures to support researchers; training on research ethics and research integrity; training and mentoring opportunities to support the development of researchers' skills throughout their careers.

During the reporting period (01 August 2022 to 31 July 2023) the University agreed to fund and implement the Epigeum on-line research integrity training. The University recognises the importance of this training opportunity for research, academic, and professional support services staff involved in research and has made the training available to through Queen's on-line. Whilst the training is available to all it has been determined that there should be a targeted approach to specific cohorts of students and staff to strongly encourage them to complete the training. Discussions are being finalised as to whether this training shall be compulsory, recognising the challenges posed by monitoring, reporting, and determining any sanctions if it is not completed. In addition, consideration is being given to whether certain modules require completion or if it is required to complete all 13 modules in the University's package.

Given the breadth of regulations, policies, and procedures that contribute to the governance of research it is only possible to review and update on a cyclical basis. This year the Regulations Governing Research Involving Animals and the Code of Conduct and Integrity in Research were reviewed and updated. Work is nearly complete on broadening the policy on Fieldwork in Conflict Zones to capture Duty of Care requirements for all

research being undertaken anywhere, not just high-risk areas.

As mentioned earlier, SOPs are available to support research. Of the 26 managed by the Research Governance Team 14 were reviewed and updated during this year to introduce flow diagrams supported by instructions, making it easier for researchers to quickly identify processes to followed.

Data Management

There were several developments occurring within Research Data Management during this time. There were 2 Research Data Librarians for this reporting period. This enabled the completion of key designated projects. For example, an Open Research Funder Toolkit was created; this has allowed researchers to check funder policies regarding data sharing mandates. An Open Research webpage was also created to provide a single point of guidance and access to the wide range of open research support services across the University. Reporting was also conducted regarding Data Access statements in UKRI funded published articles submitted to the institutional repository. This was to monitor for compliance with the UKRI data access policy.

The usual continuation of core services - review of data management plans and creation of datasets in the data repository - also continued apace. One significant development which occurred - from a cross-institutional perspective - was the establishment of a Research Data Management group with various stakeholders across professional support services liaising on RDM matters and beginning the infrastructure and governance for an incipient Data Access Committee. This was spearheaded by the Open Research Team and is led by core issues within Research Data Management; this group is thus committed to developing solutions to promote the FAIR and ethical sharing of research data.

Training

A broad range of training is available to the research community:

- A suite of training resources was provided to researchers in the form
 of Research Data Management LibGuide and through the creation of
 new training programmes (for example, "Research data and your ethesis" & "Share your research data and graduate"). In 40 one-toone sessions and approximately 20 training sessions (staff and
 students) were delivered on data management in this period,
 numbering 900+ attendees in total.
- To support compliance with the Human Tissue Act, training is compulsory for all staff and students working with tissue every three years. Such training is offered on a monthly basis.
- Members of Research Governance, Ethics and Integrity Team are often guest lecturers on a variety of post-graduate degree programmes delivered throughout the year.

- The year has had a strong focus on creating awareness of Trusted Research, Export Control and the Nagoya Protocol. This has been achieved through Town Halls, attendance at a variety of School based forums and as invited guest lecturers.
 - The Higher Education Export Control Association (HEECA)
 Export Control training has been piloted within the University
 and work is ongoing to determine the most appropriate
 processes to implement this.
- The Postdoctoral Development Centre (PDC) has been instrumental in providing a range of training opportunities, workshops, career events, inductions, and one-to-one support to research staff.

In addition, the PDC has focused its efforts to appropriately valuing the contributions of all members of the R&I ecosystem. During the year it produced new guidance for Schools to enable and formally recognise supervision activities carried out by research staff. This adds to a widening of eligibility criteria for internal funding (e.g. conference fund, engagement or bid development funding etc.), enabling staff in non-academic roles (e.g. research staff, technicians, R&I professionals) to apply. Further work focused on promoting good working practices allowing positive work-life balance in research, notably including work-life balance guidance, a new time management course, and more details on how the maternity leave policy applies to research staff (e.g. case studies and information session). A new course was developed on careers outside academia and on time management.

Equality Diversity and Inclusion in Research Action Plan

In May 2023 Queen's launched the first of two phases of its 3-year Equality, Diversity & Inclusion (EDI) in Research Action Plan for 2023–2026; this was in addition to complementary University policies that were already in place, such as the University Equality Scheme and Action Plan (2018-23), the D&I Policy (2020), and the Disability Action Plan (2021-2026). The first phase of the EDI in Research Action plan (2023-24) was put in place specifically to inform and guide our internal approaches relating to the operational and strategic pre-award support.

Development of Phase 2 (2024-26) of the plan is currently underway and will move beyond the pre-award focussed priorities identified in Phase 1, to develop plans for supporting ED&I in post-award processes and project delivery.

The Phase 1 action plan is currently being implemented via the following approaches:

- Investigating the barriers to greater access and participation in research, including collecting and analysing data on diversity and evaluating processes for ED&I considerations in real-time.
- Encouraging and enabling equitable participation in research, including ensuring equitable access to information, resources, and opportunities.
- Embedding inclusive practices in our pre-awards processes, including carefully evaluating processes and embedding inclusive practices throughout.
- Working with the wider HEI community and funders to learn and share best practice and policies, and proactively seeking to provide feedback to funders.

Research Ethics Committees: lay members

As the lay members on the Faculty Research Ethics Committees were coming to the end of their tenure, a recruitment exercise was undertaken to ensure lay representation on School/Faculty Research Ethics Committee, The Animal Welfare Ethical Review Body and the corporate Governance, Ethics and Integrity Committee. As the year ends the exercise has been completed and a training/induction day has been arranged to on-board the new lay members to the University.

2C. Reflections on progress and plans for future developments

This should include a reflection on the previous year's activity including a review of progress and impact of initiatives if known relating to activities referenced in the previous year's statement. Note any issues that have hindered progress, e.g. resourcing or other issues.

The Annual Statement for the academic year 2022-23 demonstrates research integrity is an integral part of the University business. The Research Culture Action Plan, Trusted Research and Research Data Management and Open Access requirements have been a continuation and maturing of this agenda. EDI, a new component to enhancing the research integrity agenda, allows for a focus on inclusivity in research. Underpinning all these themes has been the offer and delivery of training. Whilst the uptake of training can be easily captured it remains a challenge to understand the impact training has had and whether it has changed individual or research team behaviour.

2D. Case study on good practice (optional)

Please describe an anonymised brief, exemplar case study that can be shared as good practice with other organisations. A wide range of case studies are valuable, including small, local implementations. Case studies may also include the impact of implementations or lessons learned.

Ethical review is an important component of research integrity and ensuring high quality of research. Over recent years the University has been transitioning from structures within individual Schools in the Faculties of Engineering and Physical Sciences, and Medicine, Health and Life Sciences to Faculty level structures. Given the volume of research requiring ethical review in the Faculty of Arts, Humanities and Social Sciences it was considered appropriate to retain the School structure as well as have a Faculty Research Ethics Committee to oversee, standardise and support activities within Schools.

The composition of an ethics committee is important and during this year the University undertook an exercise to recruit new lay members to its ethics committees, including the Animal Welfare Ethical Review Body. The initiative was

co-ordinated by the University Ethics Officers who liaised with the University's Alumni Office to place a call for Expressions of Interest (EoI).

A total of 87 EoIs were received which reduced to 29 people who were involved with informal conversations with Faculty and AWERB chairpersons and members of the Governance, Ethics and Integrity Team. 18 members of the public were able to be placed on Committees for the new academic year of 2023-24, with a further 11 on waiting lists. At the end of August there will be an induction programme before the new lay members take up position on School or Faculty Ethics Committees or AWERB. It is also planned to routinely check with lay members to identify any additional training needs and ensure they are supported.

This is the second time the University has adopted this approach to bringing lay members onto Committees and we are grateful for all those who give of their time to support research in this way.



Section 3: Addressing research misconduct

3A. Statement on processes that the organisation has in place for dealing with allegations of misconduct

Please provide:

- a brief summary of relevant organisation policies/ processes (e.g. research misconduct procedure, whistle-blowing policy, bullying/harassment policy; appointment of a third party to act as confidential liaison for persons wishing to raise concerns) and brief information on the periodic review of research misconduct processes (e.g. date of last review; any major changes during the period under review; date when processes will next be reviewed).
- information on how the organisation creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct (e.g. code of practice for research, whistleblowing, research misconduct procedure, informal liaison process, website signposting for reporting systems, training, mentoring, reflection and evaluation of policies, practices and procedures).
- anonymised key lessons learned from any investigations into allegations of misconduct which either identified opportunities for improvements in the organisation's investigation procedure and/or related policies / processes/ culture or which showed that they were working well.

As required by the Concordat to Support Research Integrity the University has in place Regulations to Govern the Allegation of Misconduct in Research, maintained by the Research and Enterprise Directorate. The People and Culture Directorate are responsible for the Bullying and Harassment Policy, working closely with colleagues in R&E to ensure Funder's requirements are met.

The Registrar's Office is responsible for maintaining the Whistle Blowing Policy, amongst many others that underpin robust corporate governance requirements and add to the wider corporate integrity agenda. All Regulations, Policies and procedures in this space are reviewed and updated when legislation and/or codes of practice mandate or at routine review – normally every 2-3 years. The Regulations Governing and Allegation of Misconduct in Research were last reviewed and updated on October 2021. A review is scheduled to commence in August 2023 to ensure the Regulations remain in line with good practice within the sector.

The <u>Research Governance</u>, <u>Ethics and Integrity</u> Webpages have the information required for the reporting of allegations.

The University received 3 allegations of misconduct in research during this reporting period. All 3 were against members of staff, one of whom retired from the University during the investigative process. Two of the allegations required an approach being made to publishing houses to have the research record corrected. Erratum/retractions remain outstanding as the reporting period ends.

3B. Information on investigations of research misconduct that have been undertaken

Please complete the table on the number of **formal investigations completed during the period under review** (including investigations which completed during this period but started in a previous academic year). Information from ongoing investigations should not be submitted.

An organisation's procedure may include an initial, preliminary, or screening stage to determine whether a formal investigation needs to be completed. These allegations should be included in the first column but only those that proceeded past this stage, to formal investigations, should be included in the second column.

	Number of allegations				
Type of allegation	Number of allegations reported to the organisation	Number of formal investigations	Number upheld in part after formal investigation	Number upheld in full after formal investigation	
Fabrication					
Falsification					
Plagiarism					
Failure to meet legal, ethical and professional obligations	1				
Misrepresentation (eg data; involvement; interests; qualification; and/or publication	1				

history)			
Improper dealing with allegations of misconduct			
Multiple areas of concern (when received in a single allegation)	1	1	1
Other*			
Total:	3	1	1

^{*}If you listed any allegations under the 'Other' category, please give a brief, high-level summary of their type here. Do not give any identifying or confidential information when responding.

[Please insert response if applicable]