

**Annual Statement of Compliance with  
The Concordat to Support Research Integrity  
2017-18**

1. Annual Statement of Compliance
- 1.1 Universities UK issued the Concordat to Support Research Integrity in 2012 with the expectation that Research Organisations would comply with five key commitments:
  - i. “Maintaining the highest standards of rigour and integrity in all aspects of research;
  - ii. Ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards;
  - iii. 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;
  - iv. Using transparent, robust and fair processes to deal with allegations of research misconduct should they arise;
  - v. Working together to strengthen the integrity of research and to reviewing progress regularly and openly.”
- 1.2 During 2017-18 the House of Commons Science and Technology Committee undertook a review of institutional compliance with the Concordat to Support Research Integrity. The report and any revised concordat, expected as a result of the review, shall be considered by the appropriate governance committees in 2018-19.
- 1.3 As part of its commitment to and compliance with the Concordat, the University is required to produce an annual statement to Senate on its progress to enhance and embed research integrity, across the Institution. The University was an early adopter of the publication of an annual statement to Senate, subsequently, this is the fifth statement and covers the period 01 August 2017 to 31 July 2018. All statements are available through the Research Governance, Ethics and Integrity website to support transparency <http://www.qub.ac.uk/Research/Governance-ethics-and-integrity/Research-integrity>. It should be noted that each annual statement is designed to be read as a standalone report. Therefore, contextual information may not always change from year to year.
- 1.4 The University receives funding from Research Councils UK (RCUK). As part of the funding terms and conditions it is important the University provides assurance to them that procedures are in place to govern good research practice, and for the investigation and reporting of unacceptable research conduct.
- 1.5 One of the minimum requirements to comply with the Concordat is that the University has a senior member of staff to oversee research integrity. The University's Pro-Vice-Chancellor (PVC) for Research and Enterprise is the senior academic lead on research integrity matters. The PVC is Chair of the University's Research Governance and Integrity Committee, and is supported by the Faculty Deans of Research and the Research Governance, Ethics and Integrity Team, based in Research and Enterprise.

The Research Governance, Ethics and Integrity Team is responsible for the development of the necessary elements to fulfil the University's commitment to the Concordat.

## 2. Supporting and Strengthening Integrity

### 2.1 Policies and Procedures

2.1.1 The University has in place a range of Regulations and Policies that govern integrity matters. A number of professional support services directorates are involved in developing, implementing and maintaining these Regulations and Policies. A full list of relevant documentation to support research integrity can be found in Appendix 1, along with the weblink addresses.

### 2.2 Research Ethics – Human Research

2.2.1 The last annual statement reported the establishment of a pilot Faculty Research Ethics Committee structure within the Faculty of Engineering and Physical Sciences. It had been planned to evaluate the pilot following six months of operation, however, in order to give the process, Committee members, and applicants time to fully engage with the new way of working it was nine months before the evaluation was conducted.

2.2.2 To ensure independence in the process, the Research Governance and Integrity Team invited expressions of interest from counterparts at Russell Group universities to undertake this evaluation. Expressions of interest were received from a number of Institutions, which demonstrated the support and willingness of members of the Russell Group Research Integrity Forum. In March 2018, the Ethics Officer from Cardiff University accepted an invitation from Queen's University to undertake a review of the Faculty REC pilot.

2.2.3 A comprehensive and robust evaluation was conducted, which examined systems and the processes used by the Faculty REC, the quality of application reviews undertaken by the Committee, the reporting and skill set of Committee members, and interviews with key stakeholders. Following the formal visit to Queen's a full report was prepared and issued to the University.

2.2.4 The report acknowledged the significant experience and development work in one particular School within the Faculty, the School of Psychology. This expertise formed the basis for effective practice in the new Committee as well as the Committee's capacity to draw on expertise in human tissue and data protection regulations. The evaluation made a series of detailed recommendations on reporting relationships, staff workload, training and operating procedures.

2.2.5 Following careful deliberation, the report was welcomed and accepted in full. A detailed Action Plan, which responded to each recommendation, was subsequently developed. Both documents were considered by the Faculty REC, the University Research Ethics Committee (UREC) and Faculty of Engineering and Physical Sciences Research Committee. Time-based targets, lead responsibilities and performance measures were identified as part of the Action Plan. This has provided the basis of a programme of work to be undertaken during the forthcoming academic year. Some areas that required strengthening included intensifying governance arrangements within the Faculty, further development of guidance for applicants, and additional support to Committee members through training and recognition in workload

allocations. The Faculty REC Chair and the University Research Ethics Officer are responsible for reporting progress on actions to UREC.

- 2.2.6 As the pilot Faculty REC had proved successful, UREC approved that the model should continue within EPS. UREC also recommended that the Faculty REC structure be rolled out, incrementally, to the other two University Faculties. In May 2018 the Research and Postgraduate Committee approved this recommendation, subsequently work will commence to implement this.

## **2.3 Research Ethics – Animal Research**

- 2.3.1 The Animal Welfare Ethics Review Body (AWERB) normally meets six times per annum. It is composed of academic staff who are active project licence holders, student representatives who are also personal licence holders, at least one lay member to the University, the named training and competency officer, named veterinary surgeon and two named animal care and welfare officers (NACWO). The Home Office representative and QUB Licence Holder are also in attendance at the meetings.

- 2.3.2 The AWERB makes an annual report to the University Research Ethics Committee. As a signatory to the Concordat on Openness on the use of Animal in Research the AWERB annual report is then received by various committees within the research governance structure before being submitted to Senate. The University also maintains a publically available website dedicated to the use of animals in research [www.qub.ac.uk/sites/AnimalResearch/](http://www.qub.ac.uk/sites/AnimalResearch/). Statistics of animal use are openly available on the site and detailed by species.

## **2.4 Data Management**

- 2.4.1 Commitment 1 of the Concordat requires the University to maintain '*the highest standards of rigour and integrity in all aspects of research*'. A significant process to support this commitment is through good Research Data Management. The University's Research Data Management Policy requires researchers to comply with all relevant funder requirements, of which the common requirements include:
- a. Preparation of a Data Management Plan (DMP) either during the application process or at the outset of a research project.
  - b. Publishing data underpinning published research findings in an online repository.
  - c. Including an access statement in published research outputs stating how the underpinning data can be accessed.
  - d. Retaining data generated during a research project for a minimum of 5 years.
  - e. Storing research data in a safe, secure, backed-up location and paying due regard to any legal or ethical concerns arising from the collection and management of research data.
- 2.4.2 During 2017-18 the University's Research Policy Office supported good data management through the delivery of training in both Research Data Management and Data Management Planning. During this year five training sessions were made available with 109 attendees.
- 2.4.3 Staff in the Research Policy Office assist researchers with the preparation of Data Management Plans to support grant applications to various funding bodies. They work in conjunction with the Research and Development Team, which is also part of the Research and Enterprise Directorate. A total of 16 Data Management Plans were reviewed by the dedicated team within the Research Policy Office.

- 2.4.4 The University's Research Data Manager operates as a curator to the Queen's University Active Data Storage Cluster and for datasets uploaded to institutional PURE repository. The Active Data Storage Cluster has been designed to support curation and management of large datasets. However, where a genuine need can be demonstrated, the facility can be available for all Queen's researchers. Currently 33 projects have data management supported through this facility, with 8 projects approved in 2017-18.
- 2.4.5 The University's PURE repository provides an important data management tool for archiving and publishing research data. Currently 168 datasets have been validated and are hosted on PURE.

## **2.5 Assurance**

- 2.5.1 The University has a robust governance and assurance mechanism established. As reported above, AWERB presents its annual report to the University Research Ethics Committee. Research governance and integrity issues are considered by the Research Governance and Integrity Committee (RGIC), which is chaired by the Pro-Vice-Chancellor for Research and Enterprise. Each of the Faculty Deans of Research are members of RGIC enabling areas of local concern/ interest to be raised, as required.
- 2.5.2 The University's Human Tissue Steering Group reports to RGIC, who were satisfied with the programme of premises audits conducted during 2017-18 across all areas that housed human tissue. In total eight laboratories, across two research licensed premises were inspected by the Research Governance, Ethics and Integrity Team. These premises audits provided assurance to the University of ongoing compliance with the Code of Practice for Research. The Team also conducted traceability audits under the Code of Practice for Anatomy, which also demonstrated robust compliance.

## **2.6 Training and support to researchers**

- 2.6.1 The Research Governance, Ethics and Integrity Team provides support to academics, researchers and postgraduate research students with navigating the required governance and ethical approvals needed to conduct certain types of research. Very often this is done through face-to-face contact and/or responding to telephone and email queries.
- 2.6.2 However, a core value of the Team's work has been to equip the research community through training, to ensure that there is comprehensive understanding of legislative requirements. At the commencement of each academic year the Team are involved in the induction programmes for post-graduate students, both corporate and local inductions within the Schools and Research Centres.
- 2.6.3 In addition to Post-graduate induction the team are also actively involved in induction programmes for the Contract Researchers. Research Governance, Ethics and Integrity has become part of the teaching and education programme on some degree programmes, where members of the Team deliver a teaching session to students.
- 2.6.4 Face-to-face talks are also provided to the supervisors of post-graduate researchers and a new format of talk has enabled greater engagement across disciplines. There is also monthly training made available to allow staff and students to understand their obligations and the University's requirements in order to comply with the Human Tissue Act.

### 3 Allegations of Misconduct in Research

- 3.1 During 2017-18 the University sought input from their internal auditors as to the effectiveness and fairness of these Regulations, in particular, whether post-graduate students had been disadvantaged by being included in them. It was concluded by the Internal Auditor that PGR students did not appear to have been negatively impacted by being brought under the Regulations. Areas for greater clarity were recommended, subsequently the Regulations Governing an Allegation of Misconduct in Research were revised and updated. An additional stage of review was also introduced as part of these revisions. The PVC for Research and Enterprise must now receive all allegations that do not proceed to Stage II to review the work of the Screening/Preliminary Investigation Panel.
- 3.2 Given the potential impact an allegation of misconduct in research might have on an individual's health and wellbeing, when the Regulations were updated they also included a responsibility on the Head of Research Governance, or their nominee, to ensure that person(s) involved in allegations be made aware of relevant support services, for example, Occupational Health or Students' Union Advice.
- 3.3 All allegations received are processed using these Regulations enabling a rigorous, fair and transparent approach, in line with Commitment 4 of the Concordat. The procedure for the investigation of an allegation contains an initial screening stage. This allows the allegation to be reviewed to determine whether it relates to misconduct in research or if it should be considered under a different process. Once screened, Stage 1 of the Regulations would be implemented, if required. Stage 1 involves talking to relevant personnel and review of evidence relevant to the allegation. For example, and depending on the nature of the allegation, documentation, electronic files, email correspondence and laboratory notebooks can be requested and reviewed by the Screening Panel.
- 3.3 During 2017-18 the University received three allegations relating to staff and PGR students. Table 1, below, details the category of the University personnel against whom the allegation was made, the Faculty to which they belong and the nature of the allegation.

Table 1: Allegation of Misconduct in Research received during 2017-18

<b>Staff / Student</b>	<b>Faculty</b>	<b>Nature of allegation</b>
Staff	AHSS	Authorship
Staff	AHSS	Lack of consent
Student	MHLS	Falsification and fabrication of research data

- 3.4 With regard to the allegation on Authorship, the initial screening and stage 1 investigation did not uphold the allegation and so it was dismissed at the end of stage 1.
- 3.5 The second allegation relating to lack of consent was identified through the audit programme undertaken by the Research Governance, Ethics and Integrity Team. As it was a breach of research ethics, the local Health Research Authority Research Ethics Committee (HRA REC) was notified. A series of corrective actions were implemented and the matter was considered under the appropriate Regulations. The researcher addressed all the corrective actions requested by the HRA REC in a timely and efficient

manner. The Stage 1 investigation concluded that the issue had substance but that it would be best addressed through education and training.

- 3.6 The final allegation relating to a Post-graduate Student remains ongoing, the outcome of which shall be reported in the next annual statement of compliance.

#### 4 External Engagement

- 4.1 The Head of Research Governance, Ethics and Integrity (HGEI) continues to be actively involved in the Russell Group Research Integrity Forum. In October the Forum convened at Manchester University and had a very useful meeting with representatives from MRC, ESRC and Wellcome Trust. The HGEI was both part of the organizing team for this meeting and presented to the group. The meeting explored the expectations of Funders in the onward reporting of research integrity matters, clarifying the various time points and exchange of data.
- 4.2 In April, the Forum met at the University of Birmingham to start a conversation between research institutions, editors and publishers. A number of potential work streams were identified with the aim of creating a stronger relationship between interested parties.

Research Governance, Ethics and Integrity Team  
Research and Enterprise

## Governance Regulations, Policies and Procedures

### Research Governance Regulations and Policies:

- Regulations for Research Involving Human Participants
- Policy and Principles on the Ethical Approval of Research
- Regulations Governing an Allegation of Misconduct in Research
- Policy on the Use of Animals in Research and Teaching
- Regulations Governing Research Involving Animals
- Code of Conduct and Integrity in Research
- Policy on Fieldwork in Conflict Zones

<http://www.qub.ac.uk/Research/Governance-ethics-and-integrity/Policies-procedures-and-guidelines/>

### Intellectual Property Policy

<http://www.qub.ac.uk/Business/Commercialisation/IP-and-innovation/IP-policy/>

### Research Data Management Policy

<http://www.qub.ac.uk/home/media/Media,763208,en.pdf>

### Policies and Procedures Governed by the Registrar's Office:

- Acceptance of Gifts, Gratuities and Hospitality
- Registrar of Interests
- Whistleblowing Policy
- Anti-Fraud Policy
- Bribery Act
- Freedom of Information
- Data Protection

<http://www.qub.ac.uk/about/Leadership-and-structure/Registrars-Office/Policies/>