

# Annual statement on research integrity

Statement Pilot for 2022-23 (reporting period 2021-22).

## Section 1: Key contact information

Question	Response
<b>1A. Name of organisation</b>	Abertay University
<b>1B. Type of organisation:</b>  higher education institution/industry/independent research performing organisation/other (please state)	University - Scottish Modern
<b>1C. Date statement approved by governing body (DD/MM/YY)</b>	Approved by University Court 15/02/23
<b>1D. Web address of organisation's research integrity page (if applicable)</b>	<a href="https://www.abertay.ac.uk/research-overview/research-governance/">https://www.abertay.ac.uk/research-overview/research-governance/</a>
<b>1E. Named senior member of staff to oversee research integrity</b>	Name: Prof. Nia A White
	Email address: <a href="mailto:n.white@abertay.ac.uk">n.white@abertay.ac.uk</a>
<b>1F. Named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity</b>	Name: Prof. Nia A White (Dean of Research and the Graduate School)
	Dr Kevin Smith (Chair of the University Research Ethics Committee)  Email address: <a href="mailto:n.white@abertay.ac.uk">n.white@abertay.ac.uk</a> ; <a href="mailto:k.smith@abertay.ac.uk">k.smith@abertay.ac.uk</a>

## 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.

Abertay seeks to maintain high standards of research integrity and to promote a positive research culture through the implementation of: appropriate policies and processes; excellent leadership and researcher development opportunities; as well as efficient systems for monitoring and reporting.

Abertay is fully engaged with (and a signatory of CSCDR & KEC) the principles of the *Concordat to Support Research Integrity* (CSRI), the *Concordat to Support the Career Development of Researchers* (CSCDR), the *Concordat on Open Research Data*, the *Knowledge Exchange Concordat* (KEC), and the *Concordat for Engaging the Public with Research*, which we use to guide development of our research culture, including supportive RKE policies, practices and structures. We are compliant with our CSRI commitments; all staff, students and visiting researchers must adhere to the highest standards of integrity in the conduct of their research as specified in the *Abertay Research Code of Conduct* (ARCoC) and engage in mandatory research integrity training. Our ARCoC is reviewed annually and updated in line with UK Research Integrity Office and other relevant external agency/body guidance, prior to consideration and approval by the University Research and Knowledge Exchange Committee (RKEC), which reports to the University Senate. Abertay signposts contacts should anyone wish to discuss or raise concern about research misconduct, and provides clear guidance in the reporting of misconduct, in line with our ARCoC, *Complaints Handling Procedure* and *Public Interest Disclosure* policy. Staff mentor new colleagues to inculcate best practice and advise on institutional policies, and colleagues collaborate and share best practice within research groupings.

The *Dean of Research & Graduate School* and the *University Research Ethics Committee* lead the University Research Integrity Group to plan and monitor delivery of the CSRI Action Plan, which is reported to the RKEC annually.

The University is engaged and informed by the University Scotland RKEC and its sub-committees. Abertay is a member of the Scottish Research Integrity Network, to ensure awareness of Scottish level issues and sharing of best practice.

We have established a rigorous and thorough approach to the ethical review of proposed research, which is consistent throughout the university, while recognising differing discipline approaches and conventions. Applications for funding and research and knowledge exchange activities are subject peer-review and scrutiny, including for matters related to research integrity, as outlined in our funding application protocol available via the staff intranet. Researchers engage with the university ethical approval process(es) and must not conduct research without university granted approval. Researchers follow their Research Ethics plans as approved by the Research Ethics Committee.

Training on Research Integrity (including research ethics, data management, GDPR for Research, and Open Access) available via the Graduate School, is obligatory for all research active and supervising staff, and part of the obligatory induction for Postgraduate Research Students. Support mechanisms are in place to foster compliance and our dedicated pages on the intranet guide researchers on issues from ethical review to project end and output.

We are progressing development of our open research environment; published outputs and research data are open-access compliant. Our *Open Access* and *Research Data Management Policies*, researcher development training and individual support, has been used to increase staff engagement in open science/research practices, pre-registration, and the use of open-access data repositories. We are committed to the responsible use of metrics in research evaluation and are a signatory of the *San Francisco Declaration on Research Assessment* (DORA). Our policy and practice on the use of research metrics for research assessment is included within our ARCoC and is mainstreamed within our *Recruitment and Promotions* policies. Governance and progress with concordat action plans is reported and monitored through the University RKEC.

## **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.

We have a dedicated compendium on the intranet containing all up-to-date policies, guidelines, and exemplars related to research integrity and ethics. This includes information on how to use our ethics management system and attain approval for a project, and the circumstances in which applications should be updated or revised. Our online *Research Ethics Management system* manages the workflow, allocation, and review of a given research ethics application and its supporting materials. Templates are available for all forms that are required to be submitted for ethical review, which includes comprehensive guidance text to ensure adherence to ethical best practice and the handling of research data (including Data Management Planning and GDPR). All applicants can seek advice/support from a dedicated research ethics mailbox, from Division ethics reps, and their *School or University Research Ethics Committee* Chair, for more complex matters. All processes and documentation is reviewed annually and revised for RKEC approval.

We have established a *Research Integrity Concordat (RIC) Group* to develop, review and refine annually, a detailed Action Plan to enable compliance with our obligations under the Concordat to Support Research Integrity. Action Plan targets and progress will be considered and approved by RKEC annually.

The University is engaging with *Open Research* practices aligned with the Concordat on Open Research Data. Our Research Support Manager monitors and supports compliance and best practice via our research repository. Compliance data is reported to RKEC quarterly.

We have introduced an explicit recommendation that all PhD research plans are reviewed by our specialist Research Development Officer who will offer advice and co-design robust and compliant research. This service is open to all researchers and recommended to ECRs.

Our Graduate School training on Research Integrity (including research ethics, data management, GDPR for Research, and Open Access), is obligatory for all research active and supervising staff, and part of the obligatory induction for Postgraduate Research Students. We have revised this training and now require staff to update their knowledge and understanding periodically, at least every 3 years. This will be monitored going forward. Furthermore, researchers will plan and maintain their professional practice/standing and knowledge of current discipline ethical practices, via professional bodies and networks. Academic staff with responsibility for research, will now plan and record their development during Development Discussions with their line manager, and be allocated time for developmental

activities.

## **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 continued impact of Covid-19 on the research community has made the reporting period challenging for the University. Nevertheless, we have made good progress in terms of plan implementation. This template will help standardise reporting going forward. Clarity around reporting timeframe would be helpful – we are reporting by academic year. However, the requirement to have this signed off by the University Court does impact upon our ability to meet deadlines set for submission.

## 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, whistle-blowing, 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.

Our Research Code of Conduct Policy (ARCoC) is applicable to all colleagues who conduct research, including visiting researchers. Our ARCoC sets out the protections in place for the complainant and accused, when suspected instances of misconduct are reported. It contains dedicated sections on the confidential reporting of suspected misconduct, the protections in place for the complainant and accused, whom one should report to in the first instance, and how those accused can appeal/defend their case. Our procedure is confidential, transparent, timely, robust and fair and protects the rights and interests of all parties to ensure accountability when things go wrong with clear rights of appeal. Our processes include multiple routes for reporting suspected research misconduct, and safeguard the reputation of any individuals who is exonerated by the investigation. It provides support and guidance on managing research projects with integrity at all stages of a project, including avoiding/declaring potential conflicts of interest. This policy also directs readers toward our alternate *Complaints Handling*

*Procedure and Public Interest Disclosure* policy (including whistle-blowing). All template participant information sheets/consent forms administered during individual research projects detail our separate formal procedure for handling complaints (related to research), which are submitted as part of ethical review. Information, Policy and contact information is available via our internal and external facing web pages. Our ARCoC clearly outlines the protection for all parties involved (e.g., anonymity/confidentiality), including the involvement of independent external members of formal investigation panels and the routes for appeal. Our University's *Public Interest Disclosure* (whistle-blowing) Policy already states that Independent external members of formal investigation panels.

The number of breaches of the ARCoC (reported/ investigated/ upheld) are reported annually to RKEC.

See section 2 for additional information.

### 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.

Type of allegation	Number of allegations			
	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	1	1	
Misrepresentation (eg data; involvement; interests; qualification; and/or publication history)				
Improper dealing with allegations of misconduct				
Multiple areas of concern (when received in a single allegation)				
<i>Other*</i>				
<b>Total:</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>



**\*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]*