Code of Good Research Conduct

Version 2.0 (December 2022)

UWE Bristol | University of the West of England

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1. PURPOSE, CONTEXT AND SCOPE

1.1 Purpose

This Code of Conduct sets out the University's requirements and guidance in relation to good research conduct and practice.

1.2 Context

This Code incorporates the requirements of the Concordat to Support Research Integrity (Universities UK, 2019), referred to in this document as 'the Concordat'. The provisions set out in this document are essential for the University to comply with the Concordat and to assure good research conduct and practice. The new UK-wide Committee on Research Integrity (UK CORI) has been established and is responsible for promoting research integrity nationally. This may result in new provisions which should be complied with by, and these will be added, as appropriate, to this Code and UWE procedures.

1.3 Scope

The Code applies to researchers conducting research at, or under the auspices of, UWE Bristol. This includes academic staff, professional service staff, and students conducting research as part of any programme. Visiting researchers and students are also covered by the relevant provisions of the Code. In the case of student research, both students and Directors of Studies (DoS) for research degrees, or the Student Research Supervisor for taught degrees, have responsibilities in relation to the conduct of the research (see 5.3.3 below). More detailed information about research role definitions is included at Annex 1.

In addition to the provisions set out in this Code, researchers are required to comply with any requirements that may be in force related to unanticipated circumstances, such as a pandemic or conflict situations. In such circumstances, special guidance will be issued.

2. GOOD RESEARCH CONDUCT

2.1 Terminology - integrity, good research conduct, good research practice and research misconduct

This Code uses the following meanings. Research integrity is what we are trying to achieve, and five core elements are set out in the Concordat (see 2.2.1 below). Good research practice is what we do to achieve integrity in our research (and is outlined in

more detail below at 2.2). Good research conduct is demonstrated when our research practice is of a sufficiently high standard to ensure that integrity is upheld. Research misconduct, as defined in the Concordat to Support Research Integrity, is behaviours or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. Research governance is the framing within which we manage research to ensure research integrity is achieved. This framing includes principles, legal and regulatory provisions, standards of good practice, policies, guidance, systems, management and supervision and spans institutions and, in some cases, national boundaries.

2.2 What is good research practice?

2.2.1 The Concordat to Support Research Integrity sets out a comprehensive national framework for good research conduct and its governance. Good research practice is defined by the Concordat to Support Research Integrity as research which is conducted to the highest standards of rigour and integrity.

The core elements are set out as:

- **Honesty** in all aspects of research, including in the presentation of research goals, intentions and findings; in reporting on research methods and procedures; in gathering data; in using and acknowledging the work of other researchers; and in conveying valid interpretations and making justifiable claims based on research findings.
- **Rigour**, in line with prevailing disciplinary norms and standards, and in performing research and using appropriate methods; in adhering to an agreed protocol where appropriate; in drawing interpretations and conclusions from the research; and in communicating the results.
- **Transparency** and open communication in declaring potential competing interests; in the reporting of research data collection methods; in the analysis and interpretation of data; in making research findings widely available, which includes publishing or otherwise sharing negative or null results to recognise their value as part of the research process; and in presenting the work to other researchers and to the public.
- **Care and respect** for all participants in research, and for the subjects, users and beneficiaries of research, including humans, animals, the environment and cultural objects. Those engaged with research must also show care and respect for the integrity of the research record.
- **Accountability** of funders, employers and researchers to collectively create a research environment in which individuals and organisations are empowered and enabled to own the research process. Those engaged with research must also ensure that individuals and organisations are held to account when behaviour falls short of the standards set by this concordat.

2.2.2 The Concordat to Support Research Integrity, first published in 2012 and revised in 2019, is signed by a number of key research funders, including UKRI. The Concordat sets out expectations of the signatories in relation to good research conduct, and compliance is a condition of research funding from those organisations. *'It provides the principles and commitments to ensure that research produced by, or in collaboration with, UK universities, research institutes and others undertaking research is underpinned by the highest standards of rigour and integrity'* (page 4 of the Concordat). The expectations set out in the Concordat are the broadly accepted standards against which universities and researchers should judge research integrity and is, therefore, a fundamentally important document for all researchers. Staff and students engaged in research are expected to familiarise themselves with the Concordat.

2.3 Why is good research practice important?

Research integrity underpins the value of research. Good research practice has a direct impact on the quality of research, its value to those who might use it and, therefore, the impact it may have. Demonstrable research excellence goes hand in hand with demonstrable excellence in research practice and processes. Together, these contribute to the reputation of both researchers and the University. Good research practice also contributes to public trust in research, and protects human and animal research participants, those otherwise affected by research processes and outcomes, and the environment. It also ensures that the best possible value is obtained from research funding.

The converse is also true. The Concordat to Support Research Integrity says of research misconduct:

'It can cause harm to people and the environment, wastes resources, undermines the research record and damages the credibility of research. The concordat recognises that academic freedom is fundamental to the production of excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily with individual researchers.'

UWE Bristol places the highest possible emphasis on integrity and excellence in research practice. This is also a matter of compliance with key funder requirements, without which the University would be unable to receive research funds from funders who are signatories to the Concordat.

3. FUNDER AND PARTNER REQUIREMENTS OF UWE BRISTOL AND ITS RESEARCHERS

3.1 Concordat requirements

3.1.1 As a member of Universities UK, UWE Bristol is committed to the Concordat. The University is also in receipt of funds from signatories to the Concordat. This means that the University, and all conducting research at UWE Bristol, must comply with the requirements set out in the Concordat. In addition, the University welcomes the UKRI policy and guidelines for good research conduct and expects all its staff and students engaged in Research Council funded research activity to comply with the requirements set out therein. The University will also require staff and students to comply with any revised requirements, including revised UKRI guidance, which may arise in the context of the new UK Committee on Research Integrity (CORI).

3.1.2 The University will comply with the Concordat requirements placed upon employers of researchers.

3.1.3 Key Concordat requirements on researchers and employers are set out at Annex 2. The University requires its staff and students engaged in research to comply with the Concordat requirements placed upon researchers.

3.1.4 UKRI will monitor compliance with the Concordat via its Funding Assurance Programme. The ultimate sanction upon the University is the removal of research funding.

3.2 Other funder requirements

In addition to the requirements set out in the Concordat, specific funders also have their own specific requirements. Examples of these are set out in Annex 3. Researchers engaging with such funders should familiarise themselves fully with, and ensure that their research complies with, such funder requirements. Guidance and Support is available from colleagues within Research Business and Innovation (RBI).

4. LEADERSHIP AND EMBEDDING A CULTURE OF RESEARCH INTEGRITY

4.1 Overall University management responsibility

The University is committed to providing the right framework for research integrity to flourish. In part, this means providing clear guidance about policies, procedures and responsibilities and the training and support necessary for researchers to play their

role. It is also important to monitor the implementation of such policies and procedures.

4.2 The research governance structure at UWE Bristol

4.2.1 Ultimate responsibility for research governance rests with the Vice Chancellor (VC) and Board of Governors. The key Committee with oversight of research governance, reporting ultimately to the Governors via Academic Board, is the University Research and Knowledge Exchange Committee, and the senior level oversight rests with the Pro Vice-Chancellor Research and Enterprise, reporting through to the VC. PVC and Heads of College, College Deans of Research and Enterprise and Heads of Schools (HoS) all play a key role in the governance structure. It is important to understand, however, that research governance is everyone's business – all staff and students involved with research at the University have a responsibility to play their appropriate part in ensuring our research is conducted to the highest standards of research integrity. Responsibilities are described in more detail below.

4.2.2 Within the University, it is the responsibility of the Senior Management Team, PVC Heads of College, College Deans (both Research & Enterprise and Learning & Teaching) and Heads of Professional Services to ensure that research is conducted in accordance with good research practice. Where research is being conducted by Professional Service staff, responsibility rests with the Head of Service. The Pro Vice-Chancellor Research and Enterprise has overall executive responsibility for overseeing the review and implementation of the UWE Bristol Policy on Good Research Conduct and this Code of Conduct. The Pro Vice-Chancellor Research and Enterprise will be supported in this function by the University's Research Governance Manager, who is the first point of contact for research integrity and conduct matters.

4.3 Research project management

4.3.1 Different funders and authorities use different terms for a research Project Manager (e.g. Principal Investigator, Chief Investigator). UWE Bristol uses the term Project Manager to indicate a formal University management role in relation to a project. This does not necessarily refer to the person responsible for the day-to-day activities of managing the project, but to the person with overall University management responsibility for the project. Where UWE Bristol is the lead institution, this will usually be the first named applicant on the funding application. Where another institution leads, a UWE Bristol Project Manager should be appointed from amongst the UWE Bristol co-applicants to take management responsibility for the UWE Bristol part of the project.

4.3.2 All research projects must have a designated UWE Bristol Project Manager, including internally funded projects and research undertaken as part of personal research and

scholarship. For postgraduate research student projects this will be their Director of Studies. For students conducting research as part of taught courses this will be the Student Research Supervisor (see also section 5.3.3 on Supervision). For visiting researchers, a permanent UWE Member of Staff will need to take overall responsibility for the research.

4.3.3 The Project Manager is the person designated as taking overall responsibility within the team of researchers for the design, conduct and reporting of the study and has responsibility for ensuring compliance with all aspects of the UWE Bristol Code of Good Research Conduct. This includes ensuring that:

- the research is carried out in accordance with this Code (and related guidelines, regulations, procedures and Health and Safety Standards);
- all research project staff, including public research partners, are aware of the provisions of the Code and any research practice guidelines produced by relevant professional and other bodies. Where the provisions of this Code are in conflict with those of any partner organisation, such as a collaborator or funder, agreed arrangements must be included in the contractual agreements between the parties concerned[1];
- the dignity, rights, welfare and safety of researchers and any research participants are safeguarded;
- the project complies with all legal, regulatory, contractual and ethical approval requirements;
- the University's research project approval process is adhered to for externally funded research;
- the research is carried out as defined in the original proposal to the funder (where applicable), and that any proposed changes to the protocol are approved by the appropriate funder and the relevant research ethics committee where appropriate;
- staff and doctoral research is entered onto the UWE Research Governance Record, or equivalent), is kept updated where the research changes, and the UWE Research Data Management Plan is uploaded;
- clinical trials, and where appropriate other health related research, are registered on an appropriate external register, in accordance with the regulation of clinical trials, and recorded on the UWE Research Governance record (or equivalent)[2];

1 Advice and support will be available to the Project Manager from the Research Governance team and the Contracts team.

2 Whilst the requirement to register clinical trials is mandatory, in line with the WMA Declaration of Helsinki October 2013 (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/), and Health Research Authority Guidance, it is also recommended for reasons of transparency that all other research into human health should also be registered in a publicly accessible database.

- human tissue research is registered on the UWE Bristol Human Tissue Research Register, appropriate approvals for the project are in place, and it complies with the national regulations for use of Human Tissue in Research, further details of which are at: https://www.hta.gov.uk/guidance-professionals/regulated-sectors/research (**Please note**: teaching activities involving human tissue must be logged on the UWE Human Tissue Teaching Register);
- animal/animal by-product research is registered on the UWE Bristol Animal and Animal By-Products Register, has been approved by the UWE Bristol Animal Welfare and Ethics Sub-Committee (AWESC) and complies with the national and international legal and regulatory requirements for research involving animals/animal by-products (**Please note**: these requirements also relate to teaching activities involving animals/animal by-products);
- where necessary, the UK Policy Framework for Health and Social Care obligations, including reporting of serious adverse events, and the HRA information governance requirements are complied with (see also section on use of patient data in the UWE Handbook of research ethics);
- appropriate procedures are in place to protect project data (and its integrity and confidentiality) during collection, processing, analysis and storage, and that it is appropriately archived or destroyed upon completion of the research, complying with UWE research data management requirements;
- reports on research progress and outcomes are produced on schedule, to an acceptable standard and in accordance with funder or ethics requirements, and assessment requirements are set out for students;
- findings are consistent with principles of open access, are open to critical review through accepted research and professional channels, and disseminated promptly as appropriate to participants (for student research this requirement applies only where judged appropriate by the Student Research Supervisor);
- appropriate agreements governing the research are set in place, with involvement of the UWE Contracts Team;
- the terms of any confidentiality and intellectual property rights agreements are complied with, any intellectual property arising is managed and reported appropriately and any conditions regarding publication arrangements are in place;
- research project staff, including public research partners, are appropriately skilled, trained and supported in their work on the project, and students acquire research skills to the necessary level in the course of their research training.
- the Project file for the research is set up and maintained.

4.4 Research Governance Project Record Keeping

4.4.1 All staff and doctoral research must be entered on to the UWE Research Governance Record (RGR), or equivalent, by the UWE Project Manager (or the DoS for student research). The record must be created at an early stage in the life of the research and

kept updated throughout. At the end of the research this must be archived. If the UWE Project Manager leaves the University, or their role, they must ask the HoS to allocate a new UWE Project Manager. It is the HoS's responsibility to ensure that this has taken place.

4.4.2 The UWE Project Manager should maintain a Research Governance Project file for the research. This should comprise the key documents which demonstrate that governance requirements have been complied with, including, for example:

- copy of up-to-date RGR and previous versions
- all research ethics applications and approvals and amendments
- up-to-date UWE Research Data Management Plan and previous versions
- agreements, such a Collaboration, Data Sharing Processing Agreements, Material Transfer Agreements
- licenses and permits
- records of required and relevant training for the research team
- student progression documents
- risk assessments

What is required will vary depending on the research, but these are indicative of what would be required to be able to demonstrate that the necessary research governance requirements are in place. The file may be electronic (securely held in line with UWE requirements) or paper – the crucial thing is that these core documents should be readily available for the researcher to use and for audit if required.

5. TRAINING AND SUPPORT

5.1 Adequate provision in training and development for researchers

It is the University's policy that all UWE Bristol staff and students conducting research should be properly trained for the research they are conducting, including the necessary understandings of research integrity.

It is the responsibility of the Project Manager, Student Research Supervisor or Director of Studies to identify required research skills and training needs and to ensure that the necessary research related training is accessed by researchers, including public research partners. It is the responsibility of PVC Heads of College (which they may delegate to Heads of School), and where appropriate Heads of Professional Services, to ensure that necessary training is made available in an appropriate and timely way. Where a University-wide approach is necessary, it is the responsibility of the Pro Vice-Chancellor Research and Enterprise to ensure that such research training can be effectively delivered. For undergraduate and masters student research, this will normally be covered as part of the teaching and learning process.

5.2 Induction

It is the responsibility of PVC Heads of College (which they may delegate to Heads of School), and where appropriate Heads of Professional Services, to ensure that new staff who will be conducting or supervising research are provided with an induction programme that contributes to understanding and adopting best practice as quickly as possible. This should include, where necessary, appropriate research training in, for example, legal and regulatory issues, ethics approval and consents, research design, equipment use, risk assessment, health and safety, confidentiality, research data management and data protection. Such training should be provided in a timely way, taking advantage, where appropriate, of central provision. Ensuring that necessary research induction training for students is received is the responsibility of the Director of Studies or Module Leader. All staff and students should receive necessary induction for laboratories or other specialist facilities, such as workshops and art studios, prior to being allowed access.

5.3 Supervision

5.3.1 **Student responsibilities**

Students are responsible for following good research practice as set out in this Code. However, it is not expected that all students will start their research with sufficient knowledge of what constitutes good research practice as their research forms part of their training. It is therefore essential that students attend supervisory sessions, take the advice of their research Supervisors and operate within the advice received from relevant committees, for example in relation to ethical scrutiny. If a student has been given advice by their supervisor and has deliberately and wilfully chosen to ignore it, the student may be personally liable.

5.3.2 **Student Research Supervisor training**

The University will provide, as appropriate, training for Student Research Supervisors in supervisory skills through a structured programme of staff development for academic staff, and Supervisors will be required to take part in any training necessary to ensure they are able to conduct their supervisory duties. Such training needs may arise even for experienced Supervisors as, for example, legal and regulatory frameworks change, developments in research methods arise, or a particular research project being supervised is sufficiently beyond/unrelated to the Supervisor's current direct experience to necessitate additional training. The University encourages and supports continuing professional development of this kind amongst supervisors. The Graduate School provides appropriate training for research degree students and development sessions and opportunities for research degree supervisors to share practice.

5.3.3 **Supervisor responsibility for student research supervision, training and support**
For taught programmes, Programme and Module Leaders play a part in ensuring that adequate research training and support are available for students on their modules or programmes. However, the key role is the Student Research Supervisor, who is responsible and accountable for the management of any student research that they supervise and should ensure that students have adequate supervision, support and training. It is the Student Research Supervisor's responsibility to support students in conducting their research and ensure that their training needs are met in a timely way. Supervisors are expected to draw the relevant provisions of this Code to the attention of undergraduate and masters students that they supervise.

For postgraduate research programmes, Directors of Study are responsible and accountable for the management of any student research that they supervise. Their responsibilities are outlined in the University's Academic Regulations, Section E.8 and the Postgraduate Research Degrees Code of Practice and are described in full in the Doctoral Academy Handbook. They should ensure that their students are aware of, and conduct research in accordance with, the Postgraduate Research Degrees Code of Practice and this Code of Good Research Conduct. The UWE Bristol Postgraduate Research Degrees Code of Practice seeks to meet the provisions of the QAA UK Quality Code for Higher Education (Quality Assurance Agency for Higher Education, 2018). Research degree students are expected to read and understand the Code of Good Research Conduct as it relates to their research.

6. RESEARCH ETHICS

6.1 Research ethics at UWE Bristol

6.1.1 UWE Bristol is committed to promoting high ethical standards in the conduct of research undertaken by its staff and students. All research involving human participants, their tissues or data requires ethical approval by the University's Research Ethics Sub-Committee (RESC) or one of its Faculty Research Ethics Committees (FRECs) in accordance with the operating procedures set out in 6.3 below. Research that involves NHS or Social Care organisations, or involves human tissue, may also require review by an NHS REC or the Social Care REC (as part of the Health Research Authority approval process), and guidance about approval pathways in these circumstances is available here. All academic staff engaged in research are required to complete the UWE Bristol Research Ethics Training on-line. This includes all academic staff supervising postgraduate research students, and postgraduate taught students, and undergraduate students undertaking research-based modules.

6.1.2 Some BSc/MSc student research which is 'low risk' may be approved by the student project Supervisor in accordance with the operating procedures relating to student

projects (including the mandatory completion by the Supervisor of a Student Ethical Review Record – all academic staff at UWE should have automatic access to this, but if there are any problems with accessing this please contact researchethics@uwe.ac.uk). The University regards proper ethical conduct, including appropriate ethical review, as a central tenet of good research practice which must be observed by anyone conducting research at UWE Bristol.

6.2 University obligations

The University undertakes regular and timely review of its research ethics policy, guidance and review process to keep them up-to-date and fit for purpose. The University is committed to independence in ethical review, the appropriate composition of research ethics committees (RECs) and adequately resourcing ethical review as set out, for example, by ARMA/UKRIO in their Research Ethics Support and Review in Research Organisations guide (p33):

'Both governance and research ethics review must be adequately resourced for good practice to be sustained'.

6.3 Research ethics policy and procedures and researcher obligations

6.3.1 **Research involving human participants, their tissue or their data**

Information about how to apply for ethical approval, including information about how to apply for Health Research Authority approval (incorporating NHS REC approval) where necessary can be found in the UWE Bristol Research Ethics Handbook. It is a requirement of all those conducting or supervising research at the University that they familiarise themselves with the Ethics Policy and guidelines and follow the required procedures.

6.3.2 **Research with Animals and Animal by-products**

Research with live vertebrates does not take place on UWE premises, however **all** research and teaching activity undertaken by UWE staff or students that involves or impacts upon animals or utilises animal by-products must be approved by UWE Animal Welfare and Ethics Sub-Committee (AWESC), prior to the activities for which review is necessary commencing. Animal by-products include any part of an animal, regardless of where sourced. This includes, but is not confined to, feathers, uncured leather/fur, bone, honey, milk, skin, eggs, eyeballs, meat, aquatic and terrestrial invertebrates and serum/serum products.

Applications for student research projects (at all levels) where animals or animal by-products are involved must be approved by AWESC. Supervisors will need to apply for approval for all undergraduate and postgraduate taught student projects that they are supervising. Postgraduate Research students are expected to apply for approval, but

this will need to be done with the approval of their Director of Studies (further details are given in the research ethics application form).

If a research project involves both animals/animal by-products and human participants then both the AWESC and UWE Research Ethics application forms must be completed to allow appropriate ethical scrutiny of your research in respect of the animals/animal by-products and human participant elements of the research.

Please contact researchgovernance@uwe.ac.uk for more information about applying for AWESC approval and about how to access UWE guidance.

7. RESEARCH DATA MANAGEMENT

7.1 Research Data Management description

Research data is all data arising from a research project. This includes raw data, analysed data, and data gathered during the course of research which is later translated into another form or destroyed, such as audio and video recordings. Research data can be in any form, for example, electronic or hard copy, video, audio, artefacts or machine readouts. It can include survey/questionnaire data, consent forms, laboratory log books, videos of artistic performances, audio records of interviews and their transcripts, physical samples (including biological samples of animal or human origin), photographic images, environmental or habitat data and observational data (of humans or animals). Research data management refers to all aspects of data management concerned with research, from developing a data management plan at the inception, through the life of the project, to the archiving and making available, where appropriate, of research data. Inadequate attention to research data management can result in serious research misconduct, including breaches of confidentiality, breaches of the law, loss of valuable data or errors in reported data. For this reason, the University regards research data management as an essential aspect of good research practice.

7.2 UWE requirements

7.2.1 The UWE Research Project Manager is responsible for ensuring that there is sound research data management practice in relation to the project, and all researchers are required to familiarise themselves with the University's research data management requirements. Mandatory online training modules on Data Protection and Information Security must be completed by researchers.

7.2.2 The University's policies on Data Protection and Security, Acceptable Use, Records Management, Information Handling and Remote Access can be accessed at: https://www.uwe.ac.uk/about/structure-and-governance/policies.

7.2.3 The University's Research Data Management Policy and guidance, including research data security guidance, can be found at: https://www.uwe.ac.uk/research/policies-and-standards/resources-for-researchers/research-data-management.

7.2.4 The University's Guidelines for Staff and Students on Research Data Protection can be found at: https://intranet.uwe.ac.uk/people-groups/Service/data-protection-office. The GDPR Research Governance Standard can be found at: https://www.uwe.ac.uk/-/media/uwe/documents/about/policies/gdpr-research-governance-standard.pdf.

It is a GDPR (General Data Protection Regulation) requirement that records of processing must be kept in relation to personally identifiable information for which UWE is the Data Controller. For research data, UWE complies with this requirement by means of the UWE Research Data Management Plan.

7.2.5 It is a requirement that a UWE Research Data Management Plan (RDMP) is completed, and uploaded to the UWE Research Governance record (or equivalent), for all staff and doctoral research, whether funded or unfunded. The template and guidance notes can be found at: https://www.uwe.ac.uk/study/library/research-support/manage-your-research-data/planning-your-project/create-a-data-management-plan.

It is the responsibility of the UWE Project Manager to complete and upload the RDMP, review and amend it as appropriate throughout the course of the Project and ensure that all those involved in managing the research data are aware of the provisions within the RDMP. Whilst the DoS is the UWE Project Manager for doctoral research, it is clearly anticipated that the production of the RDMP will be a joint effort between the student and the DoS. Whilst it is not a requirement that a full RDMP should be completed for Programme level student research, it is strongly recommended that a proportionate RDMP is produced to assure that arrangements for the appropriate handling of research data are in place, understood and agreed by both Supervisor and student and documented for future reference. This can be particularly important should any difficulties arise in relation to data handling during the course of the project, as the RDMP provides a clear record of what was agreed.

7.2.6 The UWE Bristol Research Data Management training module provides detailed guidance to support the production of research data management plans and can be accessed at:https://mylearning.uwe.ac.uk/learn/course/internal/view/elearning/375/uwe-bristol-research-data-management-training (for staff) and here for students.

8. COMMUNICATING THE OUTCOMES OF RESEARCH

8.1 Good practice in publication

8.1.1 The University considers it an important priority that high quality research is disseminated to relevant audiences and supports the UWE Bristol 2030 strategy objective of focusing on internationally excellent research with real-world impact. The University expects researchers (authors) to demonstrate honesty and integrity in disseminating the results of research and knowledge exchange activities. Authors are accountable for the content of their outputs and should be mindful that scientific misconduct in publication damages the reputation of individuals and their workplace institutions. Evidence of author accountability extends to the disclosure of individuals' roles in the preparation of a manuscript which must also be detailed (see below).

A publication which is similar to other publications derived from the same research must contain appropriate reference to the other publications. Publications derived from a large programme of research (or doctoral thesis) when submitted must all be uniquely differentiated in terms of the data presented and messages contained within - there should be no evidence of replication. It is also good practice to appropriately reference previous publications by the research team to demonstrate how the current publication is credibly adding to the body of knowledge.

Authors must never submit a manuscript to more than one publisher at a time. A manuscript that has been rejected by one publisher may be resubmitted to a second-choice journal. Researchers should avoid fragmenting research simply to maximise the number of articles for publication. Authors should be mindful of the varying forms of what may constitute publication, including open access publication, social media, drafts of articles submitted for publishing elsewhere or the lodging of a thesis in the library.

8.1.2 In studies involving human participants, participants should, where appropriate, be informed of how they may access the outcomes of the study.

8.1.3 The University is strongly committed to achieving impact with its excellent research and considers it good practice to target communication at a range of relevant audiences as well as the more traditional academic outputs. Researchers should make all reasonable attempts to maximise the impact of their work, whether this involves the academic community, potential users or the public. This may for example include oral presentations, magazines and the use of social media.

8.1.4 It is necessary good practice to declare any conflicts of interest in relation to a publication, such as funding or relationships with companies with a commercial interest in the findings. Researchers must avoid libellous or defamatory statements.

8.1.5 The University expects anyone listed as an author on a paper to have made a substantial contribution to the design, conception or execution of the project and writing of the manuscript or other form of output. All authors should accept personal responsibility for ensuring that they are familiar with the contents of the output and they are able to identify their unique contribution. The roles and contributions of formal collaborators and others who directly assist or indirectly support the research must be properly acknowledged. It should apply when publishing research findings and when making public statements regarding the research. Failure to acknowledge properly all direct or indirect contributions made by other persons may be considered as poor research practice or possibly research misconduct. Thanks must be attributed, where appropriate, to the body or bodies funding the project (some funders require formal acknowledgement with specific requirements for information to be included, and these must be complied with). Some funders request advance notice of media coverage, and this should be complied with wherever possible.

Useful guidance can be obtained from the Committee on Publication Ethics (COPE).

8.2 Authorising publication

The person with overall responsibility for a research project or programme in UWE Bristol, typically the UWE Project Manager, should authorise the publication of results, and researchers should not proceed without such authorisation (subject to any alternate contractually agreed arrangements, see below). Authorisation should cover both the content of the publication and intended place of publication. All co-authors should normally approve the proposed publication output in the form submitted (and, if relevant, as later revised) before submission. In the case of research that has been funded by an external body, the UWE Project Manager should ensure that any requirements or expectations of the funding body with regard to notification prior to publication, and open access requirements, are met. It may be the case that, in relation to collaborators from outside of the University, contractual arrangements in relation to publication will be appropriate. This should be considered at the outset of a project, and where in place, complied with.

8.3 Open Access and Open Research Data

The University will comply with UKRI's Policy on Open Access, Research England's REF open access policy (REF 2021 open access policy should be followed until further notice) and other funders' requirements and requires authors to do so as well. Where permitted by the Publisher, the University requires authors to deposit a version of the full text in the UWE Bristol Research Repository. This provides worldwide open access to the University's research output, increasing visibility and allowing greater discovery

of expertise in the global research community. The University's Policy and Guidance on Open Access can be found at https://www.uwe.ac.uk/study/library/research-support/open-access-publishing.

The University is also committed to the principles set out in the Concordat on Open Research Data. This Concordat helps ensure that the research data gathered and generated by members of the UK research community is made openly available for use by others wherever possible in a manner consistent with relevant legal, ethical, disciplinary and regulatory frameworks and norms.

9 RESPONSIBILITY FOR SUBMISSION OF RESEARCH APPLICATIONS TO EXTERNAL FUNDERS

9.1 Responsibilities in relation to research applications

9.1.1 The University supports and encourages its staff to seek external funding for their research activities and accepts funding for research from a wide and diverse portfolio of sources, in accordance with University Financial Regulations and Ethics Policy. All applications and proposals made, and contracts and awards accepted relating to external research funding, are done so on behalf of and in the name of the University, in accordance with the University's Financial Memoranda and Project Approval (PA) process (see FIN25 Project Approval and Submission Procedures and Guidelines).

9.1.2 It is the responsibility of the UWE Bristol Project Manager (the senior person responsible for the project, normally the Principal Investigator), to ensure that, in relation to any application, the University's proposal approval process is engaged with adequately and completed in a timely way. It is also the responsibility of an application's Principal Investigator to ensure that the proposal is of an adequate quality and that the research proposed would meet legal, regulatory and ethical standards.

9.1.3 Special consideration should be given and advice sought from the Research Governance and Ethics Team as appropriate, for research proposals where:

- the University should act as Sponsor for research under the Department of Health Research Governance Framework;
- the research is a clinical trial, including trials of interventions (see guidance on when clinical trial authorisation is needed);
- the research involves the investigation of a medical device (see guidance on clinical investigation for a medical device);
- the research involves the use of human tissue;
- the research involves vulnerable groups including children, offenders and victims, individuals who may lack capacity under the Mental Capacity Act, or

research that may have the potential to contribute to the radicalisation of vulnerable individuals;
- the research involves animals or animal by-products;
- the research has a security sensitive dimension, involves security sensitive material and/or may have dual use implications;
- involves significant international dimensions with research governance implications.

Advice is also available to staff researchers who are drafting research applications via the University's research support teams in RBI, for example in relation to funders' requirements, ethical, legal and regulatory aspects, and contractual and intellectual property issues.

9.2 Responsibilities in relation to decisions about acceptable sources of funding

9.2.1 The University does not accept research funding from the tobacco industry.

9.2.2 There may be circumstances where ethical issues can arise when considering whether to apply for, or accept, funding for research from particular sources. It is important that the interests of staff and students and the interests and the reputation of the University as a whole are safeguarded when seeking and accepting external funding (see FIN25 Project Approval and Submission Procedures and Guidelines). Researchers should be aware of this issue, and each time an application for funding is to be made (or funding is offered), especially relating to a funder where there has been no previous engagement, due diligence must be conducted to consider ethical, legal and national security implications. It is, however, recognised that such decisions can be complex and difficult for individual researchers to make, and, as such, researchers should approach the Research Governance Manager or the RBI pre-award Hub team for early advice.

Guidance on collaborations with partners outside the UK can be found in the Trusted Research Guidance for Academia, but there are other areas of potential concern that must also be considered. Whilst it is outside the scope of this Code to provide an exhaustive list of what may or may not be acceptable sources of funding, the following circumstances would cause concern and further advice should be sought from the Research Governance Manager. Situations in which:

i) the conduct of research may, due to the source of the funding or engagement with the funder in relation to the research, harm or place at undue risk members of the public, participants or staff

ii) there may be legal constraints on what engagement with a funder is allowed, such as individuals, organisations or nations being sanctioned for all or some activities (including the need to comply with Export Controls legislation)
iii) the practices of a potential funder, or their motives in commissioning the research, may conflict with the values, mission, aims and objectives of the University
iv) the ethical and political implications of undertaking research or accepting research funding from a particular source could result in negative publicity and/or may seriously damage the reputation of the University
v) a third party is involved, and the original source of the funding is unknown or cannot be clearly identified
vi) a funding organisation wishes to place inappropriate restrictions on publication and exploitation of research
vii) a funding organisation is attempting to exert pressure to suppress or alter the results of the research which do not further, or may damage, its interests, commercial or otherwise
viii) a member of staff or close associate may have an interest in a funding organisation
ix) accepting funds from one source may compromise the ability of the University to apply for or accept funds from another source
x) the funder is an overseas government, the collaboration involves relevant close links with other nations, organisations, or individuals which may potentially be of concern, especially, but not solely, where the research could potentially be dual use.

10. RESPONSIBILITY FOR INTERNALLY FUNDED RESEARCH

The University applies the same standards of good research practice to research which is funded as part of the University's own internally managed research funding, as part of personal research and scholarship and research conducted to inform the University's operations. The governance structure and responsibilities for internally funded research are the same as for externally funded research.

11. PEER REVIEW

The University recognises that peer review is an integral part of the system of assurance of good research practice in the UK. As such, UWE Bristol encourages its staff researchers to take part in internal and external peer review activities (see Annex 4). The University has set in place an Internal Peer Review College, and it is the expectation that researchers will make use of this resource where internal peer review is a funder requirement and are encouraged to do so for other research proposals.

12. CONFLICTS OF INTEREST

The University requires its staff and students to abide by the seven principles of public life as first set out in 1995 by Lord Nolan and promoted by the Committee on Standards in Public Life - selflessness, integrity, objectivity, accountability, openness, honesty and leadership (Committee on Standards in Public Life, 1995).

The University expects its staff and students engaged in research to identify and declare conflicts of interest which may affect the research in any way. Examples of conflicts of interest which researchers might encounter include externally peer reviewing a proposal from a close collaborator, friend or family member, using research funds to obtain products or services from an organisation in which the researcher or close family member has an interest, or potentially prejudicial involvement with other organisations, such as companies. Examples of conflicts which the University might encounter in relation to research include funding sources which might affect the receipt of funding from other organisations, conflict of interest in ethical review or members of committees having conflicts in relation to research decisions. Detailed Conflict of Interest Guidance is currently being prepared, and when available will be linked from the UWE Research Governance intranet pages. Advice about potential conflicts of interest in research is available from the Research Governance Manager, in the first instance.

13. HEALTH AND SAFETY

13.1 Health and safety obligations

The University strives for a positive health and safety culture and requires good health and safety management in all aspects of its activities. Research may involve potentially hazardous situations, e.g., working with vulnerable people or the use of potentially harmful equipment, substances or organisms. The safety of participants, by-standers, researchers and other personnel must be given priority at all times, and health and safety regulations must be strictly observed. Researchers should be familiar with, and comply with, the University's health and safety policies and standards (see the University's Health and Safety intranet pages: www.uwe.ac.uk/healthandsafety) and codes relevant to their research, such as contained in the staff and student handbooks. Researchers should seek to embed health and safety appropriately throughout the life course of the project and ensure that it is regularly reviewed at research project meetings as risks may emerge or change. Appropriate risk assessments must always be in place and up to date to reflect the control and management of the relevant risks. Health and safety breaches may need to be reported to the Health and Safety Executive, as they may constitute research misconduct or misconduct, or be subject to criminal proceedings.

13.2 Required training and support

The University will provide training on health and safety, and there is a clear expectation that all staff and MPhil/doctoral students will attend appropriate courses. In particular, all researchers conducting research where risk assessment is necessary must attend a general risk assessment course and specific risk awareness courses as appropriate to their research, e.g., Control of Substances Hazardous to Health (COSHH) training. Failure to attend required training will be regarded as a disciplinary matter. The University expects research risk assessment to form a part of undergraduate and masters level courses where the student will conduct a research project. Advice on health and safety, including risk assessment, can be obtained from the Health and Safety Team (safety@uwe.ac.uk).

13.3 Further Guidance

Health and safety guidance for research is embedded within the University's general provisions for health and safety. Further guidance on health and safety requirements and advice relevant to research can be found at Annex 5.

14. FINANCIAL PROBITY

The University requires researchers to be open and honest in all financial and commercial matters relating to research and its funding. In particular, researchers must:

- comply with the University's Financial Regulations and follow the University's required financial procedures in the development and execution of the research, including requirements to keep clear and accurate financial records;
- give participants information on how and by whom the research is funded, including any benefits which will accrue to researchers and/or their School/the University/ research partners or to the funders;
- not offer payments to research participants at a level which could induce research participants to take risks that they would otherwise not take, or to volunteer more frequently than is advisable or against their better interests or judgement.
- responsibly manage project funds to ensure that expenditure is in line with the purpose and timeframe for which the funding was granted.

15. INTELLECTUAL PROPERTY

15.1 Intellectual Property description and Policy

The University's detailed guidance on intellectual property can be found at: https://intranet.uwe.ac.uk/sites/research-business-innovation/guides/Pages/Intellectual-Property-and-Knowledge-Transfer.aspx#part1. **All matters around intellectual property should be determined and interpreted in light of the guidance; what follows is only an overview:**

Almost all research activity will involve some form of intellectual property. The University strongly welcomes collaborative arrangements with partners and considers clear and documented arrangements between partners in relation to intellectual property to be a fundamental part of building, supporting and maintaining mutually beneficial collaborations. The University therefore requires all research where intellectual property is involved to be subject to adequate legal arrangements and agreements. Intellectual property ('IP') is the general term for intangible property rights which are a result of intellectual effort. IP rights ('IPR') are the legal recognition of the ownership of IP. In English law, IPR includes: Copyright; performance rights; database rights; patents; design rights; registered design rights; trademarks; know-how and confidential information.

Some of the above IPR exist as a matter of course; others, such as patents and registered design rights, must be applied for before the protection that they provide will exist. In relation to patent applications, it is important to recognise that premature disclosure through publications or discussions and the incorrect listing of inventors can lead to invalidity and loss of rights. Also, patents may be subject to a 'security notice' restricting publication of the patent application if they pertain to IP that could compromise the defence of the realm. Similarly, researchers may be asked to sign the Official Secrets Act. Advice on the protection and exploitation of IP can be obtained from the IP team in RBI (IPteam@uwe.ac.uk).

15.2 Ownership and protection of IP at UWE

15.2.1 The University requires that the ownership and potential exploitation of IP is clearly defined before the commencement of any research. These arrangements can only be put in place with the involvement and approval of the University's Director of Commercial Services and the Director of RBI. The IP team in RBI should be contacted in the first instance. Where the research involves any party outside of the University (such as another research institution or industry partner) then an appropriate legal agreement must be entered into. The Contracts & Legal Team within Commercial Services should take the lead on the negotiation of any such agreement with input and guidance from the Knowledge Exchange and IP Commercialisation Manager

where appropriate. Any such agreement must be signed by an authorised signatory on behalf of the University (this will usually be a Deputy Vice-Chancellor). Researchers must inform RBI of any IPR that does arise from externally funded research and should also inform the research funder.

It is important to the University that individuals do not infringe third party IPR in their work. Researchers must not use third party IPR in research without appropriate permissions and licences from the owner(s) of that IP. Where licences or permissions are granted, they must be in writing and should be put in place with assistance from the Contracts & Legal Team and, where appropriate, the Knowledge Exchange and IP Commercialisation Manager.

15.2.2 The University owns IP, IPR, products and materials, but may issue disclaimers of ownership of IP in appropriate cases and agree that the IP can be owned by the creators, for example for scholarly works. The IP policy can be found at: https://www2.uwe.ac.uk/services/Marketing/students/Student%20advice/Intellectual-Property-Policy-and-Regulations.pdf.

IPR created by undergraduate students and postgraduate students on taught courses will be owned by the student and not by the University, except where:

a) the University specifically negotiates and agrees otherwise with the agreement of the student (this may apply for example in the case of final year projects, or projects involving third parties, external funding, or work requiring use of pre-existing University-owned IP). A student "Assignment of Intellectual Property Rights Agreement" will need to be in place.
b) the student is employed by the University and the IP, IPR and/or material arises from that employment.

IPR arising from postgraduate study/research will be owned by the University if it relates to or arises from an existing University project, involves significant use of pre-existing University-owned IP, involves funding or collaboration with third parties or is specifically negotiated between the University and the postgraduate student in other circumstances. A student "Assignment of Intellectual Property Rights Agreement" will need to be in place.

16. INSURANCE, LIABILITY AND NEGLIGENCE

16.1 University insurance policies and cover

16.1.1 Ensuring that appropriate arrangements are in place to cover costs if something goes wrong, including compensation for research subjects, is an important aspect of good research practice.

16.1.2 The University holds the policies outlined below to protect itself, staff and 3rd parties (including students, Public Research Partners, and research subjects).

16.1.3 The University's Professional Indemnity insurance covers staff (including Public Research Partners) and students against liability for neglect, error or omission committed in good faith relating to research, advice, consultancy or teaching etc, subject to the insurance policy's Limit of Indemnity (but see 16.2.2 and 16.2.4 below). The University is therefore indemnified, up to a certain limit, for an employee undertaking approved research work for the University, provided the employee acts within the scope of her/his employment.

16.1.4 The University holds Public Liability cover in case of injury or damage to third parties.

16.1.5 The University holds Employer's Liability Insurance to cover staff against physical injury, property damage and/or negligent statements or omissions in the course of their employment.

16.1.6 Travel cover for both staff and students (who are under 80 years of age) involved in university work or their studies if travelling abroad. UK travel is also covered if the trip is overnight or involves a flight. Cover for staff and/or students over 80 may be possible to arrange via the UWE Insurance Manager.

16.1.7 Motor Insurance to cover the use of UWE vehicles and vehicles hired/leased by UWE. If travelling in a private vehicle the staff member or student should have motor insurance that covers them for business use.

16.1.8 For students, cover applies for a student working within the terms and conditions of the programme of study, under appropriate supervision, and where the student complies with Supervisor instructions.

16.2 Specific Exclusions

16.2.1 For research partners (including consultants and other organisations) UWE expects them to hold appropriate insurances to protect themselves, staff and third parties (including students and research subjects) against injury, damage and/or negligence claims. The following link provides further information on insurance cover: Contractors/external providers minimum liability insurance policy.

16.2.2 The University's insurance policies exclude cover for research involving nuclear waste, nuclear fuel and hazardous properties of any explosive nuclear assembly or nuclear component.

16.2.3 In addition, there are restrictions on the cover provided under the University's insurance policy for some research involving aerospace, aviation (including Unmanned Aerial Vehicles [UAVs]/drones), pollution or medical work (including clinical trials). It is imperative that at the Project Approval (PA) stage details of research involving these areas are forwarded well in advance to the Insurance Manager for advice (see also the UWE Insurance Guide for a summary of the cover available to both staff and students).

16.2.4 Deliberate negligent acts or deliberate errors (for example, deliberate inaccuracies in data or publications) are not covered by the University's insurance policy, and any litigation fees and court compensation awards would have to be paid by the University. Within the University's staff conduct policy, serious negligence that causes or might cause unacceptable loss, damage or injury is considered to be a form of gross misconduct and would be likely to lead to formal disciplinary action and possible dismissal (see Procedure for dealing with matters of Conduct).

16.2.5 Prior to bid submission stage, consideration should be given by the Project Lead (and authorising staff as appropriate) of any travel involved in the project, especially if that travel is overseas. UWE has committed to be carbon neutral by 2030 as part of its Strategy 2030, and eliminating unnecessary travel will contribute to meeting that objective. Secondly, the appropriateness (e.g., economic, moral, degree of risk/danger involved, etc.) of all travel must be considered before sending staff, students or third parties to a destination. If there is to be overseas travel the international travel process must be followed. If travel to a high or extreme risk destination is involved the Project Lead must email internationaltravel@uwe.ac.uk at least 4 weeks before submission for a decision in principle. It should be noted that it is unlikely that travel to an extreme risk (red) destination will be permitted, and travel to high risk (amber) destinations will need to meet strict eligibility criteria and require the implementation of complex risk controls. The cost of these controls will need to be included in the research bid.

17. LEGAL AND REGULATORY FRAMEWORKS

17.1 University requirements related to legal and regulatory compliance

17.1.1 It is a fundamental underpinning of good research practice that researchers operate within the law and regulation. The Concordat to Support Research Integrity makes clear that researchers are responsible for ensuring that they have up-to-date knowledge in this respect, whilst recognising that this landscape will change over time:

'Research is governed by a range of ethical, legal and professional frameworks, obligations and standards. The frameworks that regulate research practice will change over time. Ethical concerns also change over time, and new legal obligations and professional standards will be introduced. All parties have a responsibility to ensure they have up-to-date knowledge of the frameworks, standards and obligations that apply to their work.'

17.1.2 The University requires all staff and students to make themselves aware of, and comply with, the law and regulation, and will support researchers in doing so. A failure to operate within the law and regulation may be considered as misconduct, and/or research misconduct, and/or be subject to criminal proceedings. Advice can be obtained via the Research Governance Manager.

17.2 Exemplars of key legislation

As the Concordat suggests, it is not possible, nor even sensible, to be prescriptive in relation to the many legal and regulatory frameworks, codes and standards that researchers are expected to comply with across different areas of research. However, some key legislation and regulation for research is as follows:

- Legislation relating to children
- Clinical trials legislation
- Data Protection Act 2018
- Legislation and regulation relating to Dual Use research and Export Controls
- Equality Act 2010
- Freedom of Information Act 2000
- Legislation and regulation related to Genetically Modified Organisms
- Health and Safety at Work Act 1974
- Human Tissue Act 2004
- Intellectual Property legislation
- The Mental Capacity Act 2005
- Radiation legislation
- Safeguarding/DBS requirements/Prevent Duty
- Legislation relating to animals and animal by-products
- Legislation relating to the environment
- The Nagoya Protocol (Access and Benefit Sharing regulation)

Further detail in relation to this legislation is outlined in Annex 6.

18. EQUALITY AND DIVERSITY

18.1 The University is committed to supporting, developing and promoting equality and diversity in all of its practices; it aims to establish an inclusive culture, free from

discrimination, harassment and victimisation. The University's Equality and Diversity Policies and procedures can be found at: https://www.uwe.ac.uk/about/values-vision-strategy/equality-diversity-and-inclusivity/policies.

18.2 Researchers should take account of the University's Equality and Diversity Policy in all aspects of their work, including the recruitment of personnel associated with research and decisions relating to research participants.

19. SUSTAINABILITY

19.1 University Sustainability policies

Environmental sustainability is one of the most critical issues facing global society, and UWE Bristol is committed to continually improving and updating its response to this challenge. Throughout our teaching, research, partnerships, estates operations and supply chain we will extend our influence through the lifecycle of our activities to drive environmental sustainability and implement and promote positive solutions to sustainability challenges at the local, regional and global level.

UWE's Sustainability strategy and policy documents are overseen at a senior level by a University Sustainability Board, with action devolved to Services and Colleges to embed sustainable development into our business decision making. The University expects its researchers to be mindful of sustainability issues which arise in the context of research.

19.2 University requirements related to modern slavery

An important part of the University's Sustainability Policies relates to modern slavery. Researchers are asked to be aware of this in all research activities, including choice of collaborators and suppliers, and also in relation to what to do if concerns arise during the course of the research (in the first instance, seek guidance from the Research Governance Manager). UWE also has a Supplier Code of Conduct which must be followed.

20. PUBLIC INTEREST DISCLOSURE ('WHISTLEBLOWING')

20.1 The Public Interest Disclosure Act 1998 gives legal protection to employees against being dismissed or penalised by their employers as a result of publicly disclosing certain serious concerns.

20.2 The University is committed to the highest standards of honesty, openness and accountability. The Public Interest Disclosure (Whistleblowing) Policy is in place to allow staff, students and all members of the University to raise concerns or

information which they believe in good faith provides evidence of malpractice or impropriety. It should be noted that UWE Bristol seeks to provide a supportive environment for those with research misconduct concerns, and issues may initially be raised informally in confidence with the relevant College Dean for Research & Enterprise, Head of Professional Service or the Research Governance Manager. Concerns about research misconduct should normally be raised formally by means of the University's Research Misconduct Policy. However, concerns about research misconduct, as for any other form of conduct, may be made via the Public Interest Disclosure Act where that is deemed necessary by the complainant. In this case, concerns should be expressed in writing to the Clerk to the Board of Governors. Following initial investigation, the University's research misconduct procedure may then be invoked, if appropriate.

21. RESEARCH MISCONDUCT

Research misconduct, as defined in the Universities UK Concordat to Support Research Integrity, is behaviour or actions that fall short of the standards of ethics, research and scholarship to ensure that the integrity of research is upheld. The University is committed to ensuring that research is conducted to the highest scientific and ethical standards. Research misconduct, in all its various forms, is taken extremely seriously as it devalues research, and the reputations of both UWE Bristol and its researchers. The University has developed, and will follow, rigorous procedures for the investigation of research misconduct whenever it is alleged. The University's position on research misconduct is covered by the University Research Misconduct Policy and Procedures. Researchers are encouraged to familiarise themselves with, and follow, the University's policies, codes, standards, procedures and guidance, as well as accepted high standards of practice in their field of research, to avoid any instances of research misconduct, advertently or inadvertently, occurring.

Document Control

Ownership and oversight

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Compliance measures:	Sub-Committee activity including audits; Activity of College level Research Governance Groups, where in place.

Related policies, procedures and codes of practice:	Research Ethics and Governance Policies and procedures in specific areas; other University Policies procedures and codes, as referenced in this document.
Related legislative and/or regulatory requirements	Described in this document – all legislation and regulation which relate to research activity.

Version history

Version	Date	Summary of changes	Author
V1.0	Jan 2015	First version	
V2.0	December 2022	Significant updates and changes throughout. This Version replaces Version 1.0 (Jan 2015).	Ros Rouse, Research Governance Manager

Annex 1: Research role definitions

Researchers

The Concordat uses the following definition of researchers, which can be used for the purposes of this Code of Conduct:

'Following the UK Research Integrity Office Code of practice for research (2009), 'researchers' are defined as any people who conduct research, including but not limited to: as an employee; as an independent contractor or consultant; as a research student; as a visiting or emeritus member of staff; or as a member of staff on a joint clinical or honorary contract.'

UWE Bristol regards anyone conducting research at, or under the auspices of, UWE Bristol as covered by this Code of Conduct. This includes research and professional services staff and students at any level. Whilst specific UWE Bristol procedures may differ between students and staff, the requirements necessary for good research practice apply to all. Visiting researchers (including both staff and students) are expected to comply with this Code of Conduct.

Research

The Concordat uses the following definition of research, which can be used for the purposes of this Code of Conduct:

'a process of investigation leading to new insights, effectively shared... It includes work of direct relevance to the needs of commerce, industry, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction'.

This document relates to all who are conducting research under the auspices of UWE Bristol. It is the activity, research, rather than the characterisation of the person doing it (the various kinds of research staff and students) that is the core underpinning of the code.

Student

Students for the purposes of this document are all students conducting research, including undergraduate, postgraduate taught and postgraduate research. Students are 'researchers' when conducting research, and this includes research projects as part of taught courses or research conducted as part of a placement.

Supervisor

Supervisor refers to the member of staff with given responsibility for the management of a student's research. For taught courses, this will usually be the Student Research Supervisor (who has ultimate responsibility for the management of the research conduct of the student), although the Module or Programme Leader also has a role to play in setting the framework for the module. For MPhil/doctoral students, the Director of Studies has overall responsibility, but other named supervisors will also play a role. As students are in a training position, it is the responsibility of the Student Research Supervisor to ensure that students are given effective training, support and monitoring to assure good research practice.

Visiting academics

All research conducted at or under the auspices of UWE Bristol is covered by this Code of Conduct. This means that visiting academics and students will be expected to comply with UWE Bristol requirements in relation to good research practice.

Public Research Partners

Where members of the public are involved as researchers in research conducted at or under the auspices of UWE Bristol, it is a requirement that they comply with the provisions of this code. Public research partners take various forms and have various roles within research projects and could include patients, potential patients, carers and people who use health and social care services as well as people from organisations that represent people who use services. HRA guidance about public involvement can be found at: https://www.hra.nhs.uk/planning-and-improving-research/best-practice/public-involvement/.

Terminology used to describe the lead investigator

Various terms are used to describe the lead investigator in a research project, with different implied responsibilities. The following are some common terms.

Project Manager: All UWE Bristol research, whether internally or externally funded, must have a Project Manager, who is responsible for the conduct of the research, and within UWE Bristol, this person will normally be the Principal Investigator or lead applicant. For research led by a collaborating institution, there still needs to be a UWE Bristol Project Manager to lead for the University in relation to the project. For student research, the Project Manager is the Director of Studies (MPhil/doctoral) or Student Research Supervisor (taught course research). For research conducted as part of personal research and scholarship, this is the individual researcher undertaking this activity.

Principal Investigator: This term is often used by funding bodies (who also sometimes use 'Lead applicant'). This person will be the first named applicant on a research application and will be expected to take overall responsibility for the research. This term is also used, in a

different way, by the Department of Health Research Governance Framework to describe the person responsible for a research project at a given site.

Chief Investigator: This is the term used by the Department of Health Research Governance Framework to describe the person with overall responsibility for a research project. In multi-site projects, there may also be Principal Investigators at individual sites. This would not normally be a student.

Research Support Staff: Researchers are supported in conducting research by a range of research support staff, both project specific and University central support teams, including Professional Services and Technical Support staff. Research support staff are expected to observe high standards of integrity in their work.

Annex 2: Concordat to Support Research Integrity – key employer and researcher requirements

Key researcher requirements

Researchers will**:**

- understand the expected standards of rigour and integrity relevant to their research
- maintain the highest standards of rigour and integrity in their work at all times
- comply with ethical, legal and professional frameworks, obligations and standards as required by statutory and regulatory authorities, and by employers, funders and other relevant stakeholders
- ensure that all their research is subject to active and appropriate consideration of ethical issues
- take responsibility for keeping their knowledge up to date on the frameworks, standards and obligations that apply to their work
- collaborate to maintain a research environment that encourages research integrity
- design, conduct and report research in ways that embed integrity and ethical practice throughout
- act in good faith with regard to allegations of research misconduct, whether in making allegations or in being required to participate in an investigation, and take reasonable steps, working with employers as appropriate, to ensure the recommendations made by formal research misconduct investigation panels are implemented
- handle potential instances of research misconduct in an appropriate manner; this includes reporting misconduct to employers, funders and professional, statutory and regulatory bodies as circumstances require
- declare and act accordingly to manage conflicts of interest
    - 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 this concordat in difficult circumstances
    - demonstrating that they 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

Key employer requirements

Employers of researchers 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 this concordat in difficult circumstances
- demonstrating that they 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
- having clear policies on ethical review and approval that are available to all researchers
- making sure that all researchers are aware of, and understand policies and processes relating to ethical approval
- supporting researchers to adopt best practice in relation to ethical, legal and professional requirements
- having appropriate arrangements in place through which researchers can access advice and guidance on ethical, legal and professional obligations and standards
- embedding the features of a culture of research integrity (as set out in Commitment 3) in their own systems, processes and practices
- reflecting recognised best practice in their own systems, processes and practices
- implementing the concordat within their research environment
- participating in an annual monitoring exercise to demonstrate that the institution has met the commitments of the concordat
- promoting training and development opportunities to research staff and students, and encourage their uptake
- identifying 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
- identifying 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
- having clear, well-articulated and confidential mechanisms for reporting allegations of research misconduct
- having 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 (see the references section of the Concordat)
- ensuring that all researchers and other members of staff are made aware of the relevant contacts and procedures for making allegations
- acting 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

- taking 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
- taking reasonable steps to safeguard the reputation of individuals who are exonerated
- providing 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
- supporting their researchers in providing appropriate information when they are required to make reports to professional and/or statutory bodies
- providing 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 their auspices. This need not be the same person as the member of staff identified to act as first point of contact on research integrity matters, as recommended under commitment 3
- taking steps to ensure that their environment promotes and embeds a commitment to research integrity, and that suitable processes are in place to deal with misconduct
- 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
- producing a short annual statement, which must be presented to their own governing body, and subsequently be made publicly available, ordinarily through the institution's website. This annual statement must include:
    - a summary of actions and activities that have been undertaken to support and strengthen understanding and the application of research integrity issues (for example 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, which will include data on the number of investigations. If no formal investigation has been undertaken, this should also be noted
    - a statement on what the institution has learned from any formal investigations of research misconduct that have been undertaken, including

what lessons have been learned to prevent the same type of incident re-occurring

- periodically review their processes to ensure that these remain fit for purpose

Annex 3: Examples of funder requirements in addition to compliance with the Concordat

There is an increasing focus internationally on the need to promote research integrity. The *Singapore Statement on Research Integrity* (2010) and the Montreal Statement which followed it in 2013 highlighted the responsibilities of those involved in research, and, along with developments such as the *European Code of Conduct for Research Integrity* (2011), began to raise the profile of this issue on the global stage. This has been followed, in the UK, by the *Concordat to Support Research Integrity*, which sets out a comprehensive national framework for good research conduct and its governance. In this context, a range of funders have set out their own expectations in relation to research integrity.

The following is not an exhaustive list, and such policies may change from time to time. Researchers are required to fully familiarise themselves with such funder requirements and ensure that all research complies with the requirements of its funder.

i) UKRI requirements

In addition to the requirements set out in the **Concordat**, for research funded by research councils, the University will comply, and will expect its staff and students to comply, with the expectations of the UKRI policy and guidelines for good research conduct which are summarised as:

> *'All are expected to observe the highest standards of integrity, honesty and professionalism and to embed good practice in every aspect of their work. This includes the interpretation and presentation of research results and contributions to the peer review process and the training of new researchers, staff and students as well as the conduct of the research itself. That is, individual actions must comply with the principles of honesty, openness, transparency and research rigour.'*

UKRI produces a number of policies and guidance documents, including:

- Good research resource hub – UKRI
- UKRI policy and guidelines for good research conduct
- Research Integrity guidance

ii) Individual Research Council requirements

In addition to the Concordat and the UKRI requirements, individual Research Councils also require compliance with a number of policies and guidelines which relate to their specific areas of research. These include:

- ESRC Guidance on research ethics(Economic and Social Research Council)
- ESRC Research Data Policy (2018) the EPSRC Policy Framework on Research Data and the MRC Data Sharing Policy (Medical Research Council)

- MRC Ethics and governance guidelines including Good Research Practice: Principles and Guidelines (2012)
- BBRSRC policies (Biotechnology and Biological Sciences Research Council) include access to research outputs, data sharing, joint code of practice for research, managing risks of research misuse and safeguarding good scientific practice, animal welfare and animals in bioscience research
- BBSRC MRC (Medical Research Council) EPSRC (Engineering and Physical Sciences Research Council) NERC (Natural Environment Research Council), and DEFRA and Wellcome Trust, Responsibility in the use of animals in bioscience research
- NERC policies including animals in research, conflicts of interests, ethics and good research conduct and research integrity
- EPSRC Framework of Responsible Innovation

iii) UK Policy Framework for Health and Social Care Research

The Framework sets out clear responsibilities for organisations in relation to the role of Research Sponsor and the role of employer. It also sets out the responsibilities of researchers. The University will comply with the requirements of a Sponsor, when acting in that capacity, and an employer, and requires its staff and students to familiarise themselves with, and comply with, the researcher responsibilities.

Note: Approval is required from the appropriate College Dean for Research and Enterprise **before** UWE can take on the Sponsors' role as defined under the DoH Research Governance Framework.

NIHR requirements for approvals, registration and governance are set out at https://www.nihr.ac.uk/researchers/manage-your-funding/manage-your-project/approvals-registration-and-governance.htm

iv) Other funders

Wellcome Trust set out policy and position statements for grant holders across a range of subjects: https://wellcome.org/grant-funding/guidance/grant-funding-policies

Annex 4: Peer Review

The University encourages its researchers to take part in peer review activities.

The University agrees with the UK Research Integrity Office Code of Practice for Research regarding the following requirements upon universities and will support its researchers in this respect:

> *'They should recognise the obligations of peer reviewers to be thorough and objective in their work and to maintain confidentiality, and should not put pressure, directly or indirectly, on peer reviewers to breach these obligations.'*

The University also agrees with the UK Research Integrity Office Code of Practice for Research regarding the following requirements on researchers and expects UWE Bristol researchers engaged in peer review to comply with them:

> *'Researchers who carry out peer review should do so to the highest standards of thoroughness and objectivity. They should follow the guidelines for peer review of any organisation for which they carry out such work.*
>
> *Researchers should maintain confidentiality and not retain or copy any material under review without the express written permission of the organisation which requested the review. They should not make use of research designs or research findings from a paper under review without the express permission of the author(s) and should not allow others to do so. Researchers acting as peer reviewers must declare any relevant conflicts of interest.*
>
> *While carrying out peer review, researchers may become aware of possible misconduct, such as plagiarism, fabrication or falsification, or have ethical concerns about the design or conduct of the research. In such cases they should inform, in confidence, an appropriate representative of the organisation which requested the review, such as the editor of the relevant journal or chair of the relevant grants or ethics committee.'*

It should be noted that some research funders, such as the Medical Research Council, require funded researchers to take part in peer review:

> *'All researchers supported by the MRC are expected to participate in peer review, acting as reviewers for meetings, journals, grant applications and the ethical review of research proposals at a level appropriate to their experience and training.'*

The University also sees considerable advantages in relation to improving research quality and practice of researchers engaging in internal peer review. This may be to assist colleagues with proposals to external funders or to offer advice in relation to internally funded projects. The University strongly recommends that researchers consider some form of internal peer review for their work and that Colleges, Schools and Research Centres should support this activity.

Annex 5: Health and Safety Procedures and Guidance

All University health and safety policies and standards must be followed where applicable. University health and safety policies, standards and guidance can be found at: www.uwe.ac.uk/healthandsafety.

Whilst subject to all health and safety policies, standards and procedures relevant to staff and students generally, there are a number of regulations and procedures which apply particularly to research, listed below.

i) Risk assessment

In order to ensure that research risks are properly managed, it is necessary to carry out a risk assessment. All research projects should conduct an appropriate risk assessment for the work activity planned, and in some circumstances each individual researcher needs to complete a risk assessment. It is important that this process is not seen as a 'form filling' exercise, but is fully engaged with to identify relevant risks and develop risk management strategies in relation to those risks. Project Managers are responsible for ensuring all necessary risk assessments are completed. In the case of students, the risk assessment should be seen as part of research training, and as a collaborative activity between the student and their research supervisor, although the supervisor is formally responsible for the risk assessment. Identified risk management strategies must be carried out, and a failure to do so may constitute misconduct, and/or research misconduct. Risk assessments should also be regarded as 'living documents', responsive to changes in risks as the research develops, and regularly reviewed. Risk assessment guidance and forms can be found in the Health and Safety Risk Assessment intranet pages.

Information about the regulations and the requirements with which UWE Bristol researchers must comply, along with appropriate forms, can be found on the Health and safety standards intranet pages. In addition, Colleges and Professional Services may have their own guidelines and requirements, for example requirements for working in laboratories. Colleges and Professional Services are responsible for making clear what such requirements are, if any, and for supporting staff and students in their compliance.

ii) Accident reporting

An accident is defined as:

> *"An unplanned or unexpected event, or series of events, that may result in **personal injury** or **ill health**, damage to property or none of these. An accident where there has been no personal injury or ill health is a **near-miss**."*

Accidents and near misses can occur as part of research. In all instances these must be reported on the University's Accident Report Form. All accidents and near misses are subject to an internal investigation to identify the immediate and any underlying causes and the outcome from an investigation may require the review and update of the research project risk assessment. The University is also required to report certain more serious accidents and

near misses to the Health and Safety Executive who may undertake an additional investigation.

Information about the requirements with which UWE Bristol researchers must comply and the accident reporting procedure can be found on the Accidents and Incidents intranet page.

iii) Control of Substances Hazardous to Health Regulations 2002

Information about the regulations and the requirements with which UWE Bristol researchers must comply can be found at: https://intranet.uwe.ac.uk/tasks-guides/Policy/COSHH.

iv) Genetically Modified Organisms (Contained Use) Regulations

Information about the regulations, and the requirements with which UWE Bristol researchers must comply can be found here .

Information about the University's health and safety requirements regarding GM can also be found on the CHSS Health and Safety intranet pages.

GM research at UWE Bristol is governed by the Genetic Modification Safety Committee. Further details and guidance on conducting GM research at UWE Bristol can be obtained from the Committee Chair or the Biological Safety Adviser who can be contacted via the Health and Safety Team – biologicalsafety@uwe.ac.uk. Their details can be accessed via the CHSS Health and Safety intranet pages, using the link given above

v) Lone Working Safety Guidance

UWE Bristol guidance on lone working can be found in the Lone Worker Guidance.

vi) Work with Biological Agents

If you are handling, using, storing or transporting biological agents, you are required to comply with the University's requirements as set out in HSS21. Such work falls under the remit of the Biological Safety Committee which can be contacted at biologicalsafety@uwe.ac.uk.

vii) Unmanned Aircraft Systems (UAS/ 'drones')

The University's requirements and guidance related to UAS (which can also be known as drones, but also include fixed wing devices) can be found here. There are a number of safety issues which must be considered prior to using these on University business. Drone pilots are required to have registered with the CAA, and take an online safety test. There are also Health and safety regulations in respect of risk assessment (Management of Health & Safety at Work Regulations) and use of work equipment (The Provision and Use of Work Equipment) also apply. In addition, there is also the application of General Data Protection

Regulation where personal images and data are captured from UAS devices which have video/image recording accessories attached. The University has a Health and Safety Standard HSS31 and associated operations manual to ensure compliance with the required legislation. This Standard applies to the purchase, development, use, storage and disposal of UAS by UWE Bristol. This Standard does not apply to UAS which are recreationally flown by staff and students off University premises, and that are not flown in relation to University business (e.g. teaching, learning, research**,** commercial and consultancy activities). If research activity will include the requirement for the use of UAVS/drones advice and support can be obtained at DroneAdvice@uwe.ac.uk.

Annex 6: Some key legislation and regulation affecting research

i) Animals and Animal By-Products

The University expects all staff and students engaged in research and educational activities to comply with both the letter and the spirit of legislation, regulation and best practice and professional guidelines. UWE Bristol will always encourage, as part of research or teaching, the development of new understandings, methods, techniques or equipment to improve ethical practice, including animal welfare. As part of the process of evaluation of research and teaching activities with animals, the University will take into consideration any potential reputational harm to the University, and the extent to which the clearly set out cost-benefit analysis, ethical practice, and risk mitigations render the research or teaching activity to be acceptable and appropriate for approval.

All research with animals or animal by-products must be considered and approved by the Animal Welfare and Ethics Sub-Committee (AWESC) and, thus, registered on the UWE Animal and Animal By-Products Research Register before research activities begin or samples are brought onto UWE premises. Further information on how to apply can be obtained from the Research Governance Team (researchgovernance@uwe.ac.uk).

Key legislation relating to research with animals and animal by-products is listed below:

a) Animal Scientific Procedures Act (ASPA) 1986

- The Animals (Scientific Procedures) Act 1986 (ASPA) regulates procedures that are carried out on 'protected animals' for scientific or educational purposes that may cause pain, suffering, distress or lasting harm. "A protected animal" for the purposes of this Act means any living vertebrate other than humans, and any living cephalopod. Research with these animals (either with live animals or the killing of such) is only permitted under licence.
- UWE does not hold a Home Office Licence, so such research cannot be conducted on UWE premises.

b) The Veterinary Surgeons Act 1966

The following is not covered by ASPA but by the Veterinary Surgeons Act:

- Non-experimental clinical veterinary practices: The clinical investigation and management of the health or welfare of animals is generally considered to be non-experimental clinical veterinary practice when it involves an intervention which is of direct benefit to the animal or its immediate peer group.

- Veterinary clinical trials: Veterinary clinical trials required to be carried out for marketing authorisations of veterinary medicinal products are a requirement of the Veterinary Medicines Regulations 2011 (et seq).

c) The Wildlife and Countryside Act 1981

The Act (www.legislation.gov.uk/ukpga/1981/69/contents) covers protection of wildlife (birds, and some animals and plants), the countryside, National Parks, and the designation of protected areas, and public rights of way. For example, under the Act it is an offence to (with the exception of certain species) intentionally:

- kill, injure, or take any wild bird; take, damage or destroy the nest of any wild bird while that nest is in use or being built; or take or destroy an egg of any wild bird.
- kill, injure or take certain listed wild animals; and prohibits interference with places used for shelter or protection, or intentionally disturbing animals occupying such places. The Act also prohibits certain methods of killing, injuring, or taking wild animals.
- pick, uproot or destroy certain listed wild plants, or any seed or spore attached to any such wild plant.

d) Animal Welfare (Sentience) Act 2022

https://www.legislation.gov.uk/ukpga/2022/22/enacted

This Act (https://www.legislation.gov.uk/ukpga/2022/22/enacted) makes provision for an Animal Sentience Committee with functions relating to the effect of government policy on the welfare of animals as sentient beings. This Act broadens the range of animals now covered by welfare legislation, including decapod crustaceans.

e) Wildlife and habitat regulations in the UK

There are licensing requirements in the UK relating to birds, fish and shellfish, invertebrates, mammals, reptiles and amphibians, and other licensing requirements relating to categories such as keeping European protected species and releasing non-native species. The relevant licence will always need to be obtained before commencing any research or teaching activity that requires one. Government guidance can be found at: Environmental management : Wildlife and habitat conservation - detailed information - GOV.UK (www.gov.uk).

f) There are specific requirements related to the import and export of animals or animal derived material: Guidance on importing and exporting live animals or animal products - GOV.UK (www.gov.uk).

g) DEFRA regulation relating to the use of Animal by-products can be found at: Guidance for the animal by-product industry - GOV.UK (www.gov.uk). UWE must register our use of ABPs with DEFRA, and researchers must register their use with UWE (NB this also applies to teaching).N.B. Registration is required to be based on a physical location, not in a UWE-wide basis, so researchers should check that their work location is registered (researchgovernance@uwe.ac.uk).

h) Other legislation and regulation:

- The Conservation of Habitats and Species Regulations 2017
- Wild Mammals Protection Act 1996
- Animal welfare legislation including the Animal Welfare Act 2006. Current animal welfare legislation in the UK is set out at: www.gov.uk/guidance/animal-welfare
- The Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES)
- The Protection of Badgers Act 1992
- Countryside and Rights of Way Act 2000
- The Protection of Animals Act 1911 is now mostly repealed, but an unrepealed section imposes an obligation on anyone setting spring snares to check them at least once a day.
- The Whaling Industry (Regulation) Act 1934
- The Conservation of Seals Act 1970
- The Salmon and Freshwater Fisheries Act 1975
- The Dangerous Wild Animals Act 1976
- Animal Health Act 1981 gives ministers strong powers to remove a threat to agriculture, except in the case of badgers or European Protected Species.
- The Deer Act 1991
- Natural Environment and Rural Communities Act 2006 puts a legal duty on public bodies to take biodiversity into account when exercising their functions.
- Wildlife and Environment (Scotland) Act 2011
- The Nagoya Protocol (Access and Benefit Sharing regulation)

Legislation relating to Children (Safeguarding)

- NSPCC website provides guidance on the legislation which protects children and young people in the UK. A UK Parliament briefing provides an overview of child protection legislation in England.
- There is guidance available to researchers to help them understand how to comply with the law and avoid harm. The NSPCC provides guidance on Research with children: ethics, safety and avoiding harm. The MRC/ESRC provide joint guidance on Involving children in research. HRA guidance can be found at: Research involving children - Health Research Authority (hra.nhs.uk).
- Images of children should be used with the greatest of care. Use of images of children involve significant legal and ethical issues, which must be fully considered. The NSPCC also provides guidance on photography and sharing images of children.
- There are also clear legislative requirements. Further information about legislation in relation to indecent and prohibited images of children can be found in the CPS guidance on Indecent and Prohibited Images of Children.

- There is statutory guidance for schools and colleges related to keeping children safe in education so any researchers whose activities would fall under this guidance must ensure their activities are compliant.

ii) DBS requirements

- All researchers working with children and/or vulnerable adults (which includes data not just personal interaction) are required by the University to undergo safeguarding training. This includes supervisors of students working with children and young people. The University's safeguarding policies can be found at: Safeguarding - Stay safe on and off campus | UWE Bristol.
- The University is registered with the Disclosure and Barring Services (DBS) and is required to obtain a disclosure for staff undertaking certain activities and roles within or on behalf of the University. The University's Disclosure and Barring Checks policy for staff sets out those roles where a disclosure is or may be required depending on the level and nature of the contact with vulnerable individuals or for another reason. The Policy aims to ensure the University fulfils its responsibilities and obligations for the safeguarding of children, young people and adults with whom University staff and students are in contact as part of their work and also for the assurance of the individual, external agencies and the University itself.
- The University also has a in place a policy statement on the recruitment of ex-offenders.
- As an organisation using the Disclosure and Barring Service (DBS) to assess applicants' suitability for places on university programmes related to the Child and Adult Workforce, UWE Bristol complies fully with the DBS Code of Practice. Where students are not assessed at the application stage, but later wish to work with children or vulnerable adults, the necessity for a DBS check must be considered prior to such research commencing. It is the responsibility of the Director of Studies or the Student Research Supervisor to identify such cases and ensure checks are completed where necessary.

iii) Clinical trials legislation

- Government Guidance can be found at: Good clinical practice for clinical trials - GOV.UK (www.gov.uk).
- UWE Researchers must comply with the UK Department of Health Research Governance Framework requirement that **all clinical trials research** be in compliance with Good Clinical Practice (GCP). All researchers involved in the project should therefore complete GCP Training.
- UKRI/MRC guidance about clinical research governance, including clinical trials, can be found at: Clinical research governance – UKRI.
- In order to obtain a favourable opinion from a Research Ethics Committee through the Health Research Authority Approval System, it is a requirement that clinical trials be registered in a publicly accessible database, and failure to register will be regarded as a serious breach of good research practice. It should also be noted that a

failure to register would significantly impede the ability to publish. Health Research Authority guidance on research registration can be found at: Research registration and research project identifiers - Health Research Authority (hra.nhs.uk).

- In addition to such external registration, all UWE Bristol clinical trials, including non-CTIMP trials of interventions, must be recorded on the relevant UWE system, including PIMs and the Research Governance Record, or equivalent.
- There is additional, specific legislation relating to clinical trials of **medicinal products**, and details can be found at: Clinical Trials of Investigational Medicinal Products (CTIMPs) - Health Research Authority (hra.nhs.uk).
- There is additional, specific legislation relating to clinical trials of medical devices, and further details can be found at: Clinical Trials of Investigational Medicinal Products (CTIMPs) - Health Research Authority (hra.nhs.uk).
- Information about when software applications are considered to be a medical device, and how they are regulated, can be found at: Medical devices: software applications (apps) - GOV.UK (www.gov.uk).

iv) Data Protection Act 2018

The University requires those conducting research to comply with the Data Protection Act. The Data Protection Act relates to the protection and use of personal information. In terms of research, this is most likely to be personal information about external research subjects. However, it should be noted that information held as part of the University's formal record about students and staff is also covered by the Act, and any proposed research use must be carefully considered in terms of legal probity, as well as ethical approval. The protection of personal data includes the need for secure storage, as well as proper consent for access and use.

Relevant guidance is available at:

- University guidance on UK GDPR
- The University's data protection and information security policies and data protection guide
- Third party survey tools used to collect research data must be fully compliant with data protection legislation. The University currently has only approved Qualtrics for this purpose. Details regarding recommended online forms and survey tools (can be found here. Advice must be sought before using any other tool (particularly where personal data will be processed outside the European Economic Area).
- There are specific provisions for journalism, for guidance contact the UWE Data Protection Office.
- Information about the list of transcription companies with which UWE has an up-to-date Data Processing Agreement (necessary for compliance with the law) can be obtained from the RBI Hub (res.admin@uwe.ac.uk)

v) Dual-use research technology and Export Controls

Dual-use refers to technologies which can be used for both good and harm. Such technologies are controlled under UK and international legislation and regulation. UK export controls are intended to restrict the flow of such technology outside of the UK. This may include physical materials/goods, software and technology. Government guidance on exporting military or dual-use technology defines the purpose of UK Export Controls as:
'*Export controls for technology aim to prevent transfers that can lead to developing or producing weapons or goods which:*

- *could be used against the UK and allied forces*
- *cause national security concerns.*'

This guidance also explains that:
'*UK export controls:*

- *apply to anyone or any entity in the UK and, in limited circumstances, to UK persons overseas*
- *are not based on nationality of an individual, except where they apply to UK persons overseas*
- *are based on a concept of exports or transfers to a person or destination overseas, including access to controlled technology by persons located overseas'*

and

> '*Any transfer, permanent or temporary, of controlled technology overseas requires an export licence. This applies to a variety of circumstances. It includes for the purposes of demonstration, bidding or tendering for an overseas contract through to contract fulfilment and training material for maintenance and servicing.*
>
> *The location of the exporter is the country from which they are transferring controlled technology, or the location of a person who makes available controlled technology being accessed from overseas. The destination of transfers of technology is dependent upon the location of the intended recipient. For export control, the routing or storage of the controlled technology does not determine the destination.*
>
> *All foreign or UK persons based in the UK need a licence if they wish to transfer controlled technology overseas which they have created or acquired in the UK, or brought in to the UK from overseas. This is irrespective of the origin of the technology, for example US origin.'*

Research activities that may bring you within the scope of dual use and export control legislation include:

- physical exports of 'technology' (e.g. laboratory equipment or samples, even small quantities)
- research agreements with overseas partners (which may involve the transfer or controlled technology or software)

- International travel (e.g. data or presentations on lap-tops, meetings with non-UK nationals, remotely accessing electronic files from overseas)
- Teaching or supervising the research of international students.

Researchers are responsible for obtaining licenses and for compliance with export controls law. Failure to obtain a license when one is needed may be a criminal offence.
Government Guidance about exporting controlled goods can be found at: Exporting controlled goods - GOV.UK (www.gov.uk).

Export controls can apply to varied items, including blueprints, plans, diagrams, models, formulae, tables, engineering designs and specifications, manuals and instructions. There are ten broad categories set out in the Government guidance: nuclear materials; materials, chemicals, micro-organisms and toxins; materials processing; electronics; computers; telecommunications and information security; sensors and lasers; navigation and avionics; marine; aerospace and propulsion
Each category is then divided again into: systems equipment and component; test, inspection and production equipment; materials; software; technology.

A further useful indicative example of what may constitute Dual-use technology is provided by the WHO in relation to dual use research of concern (DURC):

> *'Dual-use research of concern (DURC) describes research that is intended to provide a clear benefit, but which could easily be misapplied to do harm. It usually refers to work in the life sciences, but the principles are also applicable to other fields including engineering and information technology. It encompasses everything from information to specific products that have the potential to create negative consequences for health and safety, agriculture, the environment or national security.*
>
> *The possibility that research might be misused, either intentionally or accidentally, is a long-standing concern of science. It can have implications in ethics and wider societal issues, and involves not only research communities and public health, but also donors, scientific publishing and public communication.*
>
> *One example is research into viruses and other pathogens. Scientists often create modified versions of dangerous viruses in laboratories to study how they behave in humans and animals, and ultimately how to fight them. While this is a necessary step in biological research, the modified viruses also pose safety concerns and have the potential to cause great harm if not controlled correctly or used to intentionally infect people or animals.*
>
> *Another example is pharmaceutical research and development. Scientists researching asthma have developed aerosol methods that help deliver drugs deeper into the lungs. While this research may hold great benefits for people with asthma and other*

respiratory issues, they could also be used to increase the damage of biological weapons such as anthrax.'

The above demonstrates that this is an area of international concern. In some instances, controls from other territories may apply in additions to UK-administered control. For example, **US Export controls are extraterritorial**, and attached to US products, software and technical data wherever they go, even after the incorporation into other articles.

Where 're-export' clauses apply, 'viewing' of US-controlled technical data by foreign nationals within the UK can be considered re-export, and so may not be permitted.

Further information about US Export Control legislation is given at:
https://www.trade.gov/us-export-controls

A breach of US Export Control laws could lead to significant potential penalties, including imprisonment for individual researchers, and the inclusion of UWE on the US "Denied 38 Parties" list, which would have very severe consequences for the University.

vi) Equality Act 2010

The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society.

It replaced previous anti-discrimination laws with a single Act, making the law easier to understand and strengthening protection in some situations. It sets out the different ways in which it's unlawful to treat someone.

vii) The Freedom of Information Act 2000

UWE must comply with the FOI Act. Guidance can be found on the Information Commissioner's Office site.

viii) Genetic modification legislation

- UWE Bristol is not involved in the release or marketing of GMOs or GM products. We do, however, undertake research which involves the contained use of genetically modified organisms. This is regulated under the Genetically Modified Organisms (Contained Use) Regulations 2014. This is the primary piece of legislation that applies to the use of genetically modified organisms in the workplace. Links to this legislation can be found at: http://www.hse.gov.uk/biosafety/gmo/index.htm.
- The University's Genetically modified organisms policy (HSS22) provides information about the requirements with which UWE Bristol researchers must comply. More specific guidance is set out on the HAS Health and Safety intranet pages: https://intranet.uwe.ac.uk/sites/hlshas/Pages/Genetically-Modified-Organisms.aspx.

- GM research at the University is governed by the Genetic Modification Safety Committee. Further details and guidance on conducting GM research at UWE Bristol can be obtained from the committee chair or the Biological Safety Adviser in the University's Health and Safety Team.

ix) Health and Safety at Work Act 1974

- The Health and Safety at Work Act 1974 imposes a general duty on the University to ensure that by the manner in which it conducts its activities, there is an absence of risks to the health and safety of its staff and others (students, visitors, contractors, etc.) *so far as is reasonably practicable.*
- "So far as is reasonably practicable" means that the degree of risk in a particular activity or circumstance must be balanced against the time, trouble, cost and physical difficulty of taking measures to avoid the risk. The appropriate efforts to counterbalance the risk are the control measures – the preventative and protective measures.
- The *Management of Health and Safety at Work Regulations* (MHSW) specifically requires the University to make a "suitable and sufficient" assessment of the risks to the health and safety of its staff and others (students, visitors, contractors, etc.) who are exposed to risks arising out of the University's activities… "for the purposes of identifying the measures (it) needs to take to comply with the requirements and prohibitions imposed upon (it)…"
- UWE's policies and procedures health and safety standards with regards to Health and Safety have been dealt with extensively in Annex 5 of this Code.
- The University has also set in place a 'Legal register' of legislation relevant to health and safety which can be found on the UWE intranet pages: https://intranet.uwe.ac.uk/tasks-guides/Policy/legal-register.

x) Human Tissue Act 2004

The Human Tissue Act 2004 '*regulates the removal, storage and use of human tissue. This is defined as material that has come from a human body and consists of, or includes, human cells'*.

The Human Tissue Act regulations can be complex to interpret. A decision will need to be made firstly as to whether the tissue is 'relevant material' under the Act (and the Act does relate to less obvious tissue, such as the residual cells in urine and faeces, even where the research will not use these cells). A decision will also need to be made about whether the research is for a 'scheduled purpose'. Such decisions are not always clear cut. Researchers (including Student Research Supervisors) are therefore expected to consult for advice with the Officer to the Human Tissue Sub-Committee (HTSC) in relation to any research involving human tissue. All human tissue projects must be logged on the UWE Bristol Human Tissue Register, prior to any tissue being brought onto UWE premises. Material containing human cells can be held without a license for a period of a few days and never more than a week,

specifically and solely for the purpose of rendering it acellular **by recognised means**, but no research whatsoever can occur on those samples, even if that research would itself render the samples acellular, or can be done within a few days. Human Tissue research at UWE Bristol is governed by the Human Tissue Sub-Committee, and advice is also available from its members, via the Officer (researchgovernance@uwe.ac.uk).

The UWE Human Tissue Quality Management System (QMS) sets out the University's requirements for the conduct and management of human tissue research. The QMS can be found at:
http://www1.uwe.ac.uk/research/researchgovernance/resourcesforresearchers/humantissueresearch.aspx

Research using human tissue must be registered on the UWE Bristol Human Tissue Register, via the Officer to the HTSC. It is the responsibility of Project Managers to ensure that the entry in the human tissue register for their research is kept up to date.

The University does not have a license for the storage of human tissue for research purposes. It is therefore necessary to obtain NHS REC approval for the storage and use of human tissue in individual research projects, on a project-by-project basis (via the HRA approval process).

This means that tissue cannot be stored after the project NHS REC approval has expired, without an approved amendment of the end date. The tissue can only be used for the purposes set out in the NHS REC application, without a further application or an application for an amendment (and only then if this is in line with participant consent).

It is the Project Manager's responsibility to ensure that NHS REC permission is up to date and conditions adhered to, and that tissue is not retained by the University past the expiry date of the permission. At the end of the project the tissue either needs to be destroyed, moved to another site which has a site license, or a further NHS REC project application for new work completed before the end date of the existing approval. Any such further permissions must be in place in advance – tissue cannot be stored at UWE Bristol for any time period without permission, as this would be unlawful.

It should be noted that a lack of compliance with the legislation can result in a prison sentence.

xi) Intellectual Property Legislation

The University requires those conducting research to comply with Intellectual Property legislation.

Information about intellectual property legislation can be found on the Intellectual Property Office website.

xii) The Mental Capacity Act 2005

- The Mental Capacity Act 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. Because the Act is intended to assist and support people who may lack capacity, the Act protects people who take part in research projects but lack capacity to make decisions about their involvement. It makes sure that researchers respect their wishes and feelings. UWE Bristol research involving people who lack capacity must comply with the requirements of the Act.
- Guidance and information, including guidance in relation to research, is provided in the Mental Capacity Act 2005 Code of Practice. UKRI/ESRC have also produced guidance on research with potentially vulnerable people, which sets out some of the legislative and ethical issues.
- **Note:** Under the Mental Capacity Act 2005, 'intrusive' research requires approval from an NHS or Social Care REC if it will at any stage involve people unable to consent for themselves because of an impairing condition. Intrusive procedures are those requiring consent in law, including use of identifiable tissue samples or personal information.

xiii) Working with Offenders, HMP Services and Probation Trusts

- All applications to conduct research requiring access to data, staff or offenders are managed by the National Offender Management Service. Applications should be submitted through the Integrated Research Application System (IRAS) and the pdf emailed to national.research@noms.gsi.gov.uk.
- Further information on making research applications to the National Offender Management Service can be found at: https://www.gov.uk/government/organisations/national-offender-management-service/about/research#research-application-process.

xiv) PREVENT Duty (radicalisation of vulnerable individuals) **New Government legislation has placed a statutory duty on Higher Education Institutions to have "*due regard to the need to prevent people from being drawn into terrorism*".**

The legislation, known as Prevent Duty, applies to all kinds of extremism, for example the Far Right, Islamist groups and animal rights groups.

The objective of the Prevent Duty is to safeguard individuals from being radicalised and drawn into terrorism.

UWE needs to be aware of any research that may potentially have an influence on radicalisation and ensure that it is appropriately reviewed. The University must also be

aware of all research using security sensitive information. The University will need to assure itself through the ethical review process that the research is appropriate per se and that researchers are supported and protected in relation to their research, and appropriate for the level and experience of the researcher.

Further information on UWE Bristol's response to the Prevent Duty can be found at: Safeguarding - Stay safe on and off campus | UWE Bristol

UWE also provides guidance for security sensitive research, within the Research Ethics Handbook.

xv) Ionising Radiation Regulations and The Environmental Permitting Regulations

HSS18 Radiation Safety Policy sets out the University's requirements. Advice can also be sought from the University's Head of Health and Safety at safety@uwe.ac.uk.

Non-Ionising Radiation

For work involving non-ionising radiation there is a Health and Safety Standard HSS20. This covers all non-ionising radiation to include artificial optical and electromagnetic fields. In support of this Health and Safety Standard, the Guidance on the Safe Use of Lasers in Education and Research, published by the Association of University Radiation Protection Officers, is adopted by the University as representing good practice. The Standard also ensures compliance with The Control of Electromagnetic Fields at Work (EMF) Regulations 2016.