

Research Integrity Report 2023-24 – Lancaster University

Section 1: Key contact information

1A. Name of organisation	Lancaster University
1B. Type of organisation: higher education institution/industry/independent research performing organisation/other (please state)	Higher Education Institution
1C. Date statement approved by governing body (DD/MM/YY)	15 May 2025
1D. Web address of organisation's research integrity page (if applicable)	https://www.lancaster.ac.uk/research/research-services/research-integrity-ethics--governance/research-integrity/
1E. Named senior member of staff to oversee research integrity	Name: Professor Malcolm Joyce Pro Vice Chancellor: Research and Enterprise
	Email address: m.joyce@lancaster.ac.uk
1F. Named member of staff who will act as a first point of contact for anyone wanting more information on matters of research integrity	Name: Becky Gordon Head of Research Quality and Policy
	Email address: b.gordon@lancaster.ac.uk

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

2A. Description of current systems and culture

Lancaster requires the highest standard of research integrity from university researchers, irrespective of the source(s) of funding (if applicable), area of research or research group. We are committed to upholding University UK's [Concordat to Support Research Integrity](#) and have been a subscriber to the UK Research Integrity Office since 2011.

Research at Lancaster shall be legal and transparent and conducted in line with the principles of accountability and responsibility, honesty, openness and respect, as set out in our [Research Ethics Code of Practice](#). The University has existing policies and procedures that consider the ethical and reputational concerns highlighted below. Individual responsibility and accountability for adherence to these policies and to conducting research that is always legal and transparent rest with the Principal Investigator or PhD Supervisors.

Leadership:

Research integrity is led by the [University Research Ethics and Integrity Committee \(UREIC\)](#). This committee is Chaired by Professor Malcolm Joyce, Pro-Vice Chancellor for Research and Enterprise, and has a representative membership that includes senior individuals from across all faculties as well as a post-graduate researcher, a Research Associate and independent lay members.

UREIC has a core responsibility to foster and develop a culture of ethical research and research integrity in our research community. UREIC has oversight of the core elements of research ethics and integrity including the commitment to the Concordat to Support Research Integrity.

Research Services:

[Research Services](#) provides information and guidance relating to the University's research activities at all stages of development, completion, or dissemination. All applications for externally funded research have a designated member of the team to support researchers in the project development. Through this support any ethical, reputational or other concerns can be flagged at the pre-application stage. Additional support teams provide assistance after the award of funding, or for unfunded projects, to help researchers and research teams ensure they are acting with integrity and accordance to all legal and other requirements during their project.

Training:

Training is offered to all research staff and PhD students at Lancaster which covers a range of topics including research ethics, governance and integrity. Specific online training for ethics and Integrity has been purchased this year and the modules are available to staff and PGRs via the mandatory training section on the website. From October 2024 it has been agreed that selected

members of staff and all PGRs are required to complete the Integrity and Ethics training. All staff are required to take, and regularly refresh, mandatory training on EDI, health and safety, mental health awareness and information security.

Researcher self-assessment:

All externally-funded research projects must be costed and approved through [ACP](#), the University's costing and pricing tool and the Principal Investigator (PI) must complete the researcher self-assessment in the [ACP governance checklist](#). PIs and PhD supervisors have responsibility to ensure they assess all their research, including un-funded research that is not logged through ACP, and flag up issues for consideration through one or more established routes (e.g. Faculty Research Ethics Committees) or, seek advice from Research Services.

Funding approval:

The ACP process includes the [approval stage](#). All externally funded applications for research will go to the relevant Head of Department (HoD) for approval. HoDs can view the financial cost/recovery, research partners and researcher self-assessment. At this stage HoDs can raise any concerns before approval. Depending on the size of the application further approvals may be required from the Faculty Executive Dean/Research Institute Director, or for the largest value projects the Director of Finance and Vice-Chancellor. Applications requiring institutional match funding are considered by the University Planning and Resources Group. At any stage of this approval process questions may be raised and the process of approval halted.

Ethical approval:

Ethics committee approval is required for activities that directly involve humans, human tissue, data relating to humans, or other ethical issues that have been raised. It is the responsibility of the Principal Investigator, or PhD Supervisor, to decide whether ethical approval is required.

An application for ethical approval must be submitted to the relevant Faculty Research Ethics Committee (FREC) via our digital approval system [REAMS](#). Approval must be gained prior to any work being undertaken. Details of the internal processes can be found in the [Procedures for Research Ethics Approval](#). FREC review is also a route to raise potential conflicts of interest.

UREIC has oversight of all FREC activity; it makes decisions on applications referred up from the FREC and undertakes periodic reviews of FREC approvals. The total number of FREC applications received 2019-20 to 2023-24 are shown in Table 1, together with those funded projects identified by the researcher as not needing ethical review via the ACP governance checklist.

Table 1: Submitted Research Ethics Applications

Annual totals	2019-20	2020-21	2021-22	2022-23	2023-24
Total reviewed	565	542	625	643	755
FREC review not needed	139	146	206	158	89

Clinical research sponsorship:

All research projects that require approval from the Health Research Authority gain appropriate ethical review (via either an NHS Research Ethics Committee or relevant FREC) and project sponsorship prior to commencing. Where sponsorship is provided by Lancaster University the process is overseen, and approval granted by, the [Health and Social Care Research Sponsorship Committee](#) and researchers are supported by a clinical research governance team. Related policies, procedures and templates are [available to researchers on our webpages](#), table 2 shows the number of sponsored projects over the last five years.

Table 2: Sponsored Clinical Research Projects

	2019-20	2020-21	2021-22	2022-23	2023-24
Total sponsored	26	16	23	28	28

Research due diligence panel:

The University assesses the financial, operational and reputational risk of research projects, including working with certain research funders and partners and in accordance with our acceptance of external funding policy. Due diligence checks are a requirement of several research funders including UKRI. A series of checks to identify and manage risk are completed before an activity is approved to proceed using the [ACP governance checklist](#). If appropriate, further due diligence checks are undertaken by the [Research Development](#) team in liaison with the PI and research partners. A partner questionnaire and a due diligence checklist are submitted as documentary evidence to the [Research and Enterprise Due Diligence Panel](#) for approval or recommendation.

Philanthropic fundraising:

The University has an [Ethical Giving Policy](#) for staff engaged in fundraising activities, ensuring that due diligence is observed when assessing whether or not to accept significant benefactions or establish specific philanthropic relationships. A due diligence and review process is overseen by the Director of Development & Alumni Relations and through a [Gift Review Panel](#).

Animal research:

All research on animals, or their tissues, is dealt with by the [Animal Welfare and Ethical Review Body \(AWERB\)](#) in accordance with the requirements of the Animal (Scientific Procedures) Act 1986 (amended 2012). Prior to any work being conducted, each project must have undergone a rigorous and objective review by AWERB, whose membership includes lay persons, scientists and those with veterinary and animal care expertise.

Export controls:

The University engages widely in international research collaboration, global movement of researchers and the exchange of new ideas in pursuit of its mission to undertake excellent research and provide world-class education. However, some of the knowledge held, goods used, and activities conducted by academics and researchers have the potential to be misused and are therefore subject to UK export control law. Export controls are needed for a variety of

reasons, including national security and international treaty obligations. Compliance with export controls is a serious obligation and the University has a [statement on Export Controls](#) and [guidance](#) is available to help build awareness and to ensure compliance.

Nagoya Protocol:

Each country has rights over the genetic resources that exist within their country such as animals, plants and organisms as well as the associated traditional knowledge. The [Nagoya Protocol on Access and Benefit Sharing](#) (ABS) is an international agreement establishing a legal framework to govern access to genetic material including the associated traditional knowledge, and ensure that benefits arising from the use of these resources are shared fairly. University [guidance](#) is available to help researchers who source or use such material to exercise diligence to ensure that genetic resources and traditional knowledge associated with those resources have been accessed in accordance with applicable access and benefit sharing laws implemented by the source country.

Open research:

The Open Research team in the Library work with our research community to enable Open Research. They champion the notion that scholarly and scientific knowledge (and data) should be shared as early and freely as possible in the research process across all disciplines, both within and beyond academia. By aiding the development of open research skills and practices, we are working towards more reproducible, accessible and rigorous research at Lancaster. Oversight in this area is provided by our Open Research Group with membership including senior academic research leaders from all faculties, Research Services, and the Library.

Other policies relating to research:

Other University policies and procedures impact on our approach to upholding the highest standards of research integrity and individual responsibility and accountability. These include:

- Raising Serious Concerns and Disclosing Public Interest Matters ([Whistleblowing](#))
- Misconduct in Research [Policy](#)
- Code of Practice on [Freedom of Speech](#)
- Health and Safety [Policy](#)
- [Safeguarding in Research](#) Statement and Policy
- Bullying, Harassment and Sexual Misconduct (BHSM) [Policy](#)
- [Financial Regulations](#)
- Anti-bribery and Corruption [Policy](#)
- Rules Governing [Outside Professional Activities](#)
- Intellectual Property [Policy](#) and Support
- [Equality, Diversity and Inclusion](#)
- [Sustainability](#)
- [Research Data Policy](#) and [Data Protection](#)

A full list of all University policies and procedures can be found [here](#).

2B. Changes and developments during the period under review

University committees:

The University Research Ethics and Integrity Committee (URIEC) met regularly during 23/24 to ensure oversight of ethics, research misconduct, information Governance and concordat. The committee has reported upwards to the University's Research Committee.

In October 2023 the Terms of Reference for Clinical Research Sponsorship Committee (CRSC) were updated and the committee changed its name to the **Health and Social Care Research Sponsorship Committee (HSCRSC)** which ensures all governance on research projects requiring sponsorship.

Digital ethics approvals:

A digital research ethical approval management system (REAMS) was launched across the university in November 2021. This introduced a new process allowing applicants to self-review projects that are deemed as minimal risk and therefore do not need FREC review. Each application reviewed in this way was checked throughout the year by the Research Ethics Officers to ensure the use of this new process was appropriate. Any queries were directed to the relevant FREC Chair for confirmation or referral to the full review process. REAMS is designed to reduce administrative load for applicants, academic reviewers and professional services staff; saving valuable time whilst enhancing the experience for the community to further foster an environment of excellent research integrity. Following a system review in 2022/23, and with recommendations from URIEC an update has commenced on the REAMS system to improve processes, training and oversight and will be implemented during 24/25.

Sponsorship approvals:

The Health and Social Care Sponsorship Committee has expanded its remit and approval route for university sponsorship of clinical projects working not only within the NHS but now clinical projects working outside of the NHS but within a Health and Social Care setting; previously these projects were approved via FREC Chairs and Research and Enterprise Services. Throughout 2023-24, a proportional review has continued to be developed and tested so that the potential risk level of the project determines the scrutiny that each application undergoes. The lowest level remains with a Clinical Research Governance Officer (CRGO) review before being sent for approval. However there have been changes for the other levels. For medium-level projects an academic from the HSCRSC also completes a review before the project is sent to the Chair and Deputy Chair for authorisation. Projects which require the highest-level of scrutiny will be reviewed by a panel of 3 members of the committee consisting of at least 1 Lancaster academic staff member and 1 clinician, before going to the full committee for a review. The new process ensures the projects undergo a full assessment using the expertise on the committee to ensure any sponsorship approvals are fully assessed in advance of the project starting.

Researcher training:

During 2022-23, two new digital training packages were purchased (1) Research Integrity 2.0, which is an updated version of previous institutional provision and (2) Ethical Research which includes new modules under the headings 'becoming an ethical researcher' and 'research ethics in practice'. Following consultation within the research community in 2023-24, UREIC and the University Executive Board (UEB), the mandatory elements of this training are now being rolled out to the research community. Completions will be monitored during 2024-25.

2C. Reflections on progress and plans for future developments**Digital approvals:**

Following the 1-year REAMS review in 2022-23 a report with associated recommendations was considered at the October 2023 UREIC meeting. The approved changes are currently being implemented in the system and expected to be finalised in 2024-25. The recommendations included improvements to guidance and questions.

Following the continued implementation of the REAMS review recommendations, and the refresh of standard operating procedures for review of research requiring HRA sponsorship, Research and Enterprise Services have considered whether the sponsorship approval process can be transferred into REAMS. Due to the smaller number of applications for sponsorship this is not a major priority, however the University aims to increase research activity in this area and using the existing digital system could be an advantage for researchers as it would provide a consistent pathway to university approvals. This will be explored further in 2024-25.

Researcher training:

Following staff consultation using a newly appointed role of Researcher Training and Skills Developer, a proposal was developed and presented to UREIC and UEB to ascertain the most pertinent modules to make mandatory for both Staff and PGRs in the Ethics and Integrity digital training packages. The rollout is due to start in October 2024 with a review scheduled for summer 2025.

Following up misconduct allegations

Lancaster takes any concerns raised about the conduct of research very seriously – see section 3 of this report. Although not all allegations result in formal research misconduct investigations any issues that need institutional, or local (e.g. departmental), action will be discussed at UREIC. Discussions of allegations happen anonymously but allow UREIC to agree actions for improvements to policy or process. Issues raised during 2023-24 will be raised with UREIC during 2024-25 and actions will be reported in the next annual report.

Section 3: Addressing research misconduct

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

Lancaster is committed to the highest standards of research integrity and takes any concerns raised about the conduct of research undertaken by any staff member or research student very seriously. To ensure that both internal staff and students and external individuals feel able to report suspected instances of research misconduct we ensure that all our research webpages are publicly available to encourage an open environment, this includes information about our research misconduct procedure.

The University's [Procedure for the Investigation of Misconduct in Research](#) was updated in 2021 in line with the [procedure published by the UK Research Integrity Office](#). It provides a transparent, timely, robust and fair process for dealing with allegations of research misconduct. Other relevant policies and procedure are listed below:

- Raising Serious Concerns and Disclosing Public Interest Matters ([Whistleblowing](#))
- Code of Practice on [Freedom of Speech](#)
- [Safeguarding in Research](#) Statement and Policy
- Bullying, Harassment and Sexual Misconduct (BHSM) [Policy](#)
- [Financial Regulations](#)
- Anti-bribery and Corruption [Policy](#)
- Rules Governing [Outside Professional Activities](#)

In the event of an issue being raised to the University under a specific policy or procedure that may/does not fit with the criteria within, a decision on where best to investigate/deal with the matter is made by the senior staff in charge of the relevant processes. Each policy or procedure articulates, where appropriate, how they may relate or interact with each other.

The current research misconduct procedure does not provide a process for dealing with issues of poor research practice. That is those concerns that were not deliberate or not as serious and therefore should not be investigated via the formal misconduct procedure. Therefore, a revised misconduct procedure has been drafted to address this and will be approved and implemented in 2024-25 to introduce new methods for dealing with poor research practice issues.

The University will use the opportunity of the new procedure's release to promote the importance of raising research concerns across the research community. This will be promoted alongside other university policies to ensure the continuation and strengthening of an environment where researchers are confident that concerns are heard and investigated appropriately. In addition, where possible, references to the University's misconduct process will also be integrated into the new integrity training provision.

No allegations of research misconduct have been raised in 2023-24 requiring a formal investigation at this point however some allegations are undergoing earlier review stages which might mean a formal investigation follows in 2024-25.

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

*Please complete the table on the number of **formal investigations completed during the period under review** (including investigations which completed during this period but started in a previous academic year). Information from ongoing investigations should not be submitted. An organisation's procedure may include an initial, preliminary, or screening stage to determine whether a formal investigation needs to be completed. These allegations should be included in the first column but only those that proceeded past this stage, to formal investigations, should be included in the second column.*

Type of allegation	Number of allegations			
	Number of allegations reported to the organisation	Number of formal investigations	Number upheld in part after formal investigation	Number upheld in full after formal investigation
Fabrication				
Falsification	1			
Plagiarism	1			
Failure to meet legal, ethical and professional obligations	2			
Misrepresentation (eg data; involvement; interests; qualification; and/or publication history)	2			
Improper dealing with allegations of misconduct				
Multiple areas of concern (when received in a single allegation)				
Other				
Total:	6	0	-	-