Code of Good Research Practice

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Contents

1   INTRODUCTION

Bournemouth University (BU) recognises its responsibility to researchers and the wider community and its commitment to creating an environment that promotes the highest standards of integrity and professionalism in the conduct of research. This Code of Good Research Practice ("the Code") provides guiding principles and standards of good practice in research across all subject disciplines and fields of study in the University. It requires all those undertaking and/or contributing to research to adhere to the highest standards of performance and ethical conduct, and embed good practice in all aspects of their work. Researchers must operate honestly and openly in respect of their own actions and in response to the actions of others involved in research.

BU requires all staff, students and visiting faculty ("Researchers") involved in research undertaken at BU to abide by the Code. Dependent on the nature of the research, individuals may be expected to adhere to other applicable standards and legislation in their undertaking of the research project.

The principles of good practice underpin the University's commitment to effective research governance, ethics and integrity, the pursuit of excellence and the highest quality research.

The Code draws on a number of sources of guidance and good practice available to the research sector in the UK and internationally, including:

- RCUK Policy and Guidelines on Governance of Good Research Practice, April 2017
- The Concordat to Support Research Integrity, July 2012
- UKRIO Code of Practice for Research: Promoting Good Practice and Preventing Misconduct;
- Good Clinical Practice standards
- The Human Tissue Act 2004
- The Medicines for Human Use (Clinical Trials) Regulations 2004
- Doing Global Science. A Guide to Responsible Conduct in the Global Research Enterprise

The Code and its implementation is regularly reviewed by Research Development & Support ("RDS") in consultation as appropriate with relevant individuals or groups and is approved by the Research & Professional Practice Committee (RPPC). The review will take into account changes and recommendations from external research funders, Acts of Parliament and other regulations.

Failure to comply with the Code or any actions that may be deemed to constitute research misconduct, under the University's 6M – Research Misconduct: Policy and Procedure, may be grounds for instigating disciplinary proceedings.

The University recognises and protects the principle of academic freedom in its ordinances and the Code is not intended to restrict the academic freedom of staff. However, each member of staff is expected to exercise their academic freedom in a manner consistent with the Code.

2   PRINCIPLES OF GOOD PRACTICE IN RESEARCH

It is the responsibility of all engaged in research to adhere to the following principles:

Excellence

- Strive for excellence when conducting research
- Aim to design, produce and disseminate work of the highest quality and ethical standards
- Promote and support good research practice
- Build on relationships and partnerships with external organisations in order to contribute to the improvement and advancement of technology, healthcare, and wider society, whilst building on international collaborations

Integrity

- Observe and comply with all legal, regulatory and ethical requirements in the UK and in countries where research is conducted or participants are from, relevant to the field of study and any collaborative partner organisations
- Maintain knowledge and awareness of relevant and up-to-date legislative and regulatory requirements, professional body codes of practice, University policies and procedures, accessing support and guidance provided by RDS, as needed
- Ensure research has been appropriately reviewed, and necessary regulatory, funding and ethical approvals, internally to the University and externally, have been obtained
- Ensure that research projects are appropriately managed by Researchers with the relevant training and experience required to undertake their duties
- Recognise and declare any actual, potential or perceived conflicts of interest relating to research and seek advice and/or to take steps to resolve them
- Recognise when something is not quite right and seek confidential advice as appropriate

Honesty and Openness

- Foster and support honesty in research, in relation to their research and that of others
- Ensure research designs, methodologies, data, findings and results are open to scrutiny (subject to appropriate confidentiality applicable to personal or commercially protected data)
- Endeavour to disseminate all results of research through publication (or other means).
- Ensure the accuracy, security, accessibility and completeness of data and results, appropriately acknowledge the contributions of others, and neither engage in misconduct nor conceal it
- Ensure data and results are retained and deleted/destroyed in accordance with all legal, ethical, funding body and University requirements
- Consider the wider consequences of their work and to engage critically with the practical, ethical and intellectual challenges that are inherent in the conduct of high quality research

Co-operation

- Contribute to and promote the open exchange of ideas, research methods, data and results and their discussion, scrutiny and debate, subject to any considerations of confidentiality and the research interests of the University
- Work alongside colleagues and collaborating organisations to develop ideas, cross-working opportunities and to contribute to improving areas such as healthcare, wider society and technology

Accountability

- Recognise that in and through research, Researchers are ultimately accountable to the general public and in some cases, participants from within and outside the UK, and should act accordingly
- Ensure that any research undertaken complies with any agreements, terms and conditions relating to the project, and allows for proper governance and transparency
  - o This should include ensuring there are fully auditable records of, for example, timesheets, participants' consent, where required, all relevant approvals, amendments to the study design or documentation, and access to and understanding of any associated legal agreements, grant terms and conditions
- Follow the requirements and guidance of any professional bodies in their field of research and those who are members of a regulated profession must follow the requirements and guidance of the body regulating their profession
- In the case of clinical research within an NHS setting, the researcher and members of the research team should follow the requirements of Good Clinical Practice guidelines, and the requirements and guidance set out by the Health Research Authority, and if applicable, the NHS Research Ethics Committee and Medicines and Healthcare Products Regulatory Agency (MHRA). Dependent on the project, there may be additional bodies whose guidance should be followed (e.g. Human Tissue Authority)
- In the case of research conducted in care homes when recruiting participants lacking capacity, researchers must comply with the Mental Capacity Act (2005) and seek the approval of the NHS Social Care Research Ethics Committee (as well as comply with University internal review processes)

Training and development

- The University provides training and opportunities for the development for researchers, and resources to enable them to conduct research to the required standards.
- Researchers should ensure that they have the necessary skills, training and utilise the related resources to carry out research, in the proposed research team or through collaboration with specialists in relevant fields, and identify and undertake appropriate training and development to carry out their research
- Training and development opportunities are further detailed in Section 7: Training

Safety

- Researchers should ensure the dignity, rights, safety and well-being of all involved in research and avoid unreasonable risk or harm to research subjects, (service users, animals), other researchers and themselves and communities researched
- Researchers should risk assess, report and address any concerns relating to the dignity, rights, safety and well-being of those involved in research
  - Research should be initiated and continued only if the anticipated benefits justify the risks involved
  - The responsibility for risk assessments lies with the individual researcher overseen by the Faculty and more information can be found on the University's Health, Safety and Wellbeing page on the Staff Intranet
- In the case of research within the NHS involving patients/service users, the risks associated with a project will be observed by the NHS Research Ethics Committee
- Researchers should ensure that all research projects comply with appropriate health and safety legislation and regulation, and have sufficient insurance and indemnity prior to the research being conducted. The Health, Safety and Wellbeing team can advise on current legislation and regulation
- More detail on Health & Safety can be found in Section 9: Health & Safety. In the case of NHS research, the individual Trusts will have their own policies that the researcher should adhere to when working within their establishment

Research Misconduct

- BU is committed to maintaining the integrity and probity of academic research defined here in the broadest sense of this definition and to include all knowledge exchange activity (to include enterprise, consultancy, business engagement, etc.)
- BU regards it as a fundamental principle that the conduct of research and the dissemination of the results of research must be truthful and fair
- All research must be undertaken to the highest ethical standards. The University has, adopted 6M – Research Misconduct: Policy and Procedure for handling any allegations of and/or concerns about misconduct in research by staff or students
- All members of the University are under a general obligation to preserve and protect the integrity and probity of research
- If there is good reason to suspect any misconduct in research, alleged misconduct should reported in accordance with the terms of this Policy and Procedure. Members of the University and any other person making an allegation should bear in mind that any allegation is serious and could have major implications for the reputation of the Researcher
- The University is committed to ensuring that all allegations of misconduct in academic research are investigated as fully, fairly and expeditiously as possible. In keeping with its Public Interest Disclosure Policy, the University also lays stress on principles of confidentiality, fairness and no-detriment. In particular the University seeks to ensure that anybody making an allegation of misconduct in research, in good faith, suffers no detriment as a result of having made the allegation

3   RESEARCH ETHICS

BU recognises the importance of maintaining public confidence in the ethical quality of research conducted by Researchers of the University. The purpose of ethical approval within BU is threefold:

- It reflects BU's commitment to good ethical practice, as a principle in itself and as a means of maintaining public confidence in the work undertaken by Researchers
- The provisions for ethical approval assists Researchers and Supervisors undertaking research to identify appropriate issues and address these in the development of research proposals
- The approval process itself acts as a safeguard to Researchers and Supervisors who can be confident of the ethical propriety of their project once it has been approved

The Research Ethics Code of Practice ("RECP") is designed to provide guidance about conducting ethical research and to provide details of the University process for ensuring appropriate consideration, approval and documentation by Researchers.

The aims of the RECP are:

- To ensure that all Researchers undertaking research at BU are made aware of the
- University's policies and procedures regarding research ethics
- To ensure that all Researchers undertaking research at BU have a common understanding of their respective roles and responsibilities
- To promote policies and procedures which protect the University's reputation as a research institute
- To outline the requirements and expectations surrounding conducting research in an NHS setting

- All Researchers and Supervisors must read the RECP prior to commencement of research. If further clarification or guidance is needed, members of the Research Ethics Panels ("Ethics Panels") should be consulted. The list of Panel members is available on the Research Ethics Blog
- The University requires that all research (as defined in Section 5 RECP) is subject to appropriate ethical reflection, leading if necessary to formal approval via the online ethics checklist
- Approval must be obtained prior to the commencement of research. 'Approval' includes internal ethical approval as well as external approval where necessary (i.e. external approval from the HRA and/or NHS Research Ethics Committee REC)), Social Care Research Ethics Committee, Ministry of Defence)
- Failure to conduct research in accordance with the RECP may result in the loss of funding support, withdrawal or failure of degree awards, personal disciplinary or legal action taken against the Researcher, Supervisors or the University
- Amendments are changes made to a research project after approval has been issued in accordance with the RECP. Amendments need to be approved before the changes can be implemented and it is the Researcher's responsibility to apply for approval via the online ethics checklist

- Amendments for research projects in receipt of NHS REC approval, also require approval (see HRA guidance).   Informal advice is available from RDS by email to researchethics@bournemouth.ac.uk

4   CONFLICTS OF INTEREST

[Bournemouth University's Conflicts of Interest Policy and Procedures](#) aims to protect the University and members of staff from any appearance of impropriety and to enable the University and members of staff to comply with their legal obligations:

- All those undertaking research must be able to recognise situations and activities that might give rise to a real or potential conflict of interest, or could be perceived by others as a real or potential conflict of interest. Any such conflict, which could affect, or be perceived to affect, an individual's judgement in any aspect of undertaking his/her research, must be disclosed to the University as soon as it is recognised and necessary steps taken to ensure it is recorded, and either avoided or appropriately managed
- A conflict of interest can inappropriately affect research and risk compromising the validity or integrity of the research, the reputation of the researcher, research group(s), department, faculty, institute, research centre and the University. They must be identified, disclosed to the University and addressed to avoid poor research practice or potential misconduct
- Researchers should consider the potential for real or perceived conflicts of interest to arise related to their research not only prior to the start of the research activity but also during the lifetime of the project. Any personal or outside interests or activities relating to a potential funder or sponsor of research (e.g. directorship, shareholding, consultancy, etc.) must be disclosed to the University prior to the application for a research grant or negotiation of a research contract with that funder or sponsor. In accordance with the Conflicts of Interest Policy and Procedures, a researcher's personal or outside interests and activities includes the interests and activities of his or her partner, children and relatives. Some funding bodies and ethics committees may require direct notification of certain interests. Researchers must ensure that they are aware of any such conditions and adhere to the specified requirements
- Disclosures to the University of any actual or potential conflict of interest should be made in accordance with the Conflicts of Interest Policy and Procedure using the on-line form available on the [Human Resources Intramap](#). If a member of staff cannot access the on-line form they should request a paper form from Human Resources. Any paper forms should be returned to the Chief Operating Officer
- The following activities undertaken by employees or third parties associated with the University could create an actual or perceived conflict of interest (the list is not exhaustive and researchers should consider their own circumstances):

  o Use of the University's research or administrative facilities to pursue personal, business, commercial, or consulting activities
  o Any attempt to restrict rights governing the timing and content of publications, except in circumstances properly approved by the University to protect privacy, commercially sensitive proprietary information, and patentable inventions
  o Involvement in externally funded activity which might infringe the right of a student engaged in the activity to complete the degree for which he or she is registered, and/or to publish freely his or her findings (except in the circumstances referred to in sub-paragraph immediately above)
  o A financial interest held by an individual (or by his or her relative(s)) in an external enterprise engaged in activities closely related to that individual's line of research in the University. Examples of such interests are paid consultancies, paid service on board of directs or advisory board, equity holdings in or royalty income from the enterprise. The existence of such an interest does not necessarily imply conflict, but is likely to give an appearance of conflict, and should be declared

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- A personal involvement in any company or commercial enterprise which is in a contractual relationship with the University, or which is in the process of negotiating a contract with the University, where the employee or his or her relative has been concerned or connected with placing or negotiating the contract in question or with the research or other activity which the contract might cover
- Application by relatives or friends for employment in the University or in a related company, where an individual is in a position to influence the appointing process;
- Receipt of gifts or hospitality by an individual (or by his or her relative(s)) from a company or organisation offering goods or services to the University

- Once a disclosure has been made to the University, it will be evaluated in accordance with the Conflicts of Interest Policy and Procedures and a decision made as to whether:

  - The disclosure of the conflict is enough. If additional measures are required to protect the University and the member of staff; or
  - Additional measures may be required to protect the University and the member of staff involved

- If it is decided that additional measures are required, the member of staff involved will be informed of such measures. That member of staff is responsible for carrying out those measures

5 FUNDING FROM EXTERNAL SOURCES

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 legal sources, in accordance with University financial regulations and ethical scrutiny framework. 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:

- It is recognised that there may be circumstances where ethical issues can arise when considering whether or not to apply for or accept funding for research from particular sources
- It is important that the interests of all staff and the interests and the reputation of the University as a whole are safeguarded when seeking and accepting external funding. The Dean or delegated person considers this when reviewing the proposal under the Activity Proposal Form (APF)
- While it is outside the scope of this guidance to provide an exhaustive list of specific examples of what may or may not be acceptable sources of funding, circumstances where the following may occur would cause concern and further advice should be sought from RDS in the first instance for further investigation and recommendation; depending on the circumstances, this may then be referred to the Head of Research Development & Support and/or the Deputy Pro-Vice Chancellor):

  o Where a third party is involved and the original source of the funding is unknown or cannot be identified
  o Where a funding organisation wishes to place inappropriate restrictions on publication and exploitation of research which may lead to substantial ethical difficulties
  o Where 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
  o Where a member of staff may have an interest in a funding organisation;
  o Where accepting funds from one source may compromise the ability of the University to apply for or accept funds from another source
  o Where the practices of a potential sponsor or their motives in commissioning the research may conflict with the mission, aims and objectives of the University
  o Where 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
  o Where the conduct of research may harm or place at undue risk members of the public, participants or staff

- Further advice and guidance on any ethical considerations relating to the application for or acceptance of external funding for research activities should be referred to RDS in the first instance for further investigation and recommendation; depending on the circumstances, this may then be referred to the Head of Research and Knowledge Exchange and/or the Deputy Pro Vice-Chancellor).
- In the case of clinical research, if the event constitutes a breach in the safety of participants or the scientific value of the research, then it shall be recorded and reported as a *serious*

breach to the appropriate bodies. More guidance can be found within the RDS SOP (005, *Deviations, Violations and Serious Breaches*)

The National Institute for Health (NIHR) Portfolio

- Where a research project has received external funding, awarded via open competition, either from the NIHR, other areas of central government, or from one of their '<u>non-commercial partners</u>', the study may be eligible for adoption onto the NIHR Portfolio.
- Studies may have received financial support from multiple funders
  By obtaining portfolio status, the project and researcher gains the support of the NIHR Clinical Research Network, whose main role is to provide infrastructure support for the initiation and delivery of high quality research, which benefits patients and the NHS
- Portfolio-adopted studies are of great benefit to NHS Trusts so it is encouraged wherever feasible for researchers to apply for external funding

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6   COLLABORATIVE WORKING & INTERNATIONAL RESEARCH

Collaborative Working

Researchers should be aware of the standards and procedures for the conduct of research followed by any organisations involved in collaborative research that they are undertaking:

- Ae aware of any contractual requirements involving partner organisations, seeking guidance and assistance where necessary and reporting any concerns or irregularities to the appropriate person(s) as soon as they become aware of them
- Try to anticipate any issues that might arise as a result of working collaboratively and agree jointly in advance how they might be addressed, communicating any decisions to all members of the research team
- Contact RDS (funded research) so that an appropriate agreement can be put in place which clearly outlines the specific roles of the researchers involved in the project and on issues relating to intellectual property, publication, data management and the attribution of authorship:
    - Recognise that, subject to legal and ethical requirements, roles and contributions may change during the time span of the research
- In the case of clinical research, the researcher must involve RDS and discussions must take place as to which organisation should undertake the role of the study 'sponsor', that is to say, the 'individual, company, institution, organisation or group of organisations that takes on responsibility for initiation, management and financing (or arranging the financing) of the research'[1]. In most cases a single sponsor will be named, however it is feasible and accepted to have joint-sponsors, provided all decisions and processes are documented:
    - When the research study involves collaboration with external organisations (e.g. a central laboratory, Clinical Trials Unit etc.), the use of these vendors should be documented, in addition to the activities/duties to be undertaken in the form of a delegation of duties
    - Likewise appropriate agreements should be in place between the parties. All documented processes and decisions are subject to review by regulatory authorities and appropriate governance staff

Research Conducted Outside the UK

- When conducting, or collaborating in, research in other countries, organisations and researchers based in the UK should comply with the legal and ethical requirements existing in the UK and in the countries where the research is conducted. Similarly, organisations and researchers based abroad who participate in UK-hosted research projects should comply with the legal and ethical requirements existing in the UK as well as those of their own country
- Researchers should bear in mind the differences between civil, legal and often the financial positions of national and foreign researchers and participants and must be aware that there may be a number of national laws which can affect the conduct of their research in other countries
- In particular where low and middle income countries are involved specific consideration must be given to the following:

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[1] Health Research Authority. (2018). Roles and responsibilities. [online] Available at: https://www.hra.nhs.uk/planning-and-improving-research/research-planning/roles-and-responsibilities/ [Accessed 29 Aug. 2018].

- o Whether the research could be carried out reasonably well within a high income country
- o That the characteristics and culture of the country do not diminish the researcher's respect for the rights and interests of participants involved
- o The reason for undertaking the study should usually be its relevance to the needs of the community in which it is carried out
- o Ethics review must, where possible take place in the UK and in the host country

For further guidance in this area please see the Wellcome's "Research involving people in low- and middle-income countries.

7   LEADERSHIP & SUPERVISION

BU, through its Code, promotes an environment which fosters and supports research of high ethical standards, mutual co-operation, professionalism and the open and honest exchange of ideas. There are clear procedures to identify and address inappropriate conduct through 6M – Research Misconduct: Policy and Procedure:

- BU encourages career development of their researchers and provides training and mentoring of new and existing researchers supporting the principles of the Concordat to Support the Career Development of Researchers; see Code of Practice for the Recruitment and Career Development of Researchers
- Those involved in the supervision and development of other researchers should be aware of their responsibilities and ensure that they have the necessary training, time and resources to carry out that role, and request support if required
- In the case of research within the NHS, a suitable Chief Investigator should be identified. The Chief Investigator is responsible for the conduct of the whole project (within the UK)
- In the case of student research or research undertaken by Postgraduate Researchers, in accordance with the UK Policy Framework for Health and Social Care Research (November 2017), this should be the supervisor unless the researcher holds a clinical post/contract that ensures they have the appropriate expertise and experience to undertake this role:
    - o Exemption is also made if the researcher is undertaking doctoral-level study in receipt of a fellowship
    - o It is advisable and acceptable to appoint a clinical supervisor within the NHS Trust, especially if the researcher and supervisor do not have appropriate clinical experience
- In undertaking the role of Chief Investigator, individuals will be required to sign a declaration form which outlines the duties expected of them. Individuals will likewise be expected to undertake Good Clinical Practice training in line with BU's statement on GCP training

Research Degree Student Supervision

- The above principles should also apply to the supervision of Postgraduate Researchers (PGRs). Academic members of staff who will undertake doctoral supervision must be clear about their roles and responsibilities which are set out in 8A Code of Practice for Research Degrees. In particular, as Doctoral Supervisors, they must ensure their PGR(s) adheres to all BU's policies, procedures and regulations including but not limited to, research ethics, health and safety, academic misconduct, copyright, research data management, data protection and intellectual property rights
- All PGRs and Doctoral Supervisors are required to familiarise themselves with the RECP and review ethical considerations at the outset of the research. To apply for ethics approval, PGRs are required to submit an ethics checklist via the Online Ethics Checklist
- Before agreeing to supervise a student, Supervisors should satisfy themselves that:
    - o They have the necessary knowledge and expertise to supervise the project which the student wishes to undertake
    - o The project is appropriate for the degree concerned
    - o The project can reasonably be undertaken with the resources available and in the required timescale

- - They are confident, as far as is possible, that the student has the capacity to undertake the project successfully
- In the case of research within the NHS, it is advisable and acceptable to appoint a clinical supervisor within the NHS Trust, in order to ensure that the student/PGR has the necessary oversight when dealing with patients and their data
- Supervisors are expected to engage in development opportunities and to meet requirements for continuing professional development. The Doctoral College provides Supervisory training and development opportunities (see 8A Code of Practice for Research Degrees section 3.2.3)
- Both the supervisor and the department have a number of specific responsibilities in regard to research students. These and other information can be found in 8A Code of Practice for Research Degrees developed by the Doctoral College

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8   TRAINING

The University offers a wide range of training for researchers to enable them to carry out their duties and to develop their knowledge and skills throughout their career, repeating training where necessary to ensure that skills are kept up-to-date. Researchers should identify needs for training when they arise and report them to their manager or other appropriate person as identified by their department:

- Organisational Development is the staff training unit for the University and they offer a range of opportunities for staff and bespoke opportunities for Faculty/Departments
- The Research and Knowledge Exchange (RKE) Development Framework offers a range of opportunities for Researchers at all career stages to develop the necessary skills, knowledge and capabilities in relation to research and knowledge exchange. The Framework is agile and flexible and provides a number of Pathways, which are grouped around key topic areas with sessions delivered by BU staff with expertise in the topic, external facilitators, or via online materials that can be access at any time. Booking and further information can be found at www.bournemouth.ac.uk/rke-development-framework
- Students (UG/PGT) should consult their student Handbook for information on what training is available (available via Brightspace)
- The Doctoral College offers PGRs over 150 workshops, online modules, online resources and interactive webinar series specifically for their professional, personal and research development. For full programme details, please visit Brightspace
- Researchers undertaking studies within a healthcare setting are expected to undertake and maintain Good Clinical Practice (GCP) accreditation (two-yearly) in line with the BU's statement on GCP training. GCP courses are available online and face-to-face sessions run locally and throughout England. Training may be booked and/or identified via RDS (email researchethics@bournemouth.ac.uk) or through the NIHR Learn website.

9   RESEARCH DESIGN

A design is used to structure the research, to show how all of the major parts of the research project, the samples or groups, measures, treatments or programs, and methods of assignment, work together to try to address the central research questions:

- Obtaining advice on research design is important for anyone wanting to apply for funding, as funding streams have particular requirements and it is both efficient and helpful to find out about these from experienced researchers. For specific advice on research design when applying for funding, researchers should contact:

  - [RDS](#) – the Research Facilitators will be able to offer Faculty/Department specific advice
  - Experienced researchers in the Faculty, to include Deputy Deans for Research & Professional practice and Professors
  - [RDS](#) – for specific advice on research involving the NHS

- The process of research design will examine all the potential risks, ethical issues, peer review requirements and hurdles Researchers will need to overcome to get the research project from the planning stage to the implementation stage and beyond. Good project management is the key to success and the process should map out deadlines for completion of key stages

- When designing research projects, researchers should ensure that:

  - The proposed research addresses pertinent question(s) and is designed either to add to existing knowledge about the subject in question or to develop methods for research into it
  - The design of the study is appropriate for the question(s) being asked and addresses the most important potential sources of bias
  - The design and conduct of the study, including how data will be gathered, analysed and managed, are set out in detail in a pre-specified research plan or protocol
  - All necessary skills and experience will be available to carry out the proposed research, in the proposed research team or through collaboration with specialists in relevant fields
  - Sufficient resources will be available to carry out the proposed research and that these resources will meet the relevant standards
  - The appropriate participants can be identified and recruited so as to protect their rights, safety and wellbeing
  - Any issues relating to the above are resolved as far as possible prior to the start of the research

- A [risk assessment](#) of the planned study to determine the potential for risks to the University, the research or the health, safety or well-being of researcher or research participants should be undertaken

- Where the design has been approved by an appropriate ethics panel, regulatory or by peer review, Researchers should ensure that any subsequent alterations to the design are subject to appropriate review to determine that they will not compromise the integrity of the research or any terms of approval previously given

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10 HEALTH & SAFETY

Health and safety legislation applies just as much to research work as it does to any other activity carried out within the University. BU recognises its duties towards employees and others associated with research activities carried out at the University, or under the control of University personnel:

- It is BU's policy to comply with the various regulations that apply to research activities by ensuring that supervisors, researchers, line managers and appraisers are aware of responsibilities that have been delegated to them, and by providing access to an appropriate level of support
- All research undertaken must fulfil the requirements of health and safety legislation and good practice. Researchers will face a range of potential risks to their safety when conducting certain types of research, for example, social research in a conflict zone. Appropriate and thorough risk assessment must be undertaken when research is to be conducted in potentially hazardous conditions, involves potentially harmful material (whether harmful physically or psychologically) or might cause harm to the environment. Such issues need to be considered in the design and conduct of research and appropriate steps put in place and procedures adopted to remove, reduce or manage the risks effectively
- Further information can be found in the University's [Health & Safety in Research Work](#) policy, which outlines the responsibilities of BU and Faculties, supervisors/ line managers and researchers in regards to health and safety. Additionally, please consult BU's [Health, Safety & Wellbeing](#) section on the Intranet. This contains useful information on all aspects of Health & Safety, including all BU's policies and procedures. This includes the Health & Safety Policy Statement, Organisational Section and Arrangements Section, which set out who is responsible for specific actions within BU as well as containing specific details of what BU does in practice to achieve the aims set out in the Health & Safety Policy Statement.

Protection of Researcher and Research Team

- Some researchers will face a range of potential risks to their safety and the safety of their research team when conducting certain types of research; for example, a researcher may be required to enter potentially dangerous environments to question certain participants or lone working. Such issues need to be considered in the design and conduct of research and procedures must be adopted to minimise any risk to researchers. In addition, researchers must consult all appropriate Health and Safety guidelines and procedures relevant to their area of research before commencing work
- In the case of clinical research it is vital that there are measures in place to protect the researcher themselves. This in turn allows them to offer their full support to participants. Any lone working to be done in visiting participants' homes should be considered in line with the NHS Trust's lone worker policy, and researcher safety. (The relevant Trust's Research & Development Office can signpost to appropriate guidance)
- Where applicable, the vulnerability of those participating should likewise be assessed. Consideration should be given to whether the researcher has the appropriate experience and support mechanisms in place to allow them to fully support the participant, given this vulnerability. Indeed, all participants should be supported in contributing to BU-lead research, in line with GCP standards

Fieldwork

- Fieldwork is defined as any practical work carried out by University staff or students for the purpose of teaching and/or research in places which are not under University control, but where BU is responsible for the safety of its staff and/or students and others exposed to their activities
- Fieldwork is controlled through the risk assessment process, with the activity/s being fully assessed prior to taking place to ensure that any residual risks are adequately controlled by the implementation of suitable and sufficient control measures, safe systems of work.
- Although in no means exhaustive, some of the specific considerations as part of the Fieldwork risk assessment should include:

  - Environmental Conditions
  - Supervision and Training
  - Lone Working
  - Transportation (Land, Air and Water)
  - Work Equipment
  - Protective Gear and Clothing
  - Dangerous and Hazardous Substances
  - Excavations and Confined Spaces
  - Security and Personal Protection
  - Catering, food and drink provision
  - Breaks and Leisure Time
  - Behaviour
  - Health Issues, Accidents, First Aid and Emergency Procedures
  - Persons with Disabilities, health conditions or support needs
  - Health Screening
  - Immunisation

- The UCEA's (Universities and Colleges Employers Association) 'Guidance on Health and Safety in Fieldwork' publication, provides in-depth specific guidance on planning, risk assessing and carrying out fieldwork activities and should be viewed in association with the BU Risk Assessment policy and procedures.

Risk Assessment

- Risk Assessment is a cornerstone of health and safety in the workplace and requires an organisation to consider any activity where there is inherent risk, to assess it, and then implement suitable and sufficient control measures. It's a requirement of law, and individuals as well as organisations can be prosecuted where they have failed to meet the duties placed upon them for carrying out, completing, or failing to implement suitable and sufficient control measures identified within risk assessments
- A risk assessment is simply a careful examination of what, as part of our work, could cause harm to individuals, so that we are able to weigh up whether we have taken enough precautions or should do more to prevent harm
- The Management of Health and Safety at Work Regulations (2006 Amendment & 1999), places the duty on BU to make a suitable and sufficient assessment of the risks to the health and safety at work of staff, students and others who may be affected by our operations. It does not expect us to eliminate all risk, but requires us to protect people as far as is reasonably practicable

- Risk assessments MUST be recorded in writing and relevant persons need to be notified of the significant findings and related control measures
- The five basic steps to completing a risk assessment are:

  - **Identify** the hazards *(i.e. a hazard is something that has the potential to cause harm)*
  - Decide **who** might be harmed and how *(i.e. staff, students, visitors, contractors)*
  - **Evaluate** the risks and **decide upon precautions** *(i.e. high, medium or low - what can be done to make the task, event, activity safer)*
  - **Record** findings and **implement** them *(share the risk assessment with those involved)*
  - **Review** the risk assessment and update if necessary *(review based on experience, incidents, changes in processes or locations.)*

- A complete Risk Assessment resource is available via the Health, Safety & Wellbeing pages of the Intranet. This includes policies, procedures, forms and guidance
- BU also run monthly 2 hour 'Introduction to Risk Assessment' Training sessions, which give an overview of the BU risk assessment process, for all academics or any individual involved with organising and running events/activities, or anyone responsible for staff, students and others.
- Below is a list of associated documents for further review:

  - Risk Assessment Policy
  - Online Risk Assessment Checklist
  - Lone working & Personal Safety

Working Overseas

- Many staff travel overseas on a wide range of University business, and specific procedures apply when arranging and undertaking such activities to ensure that due care has been exercised in assessing and minimising the risk attached to such activities
- All staff travelling overseas on University business must complete a risk assessment (as part of the travel arrangement process), which must be submitted to the appropriate Line Management alongside the Overseas Travel Approval Form
- If researchers have any safety concerns about the country or region they are planning to visit, the researcher should consult the UK Government Foreign Office website. The site provides up to date information on areas of political unrest or terrorism
- The Working Overseas resource section of the Health, Safety & Wellbeing Intranet pages, provides lots of useful information including policies, procedures and check lists
- The UCEA (Universities and Colleges Employers Association) 'Health and Safety Guidelines for Working Overseas' publication, provides in-depth specific guidance on planning, risk assessing and working overseas and should be viewed in association with the BU Risk Assessment policy and procedures.

11   PUBLICATION, AUTHORSHIP & OPEN ACCESS

- Authors must comply with the [Publications Policy and Procedures](#) ensuring their outputs are managed in a way that ensures they provide maximum value both to themselves, the academic community they represent and collectively to the University. In particular authors should:
    - Accurately record outputs as being produced by Bournemouth University staff maximising the impact of University publications in bibliometric analyses
    - Ensure all peer-reviewed research outputs are made open access maximising their impact by making them as widely available as possible
    - With regard to clinical studies data, the researcher must ensure that the results and findings are made available to the study participants, and in an accessible format
- Any person, including research students, research assistants, research officers, technical officers and other support staff, who has participated in a substantial way in conceiving, executing or interpreting the relevant research must be given the opportunity to be included as an author of a publication derived from that research
- In addition to meeting the above requirements regarding publication, an author must ensure that the work of any relevant person is recognized and appropriately acknowledged in all publications derived from research to which they have made a contribution
- Any person who has not participated in a substantial way in conceiving, executing or interpreting the relevant research must not to be included as an author of the publication derived from that research
- A publication which is substantially similar to other publications derived from the same research must contain appropriate reference to the other publications
- A researcher who submits substantially similar work to more than one publisher should disclose that fact to the publishers at the time of submission
- Publication and dissemination of work electronically or on the web should be treated with the same degree of integrity as every other form of publication
- With clinical studies that fall into one of the below categories, the study must be registered on a publically accessible database, before the first participant is recruited, but no later than 6 weeks after the recruitment of the first participant:

    - Clinical trial of an investigational medicinal product
    - Clinical investigation or other study of a medical device
    - Combined trial of an investigational medicinal product and an investigational medical device
    - Other clinical trial to study a novel intervention or randomised clinical trial to compare interventions in clinical practice
- Clinical researchers are advised to register their study on the ClinicalTrials.gov website or ISRCTN registry regardless of whether their study fits within the above categories, or not. Researchers are likewise obligated to make negative and inconclusive results available, as well as the positive.

Further Information

[Committee on Publication Ethics (COPE) Code of Conduct](#)

[Committee on Publication Ethics (COPE)-how to handle authorship disputes: a guide for new](#)

[researchers](#)

[UKRIO Information Note: Guidance for researchers on retractions in academic journals](#)

Code of Good Research Practice
January 2019

12   RESEARCH DATA MANAGEMENT

Research Data Management Principles

The following guiding principles, which are aligned with the agreed UKRI principles on sharing of research data, should inform all decisions relating to the management of research data that has arisen as a result of public funding:

- Research data are a public good, produced in the public interest and should be made freely and openly available with as few restrictions as possible in a timely and responsible manner
- It is recognised that there are legal, ethical and commercial constraints on release of research data. To ensure that the research process (including the collaborative research process) is not damaged by inappropriate release of data, research organisation policies and practices should ensure that these constraints are considered at all stages in the research process
- Sharing research data is an important contributor to the impact of publicly funded research. To recognise the intellectual contributions of researchers who generate, preserve and share key research datasets, all users of research data should acknowledge the sources of their data and abide by the terms and conditions under which they are accessed
- Researchers should be entitled to a limited period of privileged access to the data they collect to allow them to work on and publish their results. The length of this period will depend on the scientific discipline and the nature of the research
- Institutional and project specific data management policies and plans should be in accordance with relevant standards and community best practice and should exist for all data. Data with acknowledged long term value should be preserved and remain accessible and usable for future research
- Sufficient metadata should be recorded and made openly available to enable other researchers to understand the potential for further research and re-use of the data. Published results should always include information on how to access the supporting data;
- It is appropriate to use public funds to support the preservation and management of publicly-funded research data. To maximise the scientific benefit which can be gained from limited budgets, the mechanisms for managing and providing access to research data should be both efficient and cost-effective in the use of such funds
- Final archived data may be stored on BORDaR, Bournemouth University Online Research Data Repository. Further guidance on Research Data Management at Bournemouth University can be found on the BU Library Research Data Management page

Research Data Management Policy

- As a leading research institution BU places high value on the research carried out under its aegis, whether this is produced alone or in collaboration with others
- The University recognises that the different types of output resulting from research are key assets and should be managed in a way that brings most benefit to the individual researcher and the University. Research data in its various forms is one such output.
- There are a number of obligations on both individual researchers and the University regarding research data, for example legal requirements such as the Data Protection and Freedom of Information Acts, the need for confidentiality for ethical or commercial reasons, and the view increasingly adopted by funders that the outputs of publicly-funded research

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should be openly accessible wherever possible. In the case of clinical studies, the data produced may then have implications in terms of intellectual property rights and likewise, the data rights of NHS participants should be considered. If it is likely that the output/end product of a clinical research project will have IP considerations, BU Legal Services should be contacted

- There is also a need for research data to be accessible for an appropriate period of time in a form that enables validation of research findings. With regard to clinical study results, there is an obligation for researchers to make these available, and in an accessible format.
- It is therefore necessary that the University is aware of research data produced or reused by BU researchers and that this data is appropriately managed and protected with respect to data subject rights
- This Policy is to ensure that data produced or otherwise used through the University's research activities is registered, stored, made accessible for use and reuse as appropriate, managed/curated over time and/or disposed of, according to legal, ethical, funder requirements and good practice. Clinical studies data should be archived in accordance with Good Clinical Practice guidelines, retention periods may vary dependent on the type of research project
- This policy, and services developed in association with it, will support both the University itself, and Researchers who are responsible for creating and using data, in fulfilling their various accountabilities and obligations regarding this data and in gaining best value from it

Policy Statements:

1. BU is committed to ensuring that the research conducted by its staff and students maintains the highest possible standards of integrity.
2. BU research data will be managed in accordance with the University's policies, guidelines and standards, and funder, legislative and ethical requirements.
3. Exclusive rights to host, reuse or publish research data should not be given to other bodies without retaining the rights to make the data openly available for reuse, unless this is a condition of funding.
4. Those responsible for research staff and students should ensure that researchers in their areas are aware of the University's policy regarding research data and its associated guidelines and procedures.
5. Principal Investigators or those in equivalent roles have lead responsibility for ensuring that research data management requirements are observed during a research project or programme.
6. All researchers are expected to familiarise themselves with, and act in accordance with, this and other BU policies relating to research practice. In conducting clinical research, all researchers and members of the research team are expected to undertake Good Clinical Practice training, and to adhere to the guidelines.
7. When planning research activity where research data may be created or reused, researchers must prepare and maintain data management plans that at a minimum meet BU standards, or more rigorous standards as appropriate where required by external bodies.
8. All BU research data must be registered with the University whether it is hosted by the University or elsewhere.
9. Data must be retained intact in an appropriate format and storage facility, normally for a period of 5 years from the date of any publication which is based upon it. Where specific regulations with regard to data retention apply, e.g., from funders, Good Clinical Practice guidelines, these regulations should prevail, particularly where the required retention period is longer than the University requires.

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10. Data deemed to be of interest to future research, including data that substantiate research findings, will normally be offered for deposit in an appropriate external data service or repository and/or BU's repository.
11. Data should be made available for access and re-use under the appropriate conditions.
12. Where research data is not retained it should be disposed of according to University guidelines. Clinical studies data should be disposed of according to Good Clinical Practice guidelines.
13. The University will provide means and services enabling registration, deposit, storage, retention of and access to research data.
14. The University will provide advice, training and support regarding research data management.
15. The University will work with relevant discipline-based data repositories in order to promote relevant archiving standards, data accessibility and long-term curation.

In adopting this Policy the University intends that an evolutionary approach will be taken to implementing it over a number of years:

• The scope of the Research Data Management Policy extends only to research-related data. Any other data held by the University whether on a University system or in manual form is covered by the Data Quality Policy

13 PUBLIC ENGAGEMENT

Engaging the public with research can take many forms, and the following describes some of the most common. For more information, please refer to the [National Co-ordinating Centre for Public Engagement](#):

- Communicating research activity and outcomes. The goal is to find effective ways of informing the public about their research in order to increase its accessibility. This can involve a range of methods to inspire and involve different audiences
- Listening to public views and concerns. The goal is to make sure that Researchers consider the public's view and concerns about your research, and the perceived social and ethical issues that relate to it. It's also an opportunity to hear fresh perspectives and insights with can fundamentally challenge and help to develop their own thinking and lines of enquiry. Some external funders for clinical research will expect to see evidence of patient and public involvement in the design of the study
- Involving the public as researchers. The goal is to encourage public participation in their research by involving people as researchers for your project
- Developing collaborative research and co-inquiry projects. The goal is to develop genuine collaboration, where the research questions are developed and explored in partnership with the public
- The [Concordat for Engaging the Public with Research](#) (signatories include RCUK, HEFCE, British Academy, Royal Society, etc.) clearly emphasises the importance of public engagement to help maximise the social and economic impact of UK research. The Concordat provides guidance for those research organisations, researcher managers and researchers who receive our funding to foster public engagement and meet these expectations and responsibilities through four principles:

  1. UK research organisations have a strategic commitment to public engagement.
  2. Researchers are recognised and valued for their involvement with public engagement activities.
  3. Researchers are enabled to participate in public engagement activities through appropriate training, support and opportunities.
  4. The signatories and supporters or this Concordat will undertake regular reviews of their and the wider research sector's progress in fostering public engagement across the UK.

- BU proactively supports staff and students to develop public engagement activities and is a signatory of the [National Co-ordinating Centre for Public Engagement's (NCCPE) Manifesto for public engagement](#). Opportunities for public engagement at BU include the Festival of Learning ([2018 Programme](#)), [Café Scientifique](#) series and a range of other initiatives supported by RDS
- Projects that fall under the auspice of Public Engagement may require ethics approval. For the purposes of best practice, or where there is any doubt as to whether ethics approval should be sought, it is recommended that BU's standard ethics procedures are followed. This is especially pertinent for projects where any data of any type is collected, which researchers may wish to re-use or represent in another format at a later date. Consult with a member of an Ethics Panel or supervisor prior to commencement of the project to

determine if ethics approval is required. Further guidance can be found on the National Co-ordinating Centre for Public Engagement website regarding ethics in [Participatory Research](#)

14 RESEARCH IMPACT

Developing research impact is becoming an increasingly important part of academic life, largely underpinned by changes in the external environment.   Demonstrating the potential impact often forms part of grant applications, while impact case studies are a significant part of the University's Research Excellence Framework (REF) submission. For Researchers, developing impact and seeing their research make a difference to society can be extremely rewarding:

- RDS has created an online toolkit (only available to BU staff) designed to help support Researchers in the development of their research impact. The toolkit explores what impact is and how Researchers can go about creating an impact strategy.

Staff Advice

- For advice on how Researchers might be able to develop an impact case study or demonstrate/ evidence the impact of their research, please contact an appropriate Impact Officer:

  - Faculty of Management – *Matt Fancy* (email: mfancy@bournemouth.ac.uk)
  - Faculty of Health & Social Sciences – *Amanda Lazar* (email: alazar@bournemouth.ac.uk)
  - Faculty of Science & Technology – *Amanda Edwards* (email aedwards@bournemouth.ac.uk)
  - Faculty of Media & Communication – *Brian McNulty* (bmcnulty@bournemouth.ac.uk)

Student Advice (UG/PGT/PGR)

- Students should discuss potential impact with their Supervisor(s) in the first instance

Training Opportunities (Staff)

- Training is available through the RKE Development Framework '*Impact and Communicating your Research*' – see Staff Intranet and/or Brightspace for further details

15 UKRIO RESEARCHER CHECKLIST

Recommended checklist for researchers

The Checklist lists the key points of good practice in research for a research project and is applicable to all subject areas. More detailed guidance can be found in section 3. A PDF version is available from www.ukrio.org

Before conducting your research, and bearing in mind that, subject to legal and ethical requirements, roles and contributions may change during the time span of the research:

1 Does the proposed research address pertinent question(s) and is it designed either to add to existing knowledge about the subject in question or to develop methods for research into it?

2 Is your research design appropriate for the question(s) being asked?

3 Will you have access to all necessary skills and resources to conduct the research?

4 Have you conducted a risk assessment to determine:

   a whether there are any ethical issues and whether ethics review is required;

   b the potential for risks to the organisation, the research, or the health, safety and well-being of researchers and research participants; and

   c what legal requirements govern the research?

5 Will your research comply with all legal and ethical requirements and other applicable guidelines, including those from other organisations and/or countries if relevant?

6 Will your research comply with all requirements of legislation and good practice relating to health and safety?

7 Has your research undergone any necessary ethics review (see 4(a) above), especially if it involves animals, human participants, human material or personal data?

8 Will your research comply with any monitoring and audit requirements?

9 Are you in compliance with any contracts and financial guidelines relating to the project?

10 Have you reached an agreement relating to intellectual property, publication and authorship?

11 Have you reached an agreement relating to collaborative working, if applicable?

12 Have you agreed the roles of researchers and responsibilities for management and supervision?

13 Have all conflicts of interest relating to your research been identified, declared and addressed?

14 Are you aware of the guidance from all applicable organisations on misconduct in research?

When conducting your research:

1 Are you following the agreed research design for the project?

2 Have any changes to the agreed research design been reviewed and approved if applicable?

3 Are you following best practice for the collection, storage and management of data?

4 Are agreed roles and responsibilities for management and supervision being fulfilled?

5 Is your research complying with any monitoring and audit requirements?

When finishing your research:

1 Will your research and its findings be reported accurately, honestly and within a reasonable time frame?

2 Will all contributions to the research be acknowledged?

3 Are agreements relating to intellectual property, publication and authorship being complied with?

4 Will research data be retained in a secure and accessible form and for the required duration?

5 Will your research comply with all legal, ethical and contractual requirements?

A pdf version can be downloaded from the UKRIO website