

Annual statement on research integrity

Section 1: Key contact information

Question	Response
1A. Name of organisation	Northumbria University
1B. Type of organisation:	Higher education
1C. Date statement approved by governing body	20/04/2026
1D. Web address of organisation's research integrity page	https://www.northumbria.ac.uk/research/ethics-/integrity-and-trusted-research/
1E. Named senior member of staff to oversee research integrity	Name: Professor Louise Bracken Pro Vice-Chancellor, Research and Knowledge Exchange.
	Email address: louise.bracken@northumbria.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: Ellen Cole <i>Research Environment & Integrity Manager</i>
	Email address: ellen.s.cole@northumbria.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

Please describe how the organisation maintains high standards of research integrity and promotes positive research culture. It should include information on the support provided to researchers to understand standards, values and behaviours, such as training, support and guidance for researchers at different career stages/ disciplines. You may find it helpful to consider the following broad headings: Policies and systems; Communications and engagement; Culture, development and leadership; and Monitoring and reporting.

2A.1 Introduction

Northumbria University recognises that the pursuit of high-quality research requires the highest standards of research integrity and ethics and the fulfilment of our responsibilities to researchers, participants in research, research users and the wider community. Therefore, the University supports, and is committed to upholding, the principles set out in the 2025 Concordat to Support Research Integrity: honesty, rigour, transparency and open communication, care and respect, and accountability. These principles underpin all aspects of our research activity, from the design and conduct of research to dissemination. Our policies, systems, training and governance structures described in this statement are designed to embed these principles across the University's research environment and to support all members of the research community to uphold them.

An integral part of that obligation is the presentation of an annual statement on research integrity to the Board of Governors for their review and approval. Compiling the annual

statement offers a framework to evaluate our progress against the Concordat's commitments, and to raise the visibility of our commitment to research integrity.

This is the 12th annual statement published by Northumbria University and covers the academic year 1 September 2024, to 31 August 2025. Annual statements are published on the University's [Research Ethics, Integrity and Trusted Research webpages](#) for visibility, accountability, and assurance on activities taken to support research integrity; and in compliance with the requirements of the Concordat.

2A.2 Institutional Leadership and Strategy

The Pro Vice-Chancellor for Research and Knowledge Exchange (PVC R&KE) has formal responsibility for research integrity and ethics at Northumbria. The PVC R&KE is the primary contact for anyone with concerns regarding research integrity and research misconduct at the University, with their contact details provided on [public-facing webpages](#).

The PVC R&KE chairs, and is supported by, the University Research Ethics Committee (REC). The REC is responsible for policies, processes, training and monitoring associated with research ethics and academic misconduct in research at a University-level. In addition, each Faculty has a Faculty Research Ethics Committee (FREC) that ensures agreed policies and procedures are operationalised and socialised effectively within the context of each Faculty and disciplinary norms.

Within faculties, throughout 2024/5 responsibilities for research ethics and integrity were held by Faculty Research Ethics Directors and Departmental Ethics Leads. They were supported by a College of Ethics Reviewers, a cohort of trained academic colleagues who are workloaded for undertaking the ethics review process in recognition of this essential task. In addition, colleagues in our central professional services teams are crucial to developing and implementing our ethics and integrity policies and procedures, including the University Risk Manager, Insurance Manager, Health & Safety team, and Records & Information Manager, who all contribute to our REC and FRECs.

The Research Ethics & Integrity team in Research & Innovation Services (RIS) support, enable and champion the research ethics and integrity agenda across the University. During an internal restructure of RIS in 2025, it became part of the expert services offered by the Research Quality & Compliance team alongside Research Due Diligence, Research Information & Systems, and Research Quality and Assessment. Bringing these areas of activity together ensures the team works in close partnership with colleagues on delivering a research environment that supports our ambitions for growth of quality research.

The Research Ethics & Integrity team currently comprises two coordinators, and a Research Environment & Integrity Manager, a new role introduced in April 2025. The postholder leads on ensuring rigorous research policy, processes and systems are in place to develop a culture and environment of research integrity and compliance with external frameworks. The Research Environment & Integrity Manager is secretary to REC and all FRECs.

2A.3 Policies and Systems

2A.3.1 Research Ethics Policy

Our [Ethical Governance in Research Policy](#) sets out how we seek to uphold the principles of research integrity in all research carried out under the auspices of the University. This includes

staff, students, visiting or emeritus staff, associates, honorary contract holders, contractors and consultants.

The policy communicates the ethical responsibilities of those undertaking research, and provides a framework for the conduct of research activity. This includes our requirements for ethical review, including our ethical review categories [see 3.2.2], and recommended best practices for ethical conduct in research. The policy is aligned with external regulatory frameworks (for example the Health Research Authority, the Human Tissue Act, and data protection law), the principles of the Concordat to Support Research Integrity, and funder requirements (e.g., ESRC ethics framework). The policy undergoes annual review, and is updated according to changes in internal or external policy, with the most recent updates in including guidance on Due Diligence and Research with Third Parties, Research with Defence or Security Applications, and additional guidance on how to undertake research on extreme political views and which might be security sensitive.

2A.3.2 Research Ethics System

Our ethical review process is facilitated by Infonetica's Ethics RM platform. All actions take place within the system, making it an efficient process for both applicants and reviewers, and enabling transparency, accountability, and reporting at each stage of the process. The system is central to our ethics processes, enabling us to deliver robust ethical review and research governance checks to deliver our Ethical Governance in Research policy.

One of the two coordinators in the Research Ethics & Integrity team leads on the maintenance and development of the research ethics system, and associated forms and processes.

2A.4 Research Ethics Review Process

2A.4.1 Applications

In 2023/4 all applications were made to our Main Ethics Application Form, designed and managed by the Research Ethics & Integrity team. This is a smart form that uses conditional logic to direct applicants to questions relevant to their research based upon the information they input. This form also assesses the level of risk associated with the application based upon the review categories [see 3.3.2] selected by the user, thus identifying whether it will be routed for proportionate or full review. Applicants are supported by prompts and guidance embedded throughout the system.

2A.4.2 Review Categories

Northumbria has a tiered ethical review approach in line with UK Research Integrity Office (UKRIO) guidance. Our Ethical Governance in Research Policy sets out ethical review activities aligned to either proportionate or full review categories depending on the level of complexity or risk associated with it [Table 1].

In 2023/4 we expanded the list of specified research activities to include "The development or application of machine learning and/or artificial intelligence", which will require full review unless the use is limited to off-the-shelf products used to support analysis and writing.

Review Category	Research Activity
	<i>Researchers, both students and staff, should reflect upon their individual project, and the potential risks to both themselves, participants, or the environment. These should be acknowledged and assessed as part of their application, and in any project proposal.</i>

<p>Full Review (Two lead reviewers and moderation by chair)</p>	<ol style="list-style-type: none"> 1. Discussion (e.g. interviews) of highly sensitive topics that may cause undue stress to participants, and researchers, including, but not exclusively: sexual behaviour, drug use; abuse or exploitation; trauma; pornography. 2. Funding from a source that may be controversial (e.g. due to the nature of the funder, or a conflict of interest). 3. Covert methods of investigation or deception. 4. Research with international partners, or research undertaken outside of the UK where there may be issues of local practice and political sensitivities. (In these instances, it will be necessary to act in accordance with the legal and ethics review requirements in the countries included in the research and demonstrate awareness of these.) 5. Access to records of personal or sensitive confidential information, including genetic or other biological information concerning identifiable individuals. 6. Intrusive interventions including the use of drugs or other substances (e.g. food, drink, placebos or drugs); and, or, procedures involving physical distress (e.g. prolonged testing) or emotional distress (e.g. stress or anxiety), that are greater than those you would encounter in everyday life. 7. Work that involves direct observation of, or participation in, activities during which it is anticipated that illegal activity, or regulatory breach is likely to occur (e.g. hunting, drug dealing, accessing the dark web, hacking). 8. Access to or collection of data, information, materials (e.g. magazines, publications, websites, and social media) relating to extremism, radicalisation or terrorism (including extreme or terror groups). 9. Funding/ sponsorship from, or the involvement of, the UK Ministry of Defence, Military (UK and International), and or, EU Security funding call. 10. The collection of data/information that might be confidential or classified (e.g. protected by the Official Secrets Act). 11. Direct testing on animals or materials derived from animals (which may require additional licencing). 12. The funding body e.g. ESRC funded projects require REC review. 13. Research with potentially vulnerable participants or groups, including people under 18 (which may require DBS clearance). 14. The collection of bodily tissue e.g. blood, saliva, urine samples from living persons (which may require licence under the HTA and additional training). 15. The development or application of machine learning and/or artificial intelligence (excluding the use of off-the-shelf AI solutions like Co-Pilot and ChatGPT to support analysis, writing, etc.)
<p>Proportionate Review (One reviewer)</p>	<ol style="list-style-type: none"> 1. Gathering data or information from human participants (e.g. via questionnaire / interview/survey/experiment/ VR). 2. Collecting personal data, i.e. name, email, home address, computer IP address, phone number etc. 3. Analysis of secondary data not in the public domain (e.g. archive material that require organisational membership). 4. The collection or use of information which is 'commercially sensitive'. 5. Financial inducements other than expenses and compensation for time. 6. Gathering data/information at a physical location external to Northumbria University campuses, franchised locations, and not your normal place of work.

	<ol style="list-style-type: none"> 7. Collection of samples such as plants, soils etc, that might disturb the environment or archaeological remains. 8. Individuals or groups where permission of a gatekeeper is normally required for initial or continued access to participants (e.g. NGOs, community leaders).
Research not normally requiring ethics review	<ol style="list-style-type: none"> 1. Secondary data that is in the public domain (e.g. financial databases). 2. Systematic Reviews. 3. Meta-analyses of secondary data. 4. Black Letter Law.
Research requiring external review (e.g. HRA, NHS, MOD, HMPPS)	<ol style="list-style-type: none"> 1. Research with those who might lack capacity to consent, for example, a learning disability, dementia, or cognitive impairment. 2. The use of ionising radiation. 3. Recruitment or collection of data from patients, via the NHS, and some social care settings (e.g., home, or residential care). 4. The collection of bodily tissue from deceased persons. 5. A health-related study or clinical trial of an investigational medicinal product or a medical device. 6. The prison service, offenders or participants on probation.

Table 1: Research activities and ethical review categories

2A.4.3 Triage & governance checks

Each application is triaged by the Research Ethics & Integrity Team, to confirm the form is complete and that the research activities selected are accurate, to ensure the application is allocated for the appropriate level of review.

The triage process also includes governance checks. This can involve Disclosure and Barring Service certification, data protection impact assessments, legal reviews, trusted research and export controls, health and safety, and insurance. The team liaises with colleagues in the relevant areas of the University to perform these checks and ensure appropriate safeguards are in place for the research project. Once complete, the application is allocated to reviewers.

2A.4.4 College of reviewers

Our College of Reviewers was established in 2022, providing a cohort of trained, expert and supported colleagues to consistently deliver high-quality ethics reviews. The College is an agile group, with colleagues transitioning in and out depending on other demands on their time and the volume and nature of applications received in their local area. The College of Reviewers comprised 130 colleagues in 2023/4.

REC approved a workload of between 10-30 applications per reviewer annually, mindful that the number and complexity of reviews will differ depending on the subject matter and methodology. The Research Ethics & Integrity team maintain a database of reviewers, including information about preferred subjects and methodologies. REC, and the Research Ethics & Integrity Team, regularly review the training needs of the college of reviewers and have developed a role description with agreed review expectations (e.g. timescales for review, constructive tone of review, routes to escalate any issues).

2A.4.5 Communications and engagement

One of our two Research Ethics & Integrity coordinators leads on the development and delivery of a programme of researcher development activity to support research integrity. This includes our mandatory research ethics training courses, both online and in person, development

activities for our College of Reviewers, and the maintenance of guidance materials published online.

The College of Ethics Reviewers is a key cohort of colleagues who promote a culture of research integrity across the University. The Research Ethics and Integrity team work proactively with Faculty colleagues to identify skills and knowledge gaps, and deliver additional training which includes disciplinary training, system training and best practice in ethics review. A suite of online training, including user videos and handbooks has also been developed. These training materials are continually refreshed.

Online content plays an important role in staff and students' engagement in our service. We maintain a presence both on the Intranet and public University website, regularly updating content in response to user feedback and developments in research ethics practices and processes. This includes information about our systems, review processes, ethical research practices and signposting to related teams and sources of information. This enables staff and students to self-serve essential information on demand, and contact the Research Ethics and Integrity team for more in-depth information, advice and guidance as required.

2A.5 Culture, development and leadership

2A.5.1 Research Culture

At Northumbria we recognise that a key part of delivering research integrity is an open and rigorous research culture that is underpinned by clear policy and processes that enable researchers to produce high-quality research. Led by our Dean of Research Culture, our Research Culture Committee developed a [Research Culture Action plan](#) for 2024-2027, with research featuring as a core principle:

"We conduct, share, and evaluate knowledge and research with integrity, openness, and fairness, promoting trust in research processes, and recognising that research quality is realised in many forms."

As part of its Terms of Reference the committee will monitor research integrity activity where it intersects with research culture activity, for example reviewing a proposed Code of Good Conduct in Research. The Dean of Research Culture reports to the PVC R&KE.

2A.5.2 Research Ethics Leadership and Support

To develop leadership and embed a culture of ethics and integrity, Faculty Research Ethics Directors and Departmental Ethics Leads have been able to take advantage of additional training on ethics and integrity from UKRIO. An annually updated ethics training module is mandatory for all staff who conduct research to ensure awareness of the University's policies and processes, and the use of the ethics online system.

The University provides mentoring for both new and existing staff and renewed its HR Excellence in Research Award in 2023 as part of the ten-year review cycle. The HR Excellence in Research Award is granted to universities who can show their support of early career researchers and compliance with the principles of the Concordat to Support the Career Development of Researchers. The University will resubmit for HR Excellence in 2026.

The University contributes to sector-level initiatives to develop common standards and respond to external developments (e.g., via UKRIO and ARMA).

2A.5.3 Monitoring and reporting

Research Ethics Committee oversees the research ethics regulatory and governance framework of the University. The Committee supports the university research environment to ensure that research is delivered with integrity and follows ethical frameworks including disciplinary norms, and external requirements (e.g. NHS Research Ethics Committee). The specific responsibilities of the Committee include:

- To monitor and review the University's Research Ethics Policy and Research Ethics and Governance Framework in the light of the University's developing ethical experience and the external research ethics environment and to propose changes as required.
- To ensure a framework is in place for the development of staff and systems that support the ethical review and governance of research.
- To consider annual reports and annual audits from faculties on the management of ethical issues in research and the operation of Faculty level
- To approve, and periodically review, the University's Research Ethics and Governance Framework.
- To provide written guidelines on ethical issues in research for use by staff and students of the University.
- To advise on any issues of an ethical nature directly referred to it by the Faculty Research Ethics Committee and Service Departments.
- To submit an annual report on the Committee's activities and the operation of procedures for ethical review of research to Academic Board.
- To review the arrangements in place to ensure compliance with the Concordat to Support Research Integrity.

The Research Ethics and Integrity team provide secretarial support to Research Ethics Committee, Faculty Research Ethics Committees and Ethics Steering Group, and are responsible for ensuring that external approvals (e.g. Health Research Authority, NHS Research Ethics Committee) via the Integrated Research Approvals System are completed and maintained with appropriate university level authority. The team is a valued point of contact for students and staff seeking advice, support and guidance on research integrity and research ethics issues. The team also ensure that the ethical review system, research ethics and integrity training, and practices and processes across the University are fit for purpose and reviewed regularly to reflect best practice in the sector and align with external frameworks.

2B. Changes and developments during the period under review

Please provide an update on any changes made during the period, such as new initiatives, training, developments, also ongoing changes that are still underway. Drawing on Commitment 3 of the Concordat, please note any new or revised policies, practices and procedures to support researchers; training on research ethics and research integrity; training and mentoring opportunities to support the development of researchers' skills throughout their careers.

Our revised Managing Misconduct in Research Policy was approved in February 2025. This sets out clear procedures for anyone, internal or external, to raise concerns about research integrity. In accordance with the Concordat, the policy sets out procedural safeguards to ensure that investigations are conducted fairly, transparently, and in a timely manner. This includes provisions for managing conflicts of interest among those involved in investigation panels, and the ability to draw on external advisers where independent expertise is required. All parties to an investigation have access to an appeals process, the details of which are set

out in the policy. Investigation panel members are provided with briefing on their roles and responsibilities prior to convening. Outcomes of investigations are documented in a final report, and recommendations are acted upon and disseminated through appropriate governance channels. The policy is published on our website, along with contact details of our named person for matters of research integrity, Professor Louise Bracken (PVC R&KE), and responsible officer with delegated responsibility to respond to concerns about research integrity, Ellen Cole (Research Environment & Integrity Manager).

Demonstrating the principle of transparency and open communication, the University supports open research practices, including appropriate data sharing, open access publishing, and pre-registration where relevant. The University approved a new Research Publications Policy in July 2025, to be implemented from September 2025. This policy is underpinned by a rights retention statement, and authors allocating the University a non-exclusive, irrevocable, worldwide licence to make the Author Accepted Manuscript (AAM) of their work publicly available under a Creative Commons Attribution (CC BY) licence upon acceptance for publication for all journal articles and conferences papers published in serial publications. In addition, all such research outputs should include a data access statement.

In our 2023/4 Annual Report, we noted cross-institutional work to develop processes to support research into political extremism. The recommendations developed through this work were implemented in 2024/5, becoming standard practice. This includes governance checks and cross-referral to expert teams to provide multiple assurance points for this research, and additional training opportunities to support the development of researchers' skills. This included departmental development afternoons where, working in partnership with academic leadership of the relevant departments, the Research Ethics & Integrity team delivered updated training to colleagues with research ethics responsibilities on the new policies and procedures and facilitated discussions emerging from the research in their areas and practices in the sector. These activities enable us to support researchers to adopt best practice in relation to ethical, legal and professional requirements and make clear how they can access advice and guidance, within their department or the Ethics team, when needed. The longer form 'development afternoon' format of training plus facilitated workshops and discussion will continue due to positive feedback received from participants and the benefits perceived by the Research Ethics & Integrity Team.

The re-positioning of the Research Ethics & Integrity team into the new Research Quality & Compliance team in Research & Innovation Services presented new opportunities in 2024/5. This has allowed us to work in much closer alignment with colleagues supporting research governance and compliance issues, developing new resources, and merging our internal and [external web presence](#). Streamlined governance checks are in place, and more frequent cross-referral and discussion of the governance requirements of new projects. This ensures we can support researchers to adopt best practice in relation to ethical, legal and professional requirements, and provide improved support to researchers.

2C. Reflections on progress and plans for future developments

This should include a reflection on the previous year's activity including a review of progress and impact of initiatives if known relating to activities referenced in the previous year's statement. Note any issues that have hindered progress, e.g. resourcing or other issues.

The revised Academic Misconduct in Research policy, developed during the 2023/24 academic year and published in 2024/5, provided clarity on procedures and alignment to related HR-owned policies and UKRIO guidelines. The new procedures outlined in this policy were implemented in all cases reported to the University in 2024/5 [see 3B]. In implementation, we have identified opportunities to refine these procedures. For example, the Research Environment and Integrity Manager is the Responsible Officer with delegated responsibility for implementation of the policy and procedure on behalf of the Named Person, the Pro Vice-Chancellor Research and Knowledge Exchange. The Responsible Officer was named as an optional attendee of the Investigation Panel formed at stage two of the process, the formal investigation. In practice, we have found that their membership on this panel would enable smoother, more consistent enactment of the policy and procedures and will be recommended in future. Further opportunities for reflection were provided by two of the allegations reported to us originating outside of the University, which demonstrated that our procedures primarily considered only internal complainants, for example, by describing routes to appeal only available to University staff. This will be an area for review in 2025/26.

Our 2023/4 statement described the process of comprehensively updating our Consent and Participant Information Documentation. The revised paperwork has now been adopted across the University, providing consistency and rigour to our approach to participant information. We monitored the usage of this documentation throughout 2024/5, taking feedback from researchers, our colleagues with additional research ethics responsibilities, and professional services colleagues in relevant governance roles, to ensure the paperwork remains fit for purpose and aligned to legislative requirements. An area for development in 2025/6 is a collaboration with academic colleagues in the School of Communities & Education on a project to develop documentation in accessible 'Easy Read' formats for research participants with learning disabilities.

During the 2024/5 academic year, the University proposed changes to its academic structures, including transitioning from four Faculties and 16 departments to three faculties and 12 schools, with revised leadership structures and changes to additional responsibilities such as those for research ethics. The changes were implemented from September 2025. The key change for research ethics and integrity was the removal of the formal Faculty Research Ethics Director and Departmental Ethics Leads roles, with the associated responsibilities assumed by the Associate Faculty Pro Vice-Chancellors - Research and Knowledge Exchange, and Associate Heads of School – Research and Knowledge Exchange respectively. The College of Reviewers remains unchanged, including the allocation of workload for colleagues with these responsibilities. The Research Ethics & Integrity team worked over summer 2025 to prepare for the change, preparing training materials, ensuring roles were allocated in the research ethics review system, and checking all responsibilities would be accounted for in the new structure. This structure will be in place for the 2025/26 academic year.

Another area for development is increased engagement by the Research Ethics & Integrity team with colleagues in our Grants and Contracts team. This includes access to our Worktribe grants management platform, enabling us to see which governance checks have already been undertaken on externally funded projects, streamlining our own processes, and involvement in project kick-off meetings for major awards, further enabling us to support our research community to understand and act according to expected ethical, legal, regulatory

and professional frameworks, obligations, and standards, including where research involves partners or sub-contractors.

Section 3: Addressing research misconduct

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

Please provide:

- a brief summary of relevant organisation policies/ processes (e.g. research misconduct procedure, whistle-blowing policy, bullying/harassment policy; appointment of a third party to act as confidential liaison for persons wishing to raise concerns) and brief information on the periodic review of research misconduct processes (e.g. date of last review; any major changes during the period under review; date when processes will next be reviewed).
- information on how the organisation creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct (e.g. code of practice for research, whistle-blowing, research misconduct procedure, informal liaison process, website signposting for reporting systems, training, mentoring, reflection and evaluation of policies, practices and procedures).
- anonymised key lessons learned from any investigations into allegations of misconduct which either identified opportunities for improvements in the organisation's investigation procedure and/or related policies/processes/culture or which showed that they were working well.

The University fosters a culture of openness and transparency in research conduct. We recognise that not all questionable research practices constitute intentional research misconduct, and can arise through lack of knowledge, negligence, or inadvertent mistake. Our Managing Misconduct in Research Policy, approved in February 2025, reflects this distinction, and we actively seek to create an environment in which researchers feel safe to acknowledge errors and seek help without undue detriment. All concerns require careful, case-by-case consideration, accompanied by appropriate support and training, and we actively encourage researchers to seek advice whenever they become aware of behaviour, including their own, that may not meet expected standards.

Our policy reflects sector best practice and provides clear guidance on procedures, roles, and expected behaviours for all parties involved in allegations and subsequent investigations. This includes expected timescales for each stage of investigation, setting out who will sit on investigative panels, and the potential outcomes at each stage. This is designed to provide a proportionate, timely, and transparent approach that is both fair and robust, applicable to externally and internally funded research projects alike.

When allegations arise, the University maintains appropriate confidentiality and implements safeguards to protect those raising concerns in good faith. We are equally committed to protecting the reputations of individuals who are exonerated, ensuring they suffer no adverse consequences. Allegations can be made anonymously to the Chair of REC (Prof Louise Bracken, PVC R&KE) or the Research Environment and Integrity Manager (Ellen Cole).

All investigations produce a final report containing recommendations for further action and lessons learned. These reports and outcomes are shared at REC, with recommendations disseminated through Faculty Research Ethics Directors and Departmental Leads.

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

Please complete the table on the number of **formal investigations completed during the period under review** (including investigations which completed during this period but started in a previous academic year). Information from ongoing investigations should not be submitted.

An organisation's procedure may include an initial, preliminary, or screening stage to determine whether a formal investigation needs to be completed. These allegations should be included in the first column but only those that proceeded past this stage, to formal investigations, should be included in the second column.

Type of allegation	Number of allegations			
	Number of allegations reported to the organisation	Number of formal investigations	Number upheld in part after formal investigation	Number upheld in full after formal investigation
Fabrication				
Falsification				
Plagiarism	1	1		1
Failure to meet legal, ethical and professional obligations				
Misrepresentation (e.g. data; involvement; interests; qualification; and/or publication history)				
Improper dealing with allegations of misconduct				
Multiple areas of concern (when received in a single allegation)	2	2		1
<i>Other*</i>	2	2		
Total:	5	5	0	2

***If you listed any allegations under the 'Other' category, please give a brief, high-level summary of their type here. Do not give any identifying or confidential information when responding.**

- Improper management of a manuscript for submission.
- Requests for attribution without contribution.

A total of five allegations were reported to the University, which were all investigated per the misconduct policy and procedures. Three were dismissed, with two upheld in full.