Annual Statement on Research Integrity 2024

Section 1:

Key contact information

Question	Response
1A. Name of organisation	Cranfield University
1B. Type of organisation: **higher education institution/industry/independent research performing organisation/other (please state)**	Higher Education
1C. Date statement approved by governing body (DD/MM/YY)	XX/XX/2025
1D. Web address of organisation's research integrity page (if applicable)	[Research ethics and integrity (cranfield.ac.uk)](cranfield.ac.uk)
1E. Named senior member of staff to oversee research integrity	Name: Professor Leon Terry
	Email address: researchoffice@cranfield.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: Alicen Nickson
	Email address: alicen.nickson@cranfield.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
  The University has specific policies regarding ethics and integrity as well as a Process for implementing and monitoring research integrity, which sets out specific responsibilities for the University, researchers, supervisors and students. It includes details on how to raise concerns in relation to scientific misconduct or breaches of research integrity and the process for investigation. Ethics and integrity related polices are reviewed on an annual basis. The University has a single online ethics system which is used across the University by staff and students undertaking research. Students are required to provide evidence of ethical approval as part of their thesis submission.

- Communications and engagement
  Regular communications via the University's ebulletins, research student inductions and presentations are undertaken reminding staff and students of the University's policy that all research must be submitted for ethical review prior to commencement of data collection. Online training courses on ethics and integrity and research data management are available for all staff and students.

- Culture, development and leadership
  The University aims to promote a positive research culture where all research is undertaken with integrity including the planning and conduct of research, the recording and reporting of results and the dissemination, application and exploitation of findings. Through the University's Ethics and Integrity Committee (CUREIC) and Research Committee policies are reviewed annually to ensure they remain current and fit for purpose.

  CUREIC is responsible for the development, implementation and review of procedures and guidelines relating to research ethics. It is also responsible for strategic development of the University's research integrity agenda, in compliance with the Concordat to Support Research Integrity.

Under the University's Excellence in Scholarship programme, we provide 1-2-1 formative review of outputs which includes feedback on integrity related matters such as data accessibility statements.

The University's Research and Innovation Strategy encourages a research culture that promotes the articulation of intellectual contribution for useful application. This includes prioritising the integrity of our research and associated data and will be addressed through the ongoing implementation of the new Strategy for 2022-2027.

- Monitoring and reporting
  CUREIC meets three times per year. They report annually to Senate and Council, who approve and sign off the University's Annual Statement on Research Integrity. 10% of ethics applications at all risk levels are audited each month to check they have been assigned the appropriate risk level and have been completed correctly. Where any concerns are picked up, applicants are contacted where they may be asked to provide additional information. The Annual Report also provides details on the number of applications submitted to the University's Research Ethics System (CURES) at the different risk levels, average number of days take to review application requiring manual review and the number of overdue applications requiring manual review.

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.

In February 2024, a new literature review exemption was added to the CURES application. Where research is based solely on openly available published literature which is in the public domain (e.g. published by an 'open', including paywalled, journal), and individuals are undertaking desk-based research (e.g. a systematic literature review, re-analysis of publications, a literature review) not involving any other form of data or information, full ethical approval may no longer be required. However, anyone undertaking research, must still log in to the CURES system and confirm that the research is based solely on openly available published literature, completing a declaration to confirm full CURES approval is not required.

There are exceptions, where individuals may still be required to seek full ethical approval:

1. A supervisor requests that their student apply for ethical approval because:
   - The journals or data are in a sensitive area.
   - The project will be embargoed i.e. will not be publicly available via the Cranfield Library immediately or longer term.

2. Approval is/will be specifically required by another external body e.g. journal publishers.

Even where an exemption applies, applicants are still at liberty to complete the full ethical approval application should they wish to do so.

CUREIC agreed that a formal annual review of the CURES form should be undertaken to ensure that the questions asked remain relevant and up to date with the research carried out at the University, and suggest amendments as needed. Minor amendments would be made at the discretion of the Research Ethics and Integrity Coordinator, while significant amendments would be brought to CUREIC for discussion. The plan would be to launch any new developments before each academic year begins to minimise disruption to students completing applications.

In February 2024, CUREIC agreed to establish three working groups agreeing Terms of Reference for each one, they include:

Research Integrity – to identify the gaps and challenges in our existing practices regarding research and data integrity and any cultural issues around what are accepted norms across the university. Following the completion of a gap analysis, an action plan was presented to and approved by CUREIC and Research Committee. The working group are now taking forward delivery of the action plan.

MK:U Ethical Considerations – MK:U delivers degree level apprenticeships. The working group is supporting MK:U colleagues to establish a process for ethical approval for its student projects where required. Education at MK:U is framed around business, preparing students for the workplace and focusing on the practical application of knowledge and its theoretical base.

Education and Training – to review the current training provision, and identify gaps and updates that need to be implemented. They are also reviewing innovative approaches for delivering training, and looking at focusing training content at different career stages including frequency of training. They will also consider the mandatory aspect of training for specific user groups.

Human Tissue Committee
The University's Human Tissue Committee, reporting into CUREIC, main purpose is to examine, advise and implement norms and any changes in regulatory, training, health and safety, administrative and level matters to do with the engagement with human tissue samples at Cranfield University. In 2024, the Committee focused on a review and refresh of membership and its Terms of Reference as a consequence of a number of staff changes.

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.

Cranfield made good progress against the plans for future developments detailed in the previous year's report, some of which are detailed in section 2b above.

The introduction of the literature review exemption process as part of the ethics application has received a positive response with 537 applications processed through this route since its launch in February 2024.

The Research Integrity working group's action plan has identified areas for review/improvement across five core areas which include: Training, Policies, Data Integrity and Quality Assurance Processes, Governance and Communications. Actions across all these areas will continue throughout 2025.

2D. Case study on good practice (optional)

Please describe an anonymised brief, exemplar case study that can be shared as good practice with other organisations. A wide range of case studies are valuable, including small, local implementations. Case studies may also include the impact of implementations or lessons learned.

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, whistleblowing, 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 has in place a number of underlined policies and procedures to deal with allegations of misconduct which are subject to annual review.

As part of the Research Integrity Working Group a Good Research Practice Framework is being developed which will incorporate and set the context for all research and innovation policies and related procedures with an on going review of policies to identify and address any omissions or inconsistencies.

As part of our policy review process relating to research and innovation policies, where policies are amended/updated, authors are required to submit a succinct statement aimed at communicating key changes to Research Committee and the broader community.

Research integrity training and policy information has been incorporated into a new researcher induction programme and sessions related to good research practice are being incorporated into the Researcher Development Programme.

Following completion of an academic misconduct investigation during 2024, the following improvements have been made:

- Raised awareness of the risks of publishing in predatory journals through policy updates.
- Reminding staff through line managers and Centre Heads of the requirements under the University's Authorship Policy as well as more general awareness of research and innovation policies through Research Committee briefings.
- Linked to the action plan developed by the Research Integrity Working Group, a new staff Research Induction will launch in early 2025.
- Development of a Good Research Practice Framework to bring together all policies and processes in a coherent and accessible way.
- Development of a new standardised process for annual policy development/review through Research Committee.

The University will be launching a new intranet in early 2025. As part of the new structure, all policies will be located in a centralised repository to make them more easily accessible.

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

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

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

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

*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.

Date of publication: May 2025