Research ethics code and procedures version 3.0

University of Northampton

University of Northampton Research Ethics Code and Procedures

1 Introduction and background

1.1 The University of Northampton is committed to maintaining ethical research and practice throughout the institution. The University requires all researchers based at the University to act ethically. This requirement extends to all researchers working with, for, or otherwise under the auspices of the University (e.g. those partnering with, or under contract to, the University). This document constitutes:

- a **Research Ethics Code** summarising expectations and principles for all research at the University of Northampton;
- a set of **Research Ethics Procedures** through which all research at the University of Northampton shall be reviewed and approved in relation to the Research Ethics Code.

1.2 In accordance with the Universities UK *Concordat to Support Research Integrity* the University of Northampton is committed to:

- "upholding the highest standards of rigour and integrity in all aspects of research;
- ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards;
- supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers;
- using transparent, robust and fair processes to deal with allegations of research misconduct should they arise;
- working together to strengthen the integrity of research and to review progress regularly and openly" (Universities UK, 2019, p.1).

1.3 As such, the University of Northampton requires all research conducted at, with or for the University to be underpinned by the following principles.

> "**Honesty** in all aspects of research, including in the presentation of research goals, intentions and findings; in reporting on research methods and procedures; in gathering data; in using and acknowledging the work of other researchers; and in conveying valid interpretations and making justifiable claims based on research findings.
>
> **Rigour**, in line with prevailing disciplinary norms and standards, and in performing research and using appropriate methods; in adhering to an agreed protocol where appropriate; in drawing interpretations and conclusions from the research; and in communicating the results.
>
> **Transparency and open communication** in declaring potential competing interests; in the reporting of research data collection methods; in the analysis and interpretation of data; in making research findings widely available, which includes sharing negative or null results as appropriate; and in presenting the work to other researchers and to the public.
>
> **Care and respect** for all participants in research, and for the subjects, users and beneficiaries of research, including humans, animals, the environment and cultural objects. Those engaged with research must also show care and respect for the integrity of the research record.
>
> **Accountability** of funders, employers and researchers to collectively create a research environment in which individuals and organisations are empowered and enabled to own the research process. Those engaged with research must also ensure that individuals and organisations are held to account when behaviour falls short of the standards set by this concordat" (Universities UK, 2018, p.6).

1.4 This Code outlines the processes through which the University of Northampton assures ethical research, and provides guidance for researchers in relation to the above-listed principles. The Code is intended to be facilitative, not restrictive or punitive. However, breaches of the code may constitute serious research misconduct, as per the University of Northampton's *Research Misconduct Policy*.

2 Purpose and scope

2.1 This code applies to all persons who conduct research at the University of Northampton, all research conducted under the auspices of the University of Northampton, and all research conducted by collaboratively managed researchers at the University's partner organisations.

2.2 The following statement of principles places a considerable emphasis on the personal responsibility of researchers to act ethically and to promote ethical behaviour in all aspects of research activities. It is also recognised that statements of principles and procedures cannot expect to cover every aspect of a complex area such as research ethics. The Research Ethics Committee – which operates and monitors the procedures described in this Code – will review and update the Code annually and would welcome comments and suggestions for enhancements from individuals, research units, or any other interested parties.

3 Definitions

3.1 The *Concordat to Support Research Integrity* defines 'research' as:

> "[any] process of investigation leading to new insights, effectively shared… It includes work of direct relevance to the needs of commerce, industry, and to the public and voluntary sectors; scholarship; the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction" (Universities UK, 2018, p.18).

3.2 'Researcher' refers to any person who undertakes research including University staff, postgraduates and undergraduates, and persons not employed or studying at the University but who are carrying out research under the auspices of the University or using University facilities.

3.3 In practice, 'research' at the University of Northampton takes plural diverse forms included – but not limited to – the following:

Funded research: research that is funded in whole or part by organisations other than the University of Northampton.
Staff research: research undertaken by members of staff under the auspices of the University of Northampton that is not 'funded research'.
Evaluation: specific, focused projects exploring the efficacy of particular services, policies and interventions on behalf of external organisations.
Postgraduate Research Degrees: research undertaken by postgraduate researchers registered at the University of Northampton or undertaking research degrees accredited by the University.
Undergraduate and postgraduate taught degree dissertations: research by undergraduate or postgraduate students registered at the University of Northampton or undertaking taught degrees accredited by the University.
Institutional research: any research activity conducted or commissioned by the University of Northampton.
Pedagogic research: research undertaken in order to enhance, or develop innovations in, learning and teaching practices.
Creative practices: multiple forms or participatory, creative, design-led or documentary practice, typically within the arts and creative industries.
Consultancy: deployment of search skills for the resolution of specific problems presented by clients, usually in industrial or commercial contexts.
Professional practice: a variant of consultancy applied to certain well-defined professions (e.g. law, accounting, architecture, nursing, and social work).
Social entrepreneurship: applications of research skills to develop and evaluate impacts and innovations in the social enterprise sector.
Knowledge exchange: collaborative research-focused projects bringing together researchers and users of researchers to develop social, economic, policy or entrepreneurial impacts.

4 Key Principles

4.1 The primary responsibility for the conduct of ethical research lies with the researcher. It is a fundamental principle that staff and students engaged in research adopt a continuing personal commitment to act ethically, to encourage ethical behaviour in those with whom they collaborate, and to consult where appropriate concerning ethical issues. Researchers must take all reasonable steps to avoid actions with deleterious consequences for participants, themselves, or other researchers.

4.2 The behaviour of all researchers should conform to expectations laid down in the University of Northampton's *Codes of Conduct* for staff, postgraduate researchers or students, as well as specific guidance contained in this *Research Ethics Code* and other germane institutional policies, procedures and frameworks.

4.3 All research at the University of Northampton must undergo appropriate ethical review via the procedures outlined in Appendix A. Responsibilities for ethical review are summarised in Figure 1.

Figure 1 Responsibilities for ethical review at the University of Northampton.

University Research Ethics Committee (see sections 10.2 and 10.6.1)
- Maintains *Research Ethics Code and Procedures* and supporting guidance
- Reviews all Postgraduate Research (PGR) ethics applications
- Reviews any items referred from Faculty/Department Ethics Committees
- Monitors consultative, evaluative and marketing research carried out by UON with its students and staff

Faculty/Department Ethics Committees (see sections 10.3 and 10.6.2)
- Review ethics applications for research by staff from the Faculty/Department and cognate Research Institutes
- Monitor and advise course, module or programme level ethics processes for research by the Faculty's taught postgraduate and undergraduate students
- Reviews any items referred from course/module/programme level

Course/module/programme-level ethics processes (see section 10.4)
- Manage local practice for reviewing ethics applications for research by taught postgraduate and undergraduate students

4.4 In all contexts, ethical review must involve a written, auditable application and approval process. Ethics review processes are summarised in Appendix A. The following sections of the *Research Ethics Code* highlight key points and considerations to be included in ethics applications.

4.5 It is a fundamental principle that the process of ethical review should be careful and rigorous but at all times transparent, proportionate, supportive and collegiate. Ethical review should support researchers to develop excellent research and ethical research practice. Those responsible for ethical review have a responsibility to undertake rigorous, transparent reviews of proposed research and to provide feedback which is clear, timely, supportive, and sensitive to disciplinary/methodological diversity, as well as the expertise and positionality of researchers and the distinctive needs of participants in any given research activity.

4.6 Where applicable, UON acknowledges the importance of the codes of conduct of external agencies, professional bodies, funders and organisations, and accords them primacy as a default position. Where research requires specific ethics clearance from an external body (e.g. NHS/HRA, criminal justice agencies or social care settings), researchers must first obtain external approval and include evidence of this approval as part of their University of Northampton

ethics application. Where funders or professional bodies have specific requirements for ethical review, researchers should consult with the Chair of the Research Ethics Committee, or most appropriate Faculty/Department ethics committee, to ensure necessary conditions are met. In addition:

- where proposed research involves non-human animals, researchers must seek prior approval from a licensed Animal Welfare Review Body, as per the *Animal (Scientific Procedures) Act 1986*, and include evidence of this approval as part of their University of Northampton ethics application;

- where proposed research involves genetically modified organisms, researchers must seek prior approval from the UON's Genetically Modified Organism (GMO) Biosafety review committee, as per the *Genetically Modified Organisms (Contained Use) Regulations 2014* and the University of Northampton's *Biological and Genetic Modification Safety Policy*, and include evidence of this approval as part of UON ethics application (contact Valerie.Graham@northampton.ac.uk or Alexandra.Woodacre@northampton.ac.uk);

- where proposed research involves human tissue, fluids or DNA samples, researchers must seek prior approval from recognised external ethics committee, as per by the *Human Tissue Act 2004*, and include evidence of this approval as part of their University of Northampton ethics application;

- where proposed research requires the use of classified or security-sensitive materials, or online or IT resources which contravene UON's *IT Acceptable Use Policy* (whether on UON or personal IT equipment), researchers must obtain specific prior permissions from the University's IT Services and Dean of Research, Impact and Innovation (and, if applicable, organisations responsible for classified materials) and include evidence of these permissions as part of their University of Northampton ethics application.

- Specialist approvals and licenses should be required where proposed research requires: use of radioactive substances on people (UK Administration of Radioactive Substances Advisory Committee), use of human eggs, sperm or embryos (Human Fertilisation and Embryology Authority), or xenotransplantation technologies (UK Xenotransplantation Interim Regulatory Authority and successor bodies). Proposals for research in these areas may only proceed with permission of the University's Dean of Research, Impact and Innovation following a risk assessment and due diligence, taking advice from relevant independent experts.

The University of Northampton reserves the right to request amendments to, or decline to support, any proposed research activities, including those which have been approved by an external body.

4.7 Those with supervisory responsibility for researchers (whether staff, postgraduate, undergraduate or other) have a duty to provide adequate, project-specific support and guidance in relation to research ethics and

integrity. Researchers should be supported to consider how the following principles apply to their specific projects.

5 Key aspects of ethical research

5.1 The following sections provide guidance on five key aspects of ethical research practice. Key considerations to be included in ethics applications are highlighted in each section. By nature, the following sections are generic: researchers should also consult discipline-specific guidance on research ethics when preparing their ethics application (see Appendix B).

5.2 Research funding: due diligence and conflicts of interest

5.2.1 Declaring research funding

In the ethics application, researchers must declare any funding received in relation to their research. Sources of funding should be transparent and auditable. If the source of funding is anonymous or unclear, initial approval must be obtained from the University's Dean of Research, Impact and Innovation prior to ethical review.

5.2.2 Due diligence

It is the researcher's responsibility to perform due diligence and check the appropriateness of research funders. In the ethics application, researchers must declare any potential ethical complexities or conflicts of interest arising from funding arrangements, and must clearly summarise how these will be mitigated. Researchers are also responsible for conducting appropriate due diligence in relation to potential research collaborators, partners, stakeholders, events, impacts and publications/outputs. Researchers planning to undertake funded projects in partnership with external organisations must complete an auditable due diligence process and assessment (please contact the UON RIFS team for process guidance and proforma). In addition, it is the researcher's responsibility to perform due diligence and check the appropriateness of any journal, conference, workshop etc. with regard to dissemination of their research outputs and safeguard against engaging with 'predatory publishers' etc. Researchers should consult LLS guidance on Things to consider - Before you Publish and can email openaccess@northampton.ac.uk with any queries.

5.2.3 Risks of reputational damage

Researchers must avoid research funding, activities or collaborations that may cause reputational damage to the University of Northampton. This includes (but is not limited to) funding from, or collaboration with, individuals, organisations or stakeholders linked to illegal activities, human rights violations, environmental degradation financial impropriety, manufacture of injurious products (e.g. arms, tobacco or alcohol), exploitative practices, or values contrary to the University of Northampton's *Equality, Diversity and Inclusion Policy* and *Together@UON Commitment to Equality and Inclusion*. In cases where research funding or activities may pose a risk of reputational damage to the University, initial

approval to proceed must be obtained from the University's Dean of Research, Impact and Innovation prior to ethical review.

5.2.4 Conflicts of interest

As per the University of Northampton's *Guidance on Conflicts of Interest and Loyalty* (see sections 9-10), researchers should seek to avoid research funding or activities which place them in positions of potential or actual conflict between their research and their personal or professional interests. Conflicts of interest may arise from a researcher's past or present roles, activities, status or obligations in external organisations or research settings, personal or family relationships, or the prerogatives or requirements of potential research funders or partner organisations. In the ethics application, researchers must declare any potential conflicts of interest and clearly summarise how these will be mitigated.

5.2.5 *Donations, gifts and hospitality*

Donations, gifts and hospitality from research funders, partners or settings must be handled carefully and declared in accordance with the University of Northampton's *Donor Relations and Acceptance of Donations Policy*, *Donor Due Diligence Policy* and *Guidelines on Declarations of Gifts and Hospitality*: "such gifts/hospitality should only be accepted when the individual receiving the item(s)… is absolutely certain that in so accepting, s/he does not place the institution in a position where the University's reputation for scrupulous behaviour could in any way be jeopardised".

5.3 Informed consent

5.3.1 Default expectations: informed consent

It is a default expectation that research with human participants must be based on the principle of meaningful, freely-given informed consent (though see section 5.3.10 on permitted exceptions).

Following recent changes to data protection legislation, participants must formally 'opt in' to any research activity which involves the collection of 'personal data' (see section 5.6).

5.3.2 Developing processes and materials to enable informed consent

Researchers must give very careful consideration to the processes and materials they will use to inform potential participants about their project. It is the researcher's responsibility to provide clear, non-coercive information about their project. They must develop a strategy to explain, as fully as is reasonable and in terms meaningful to the potential participants, key information including:

- the aims and nature of the research;
- who is undertaking the research;
- who is funding the research;
- why they have been invited to participate;
- how data will be recorded (and options in relation to recording method);
- what participation in the project will involve, and its duration;
- possible risks and benefits of participation;
- participants' rights to withdraw from research activities;
- participants' rights in relation to confidentiality and anonymity (as applicable, and including any reassurances or responsibilities relating to the complexities outlined in section 5.4.3)
- how data will be stored, managed, preserved (archived), shared, disseminated, and – if applicable – reused;
- participants' rights to remove data within a stated limited time after their participation (it is recommended that this should be a fixed period (e.g. one month) and not 'at any time');
- if appropriate – how findings will be fed back to participants;
- information about confidentiality and anonymity, including situations in which confidentiality may be broken (see section 5.4);
- contacts for further information

Potential participants must be provided with sufficient information to make an informed decision about whether or not to participate. In the ethics application, researchers must provide a detailed account of this strategy plus accompanying materials. Typically, this may involve the use of a participant information sheet: a sample template is available in the PGR toolkit and via Faculty/Department Ethics Committee Chairs (see section 10.3.3). Information sheets should be accessible and user-friendly for participants, and it may be necessary to prepare a range of processes and materials to communicate with diverse potential participants. It is recognised that a written participant information sheet may not be appropriate for all research settings or participants. In such cases, researchers must explain how they will use equivalent processes or materials to communicate information about the project, and provide a rationale for this alternative approach.

5.3.3 Seeking consent from 'gatekeepers'

If appropriate, the ethics application must also detail how researchers will seek consent from any organisational or institutional 'gatekeepers' prior to engagement with potential research participants. Gatekeepers should be provided with transparent, detailed information about the project (including a clear statement outlining the extent to which the organisation/institution will be anonymised, and making clear that personal data and identifiable responses from individuals will not disclosed to the gatekeeper). Typically, this may involve the use of an introductory letter/email plus information sheet: a sample template is available in the PGR toolkit and via Faculty/Department Ethics Committee Chairs (see section 10.3.3). It is recognised that this template may not

be appropriate for all 'gatekeepers'. In such cases, researchers should explain how they will communicate with the 'gatekeepers' relevant to their project, and provide a rationale for this alternative approach.

5.3.4 Consent forms

Researchers must demonstrate how they will obtain clear, auditable evidence that participants have given informed consent to take part in the project. Typically, this will involve provision of a formal consent form to be signed by each participant: a sample template is available in the PGR toolkit and via Faculty/Department Ethics Committee Chairs (see section 10.3.3). The consent form should be accessible and user-friendly for participants, and should allow participants to indicate their understanding of, and consent to, all aspects of the project. It may be necessary to prepare a range of consent forms for diverse participants. For some research activities (e.g. where data collection is solely through online survey) it may be appropriate and practical to incorporate the consent form into research tools (e.g. as the first page of an online survey). It is recognised that written consent forms may not be appropriate for all research scenarios or participants. In such cases, researchers must explain how they will collect evidence of consent, and provide a rationale for this alternative approach.

5.3.5 *Consent in research with children and young people*

In projects involving engagement with participants aged 0-17 years old, researchers must demonstrate how they will ensure that consent processes are inclusive and age appropriate. It is a default expectation that researchers should seek informed consent from young research participants (as per Article 12 of the *United Nations Convention on the Rights of the Child*), whilst also seeking the informed assent of parents/carers and those who are *in loco parentis*. The ethics application must detail how researchers will do this in practice. The ethics application should demonstrate that the researcher is acting appropriately and in accordance with specialist guidance on researching with children and young people. It is recognised that some scenarios may require an alternative approach to handling consent children and young people. In such cases, researchers must provide a detailed overview of, and justification for, their proposed approach.

5.3.6 *Consent in research with potentially vulnerable participants*

In projects involving engagement with potentially vulnerable participants (including – but not limited to – participants covered by the *Mental Capacity Act 2005*) researchers must demonstrate how they will ensure that consent processes are inclusive, appropriate and effectively safeguard individuals. In such projects, the ethics application must provide a detailed account of proposed consent processes to demonstrate that the researcher is acting appropriately and in accordance with specialist guidance salient to the research context and participant group. If family members, carers or professionals are key to giving consent a detailed overview of, and justification for, the proposed process is required.

5.3.7 *Consent as an ongoing process*

Researchers should think carefully about their interactions with research participants, and be aware that informed consent should be an *ongoing process* – not just a one-off event of signing a consent form. Researchers should regularly check that participants are comfortable and happy to continue, and should also ensure that participants understand that they can stop or pause their participation in any research activity. They should also ensure that participants feel able to do this, and have a process through which they can withdraw from data collection without penalty or embarrassment.

5.3.8 Consent and power relations/inequalities

The power imbalance between researcher and participants should be carefully considered. Care should be taken to ensure that the participants do not feel pressured or obliged to take part in research activities. This is a particularly important consideration when research takes place in hierarchical, institutional or organisational contexts (e.g. schools, institutions or businesses), especially in scenarios where the researcher has a prior role, status or seniority therein. In such situations, the ethics application must give a clear summary of how potential power imbalances will be mitigated to ensure that participants feel able to freely opt in or out of research activities. Where researchers have 'senior' or 'expert' roles in relation to participants (e.g. where participants are students, pupils, patients, service-users, employees or similar), the research ethics application must outline how power relations will be mitigated, and how will be informed that participation in research activities is not obligatory. Researchers should refer to specialist guidance on informed consent in their discipline or profession to address these kinds of issues.

5.3.9 Incentives for participation

In some cases it may be appropriate to offer incentives for participation. In such cases, incentives must be offered is a way which is fair, justifiable and commensurate with the University of Northampton's *Guidelines on Declarations of Gifts and Hospitality*. The ethics application must declare and justify the use of incentives. Incentives should be offered as a token of thanks (*not* a payment for participation). The offer of an incentive must not induce participants to participate 'against their better judgement' or distract from information about (or possible risks of) participation. Following recent HMRC guidance it is no longer advisable to give vouchers to students or members of the public as incentives in any way that could be construed as remuneration for participation.

5.3.10 Covert or deceptive research

It is recognised that, exceptionally, some research activities might complicate the expectation of freely-given informed consent. (Examples might include 'undercover' investigative research, observations of behaviour in public places, or psychological experiments based upon mild surprise or deception). Researchers considering any such activity must provide a full account and justification of the proposed method and seek advice from the Research Ethics Committee at an earlier stage. The burden of proof will rest on the researcher to show that no

alternative methods are possible and that the data sought are of sufficient value to override the principle of free and informed consent. The researcher must also demonstrate how potential harm arising from covert or deceptive research will be managed and alleviated, as per the British Psychological Society's *Code of Human Research Ethics*:

> "Where an essential element of the research design would be compromised by full disclosure to participants, the withholding of information should be specified in the project protocol that is subjected to ethics review and explicit procedures should be stated to prevent any potential harm arising from such withholding. Studies based on observation in natural settings must respect the privacy and psychological wellbeing of the individuals studied. Unless those observed give their consent to being observed, observational research is only acceptable in public situations where those observed would expect to be observed by strangers. Additionally, particular account should be taken of local cultural values and of the possibility of intruding upon the privacy of individuals who, even while in a normally public space, may believe they are unobserved.

In such cases, the ethics application should typically detail how participants will be debriefed, and consent obtained, after data collection.

5.3.11 Informed consent and internet- or social media- based research

Particular ethical complexities are posed by research that involves engagement with participants via social media, the use of apps, or the analysis or 'mining' of material posted online via blogs, social media platforms, chat rooms, discussion boards, instant messaging services etc. In such research, researchers must take care to ensure that consent processes are appropriate and proportionate. Researchers planning such research must detail how consent will be handled. Researchers are directed to recent guidance on internet-mediated research:

British Psychological Society (2017) *Ethics Guidelines for Internet-mediated Research*
Townsend, L. and Wallace, C. (2016) *Social Media Research: a Guide to Ethics*
UKRIO (2016) *Good practice in research: internet-mediated research*
University of Oxford (2018) *Internet-based Research: Best Practice Guidance*

5.3.12 Permissions for reproduction of photographs, footage, recordings or performances

Specific permissions should be obtained in instances where research involves reproduction or dissemination of:

- photographs, footage or recordings of identifiable individuals;
- recordings or footage of events, performances or creative practices involving – and/or where intellectual property is held by – anyone other than the researcher.

Sample release forms for such activities are included available in the PGR toolkit and via Faculty/Department Ethics Committee Chairs.

5.4 Confidentiality

5.4.1 Default expectations: confidentiality

It is a default expectation that research with human participants must be based on the principles of:

> Confidentiality – i.e. an assurance that information supplied by a research participant will only be reported, shared, disseminated, stored and (re)used **with the participant's consent**, and **in the terms agreed via the consent form**.
>
> Anonymity – i.e. undertaking to ensure that research participants **cannot be identified or traced from research data and outputs** (e.g. redacting identifying details from datasets, creating pseudonyms for people and places, storing anonymising data separately from identifying information, and taking care in the presentation of research findings to protect individuals' identities).

5.4.2 Developing processes and materials in relation to confidentiality

Researchers must give very careful consideration to the strategies through which they will maintain confidentiality and – so far as is reasonable – ensure anonymisation of research data and outputs. It is not sufficient to assert that research will be 'confidential' and 'anonymous'. In the ethics application, researchers must provide a clear account of how confidentiality and anonymity will be assured in practice in their project.

It is important that participant information sheets (see section 5.3.2) provide clear information about how data will be reported, shared, disseminated, stored and (re)used. Participant information sheets should clearly outline the terms on which data will be used, and the extent to which anonymity can be assured. The participant information sheet template includes further guidance on this topic. It is not sufficient to assert that research will be 'fully anonymous' or 'strictly confidential': instead, participant information sheets should clearly and concisely indicate practical steps that will be taken to anonymise data and protect confidentiality. Participants should be given a clear, realistic sense of the likelihood of being identified from research data.

5.4.3 Confidentiality in practice: complex scenarios

Researchers should take care to consider how confidentiality and anonymisation might be complicated in their particular research settings and contexts. This is especially important in:

- research settings where there is a significant chance that individuals could be identified in the presentation of findings (e.g. in small, distinctive organisations or communities);
- research methods in public or communal spaces (where research conversations may be overheard) or involving participants talking with others (e.g. focus groups, workshops or community meetings) (i.e. how will participants be safeguarded, and be made aware of the importance of preserving confidentiality?);
- scenarios where the researcher has a past or present role – and/or strong existing relationships – within their research context (e.g. as a manager or leader within a case study organisation or community) (i.e. how will the researcher take care to avoid disclosures of research findings via their organisational or community networks?);
- situations where expressing particular opinions may endanger participants' safety, wellbeing or reputation (e.g. in research where participants may speak out against powerful political or corporate interests, act as 'whistleblowers' within hierarchical organisational settings, or express counter-cultural views which place them at risk).

In such cases, researchers must demonstrate how they will take additional measures to safeguard the confidentiality of research participants. The ethics application must provide a detailed account of any specific complexities posed by their research context and their proposed strategies to mitigate risks to confidentiality in relation to them. Participants should be clearly informed, in advance, of any possibility that they could be identified from the information they have provided, and given explicit details about how and where this information will be used.

5.4.4 Naming individuals or organisations in research outputs

It is recognised that, exceptionally, some research activities might not require anonymisation of data. (Examples might include research with organisations who explicitly request that there are named, or interviews with notable individual literary, political or historical figures). In such cases, researchers must obtain specific consent for non-anonymised presentation of data and the ethics application must provide a rationale for this approach.

5.4.5 Transcribers, translators and other third parties

If research projects involve transcribers, translators or additional researchers, the ethics application must provide evidence that they are competent and appropriately trained, and that appropriate confidentiality agreements have been signed by them. Any transfer of data between the researcher and transcribers, translators or additional researchers must be covered by the data management plan (see section 5.6.4). Participants should be clearly informed, in

advance, of the involvement of transcribers, translators or additional researchers in the research project.

If third parties will be in attendance for research activities (e.g. family-member, carer, teacher, or any other stakeholder not directly involved in the research), the ethics application must outline how processes around confidentiality will take them into account. Participants must be clearly informed, in advance, of the presence of any third parties in research activities.

5.4.6 Confidentiality and Intellectual Property Rights (IPR)

Researchers must have regard for the University of Northampton's *Intellectual Property Policy* and seek advice on any potential IPR queries from the UON RIFS team, as required.

Researchers must notify the University's Dean of Research, Impact and Innovation if they have reason to believe that a proposed or ongoing project may produce Intellectual Property (IP) which has the potential for commercial exploitation. In such scenarios, a plan to protect and commercialise the IP must be agreed with the Dean of Research, Impact and Innovation. Any consequences of the plan in terms of confidentiality or data-sharing must be detailed in the ethics application (or, if unanticipated commercially sensitive IP is generated later in a project, the ethics application must be amended and updated accordingly).

The ethics application must specifically detail how Intellectual Property Rights (IPR) issues will be managed in situations where: (i) a project may produce Intellectual Property (IP) which has the potential for commercial exploitation; or (ii) a project may be sensitive in terms of commercial or operational activities of partner organisations.

For the purposes of the University of Northampton's *Intellectual Property Policy*, IP includes any,

> "patents, rights to inventions, know-how, copyright, database rights, rights in computer software, rights in designs, trademarks, domain names, confidential information and all similar rights".

5.4.6 Breaking confidentiality

Participants must be clearly informed, in advance, of any situations in which, exceptionally, it may be necessary to break confidentiality. The ethics application should outline how the researcher will handle disclosures of present or probable harm to research participants or others, and this process should be explained in participant information sheets.

Researchers working with potentially vulnerable research participants (see section 5.4.9) must demonstrate that they have consulted specialist ethical

guidance relating to their research topic – and any local, institutional and/or professional safeguarding policies relating to their research settings and/or the local authority that the research setting is located – for detailed guidance on breaking confidentiality.

There is an expectation – and, for some researcher-practitioners a legal/professional duty – that researchers must report information salient to the protection and safeguarding of children and vulnerable adults. For researchers working with children and vulnerable adults, the ethics application must detail a strategy for sensitively handling disclosures of harm or abuse in line with this expectation. Researchers working with children and vulnerable adults outside the UK must include information about legal duties, and professional or context-specific expectations, around breaking confidentiality in their research context.

Where there is a reasonable expectation that a research project may encounter some form of past, present or probable illegality (e.g. in research about illegal substance use), the ethics application must include a detailed analysis of the researcher's legal duties and ethical responsibilities in this context, and outline situations in which researcher will break confidentiality.

In the UK, researchers also have a mandatory statutory duty to report evidence of terrorism (*Terrorism Act 2000*, see *Prevent Duty Guidelines*) and a common law duty to report evidence of treason (*Treason Act 1842*) or human remains requiring burial (see *Offences Concerning the Coroner*).

5.5 Assessing risks, safeguarding and avoiding harm

5.5.1 Key principles: avoiding harm

It is a fundamental principle that researchers must work with care, respect and regard for the rights, safety, dignity and wellbeing of research participants, colleagues, fellow researchers and themselves. Researchers must work to ensure that research participants' physical and emotional well-being are not adversely affected by research. Researchers should also take care to look after their own well-being, and exercise self-care and take appropriate measures to protect themselves from potential harm. It is a default expectation that staff, PGRs and students will behave in ways that are fair, kind, collegiate, caring, equitable, inclusive, respectful, non-exploitative, anti-discriminatory and in accordance with UON's *Equality, Diversity and Inclusion Policy* and *Together@UON Commitment to Equality and Inclusion*.

5.5.2 Developing strategies to mitigate risks

When planning research with human participants, researchers must give careful consideration to potential risks to participants and themselves, and develop strategies to mitigate anticipated risks. It is not sufficient to assert that harm to research participants will be avoided: practical steps to mitigate harm and

safeguard participants and must be clearly outlined. In the ethics application, researchers must clearly state:

- Who the intended participants are and how/where they have been invited to participate in the research.
- Any anticipated risks to participants' wellbeing (including distress, emotional/psychological harm or physical harm) that might feasibly result from participation in the research.
- Any practical measures that will be taken (e.g. in terms of venue for data collection) to ensure that participation is accessible and anxiety-free for participants.
- Any potential wider forms of harm (e.g. to community cohesion or environment) which might feasibly result from research activities.
- Measures that will be taken to mitigate any anticipated harm or distress caused by the proposed research.
- If applicable, any criteria that will be employed for deciding the end point at which the study will stop because of unjustifiable further risk of harm or distress, psychologically or physically, to researchers or participants
- How potential participants will be informed of possible risks of participating in the research (see section 5.3.2 on participant information sheets).
- A plan of action for incident reporting in the event of participants being harmed in the course of research.
- If applicable, a strategy for signposting support and services in the event of participants becoming distressed or concerned in the course of the research.

All research activities must adhere to the University of Northampton's institutional *Safeguarding Framework*. In addition, researchers must also adhere to best practice guidance in relation to safeguarding in research in their discipline- or organisation- specific contexts and/or any relevant safeguarding guidance issued by professional/regulatory bodies or local authorities. Research ethics applications must specify how researchers plan to apply safeguarding principles to their research contexts, with reference to the most appropriate specialist guidance and/or professional standards on safeguarding including detail on the exceptions to confidentiality and procedures for disclosure (detailed below). The following sources signpost additional materials relating to safeguarding in research contexts:

NIHR (2020) *NIHR Safeguarding Guidance*
UKRI (2021) *Preventing Harm in Research*
University of Nottingham (2013) *Safeguarding Considerations for Researchers*

5.5.3 Disclosures of harm or malpractice

In the ethics application, researchers must detail how they will handle disclosures of present or probable harm or malpractice during research (see

section 5.4.6), and how they will communicate this process to research participants (see section 5.3.2). If applicable, researchers must also outline their intended course of action in the event of research revealing a participant's illness or condition of which the participant may not have previously been aware. Researchers should develop and outline a proportionate strategy for handling disclosures of harm and malpractice over the course of any given project (e.g. including suspicions of harm, disclosures of past abuse, whistleblowing etc.). Researchers should consult relevant subject or professional guidance to inform their strategies for handling and reporting safeguarding concerns. There are some useful resources from NSPCC on dealing with disclosures and reporting:

https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/report/
https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/what-to-do-child-reveals-abuse/

5.5.4 Sensitive or emotive research topics

Particular care is needed where it is likely that a research topic will be sensitive, controversial or emotive. In such cases, researchers must take great care to avoid distress, preserve participants' dignity and privacy, and handle emotional research encounters in a sensitive, humane manner. Where research deals with potentially sensitive, controversial or emotive topics, the ethics application must outline measures that are to be taken to limit distress and support participants in the event of them becoming distressed. Typically, in such cases, researchers may signpost to reputable, appropriate sources of specialist information and support relating to the matter in hand.

5.5.5 DBS documentation and equivalents

In the UK, researchers planning to work with participants aged 0-18 years – and in most settings with vulnerable adults – must hold recent Disclosure & Barring Service (DBS) documentation. For research with these participant groups outside the UK, researchers must investigate local equivalents and safeguarding requirements for their research context and supply this information as part of their ethics application. Researchers working with potentially vulnerable participants should take advice from experts and settings and – where necessary – engage with appropriate training on safeguarding and risk assessment and include evidence of this in the ethics application

5.5.6 Health and safety risk assessment

All research activities must be covered by a recent health and safety risk assessment as per the University of Northampton's *Health and Safety Management* policy, plus a UON Research Covid Risk Management Declaration. Proformas for the risk assessment and Covid Risk Management Declaration are available in the PGR toolkit or from Faculty Research Leaders. The risk assessment should outline anticipated health and safety risks to researchers and participants, and proposed measures to mitigate those risks. In some cases, it will be necessary to provide further supporting documentation (e.g. provision of

risk assessments from external organisations or evidence of established risk management processes for labwork).

The health and safety risk assessment should be prepared by the researcher, approved by the supervisory team (for PGR research) or Faculty Manager (for staff research), and recorded as per current Faculty processes. While it is not necessary to include a risk assessment as part of the ethics application, the ethics application must confirm that the risk assessment has been signed off as appropriate by the responsible signatory. The University of Northampton accepts no legal or insurance liability for research activities unless this confirmation is given.

The University Research Ethics Committee or Faculty Ethics Committees may ask to see a completed risk assessment if the proposed project presents particular, significant risks. Otherwise, the Committees will only need to be assured that a risk assessment has been completed and approved.

Researchers should also ensure that their approach to risk assessment aligns with the current and changing guidance in relation to risk mitigation and COVID-19 (see also section 5.5.10). Updates and latest information will be disseminated through Faculty Research & Enterprise Committees and the Graduate School.

5.5.7 International travel

For any research activities outside the UK, researchers must complete a separate Travel Plan and Risk Assessment and submit this document to the UON Finance department via safety@northampton.ac.uk. The University of Northampton accepts no legal or insurance liability for activities undertaken overseas unless the travel risk assessment is received by the Finance department. In completing this document, researchers must have regard for the current Foreign and Commonwealth Office (FCO) *Guidance for Travellers*. Travel to regions with a current FCO travel warning or advisory notice will only be approved under exceptional circumstances, and the travel plan and risk assessment must be explicitly approved prior to ethical approval. The Travel Plan and Risk Assessment should be completed even where students are conducting research in their 'home' region. The University Finance team advise that:

> "We must have risk assessments for staff or students travelling overseas. Although it is obviously a different situation with a student based overseas, to ensure that we are compliant with insurance and Duty of Care the student should complete a travel plan and risk assessment to cover the period that they will be conducting research. The form should be used to log key activities. Sections which are not relevant for students based overseas can be omitted"

5.5.8 Lone working and risks to researcher safety/wellbeing

In scenarios where there are feasible risks to researcher safety or wellbeing (e.g. research involving significant periods of lone working, travel in risky

environments, engagements with potentially aggressive participants, or activities which may be especially distressing or stressful for the researcher), the ethics application form should outline key strategies that will be adopted to mitigate these risks.

5.5.9 Research with potentially vulnerable participants

Particular care is needed when planning research with potentially vulnerable participants including (but not limited to):

- participants who are under 18 years of age
- participants with disabilities or long-term health conditions
- participants with impaired mental capacity or any other condition which may affect their ability to consent
- participants with addictions
- participants who have experienced traumatic events, abuse, bullying or victimisation
- refugees, asylum seekers or recent migrants
- participants who are in custody or otherwise engaged in the criminal justice system
- participants engaged in illegal activities
- participants who are under the responsibility of a social care organisation

Researchers have an enhanced duty of care towards potentially vulnerable participants. In such projects, the ethics application must provide a detailed account of safeguarding measures to demonstrate that the researcher is acting appropriately and in accordance with specialist safeguarding guidance salient to the research context and participant group.

5.5.10 Risks, safeguarding and COVID-19

The exceptional, unprecedented situation which is ongoing as a result of the Novel Coronavirus (COVID-19) pandemic is likely to continue to necessitate changes in institutional risk assessment requirements, as well as regulations regarding travel, social distancing and face-to-face research. Regular updates will be communicated through the UON Research Ethics Committee, Graduate School, and Faculty Research & Enterprise Committees.

If researchers need to amend previously-approved activities as a result of the changing COVID-19 situation, this can be supported through an expedited review system by UON and Faculty Ethics Committees. Researchers are particularly encouraged to review and amend planned activities where:

- proposed/ongoing research activities require face-to-face contact with participants, particularly those who are at-risk or require self-isolation as per the latest UK Government advice;
- researchers are themselves at-risk or require self-isolation;
- proposed research involves UK or international travel;

- planned research requires visits to settings which are closed or have restricted access as a result of COVID-19.

All researchers planning or doing research projects which involve face-to-face contact with participants must consider:

- can the research be paused or rescheduled to such a time as guidance on self-isolation, safeguarding and at-risk communities changes?
- can the research be conducted remotely or online instead of face-to-face?
- can the project be adapted to involve different methods or activities? (This crowdsourced resource initiated by social scientists at the University of New South Wales gives some interesting ideas, although these must be discussed with supervisors and may require additional ethical approval: https://docs.google.com/document/d/1clGjGABB2h2qbduTgfqribHmog9B6P0NvMgVuiHZCl8/mobilebasic).
- do remote or online methods pose new/different ethical challenges which require changes to the project's approach to safeguarding, confidentiality, informed consent or data management?

New University of Northampton resources and expectations about tools for online research are provided below.

Online surveys

Any colleague or student who wishes to complete an online survey can now be set up with a log-in for 'Online Surveys': a GDPR-compliant, password-protected, user-friendly online survey tool which is widely used in the HE sector. Online Surveys is the default tool for use by staff and students at UON

- Individual staff or postgraduate researchers can request a log-in by emailing surveys@northampton.ac.uk directly
- Undergraduate or Master's students can be set up with log-ins. Tutors/supervisors are advised to send a password-protected document or spreadsheet with a list of names and UoN email addresses of those students who require access to surveys@northampton.ac.uk

As a condition of use, everyone requesting access must read the T&Cs of this survey tool and individual students requesting access will be asked to complete a specified Linkedin Learning online training activity about data protection. Tutors/supervisors who request access for a student group will be required to take responsibility for training/support in use of the 'Online Surveys', highlighting the Terms & Conditions to their students and ensuring students have a basic understanding of data protection and copyright. To support this comprehensive instructions/user guides are available at:

- How to – design your survey
- How to – distribute your survey
- How to - analyse your survey

When using Online Surveys, data should be downloaded from the online interface and stored as password-protected files ASAP: personal identifiable information must be stored separate to the data once this has happened, and data should be stored and managed in line with principles laid out in section 5.6.4. Data must typically not be left live in the survey system more than three months after surveys have closed.

For Data protection reasons, colleagues and students should not be using free online survey tools such as Survey Monkey.

Online interviews

As a safe, password-protected, GDPR-compliant space for conducting online interviews or group discussions, postgraduates and undergraduates can now be set up with a personal Blackboard Collaborate account by LearnTech. This enables PGRs, students and staff to conduct and record interviews in a space similar to the Collaborate interface used by many colleagues for learning & teaching and meetings. To set this up, the process is:

1). Staff member sends Robert.Farmer@northampton.ac.uk (plus CC to Rob.Howe@nothampton.ac.uk) a password protected spreadsheet with the account details in the following format: Student Number; First Name; Last Name; Email Address. In the body of the email, the staff member should also define an expiry date for the account(s). Accounts will not be set up without an expiry date, and the date should be the same for all students on the spreadsheet. If different expiry dates are needed then more than one spreadsheet should be used.

2). LearnTech will alert staff when accounts are ready, and staff member conveys this information to their students. Students must be made aware by the staff member that their recordings will be deleted and their accounts suspended without warning or reminder on or shortly after the specified account expiry date. Recordings will be completely unrecoverable after deletion. Colleagues should send students this guide, which details how to use Collaborate as a Moderator: https://help.blackboard.com/Collaborate/Ultra/Moderator. Please note that the Learning Technology Team will not be able to provide student training for Collaborate. However, staff may request Collaborate training for themselves from their Learning Technologist, and can then provide their own training sessions for their students if they wish.

3). Once accounts have been created, students can enter their Collaborate accounts by going to eu.bbcollab.com and selecting 'Forgot Password'. It is recommended that students use the Chrome browser when using Collaborate. A password reset request is then emailed to them from notification-service@bbcollab.com (students may want to add this email address to their contacts or safe senders list prior to resetting their passwords to ensure that it doesn't get sent to their spam/junk email folder). The subject line of the forgot password email is: Blackboard Collaborate Password Reset. Students then select

the link that has been emailed to them and enter a new secure password. Students then use the Collaborate accounts to conduct interviews and create recordings as needed, in line with guidance from academic staff and their research ethics committee. Under no circumstances should recordings be downloaded from Collaborate. Collaborate users are responsible for keeping their recordings safe and secure, and failure to do so may make them personally liable for a data breach. Prior to the account expiry date, students should delete all recordings. Please note that LearnTech will not extend the account expiry date on student request. If the date is to be extended the request must come from staff, with ample notice given for this request.

For data protection reasons, students or colleagues should not be using phone-based apps to record interviews for GDPR reasons. Similarly, interviews should not be recorded interviews in Zoom/Skype etc (although, as a work-around, it may be appropriate to use a Dictaphone to record an online conversation providing all parties give informed consent to this).

5.6 Data management

5.6.1 Key principles: data management

Researchers must pay careful consideration to the handling, storage, dissemination and archiving of data during and after any research project. It is the responsibility of the researcher to ensure that data management is legal and ethical, as per the University of Northampton's *Data Management Policy* (under development in 2022) and *GDPR/DPA Policy and Procedures*.

Key expectations in relation to research data management are laid out in LLS guidance.

5.6.2 Personal data

All research involving the collection of personal data must comply with the UK *Data Protection Act* 2018 (DPA) and the EU *General Data Protection Regulation* 2018 (GDPR). The DPA defines personal data as any,

> "Records or information that on its own, or linked with other data or information in the possession of, or likely to come into the possession of, the data controller, can reveal the identity of an actual living person".

The GDPR extends this definition to include online identifiers, IP addresses, and situations in which individual identities might be inferred from researchers' practices of handling or presenting data (e.g. via filing or numbering systems, chronologically-ordered data, or context-specific information which might identify individuals even if they are pseudonymised).

Researchers who, for example, link through to an online survey site from a social media platform should be aware that the social media platform might track (and will certainly be capable of tracking) the ID of anyone who 'clicks-through' and

that this information might be collected, pass through and be stored in states with different legal requirements to GDPR. A researcher who uses social media platforms etc. cannot guarantee anonymity of anyone who 'clicks-through'.

5.6.3 Sensitive personal data

Researchers must take special care if their project involves collection of sensitive personal data. The DPA definition of sensitive personal data encompasses,

> "data on a person's race, ethnic origin, political opinion, religious or similar beliefs, trade union membership, physical or mental health or condition, sexual life, commission or alleged commission of an offence, proceedings for an offence (alleged to have been) committed, disposal of such proceedings or the sentence of any court in such proceedings".

5.6.4 The data management plan

Where researchers intend to collect any personal data it is not sufficient to assert that data protection law will be upheld. For projects which will collect personal data, the ethics application must include a data management plan (see template in PGR toolkit, or available via Faculty/Department Ethics Committee Chairs (see section 10.3.3)). explaining the purpose of collecting these data, and outlining how data will be stored securely, handled carefully, and processed in accordance with the rights of research participants (NB. see expectations regarding data management, anonymisation and informed consent below).

Researchers must clearly explain how data will be stored securely during their project and how data will be archived. The University of Northampton's current default expectations regarding secure file and data storage are outlined below. Exceptions to these expectations must be clearly explained and must be approved by the Research Ethics Committee. Where research is externally funded, funders may have specific or additional data management requirements. It is the researcher's responsibility to check such requirements and ensure that their data management strategy is appropriate

Default expectations: secure file storage

Research by UON staff and PGRs (PhDs, DProfPrac, DBA)
IT Services and the UON Research Ethics Committee have collaborated to develop **Research SharePoint** – this new, secure space for managing data during research projects is currently the default space for management of data during research projects. Key points are:

- all UON staff and PGRs can be provided with a secure Research SharePoint space immediately on request. Provision can also be provided for Masters or undergraduate projects involving sensitive personal data or vulnerable participants
- Research SharePoint settings have been designed to align with requirements of the UON Research Ethics Code & Procedures, IT Acceptable Use Policy, and guidance on research data management, with access limited by permissions
- All Research SharePoint spaces are administered by Research Ethics Committee Leads and Faculty Research Leaders, so tailored, timely, research-focused support will be available to users
- All Research Sharepoint users must abide by guidance and regulations relating to the use of UON IT systems and data management as per the UON *Acceptable Use* and *Smart Working* policies. Briefing and guidance will be provided to all new users of Research Sharepoint.
- Each Research SharePoint space is set up so administrative access is possible for the Chair of UON's Research Ethics Committee ('research owner') and a local 'research admin' (Postgraduate Research Administrator or Faculty Researcher Leader). This is a required safeguard in line with UON's IT policies. However, this admin access will never be used unless there is a specific, exceptional issue as per section 6.7 of the attached Acceptable Use policy. All colleagues with admin access will have signed a strict, enforceable confidentiality agreement and code of conduct which means they will face disciplinary action if they access files for any other reason. All accesses to documents are logged. If needed unauthorised access will be tracked and investigated.
- If you would like to set up a Research SharePoint space for a current or forthcoming research project, please contact john.horton@northampton.ac.uk in the first instance.

Research by UON Master's students

- Data should be stored on password-protected folders on Sharepoint. Personal data must be stored in a separate, password-protected folder to research data.
- Where data collection is deemed (by the appropriate ethics committee) to be particularly sensitive or high risk, an application should be made to arrange data storage on Research Sharepoint (contact john.horton@northampton.ac.uk)
- As a default, Master's research data stored on Sharepoint and Research Sharepoint will be deleted two years after it was last accessed. If, there is a need to preserve data for longer than two years, supervisors should contact the Research Ethics Committee Chair to arrange an extended Research Sharepoint space.

Research by UON undergraduates

- Where research does not involve collection of data that are sensitive (as defined by the UON Ethics Code & Procedures) or personal (as defined by GDPR), data can be stored on Onedrive. Settings should be placed on the folder to allow only access to the supervisor and student.
- Where research does involve collection of sensitive or personal data, data should be stored in password-protected folders on Sharepoint, with enhanced security settings to restrict rights of access to named individuals. Personal data must be stored in a separate, password-protected folder to research data.
- As a default, undergraduate research data stored on Onedrive and Sharepoint will be deleted two years after it was last accessed. If, exceptionally, there is need to preserve data for longer than two years, please contact UON Records Manager (phil.oakman@northampton.ac.uk) in advance of any such deletion period.

General UON expectations regarding research data management are as follows. Any exceptions to these expectations must be clearly explained and must be approved by the Research Ethics Committee.

- Researchers should not be storing work or research data on laptops or USB drives – these are not secure or backed up.
- Research data or personal data (as defined by GDPR) must be stored in a separate password-protected folder to research data. Where researchers intend to collect any sensitive personal data relating to individuals (currently

alive, or living in the past 100 years) the ethics application must outline the enhanced procedures they will adopt to safeguard individuals in the handling and reporting of data.

- Particularly sensitive documents should have a further layer of document-level password protection. If it is necessary to save personal data (e.g. names, addresses, email, etc), the personal data must be stored in a separate password-protected folder to research data. Sharepoint should be used to 'transfer' data rather than downloading onto a memory stick).

- It is expected that research data should be preserved for at least 10 years after data collection. All staff and PGRs can submit appropriately-prepared underpinning datasets to Pure for long-term preservation.

- Analyses of data – including those by UON staff in relation to colleagues and students in decision-making – must adhere to expectations of the UON *Responsible Metrics Policy* and underpinning *San Francisco Declaration on Research Assessment* (DORA).

- Use of routinely-collected / monitoring data (e.g student characteristics or module evaluation data) must be carefully handled and used only for the purposes defined at the outset when seeking consent from respondents. Any additional or subsequent use (e.g. using student records in subsequent research outputs) must be covered by either a consent process at the outset, or a retroactive consent process. Faculty/department ethics committees can be consulted for expert advice is this is required.

- All research outputs must include a data access statement which aligns with any funder, professional body or other requirements around data management, as per LLS Guidance on *Datasets and Data Access Statements*.

For UON staff and PGR research, guidance in relation to common data management scenarios is as follows

Type of data/activity	**Default expectation about data storage**
Handling research materials, reports and data that are **already in the public domain**	Can be stored on Onedrive. Author and source of information should be recorded as per standard academic referencing conventions. It is the researcher's responsibility to check whether any copyright clearance, permissions or intellectual property agreement is required to use or publish the data.
Transferring data from another organisation	Must be stored as password protected files/folders on Research Sharepoint as per the default expectations above. Sharepoint should be used to 'transfer' data. Data transfer must be covered by a data sharing agreement which explicitly outlines: permission to transfer data; terms and conditions attached to the transfer; ways in which data can be used; permissions re. who may access the date; and the transferrer's requirements re. retention and/or disposal of the data.
Handling datasets, texts, images or other materials in which **no individual people (currently alive, or living in the past 100 years) are identifiable**	Can be stored on Onedrive or Sharepoint. Author and source of information should be recorded as per standard academic referencing conventions. It is the researcher's responsibility to check whether any copyright clearance, permissions or intellectual property agreement is required to use or publish the data.
Storing **permissions letters and consent forms**	Scanned copies should be stored as password protected files/folders on Research Sharepoint. Permissions letters and consent forms must be stored in a separate password-protected folder from research findings. Researchers should bear in mind that, if consent forms are lost, there is no way of evidencing that they have any legal right to handle a participant's personal data. Exceptionally, where research does not involve written consent forms, researchers must ensure that they have a strategy in place to record evidence of consent and store this evidence in auditable format.

Storing **personal data** (e.g. names, addresses, or other personal data as defined by GDPR)	Must be stored as password protected files/folders on Research Sharepoint. Research participants must be provided with clear information about why personal information is being collected, why, who will access it, what it will be used for, etc, and this should be explicitly built into the strategy for obtaining and recording participants' informed consent. It is expected that data should be pseudonymised and anonymised as far as is reasonable, and ASAP during data analysis. Where it is necessary to keep personal data on file, the data must be stored in a separate password-protected folder from research findings. Where it is necessary to use transcribers or translators, a binding confidentiality agreement must be used which explicitly outlines requirements re. secure and appropriate handling of personal data. Research participants must also explicitly consent to the use of transcribers/translators.
Recording and analysing **audio files** (e.g. interviews or focus groups)	Should be stored as password protected files/folders on your Sharepoint. It is recommended that WAV, IFF or FLAC file types are used. Great care must be taken with recording devices (e.g. the University Records Manager has dealt with incidents where researchers have borrowed recording equipment then lost the devices with confidential information on them!)
Recording and analysing **visual materials** (e.g. photos or videos)	Digital visual materials should be stored as password protected files/folders on Research Sharepoint. Hard copies of visual materials should be handled sensitively and stored securely. It is recommended that scans or digital photographs are used to back up visual materials and store them on Sharepoint. It is expected that data should be pseudonymised and anonymised as far as is reasonable, and ASAP during data analysis.
Handling **survey data**	Research participants must be provided with clear information about why personal information is being collected, why, who will access it, what it will be used for, etc, and this should be explicitly built into the strategy for obtaining and recording participants' informed consent.

	It is expected that data should be pseudonymised and anonymised as far as is reasonable, and ASAP during data analysis. It is recommended that individual responses should only be retained for as long as it takes to collate, anonymise and aggregate data. Hard copies of surveys should be handled sensitively and stored securely. The University of Northampton recommends that use of 'Online Surveys' (formerly 'Bristol Online Surveys') for online survey data collection. When using online surveys, data should be downloaded from the online interface and stored as password-protected files ASAP. Data must typically not be left live in the online survey system more than three months after the survey has closed.
Saving **draft chapters in which data are anonymised**	Can be stored in Onedrive, your networked drive, or Sharepoint
Archiving of anonymised data after completion of PhD	Arrangements should be made to store appropriately-prepared underpinning datasets on Pure.

5.6.5 Data management and informed consent

Research participants must be clearly informed about how personal data and research data will be used, stored, preserved, shared and disseminated. The GDPR requires that personal data can only be collected and stored if participants give explicit informed consent to the ways in which the data will be used, stored, preserved, shared and disseminated. Consent forms and participant information sheets must explicitly include this information. It is recommended that consent forms and participant information sheets should not preclude sharing and preservation of anonymised data (e.g. statements that data will be 'destroyed' or 'only seen by the researcher' should be avoided), unless specific conditions or embargoes are placed upon the research (e.g. by research funders, or via agreed plans to commercialise Intellectual Property (IP) as per section 5.4.6). Where such conditions or embargoes preclude sharing and preservation of anonymised data, this must be specifically explained in the ethics application.

5.6.6 Storing personal data

It is expected that personal data should be stored separately from research data, and that researchers should take all reasonable measures to ensure that individuals are anonymised in stored and disseminated data. Exceptions to these expectations must be clearly explained and must be approved by the Research Ethics Committee. Research participants must be clearly informed of the ways in which data will be anonymised. Particular care must be taken when dealing with sensitive topics, or when working in organisations, institutions or scenarios

where the identity of individuals might be inferred by others: in such situations, researchers must outline the enhanced procedures they will adopt to safeguard individuals.

5.6.7 Data sharing agreements

Where projects involve the transfer of data between organisations, researchers must confirm that data sharing agreements or similar are in place and outline strategies for protecting data during data sharing. A proforma is available in the PGR and supervisor toolkits and should be checked and approved by the Chair of the UON Research Ethics Committee and Records Manager (contact john.horton@northampton.ac.uk in the first instance).

If a project involves sharing personal data with another organisation or third party, it will be necessary to log a Privacy Impact/ Data Protection Impact Assessment (PIA) with the University's Records Manager. Please contact recordsmanager@northampton.ac.uk for advice, if this situation arises Researchers working with transcribers or translators (or similar intermediaries/third parties) should use a confidentiality and non-disclosure agreement to mitigate ethical risks. Professional transcribers/translators might have a standard document that they routinely use, or researchers can adapt the following proforma produced by the UK Data Service: https://www.ukdataservice.ac.uk/media/622354/ukda-transcriber-confidentiality-agreement.pdf

5.6.8 Using images, texts and secondary data

Where projects involve use of secondary data, images, texts, or other materials in which individual people (currently alive, or living in the past 100 years) are identifiable, researchers must confirm that permissions to use these materials are in place and outline strategies for safeguarding individuals.

5.7 Research misconduct

5.7.1 Defining research misconduct

The University of Northampton defines research misconduct as follows:

Misconduct in relation to research includes, although is not limited to, the following conduct:

- Fabrication or falsification
- Misrepresentation of data, research process, and/or interests and/or involvement;
- Plagiarism – encompassing all forms of 'contract cheating', 'essay mills', inappropriate collusion and academic misconduct in research contexts;
- Failures to follow accepted procedures or to exercise due care in carrying out responsibilities for:
  - avoiding unreasonable risk or harm to:
    - research participants
    - researchers and colleagues;
    - animals used in research; and
    - the environment; and
  - the proper handling of privileged or private information on individuals collected during the research;
- Proceeding without appropriate ethical approval;
- Breaching either or both the University's Research Ethics Code & Procedures and/or ethical requirements of relevant professional and/or accrediting bodies as apply to the research, programme of study, module or assessment item. This includes, but is not limited to:
  - Falsifying ethical approval
  - Breaching the conditions or requirements of ethical approval
  - Contravening expectations of research integrity/approval required by a specific item of assessment, module or programme
  - Contravening supervisory/tutor guidance about research integrity/approval
  - Acting in a way which contravenes the expectations of published/available/accessible ethics code-of-practice(s) applicable to the subject matter, discipline or profession in question
  - Breaching conditions or groundrules laid out in project consent processes
- Failures to adhere to UON policy and/or funder requirements in relation to open access and good data management
- Demonstrating unfair or exploitative practices in relation to academic collaboration, co-authorship or recognising contributions to projects
- Behaving in ways that contravene UON's *Equality, Diversity and Inclusion Policy* or *Together@UON Commitment to Equality and Inclusion*.
- Behaving in ways which contravene UON's policies in relation to *Bullying and Harassment* or *Sexual Harassment, Violence and Misconduct* which encompass a wide range of discriminatory and offensive behaviours including those that constitute subtle breaches of trust, abuses of power and crossing boundaries of appropriate conduct.

It should be noted that University internal policies and procedures do not prevent the possibility of external action being taken for serious ethical breaches, as per relevant legal, professional, regulatory or context-specific duties.

5.7.2 Research misconduct and the ethics application

Research misconduct is a serious breach of academic integrity. Failure to undertake the appropriate ethical review procedure constitutes a form of research misconduct as a 'failure to follow accepted procedures or to exercise due care' in carrying out research.

5.7.3 Research misconduct: powers and procedures

The *Research Misconduct Policy* outlines the University of Northampton's powers and procedures in the event of allegations of research misconduct by staff or students. Suspected research misconduct on undergraduate or level 7 modules should be handled as per the Suspected Academic Misconduct Procedure in the University of Northampton's *Academic Integrity and Misconduct Policy*. Suspected research misconduct by level 8 researchers should be investigated via the process detailed in Appendix 1 of the *Academic Integrity and Misconduct Policy*. Suspected research misconduct by University of Northampton staff, or researchers working under the auspices of the University, should be investigated via the process outlined in the *Research Misconduct Policy*. The University of Northampton's *Ethics Code and Procedures* and *Research Misconduct Policy* provide specialist guidance, regulations and expectations which should be consulted in any suspected cases of research misconduct. Institutional and Faculty Ethics Committees can also be consulted for expert guidance on such cases. The University of Northampton's *Whistleblowing Policy* sets out the rights and responsibilities of those who report or attempt to report research misconduct or wider concerns in relation to research ethics.

Where research misconduct involves suspected breaches of UON's *Equality, Diversity and Inclusion Policy*, *Bullying and Harassment* policy or *Sexual Harassment, Violence and Misconduct*, cases should undergo simultaneous reporting and investigation via the *Research Misconduct Policy* alongside the reporting procedures outlined in those policies. UON opposes all forms of discrimination, bullying, harassment or victimisation. This means actively challenging such behaviours whenever they occur, not leaving it to someone else to act or speak out. Staff and students are expected to help prevent discrimination, bullying, harassment or victimisation by reporting incidents they experience or observe.

5.7.4 Academic misconduct at Level 8

The university's *Academic Misconduct and Integrity Policy* applies at level 8, but stipulates that cases of misconduct concerning PhD studies will be dealt with by Academic Integrity Officers (AIOs) with a doctoral qualification and supervisory experience. If you come across a case of potential academic misconduct at this level, please contact your faculty AIO or the graduate school. Information about

the policy, other resources and the full list of AIOs are here: https://www.northampton.ac.uk/ilt/academic-development/academic-integrity/ Guidance should also be taken from the University Academic Integrity Officer and Academic Registrar.

6 Procedures for Approval

6.1 Procedures for gaining ethical approval are contained in the Procedure in Appendix A below.

7 Key responsibilities

7.1 Researchers are responsible for seeking ethical approval for their research and for only undertaking that research which has been given ethical approval.

7.2 The Research Ethics Committee and Faculty Ethics Committees are responsible for having in place procedures for receiving and reviewing and the approval of research projects and proposals, as summarised in section 4.3 and Appendix A below.

8 Links to related UON Policies/Guidance/Regulations

Policies

8.1 Research Integrity Policy
8.2 Research Misconduct Policy
8.3 Framework for Postgraduate Research Training
8.4 Postgraduate Research Code of Practice
8.5 Intellectual Property policy
8.6 Codes of Conduct for staff, postgraduate researchers or students
8.7 Data Management Policy
8.8 GDPR/DPA Policy and Procedures
8.9 Whistleblowing Policy
8.10 Equality and Inclusion Policy
8.11 Health and Safety Management policy
8.12 IT Acceptable Use Policy
8.13 Intellectual Property Policy
8.14 Responsible Metrics Policy
8.15 Academic Integrity and Misconduct Policy

Guidance

8.14 Guidance on Conflicts of Interest and Loyalty
8.15 Guidelines on Declarations of Gifts and Hospitality
8.16 Prevent Duty Guidelines
8.17 Research Ethics Committee Guidance

9 Links to related external documents (e.g. QAA)

9.1 The Concordat To Support Research Integrity. Universities UK, 2018. Available from: http://www.universitiesuk.ac.uk/policy-and-analysis/reports/Pages/research-concordat.aspx

10 Appendices

10.1 Research Ethics: Procedures for Approval

10.2 Discipline-based guidance on research ethics

Summary Sheet:

Policy Title:	
Research Ethics Code and Procedures	
Purpose of Policy and to whom it applies (please specify cohorts):	
To provide expectations for the ethical conduct of research conducted by staff and students of the University and for research conducted under the auspices of the University. This revised version provides updated guidance on new expectations around research data protection and management in line with new EU General Data Protection Regulation, plus new information about online research methods and enhanced guidance on research misconduct and safeguarding	
Owner and Department:	
Prof John Horton, Chair of Research Ethics Committee, Laura Pereira, Postgraduate Research Manager (Research Ethics Committee Officer)	
Principal contact:	
Prof John Horton, Chair of Research Ethics Committee	
Dissemination and implementation plan:	
Via Research and Enterprise Committee, Research Ethics Committee, Faculty/LLS Ethics Committees, Faculty Research Leaders, Research Degrees Boards and Graduate School	
Date of initial committee approval (state committee name):	Research Ethics Committee – Sept 2021 Research and Enterprise Committee –
Date of Senate approval:	
Date for implementation and cohorts to which it applies:	Immediate implementation
Proposed date of annual update:	Oct 2022
Date of last annual update:	Oct 2019
Proposed date of full review:	Oct 2024
Date of last full review:	Oct 2018
Version number and date:	3.0 Oct 2021

10 Appendix A – Research Ethics: Procedures for Approval

10.1 Introduction

10.1.1 Procedural principles

Following the principles that underpin the University of Northampton's general quality assurance systems, responsibility for ensuring that research is conducted in an ethical way lies at the closest point possible to its actual conduct. Responsibility for the ethical conduct of research, therefore, rests primarily with the person who is planning and undertaking a project. The role of the University's Research Ethics Committee (REC), and Faculty (or Department) Ethics Committees (FEC), is to provide expert guidance to support ethical research practice and a procedures for robust review and approval of ethics applications. The procedures are intended to be facilitative, not restrictive or inhibitory.

10.1.2 All research at the University of Northampton must undergo appropriate ethical review in line with expectations of the *Research Ethics Code*. Responsibilities for ethical review are summarised in Figure 1.

Figure 1 Responsibilities for ethical review at the University of Northampton.

University Research Ethics Committee (see sections 10.2 and 10.6.1)
- Maintains *Research Ethics Code and Procedures* and supporting guidance
- Reviews all Postgraduate Research (PGR) ethics applications
- Reviews any items referred from Faculty/Department Ethics Committees
- Monitors consultative, evaluative and marketing research carried out by UON with its students and staff

Faculty/Department Ethics Committees (see sections 10.3 and 10.6.2)
- Review ethics applications for research by staff from the Faculty/Department and cognate Research Institutes
- Monitor and advise course, module or programme level ethics processes for research by the Faculty's taught postgraduate and undergraduate students
- Reviews any items referred from course/module/programme level

Course/module/programme-level ethics processes (see section 10.4)
- Manage local practice for reviewing ethics applications for research by taught postgraduate and undergraduate students

10.1.3 In all contexts, ethical review must involve a written, auditable application and approval process.

10.2 Ethical review for Postgraduate Research Degrees

10.2.1 All postgraduate researchers at the University of Northampton or undertaking postgraduate research degrees accredited by the University must seek ethical approval from the Research Ethics Committee by completion of the online application process in Gateway (unless the Committee has specifically approved alternative arrangements for course-level ethical review for research-based taught modules on professional doctorates). The Committee may require amendment or resubmission prior to approval. Detailed feedback highlighting amendments, requirements for resubmission, advisory comments and/or good practice shall be provided. Time should be allowed for due consideration when applications are made.

10.2.2 PGRs may apply for:

- 'Full approval' – i.e. approval of all proposed elements of a research project, covering all research materials and supporting documentation
- 'Approval in principle' – i.e. initial approval of a project design, but not covering all research materials and supporting documentation (e.g. may be used where a researcher requires a very early ethical approval to satisfy requirements of a research setting or funder). In such cases, the researcher must not proceed with data collection until subsequent full approval has been granted.
- 'Phased approval' – i.e. approval of all research materials and documentation relating to a particular portion of a proposed project (e.g. may be used where a researcher is ready to proceed with the first phase of a project, but subsequent phases may require further development or may be contingent on the findings of the first phase). In such cases, the researcher may only proceed with the approved phase: further phases must be submitted for ethical approval in due course.
- Amendments to existing approvals – If a PGR proposes to change or extend an approved project, details of the change must be submitted to the Research Ethics Committee via Gateway. Amendments to study design, research materials, sampling strategy, or ethical protocols can typically be approved via an expedited review process via Chair's Actions. In the approved ethics application in Gateway, clicking 'significant amendment' will open a short form that asks for a brief description of the amendment

10.2.3 PGRs must secure one of the approvals listed in section 10.2.2 for their project as a condition of Transfer (unless the Research Ethics Committee has approved alternative arrangements for course-level ethical review). This procedure does not preclude a researcher or supervisory team from seeking advice or approval from the Research Ethics Committee other than at transfer (e.g. prior to registration or when an ethical issue arises during the course of the research).

10.2.4 Where research *does not* involve engagement with people, personal data, animals, human tissue, materials in which people living within the last 100 years are identifiable, or otherwise sensitive materials, researchers may undergo a shorter, expedited review process. In such cases, researchers must provide background information about their project and a clear, concise explanation why their project poses a 'low ethical risk' (e.g. 'low ethical risk' projects might include those which are purely based on labwork, literary discourse analysis, pre-twentieth century archival work, geoscientific fieldwork, or creative arts).

10.2.5 The ethical approval process may require researchers to modify their proposed research. Failure to obtain ethical approval would generally be grounds for action via the University of Northampton's *PGR Satisfactory Progress* or *Research Misconduct* Policies. In exceptional cases, the University of Northampton reserves the right to cancel or terminate ethical approvals for previously-approved projects where there is evidence to suggest that ethical or safeguarding risks have emerged since approval was granted.

10.2.6 PGR theses must include a statement confirming that research has been approved by the UON Research Ethics Committee and the researcher has adhered to principles and expectations of the UON Research Ethics Code and any relevant external, funder or professional body requirements. Failure to so this, or any evidence that relevant ethical principles have not been met, may be grounds for action under UON's Research Misconduct procedures (section 5.7).

10.3 Ethical review for research by University staff

10.3.1 Each Faculty (or Department) Ethics Committee shall establish a procedure for the review and approval of ethics applications for staff research activities within the Faculty/Department and cognate Research Institutes.

10.3.2 University staff who are seeking ethical approval for postgraduate research must seek ethical approval from the Research Ethics Committee by completion of the online application process in Gateway as outlined in section 1.2.

10.3.3 Otherwise, University staff must seek ethical approval for all research activities via the procedure established in their Faculty or Department. Staff in Research Institutes must seek ethical approval via the most appropriate Faculty or Department Ethics Committee. Current Faculty processes are updated here: https://cpb-eu-w2.wpmucdn.com/mypad.northampton.ac.uk/dist/0/11504/files/2021/07/Faculty-Ethics-Committees-Approval-Process.pdf

Chairs of Faculty/Department Ethics Committees can advise re. procedures:

Faculty of Health, Education and Society
Contact: Michelle Pyer (Health/wellbeing) (michelle.pyer@northampton.ac.uk)
Jane Murray (Education) (jane.murray@northampton.ac.uk)
Manos Daskalou (Psychological & Sociological Sciences)
(manos.daskalou@northampton.ac.uk)

Faculty of Business and Law
Contact: Simon Sneddon (simon.sneddon@northampton.ac.uk)

Faculty of Arts, Sciences and Technology
Contact: Merryn Ekberg (merryn.ekberg@northampton.ac.uk)
Andrew Hewitt (Andrew.Hewitt@northampton.ac.uk)

Library and Learning Services
Contact: Dawn Hibbert (dawn.hibbert@northampton.ac.uk)

10.3.4 Ethics approvals for staff research may require amendment or resubmission prior to approval. Detailed feedback highlighting amendments, requirements for resubmission, advisory comments and/or good practice shall be provided. Time should be allowed for due consideration when applications are made.

10.3.5 Researchers may apply for:

- 'Full approval' – i.e. approval of all proposed elements of a research project, covering all research materials and supporting documentation
- 'Approval in principle' – i.e. initial approval of a project design, but not covering all research materials and supporting documentation (e.g. may be used where a researcher requires a very early ethical approval to satisfy requirements of a research setting or funder). In such cases, the researcher must not proceed with data collection until subsequent full approval has been granted.
- 'Phased approval' – i.e. approval of all research materials and documentation relating to a particular portion of a proposed project (e.g. may be used where a researcher is ready to proceed with the first phase of a project, but subsequent phases may require further development or may be contingent on the findings of the first phase). In such cases, the researcher may only proceed with the approved phase: further phases must be submitted for ethical approval in due course.

In all cases if a researcher proposes to change or extend an approved project, details of the change must be submitted to the Faculty Ethics Committee.

10.3.6 Staff research projects must receive the appropriate approval prior to data collection. This procedure does not preclude researchers from seeking advice their Faculty Ethics Committee at any time.

10.3.7 Faculty Ethics Committees may seek advice from the University Research Ethics Committee at any time. Exceptionally, Faculty Ethics Committees may refer ethics applications up to the University Research Committee in cases where:

- the Faculty Ethics Committee requires additional, multidisciplinary scrutiny in order to reach a decision
- the Faculty Ethics Committee membership has a conflict of interest in relation to an application
- an application poses particularly complex or unprecedented ethical issues which require a precedent or institutional position to be set
- applications include high risk elements such as those outlined in section 4.6

10.3.8 Where research poses a low ethical risk (see section 10.2.4), researchers may undergo a shorter, expedited review process. In such cases, researchers must provide background information about their project and a clear, concise explanation why their project poses a 'low ethical risk'.

10.3.9 The ethical approval process may require researchers to modify their proposed research. Failure to obtain ethical approval will generally be grounds for action via UON's *Research Misconduct Policy*. In exceptional cases, the University of Northampton reserves the right to cancel or terminate ethical approvals for previously-approved projects where there is evidence to suggest that ethical or safeguarding risks have emerged since approval was granted.

10.3.10 Research outputs and final reports must include a statement confirming that research has been approved by the relevant Faculty/Department ethics committee and the researcher has adhered to principles and expectations of the UON Research Ethics Code and any relevant external, funder or professional body requirements. Failure to so this, or any evidence that relevant ethical principles have not been met, may be grounds for action under UON's Research Misconduct procedures (section 5.7). For externally-funded projects, the UON RIFS team and Research Ethics Committee will maintain a process for requesting final confirmation that UON and funder requirements have been met, upon completion of the project.

10.4 Ethical approval for undergraduate and postgraduate taught degrees

10.4.1 Staff responsible for research by taught postgraduate and undergraduate students (e.g. for undergraduate or taught postgraduate dissertations) shall establish course, module or programme-level procedures for ethical review, as appropriate, in line with principles outlined in section 10.1.1. All research by taught postgraduates and undergraduates shall pass through such a procedure.

10.4.2 Each Faculty Ethics Committee will establish a procedure for maintaining oversight of course, module or programme-level ethics processes in their Faculty.

10.4.3 Staff responsible for course, module or programme-level ethics processes may seek advice from their Faculty Ethics Committee at any time. Exceptionally,

course, module or programme-level ethics applications may be referred up to the Faculty Ethics Committee in cases where:

- additional, multidisciplinary scrutiny is required in order to reach a decision
- course, module or programme-level staff have a conflict of interest in relation to an application
- an application poses particularly complex or unprecedented ethical issues which require a precedent or Faculty position to be set
- applications include high risk elements such as those outlined in section 4.6

10.4.4 The ethical approval process may require researchers to modify their proposed research. Failure to obtain ethical approval may be grounds for action via the University of Northampton's Cause for Concern procedures or *Research Misconduct Policy*. In exceptional cases, the University of Northampton reserves the right to cancel or terminate ethical approvals for previously-approved projects where there is evidence to suggest that ethical or safeguarding risks have emerged since approval was granted.

10.4.5 Dissertations/thesis must include a statement confirming that research has been approved via the relevant course, module or programme-level procedure, and the researcher has adhered to principles and expectations of the UON Research Ethics Code and any relevant external, funder or professional body requirements. Failure to so this, or any evidence that relevant ethical principles have not been met, may be grounds for action under UON's Research Misconduct procedures (section 5.7).

10.5 Institutional research

Institutional research (i.e. any research activity conducted or commissioned by the University of Northampton) shall have regard for the expectations of the *Research Ethics Code* and shall pass through the most appropriate Faculty or Department's procedure (see section 1.3). It shall be the responsibility of the Research Ethics Committee to monitor/audit institutional research and liaise with key colleagues and departments as required to support and monitor these processes

10.6 Ethics Committee Procedures

10.6.1 University Research Ethics Committee

10.6.1.1 Purpose

The Research Ethics Committee will be convened as a sub-committee of the Research and Enterprise Committee – its primary business shall be:

- to monitor and inform the Research and Enterprise Committee on strategic and institutional developments in research ethics
- the consideration and approval in relation to ethical matters of:
  a) PGR projects and
  b) funded research and consultancy, research by staff and other research activities referred by Faculties and Departments.

10.6.1.2 Terms of reference

Institutional Research Ethics Framework

- To maintain, update and develop the University of Northampton's Research Ethics Code.
- To advise the Research and Enterprise Committee on the development of institutional policies and guidelines relating to research integrity and ethical issues arising from postgraduate education, research, consultancy and other related activities.
- To contribute to informed debate within the University community
- and disseminate good practice.
- To contribute to institutional responses to national and international developments relating to ethical issues
- To maintain reference material on ethical guidelines produced by professional bodies, funding councils and other national bodies.
- To consider any matters referred by Senate, the Research and Enterprise Committee, the Research Degrees Committee, Research Degree Boards, Faculties and individual members of staff.

Approval and monitoring

- To monitor University practice in relation to postgraduate education, research, consultancy and other related activities and ensure practice meets nationally accepted standards.
- To monitor the operation of Faculty and Department Ethics Committees and to receive regular reports and minutes.
- To provide advice to schools, supervisory teams and individual members of staff on ethical issues.
- To review and approve PGR ethics applications
- To consider matters referred by Faculty and Department Ethics Committees.
- To receive an annual report from the Faculty and Department Ethics Committees on their activities
- To report annually to the Research Degrees Committee on the activities of the committee

Training and development

- To monitor staff learning needs in relation to staff proposals.
- To maintain the Research Ethics Committee Guidance.

10.6.1.3 Membership

- Chair appointed by Senate
- Head of the Graduate School
- Chair of the Faculty and Department Ethics Committees or their nominees
- Early career researcher representative
- Two PGR representatives nominated by the postgraduate research community body
- Safety, Health and Environment Manager

- Lay Member independent of the Institution (not a current PGR supervisor; no formal links to UON for 3+ years) whose appointment shall be for a period not exceeding 3 years
- Up to 4 co-opted University members appointed for such purpose and for such time as the Committee shall determine
- Co-opted members from partner institutions as determined by the Committee

10.6.2 Faculty and Department Ethics Committees

10.6.2.1 Purpose

Faculty or Department Ethics Committees will be convened as sub-committees of the Research Ethics Committee (REC) – their primary business shall be:

- The consideration of taught programme student dissertations and projects, funded research and consultancy that does not require ethical approval from a committee whose constitution complies with the REC membership, research by staff and referring matters to the REC, which are outside its jurisdiction.

10.6.2.2 Terms of reference

Faculty and Department Ethics Framework

- To provide advice to supervisors and individual members of staff on ethical issues arising from undergraduate and postgraduate education, research, consultancy and faculty practice;
- To contribute to the development of good practice within the Faculty or department
- To contribute to informed debate within the University community
- To consider matters referred by Senate, Research and Enterprise Committee, Research Degrees Committee, Research Ethics Committee, Research Degree Boards, Faculties and Faculty colleagues
- To provide annual reports and regular updates, and refer matters arising, to the University Research Ethics Committee

Approval and monitoring

- To provide advice to students, supervisory teams and individual members of staff on ethical issues.
- To approve in relation to ethical issues undergraduate and postgraduate taught programme dissertations and projects, staff research and funded research and consultancy that does not require ethical approval from a committee whose constitution complies with the REC membership.
- To review, audit and provide documentation of Faculty systems and outcomes in relation to research ethics.
- To refer matters for consideration and advice to the REC. The REC shall be able call in any matter that comes before the FEC for the REC to decide.
- To maintain appropriate records and to report regularly to the REC. Minutes of the FEC must be sent to the REC.

10.6.2.3 Membership

- Chair of the Research Ethics Committee shall have a right of attendance

- Dean of Faculty or Head of Department or nominee (Chair)
- Research Leader
- Member from each of the Faculty/Department's key research areas
- Up to 3 co-opted members appointed for such purpose and for such time as the Committee shall determine but such an appointment shall not exceed 3 years

10.7 Assurance Procedures

10.7.1 Postgraduate research degrees

- Completion and submission of the required documentation.
- All matters that come before the REC are recorded in minutes of meetings.

10.7.2 Research by University staff

- Record of agreed strategies kept by Faculty/Department Research Leader who reports to the Dean of Faculty or Head of Department
- All matters that come before the FEC or REC are formally recorded in minutes of meetings or approved Faculty processes
- Report of an external body approval such as a National Research Ethics Service (NRES) is kept by the Dean of Faculty with a copy to the REC.

10.7.3 Undergraduate and postgraduate taught degree dissertations

- Method of recording strategies to be decided by the appropriate Faculty or Ethics Committee in accordance with the FEC's procedural template.
- All matters that come before the REC and FEC are recorded in minutes of meetings

10.7.4 Institutional research

- Record of agreed strategies kept by the appropriate Head of Department
- All matters that come before the FEC or REC are recorded in minutes of meetings

10.8 Faculty and Department Procedures

10.8.1 Introduction

Each Faculty should have a formal ethics procedure that has been drafted to correspond with these procedures and that complements the overall institutional ethics procedure. Departments with an Ethics Committee should also have a formal ethics procedure that has been drafted to correspond with these procedures and that complements the overall institutional ethics procedure. The Faculty Ethics Committees approve Faculty procedures. A Department's procedure for Institutional Research will be agreed with the Departments of The University of Northampton. Once approved a link to Faculty and Department procedures will appear on the University website.

10.9 Faculty and Department Ethics Committee Procedure Templates: procedures for approvals and referrals

10.9.1 Procedures for approvals and referrals: PGRs

10.9.1.1 With the approval of the Director of Studies a submission to the UON Research Ethics Committee shall be made via the process outlined in section 10.2 and with regard to the expectations of the University *Research Ethics Code*.

10.9.1.2 PGRs shall undertake the Graduate School's specified compulsory and recommended training in research integrity and ethics. In addition, discipline- and project- based training in research ethics and integrity must form part of supervisory support and training for postgraduate researchers.

10.9.1.3 The proposal will be considered and approved or marked for amendments or conditions by the Committee.

10.9.1.4 In cases where research requires ethical approval by an external or professional body (e.g. NHS Research Ethics approval), research must be approved by that body before it can be approved by the UON Research Ethics Committee. The approval of an external or professional body will be accorded primacy as a default position, but the UON Research Ethics Committee may still request amendments or clarifications in line with institutional ethics requirements. For research in the UK, the NHS HRA/MRC Decision Tool can be used to determine whether NHS REC review is required. See also this resource: https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/ If a research project will focus on health/clinical/social care context/topic and the Decision Tool indicates that no NHS REC review is required, evidence of this outcome should be submitted alongside the subsequent application to the UON Research Ethics committee. Please note that additional approvals may be required by external organisations or bodies (for example from local health Trusts). Ethics applications should clearly detail the requirements for further approvals from these bodies (where relevant), and their approach to achieve this. The relevant REC may require evidence that these approvals have been obtained before data collection begins.

10.9.1.5 The Director of Studies is responsible for ensuring that any conditions set by the Committee are met including re-submission for approval of a particular strategy or approval where substantive new ethical issues should arise in the course of the researcher's studies.

10.9.1.6 Research for Postgraduate Research Degrees must be risk assessed, with approval signed off and recorded in line with current Faculty regulations. It is the responsibility of the Director of Studies to ensure a project risk assessment is appropriate.

10.9.1.7 Where there is evidence of procedural irregularity or error in relation to an ethics application decision, postgraduate researchers may make an appeal as per the *Postgraduate Research Appeals Policy.* Other complaints or concerns about the ethics review process should be directed to the Research Ethics Committee Chair or Postgraduate Researcher Representatives.

10.9.2 Procedures for approvals and referrals: research by University staff

10.9.2.1 The Dean of Faculty or Head of Department will nominate a Faculty/Department Ethics Committee Chair. Within each Faculty/Department the Dean, Ethics Committee Chair and research Leader shall agree a procedure for reviewing and approving research ethics applications from University staff, and a process for auditing and reviewing this procedure.

10.9.2.2 Within each Faculty/Department the Ethics Committee Chair will circulate information and materials relating to the agreed ethics approval process, and ensure that these are available to all staff within the Faculty. Where necessary, the Faculty/Department Ethics Committee Chair shall assist with dissemination and training activities around University or Faculty ethics procedures.

10.9.2.3 Each Faculty/Department Ethics Committee is responsible for reviewing and approving all ethics applications relating to research by staff in the Faculty/Department (except for research conducted by staff as part of postgraduate research degrees).

10.9.2.4 In cases where research requires ethical approval by an external or professional body (e.g. NHS Research Ethics approval), research must be approved by that body before it can be approved by a Faculty/Department Ethics Committee. The approval of an external or professional body will be accorded primacy as a default position, but Faculty or University Committees may still request amendments or clarifications in line with institutional ethics requirements. For research in the UK, the NHS HRA/MRC Decision Tool can be used to determine whether NHS REC review is required. See also this resource: https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/ If a research project will focus on health/clinical/social care context/topic and the Decision Tool indicates that no NHS REC review is required, evidence of this outcome should be submitted alongside the subsequent application to the UON/Faculty ethics committee. Please note that additional approvals may be required by external organisations or bodies (for example from local health Trusts). Ethics applications should clearly detail the requirements for further approvals from these bodies (where relevant), and their approach to achieve this. The relevant REC may require evidence that these approvals have been obtained before data collection begins.

10.9.2.5 Within each Faculty the Dean and Ethics Committee Chair shall agree a procedure for maintaining oversight of course, module or programme-level ethics processes within their Faculty.

10.9.2.6 All research by University staff must undergo a process of ethical review via a written, auditable application process as defined by the Faculty/Department Ethics Committee and with regard to the expectations of the University Research Ethics Code.

10.9.2.7 The Faculty/Department Ethics Committee Chair is responsible for maintaining records of documentation relating to staff ethics applications.

10.9.2.8 Staff must notify their Dean/Head of Department, Research Leader and Faculty/Department Ethics Committee Chair in the event of unanticipated matters of ethical concern arising in the course of research.

10.9.2.9 Outcomes of staff ethics applications shall be minuted at Faculty/Department research and Enterprise Committees.

10.9.2.10 The Faculty/Department Ethics Committee Chair shall provide an annual report to the University Research Ethics Committee summarising:

- Committee membership
- The process for ethics review and approval for staff research projects
- (If applicable) The process for maintaining oversight of student research on undergraduate and postgraduate taught programmes:
- Training and development undertaken (by the Committee or individual members):
- Any issues, concerns or challenges that should be considered by the University Research Ethics Committee.

10.9.2.11 Research by University staff must be risk assessed, with approval signed off and recorded in line with current Faculty regulations.

10.9.2.12 Research by staff located outside a Faculty (e.g. in a Research Institute or partner college/organisation, or in a University department with no ethics committee) must be approved by the Faculty or Departmental Ethics Committee which is most relevant to the topic of the proposed research.

10.9.2.7 Where there is evidence of procedural irregularity or error in relation to a Faculty Ethics Committee decision, researchers should contact the University Research Ethics Committee Chair in the first instance. Other complaints or concerns about the ethics review process should be directed to the University Research Ethics Committee Chair.

10.9.3 Procedures for approvals and referrals: research for undergraduate and postgraduate taught degrees

10.9.3.1 Staff responsible for research by taught postgraduate and undergraduate students (e.g. for undergraduate or taught postgraduate dissertations) shall establish course, module or programme-level procedures for ethical review and approval, with regard to the expectations of the University Research Ethics Code. All research by taught postgraduate and undergraduate students shall be regulated via such a procedure. The University of Northampton's *Dissertations and principal modules: guidelines and procedures* state that, for undergraduate and postgraduate taught degree students,

> Ethical approval… is required wherever the dissertation/project/research involves human subjects. It is the responsibility of the student to clarify this with the Supervisor. Faculties will ensure that suitable ethics procedures exist and are in complied with in these instances. The process should be as straightforward as possible, and not be unduly restrictive or cumbersome.

10.9.3.2 Staff responsible for course, module or programme-level ethics procedures must inform their Faculty Ethics Chair of their processes for ethical review and must update the Faculty Ethics Chair in the event of new or amended procedures.

10.9.3.3 Staff responsible for new taught postgraduate and undergraduate modules must consult with their Faculty Ethics Chair to agree a process of ethical review.

10.9.3.4 Students must, under the guidance of a supervising tutor, apply for ethical approval via a written, auditable application process. Ethics applications should outline a strategy to deal with anticipated ethical complexities and risks. As a minimum requirement, ethics applications must be reviewed and approved by a supervising tutor and at least one other member of the relevant course, module or programme team. Approval of ethics approvals must be formally recorded in an auditable format appropriate for the course, module or programme context and/or as is required by a professional association code of conduct (e.g. the British Psychological Society). In subject areas which typically present low ethical risks, ethics approvals may, if agreed by the Faculty Ethics Committee, be made by exception with only those research activities that pose particular ethical complexities or risks requiring ethical review.

10.9.3.5 Discipline-based training in research ethics and integrity must form part of support, training and/or taught sessions for taught postgraduate and undergraduate researchers.

10.9.3.6 In cases where research requires ethical approval by an external or professional body (e.g. NHS Research Ethics approval), research must be approved by that body before it can be approved by a Faculty/Department Ethics Committee. The approval of an external or professional body will be accorded primacy as a default position, but Faculty or University Committees may still request amendments or clarifications in line with institutional ethics requirements. For research in the UK, the NHS HRA/MRC Decision Tool can be used to determine whether NHS REC review is required. See also this resource: https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/
If a research project will focus on health/clinical/social care context/topic and the Decision Tool indicates that no NHS REC review is required, evidence of this outcome should be submitted alongside the subsequent application to the UON/Faculty ethics committee. Please note that additional approvals may be required by external organisations or bodies (for example from local health Trusts). Ethics applications should clearly detail the requirements for further

approvals from these bodies (where relevant), and their approach to achieve this. The relevant REC may require evidence that these approvals have been obtained before data collection begins. From 1 September 2021, HRA eligibility criteria for standalone student research means that some Master's level students will be able to apply for ethics review and HRA Approval, but standalone research at undergraduate level that requires ethics review and/or HRA Approval cannot take place. Eligible students should consult this NHS HRA Student Research Toolkit for bespoke guidance. UON does not recommend that Masters students undertake primary research requiring ethical approval from an NHS/HRA Research Ethics Committee other than in exceptional circumstances. The timeframe taken for this type of review can pose challenges in relation to the timeframes available for level 7 dissertation students on taught programmes (please note that Master of Philosophy/MPHIL students are included in the guidance relevant to PGRs, above).

10.9.3.7 Supervising tutors must monitor research activities and ensure that approved strategies are followed. Concerns should be reported and handled via the University of Northampton's Cause for Concern procedures or *Research Misconduct Policy*.

10.9.3.8 Staff responsible for research by taught postgraduate and undergraduate students shall establish a consistent course, module or programme-level procedure for handling cases where ethically sensitive research is conducted without ethical approval (e.g. with regard to whether or not such work should be graded). This procedure, and any penalties, must be clearly communicated to students.

10.9.3.9 Research for undergraduate and taught postgraduate dissertations must be risk assessed, with approval signed off and recorded in line with current Faculty regulations.

10.9.3.10 Staff responsible for research by taught postgraduate and undergraduate students shall establish a process for handling appeals (where there is evidence of procedural irregularity or error) or complaints in relation to a decisions on ethics applications. The Faculty Ethics Committee Chair shall arbitrate in the event of such appeals or complaints.

10.10 Guidance and Training

10.10.1 Specified online training relating to research integrity and ethics is mandatory for all PGRs.

10.10.2 The development programme for new supervisors of PGRs includes a session on the Research Ethics Code and Procedures in relation to postgraduate research students.

10.10.3 Update sessions are offered to PGRs and supervisors under the auspices of the Research Ethics Committee at Graduate School events.

10.10.4 Faculties and Departments are responsible for identifying training needs and delivering training as appropriate and may consult the Chair of the Research Ethics Committee on ethics training.

10.2 Appendix B – Discipline-based guidance on research ethics

10.2.1 Introduction

By nature, guidance provided in the University of Northampton's *Research Ethics Code* is generic. When preparing research ethics application, researchers are encouraged to consult discipline-specific guidance on research ethics and codes of practice prepared by salient professional bodies. Examples are listed below. The Research Ethics Committee would value suggestions for further examples to be included in future revisions of this document.

Archives and Records Association *Code of Ethics*
http://www.archives.org.uk/images/ARA_Board/ARA_Code_of_Ethics_final_2016.pdf

Association of Internet Researchers *Ethical Decision-Making and Internet Research*
http://aoir.org/ethics/

British Academy of Management / chartered Institute of Business Schools *Ethics Guide*
https://charteredabs.org/wp-content/uploads/2015/06/Ethics-Guide-2015-Advice-and-Guidance.pdf

British Association of Social Workers *Code of Ethics*
http://cdn.basw.co.uk/upload/basw_112315-7.pdf

British Educational Research Association (BERA) *Ethical Guidelines for Educational Research* https://www.bera.ac.uk/researchers-resources/publications/ethical-guidelines-for-educational-research-2018
British Psychological Society *Code of Human Research Ethics*
https://www.bps.org.uk/sites/bps.org.uk/files/Policy/Policy%20-%20Files/BPS%20Code%20of%20Human%20Research%20Ethics.pdf

British Psychological Society *Ethics Guidelines for Internet-mediated Research*
https://www.bps.org.uk/sites/beta.bps.org.uk/files/Policy%20-%20Files/Ethics%20Guidelines%20for%20Internet-mediated%20Research%20%282017%29.pdf

British Society of Criminology (BSC) *Code of Ethics for Researchers in the Field of Criminology* http://www.britsoccrim.org/ethical.htm

British Sociological Association (BSA) *Statement of Ethical Practice*
www.britsoc.co.uk/user_doc/Statement%20of%20Ethical%20Practice.pdf

British Sociological Association (BSA) *Using Twitter for Criminology Research*
https://www.britsoc.co.uk/media/24899/using-twitter-for-criminology-research.pdf

British Veterinary Association (BVA) – *Ethics and Animal Welfare*
https://www.bva.co.uk/News-campaigns-and-policy/Policy/Ethics-and-welfare/Animal-research/

Chartered Institution of Library and Information Professionals (CILIP) *Code of Ethics*
https://archive.cilip.org.uk/research/topics/ethics-review/existing-ethical-framework

Department of Health *Research Governance for Social Care Settings*
www.dh.gov.uk/PolicyAndGuidance/ResearchAndDevelopment.

Economic and Social Research Council (ESRC) *Framework for Research Ethics*
http://www.esrc.ac.uk/_images/Framework-for-Research-Ethics_tcm8-4586.pdf

Economic and Social Research Council (ESRC) *Research with Potentially Vulnerable People*
http://www.esrc.ac.uk/funding/guidance-for-applicants/research-ethics/frequently-raised-topics/research-with-potentially-vulnerable-people/

Economic and Social Research Council (ESRC) *Ethical Issues in Visual Research*
http://eprints.ncrm.ac.uk/421/1/MethodsReviewPaperNCRM-011.pdf

Engineering and Physical Sciences Research Council (EPSRC) R*esearch Ethics*
https://www.epsrc.ac.uk/research/ourportfolio/themes/healthcaretechnologies/strategy/toolkit/home/integrity/ethics/

Medical Research Council (MRC) *Good Research Practice*
http://www.mrc.ac.uk/Utilities/Documentrecord/index.htm?d=MRC002415

National Youth Agency (NYA) Ethical Conduct in Youth Work
https://www.nya.org.uk/resource/ethical-conduct-youth-work/

NHS/HRA – Guidance on ethical approvals
https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/

NSPCC Conducting Safe and Ethical Research with Children and Young People
https://www.nspcc.org.uk/services-and-resources/impact-evidence-evaluation-child-protection/conducting-safe-and-ethical-research/

Nuffield Council on Bioethics *Bioethics: The ethics of research involving animals*

http://nuffieldbioethics.org/project/animal-research/

Nuffield Council on Bioethics *The Ethics of Research Related to Healthcare in Developing Countries* http://nuffieldbioethics.org/wp-content/uploads/2014/07/Ethics-of-research-related-to-healthcare-in-developing-countries-I.pdf

Oral History Society *Ethical Considerations*
http://www.ohs.org.uk/advice/ethical-and-legal/2/#ethical-considerations

RCUK *Policy and Guidelines on Governance of Good Research Conduct*
http://www.rcuk.ac.uk/documents/reviews/grc/rcukpolicyandguidelinesongovernanceofgoodresearchpracticefebruary2013-pdf

RESPECT *Code of Practice for Socio-Economic Research*
http://www.respectproject.org/main/index.php

Royal College of Art Research Ethics
https://www.rca.ac.uk/research-innovation/research/research_support/research-committee/research-ethics/

Social Services Research Group – *Research Governance Framework*
http://www.ssrg.org.uk

Townsend, L. and Wallace, C. (2016) *Social Media Research: a Guide to Ethics*
https://www.gla.ac.uk/media/media_487729_en.pdf

UKAID – *Ethics in International Development Contexts*
https://www.oecd.org/dac/evaluation/DFID-Ethics-Principles-Report.pdf

University of Oxford (2016) *Internet-based Research: Best Practice Guidance*
https://researchsupport.admin.ox.ac.uk/files/bpg06internet-basedresearchpdf

World Health Organisation (WHO) *Ethical Standards and Procedures for Research with Human Beings* http://www.who.int/ethics/research/en/