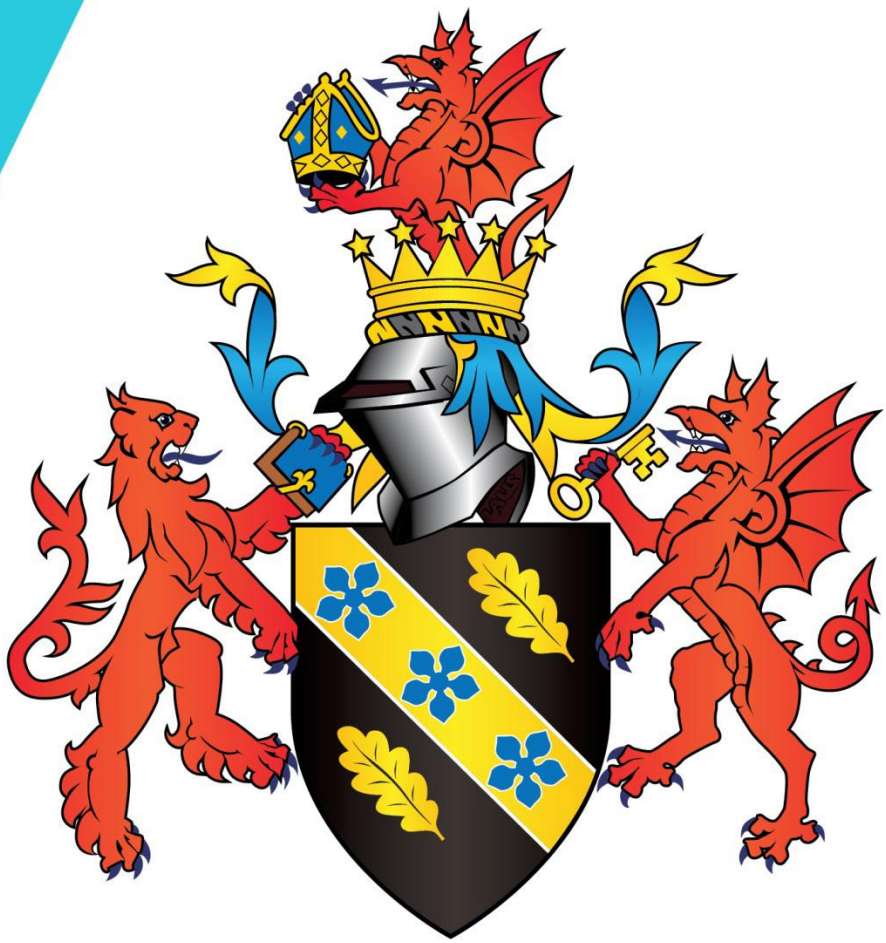
Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David



Research Ethics & Integrity Code of Practice

University of Wales Trinity Saint David

Research Ethics & Integrity Code of Practice

July 2022

1. Introduction

UWTSD and its researchers are expected to maintain the highest ethical standards and to foster values of honesty, rigour, openness, care and respect. To meet these aims, UWTSD will offer its research community:

- An extensive framework for research ethics, comprising clear policies, practices and procedures to support researchers
- Suitable learning, training, and mentoring opportunities to support the development of its researchers
- Robust management systems to ensure that policies relating to research integrity are implemented, that potential concerns are identified at an early stage and that mechanisms to support researchers in need of assistance are provided
- Awareness among researchers that high standards are expected of them.

This Code of Practice expresses UWTSD's commitment to ethical standards by setting out the general ethical principles which the University requires its researchers to follow. This Code also defines what is meant by research misconduct: if research has failed to meet the University's ethical standards.

2. Purpose

The strategic aims and objectives of the University include actively promoting research, enterprise and knowledge exchange activity that is underpinned by high ethical, social and environmental standards. This Code of Practice provides a framework for ethical research practice and decision making within the University.

3. Scope

The Code of Practice applies to all academic and administrative staff, those holding honorary positions at the University, and all students conducting research projects and related activities as part of undergraduate, postgraduate and short courses and research programmes in which students are enrolled/registered at, and/or supervised by staff at the University. For the purposes of this Code, research is defined as work which involves a systematic investigation to establish understanding, facts, principles or contribution to knowledge and its application.
The Code covers all research involving human participants, animals or data not in the public domain, as detailed in **Section 4.3**. Careful ethical consideration should be given to any piece of work at any level conducted within the University, or in partnership with it, that implicates the involvement of others (human or animal) or has the capacity to interfere with or make a difference to their lives. 'Others' commonly refers to participants in the research but could also refer to others affected by it e.g., at risk of physical or mental harm. This is without reference to the length of the piece of work, or the level at which it is undertaken, which included undergraduate research, postgraduate research and staff research. This Code of Practice does not refer directly to broader questions of ethical behaviour within the University in areas other than research.

The procedures and guidelines outlined in this Code of Practice are overseen by the University's Ethics Committee, who, by working with the University's Data Protection Officer, has oversight of data protection compliance on the research undertaken in the University. The Terms of Reference for the Ethics Committee can be found in Chapter 2 of the Academic Quality Handbook (AQH).

4. Code of Practice for Research Ethics and Integrity

The University of Wales Trinity Saint David is committed to the maintenance of high ethical standards in the research undertaken by its staff and students, whether supported directly by the University or funded by external sources. The University recognises its obligations under the Concordat to Support Research Integrity to ensure that research undertaken under its auspices is conducted to appropriate standards and conforms to generally accepted ethical principles and practices of conduct and governance. The University believes that research ethics review and approval are important for the following reasons:

- To uphold the highest standards of rigour and integrity in all aspects of research
- To ensure that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards
- To support 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
- To use transparent, timely, robust and fair processes to handle allegations of research misconduct when they arise
- To ensure that the University meets its obligations as a Data Controller under the Data Protection Act 2018 and the General Data Protection Regulation 2018 ("UK GDPR") with respect to research data processing.
- To work together with other institutions as required from time to time to strengthen the integrity of research and to reviewing progress regularly and openly.

4.1 Research Integrity

Research conducted in and by the University should be undertaken in accordance with commonly agreed standards of good practice. The Concordat to Support Research Integrity recognises that the core aspects of research integrity include:

- **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: 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 conflicts of interest; 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 results as appropriate; and in presenting the work to other researchers and to the general public.
- **Care and respect** for all participants in and subjects of research, including humans, animals, the environment and cultural objects. Those engaged with research must also show care and respect for the stewardship of research and scholarship for future generations.
- **Accountability** for the University to create a research environment in which its staff abd students are empowered and enabled to own the research process. Those engaged with research must also ensure that investigators are held to account when behaviour falls short of the standards set by this Code.

The University recognises that researchers must be able to exercise freedom in their academic choices and must also accept responsibility for the decisions they make. Thus, the

primary responsibility for ensuring that they act according to these principles in all aspects of their research work, including peer review, lies with the individual. However, the University, funders of research and other organisations engaged with supporting research and researchers also have important roles to play. The governance process for staff and the University are outlined in this Code of Practice. In this regard, in line with the Concordat, this Code of Practice seeks to ensure that:

- Researchers, whether at undergraduate, postgraduate or staff level in the University understand the expected standards of rigour and integrity relevant to their research and maintain the highest standards of rigour and integrity in their work at all times.
- The University is responsible for maintaining a research environment that develops good research practice and nurtures a culture of research integrity and supports researchers to understand and act according to expected standards, values and behaviours, and defending them when they live up to these expectations in difficult circumstances

With specific regard to data protection legislation, this means that while the University as a data controller has an obligation to implement appropriate organisational and technical measures, every individual who is subject to this Code must comply with it.

4.2 Annual Research Integrity Report

In meeting the requirements of the Research Integrity Concordat, the University will take steps to ensure that the University's research environment promotes and embeds a commitment to research integrity, that we periodically review our processes to ensure that these remain fit for purpose, and that suitable processes are in place to deal with misconduct. To promote accountability, the University will Produce an annual Research Integrity Report, which will be presented to the University Council, and subsequently be made publicly available on the UWTSD website at the following webpage: https://www.uwtsd.ac.uk/research/research-ethics/

This annual statement will include:

- a summary of actions and activities that have been undertaken to support and strengthen understanding and the application of research integrity issues
- a statement to provide assurance that the processes the University has in place for dealing with allegations of misconduct are transparent, timely, robust and fair, and that they continue to be appropriate to the needs of the organisation
- a high-level statement on any formal investigations of research misconduct that have been undertaken, which will include data on the number of investigations. If no formal investigation has been undertaken, this should also be noted
- a statement on what the institution has learned from any formal investigations of research misconduct that have been undertaken, including what lessons have been learned to prevent the same type of incident re-occurring
- a statement on how the institution creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct

4.3 Research which must be considered for ethical approval

Careful ethical consideration should be given to any piece of work at any level conducted within the University, or in partnership with it, that implicates the involvement of others

(human or animal) or has the capacity to interfere with or make a difference to their lives. 'Others' commonly refers to participants in the research but could also refer to others affected by it e.g., at risk of physical or mental harm. This is without reference to the length of the piece of work, or the level at which it is undertaken, which included undergraduate research, postgraduate research and staff research. Researchers in all cases will:

- Ensure that all research is subject to active and appropriate consideration of ethical issues.
- Comply with ethical, legal and professional frameworks, obligations and standards as required by statutory and regulatory authorities, and by employers, funders and other relevant stakeholders.

The following types of research are considered to involve more than minimal risk and require ethical approval:

Research Participants

- Research involving potentially vulnerable groups, for example, children and young people, those with a learning disability or cognitive impairment or individuals in a dependent or unequal relationship.
- Research involving groups where permission of a gatekeeper is normally required for initial access to members. This includes research involving gatekeepers such as adult professionals (e.g., those working with children or the elderly) or research in communities (in the UK or overseas) where access to research participants is not possible without the permission of another adult, such as another family member (e.g., the parent or husband of the participant) or a community leader.
- Participants who are users of any of the services for which UK Health Departments are responsible. This includes, but is not limited to NHS patients, their data or tissues.
- NHS staff where the research is not limited to non-sensitive questions about their personal role
- Prisoners in the custody of the National Offender Management Service, the Scottish Prison Service or the Northern Ireland Prison Service
- Adult participants who, under the Mental Capacity Act, may lack the capacity to provide informed consent

Subject Matter & Data Sources

- Research involving the processing of personal data as defined by the UK Data Protection Act (2018) and UK GDPR
- Any research that by law requires a Data Processing Impact Assessment (DPIA) before processing can begin (and the UWTSD Data Protection Officer must be consulted).
- Research involving sensitive topics: for example, participants' sexual behaviour, their illegal or political behaviour, their experience of violence, their abuse or exploitation, their mental health or their gender or ethnic status.
- Research undertaken outside of the UK where there may be issues of local practice and political sensitivities, or for which the Foreign and Commonwealth Officer has elevated risk levels.
- Research involving access to records of personal or confidential information, including genetic or other biological information concerning identifiable individuals
- Research involving privileged access to clinical or personal records, or access to potential participants on the basis of their being or having been patients, or the invitation to participants to divulge facts about themselves which they would not wish the investigator to allow to become known to other persons.

- Research which may involve data sharing of confidential information beyond the initial consent given – for example where the research topic or data gathering involves a risk of information being disclosed that would require the researchers to breach confidentiality conditions agreed with participants.
- Research using administrative data or secure data. Researchers using these data sets will need to be approved by the body supplying the data and keep data in secure areas. Issues however may arise when data are linked and where it may be possible to identify participants.
- Research involving the use of human tissue, including foetal and placental material (in compliance with the terms of the Human Tissue Act 2004).
- Research involving the cadavers of or tissue from the deceased (in compliance with the terms of the Human Tissue Act 2004), other than bequeathed cadavers and tissue obtained in the normal course of necropsy
- Research involving any animal, including invertebrates. Research involving live vertebrates and cephalopods must comply with the Animals (Scientific Procedures) Act, 1986, which requires a Home Office Licence for individual researchers, the establishment(s), and the project involved.

Research Methods

- Research involving deception or which is conducted without participants' full and informed consent at the time the study is carried out. It is recognised that there are occasions when the use of covert research methods is necessary and justifiable.
- Research which could induce psychological stress, anxiety or humiliation or cause more than minimal pain.
- Research involving intrusive interventions, invasive procedures, or data collection methods: for example, the administration of substances, vigorous physical exercise, or techniques such as hypnotism. In particular, where participants are persuaded to reveal information which they would not otherwise disclose in the course of everyday life.
- Research involving any form of risk or more than trivial inconvenience to the participant; this might include but not be limited to interviews, observations and focus groups.
- Research using a non-CE marked medical device
- Research using novel techniques, technologies or devices even where apparently non-invasive, whose safety may be open to question.
- Research where the safety of the researcher may be in question, in particular those working in the field and locally employed research assistants working outside the UK.
- Research involving respondents through the internet, in particular where visual images are used, and where sensitive issues are discussed.
- Research involving visual/vocal methods, particularly where participants or other individuals may be identifiable.

This list in non-exhaustive and other types of research may also require ethical approval. In all cases of doubt, appropriate advice should always be sought.

5. Procedures for the Ethical Approval of Research Projects:

To ensure that the University's procedures for maintaining the highest standards of research integrity are operationally efficient and proportionate to the risks, separate procedures are established for undergraduate research, taught postgraduate research, postgraduate research degrees and staff research.

5.1 Taught Undergraduate, Taught Postgraduate Courses and Undergraduate Dissertations

The Ethics Committee does not, under normal circumstances, review and approve research projects and related research activities conducted as part of taught undergraduate, taught postgraduate, taught short course programmes, or undergraduate dissertations. It does however provide advice, guidance and support to academic staff supervising such teaching, assessment, projects and activities. Each Institute has its own procedures for ensuring that research conducted in their respective programmes does not breach ethical standards (including, but not limited to, data protection legislation). These procedures will be reviewed and updated as required. Institute procedures will be reviewed and updated annually and reported to the University Ethics Committee.

5.2 Taught Postgraduate Dissertation

In the case of dissertations carried out on taught postgraduate courses the responsibility for ethical considerations should be with the research supervisor, and module leader, who should advise the student in line with standard ethical practices and the guidance contained in this Code of Practice. For all cases where the Institute is able to provide ethical approval an annual report shall be forwarded to the Ethics Committee detailing dissertation titles, student names and short statement confirming that no ethical issues have been identified. This will be held by the Academic Office. In cases where ethical issues are identified by the supervisor, and module leader, then the Ethics form should first be referred to the Institute Ethics Committee and if necessary, should subsequently be referred to the University Ethics Committee.

5.3 Research Degrees

All prospective research projects, whether at MPhil or Doctoral levels, should be referred to the Ethics Committee by the student and supervisory team for approval after the proposal form (PG1) has been approved by the Research Degrees Committee. This is regardless of whether or not the research involves the participants, address the themes and topics, or employs the methods listed in Section 3 (above). The PG2/E1 Application for Ethical Approval Form should be completed in all cases and submitted to the Ethics Committee. All research students are required to complete this form. A copy of the form shall be retained in the Academic Office. The collection of personal data may not commence unless and until approval has been given by the University's Ethics Committee

5.4 Staff Research

Any research undertaken by UWTSD staff which involves the participants, address the themes and topics, or employs the methods listed in Section 3 (above) must seek ethical approval. This is a requirement for both internal /non-funded research and for research where external funding has been awarded. In instances where the research is dependent upon external funding being secured, it is not normally expected that the lead investigator should seek ethical approval at the application stage, although this is recommended in high-risk cases, such as research dealing with medical or health research, any non-CE marked medical device, research working with children, vulnerable adults, or that which take place in hazardous environments (as set out in **Section 8**). Additionally, where this is a condition of the award, all externally funded research projects must have ethical approval before the research commences. This includes UKRI funded projects. The Application for Ethical

Approval form (PG2/E1) should be completed and submitted to the Ethics Committee before any data collection begins.

In order to comply with the University's obligations as a data controller, ethics approval must always be sought for projects which process personal data as set out in Section 3 above. This includes, but is not limited to:

- Any research that may, or will, have an impact upon a data subject in terms of their privacy and/or rights as data subjects
- Any research which uses special category data
- Any research that includes children and / or vulnerable adults
- Any research that has a cross border element
- Any research that involves the sharing of personal data
- Any research that by law requires a DPIA before processing can begin (and the DPO must be consulted).

The collection of personal data may not commence unless and until approval has been given by the University's Ethics Committee

6. Data Protection Impact Assessment

The UK GDPR creates a legal obligation to think about and mitigate data protection issues and privacy concerns at the project planning stage, before any data is gathered (e.g., data protection by design and default). A Data Protection Impact Assessment (DPIA) is an assessment to help researchers identify any potential risks a project might have as regards intruding into participants' privacy. The DPIA then assists with implementing appropriate measures and controls to minimise and manage those risks. The legislation has made DPIAs mandatory for higher risk data processing to ensure that privacy and data protection are key considerations from the start of any project and then considered throughout the project's lifecycle. The European Commission (DG Research and Innovation) recommends that a DPIA be carried out for data processing operations that may entail higher ethical risks, such as:

Types of personal data	• Racial or ethnic origin • Political opinions, religious or philosophical beliefs • Genetic, biometric or health data • Sex life or sexual orientation • Trade union membership
Data subjects	• Children • Vulnerable people • People who have not given their explicit consent to participate in the project
Scale or complexity of data processing	• Large-scale processing of personal data • Systematic monitoring of a publicly accessible area on a large scale • Involvement of multiple datasets and/or service providers, or the combination and analysis of different datasets (i.e. big data)
Data-collection or processing techniques	• Privacy-invasive methods or technologies (e.g. the covert observation, surveillance, tracking or deception of individuals)

	• Using camera systems to monitor behaviour or record sensitive information • Data mining (including data collected from social media networks), 'web crawling' or social network analysis • Profiling individuals or groups (particularly behavioural or psychological profiling) • Using artificial intelligence to analyse personal data • Using automated decision-making that has a significant impact on the data subject(s)
Involvement of non-EU countries	• Transfer of personal data to non-EU countries • Collection of personal data outside the EU

If the proposed research, undertaken at any level (e.g., undergraduate, postgraduate, staff) involves any of these higher ethical risks, a DPIA must be completed and submitted to the Research Ethics Committee alongside the PG2/E1 Application for Ethical Approval. The DPIA will be considered by the University's DPO as part of the Ethics review. The DPIA is available here:

Data Protection Impact Assessment template.dotx (sharepoint.com)

7. Risk Assessment

In addition to requiring the completion of the PG2/E1 Application for Ethical Approval, some researchers may also be required to undertake a full risk assessment and will be referred to the University's Health and Safety Officers for further advice. Where this is the case, the Academic Office is required to retain a copy of the Risk Assessment. For guidance applicants should assume that a Risk Assessment Form may be requested by the Ethics Committee if the research process involves any of the following:

- Environmental Risks
- Lone working
- Risk of ill health or injury
- Use of hazardous equipment
- Dealing with the public
- Manual handling
- Chemical / Biological risks
- Working on or near water
- Armed conflict
- Civil unrest
- Other hazards

8. Health and Social Care research

Researchers working in the field of health or social care must comply with the UK policy framework for health and social care research[1]. The policy framework applies to health and social care research involving patients, service users or their relatives or carers. This includes research involving them indirectly, for example using information that the NHS or social care services have collected about them. Researchers should check whether their

[1] https://s3.eu-west-2.amazonaws.com/www.hra.nhs.uk/media/documents/uk-policy-framework-health-social-care-research.pdf

research should undergo ethics review via the Health Research Authority [2]. Under the UK Policy Framework, the researcher carries defined responsibilities as does the University in its capacity as the employer of the investigator. In addition to the ethics procedures outlined here, documentation will be held on record demonstrating compliance with the UK Policy Framework. Research which has been approved by an NHS Research Ethics Committee (REC) through the NRES (National Research Ethics Service) will not require further Ethics approval from the UWTSD Ethics Committee. The Chair of the Ethics Committee, in consultation with the Head of Research Development, will provide written confirmation of compliance on behalf of the University, as required by the UK Policy Framework.

9. Safeguarding children

Research, at any level (e.g., undergraduate, postgraduate, staff) which involves one-to-one or other unsupervised contact with children will be required to obtain a current enhanced Disclosure and Barring Service check issued for work conducted through the University. Please see the guidance in **Appendix 2**.

10. Collaborative Research

Research is increasingly conducted on a collaborative basis with a range of public, private and third sector organisations, at national, European and International levels. Consistent with the guidelines in this Code of Practice, each organisation shall submit the research proposal to its own governance systems and research shall not commence until each body is satisfied that all ethical issues have been addressed. Where the UWTSD is the lead institution, (e.g. on an externally funded grant holds the research contract with the awarding contract or employs the principal / lead investigator), the Ethics Committee shall consider the proposed programme of research in its entirety, rather than just those work packages pertaining to UWTSD staff. As duplication of ethics reviews will be avoided where possible, in instances where UWTSD employs the co-investigator(s), or leads on specific work packages or activities, UWTSD ethics approval is usually only required for the research undertaken by UWTSD staff. Notwithstanding the principle of avoiding duplication, if deemed appropriate the UWTSD Ethics Committee will consider the ethical implications of the research in its entirety (regardless of whether approval has already been granted externally) and all cases the ethics form should give sufficient detail of the research project in its entirety to allow for a fully informed review by the Ethics Committee.

As noted in Section 8, Research which has been approved by an NHS Research Ethics Committee (REC) through the NRES (National Research Ethics Service) will not require further Ethics approval from the UWTSD Ethics Committee. The Chair of the Ethics Committee, in consultation with the Head of Research Development, will provide written confirmation of compliance on behalf of the University, as required by the UK Policy Framework.

In all cases, researchers must comply with the obligations set out on the University's Research Data Management Policy and consider the respective roles of the parties from a controller / processor perspective, if there is any element of joint control and whether data sharing / data processing agreements are required. The Head of Research Development and DPO should be consulted in all cases.

[2] For further guidance see: https://www.hra.nhs.uk/

11. Research conducted outside the UK

In international collaborations, partners should agree to conduct their research according to the same high standards of research integrity as expected in the UK and to investigate any suspected deviation from these standards. Where research is to be conducted outside the UK, the researcher must establish whether local ethical review is required by the host country, and if not, how the principles of the Research Ethics & Integrity Code of Practice can be followed in developing and undertaking the research. The ethical standards that UWTSD expects for UK research apply equally to work undertaken outside the UK. Researchers must, however, ensure that they comply with any legal and ethical requirements of the country/ies where the research is taking place. A useful resource is the US Department of Health and Human Services International Compilation of Human Research [3]

All international research and innovation activity, whether funded or not, should be conducted following UKRI Trusted Research and Innovation Principles [4]. These principals set out expectations in relation to due diligence for international collaboration. Advice should be sought from INSPIRE regarding:

- **Assessment of Partner Suitability.** An appropriate due diligence assessment must be undertaken of potential financial and non-financial collaborative partner organisations and/or individuals. Examples of factors that could be taken into consideration when identifying risk are the nature of the project activity and the envisaged outputs; the potential for unethical or dual-use of project information and/or outputs; the potential for fraud, bribery and corruption; and the collaborating partners.
- **Legal Framework and Affiliations.** An understanding is required of the legal framework and constitution of the partner organisation and/or the country in which it operates, who it is owned by and whether it has any formal affiliations with other entities such as other businesses, government departments or the military. If any affiliations pose a potential risk to the integrity of the handling of project information or project outputs, then mitigations should be put in place.
- **Value.** It is important to understand the democratic and ethical values of the country that the partner is based in and where these might differ from our own.
- **Conflicts of Interest.** Ensuring an individual-level awareness of people interacting with UWTSD is essential to assessing potential security related risks. Appropriate due diligence should be undertaken to identify existing or potential conflicts of interest posed by individuals who will have physical and/or virtual access to UWTSD via employment, study, collaboration, visits or access to data.
- **Managing Information and Knowledge Sharing.** All research data and IP must be processed in accordance with the UWTSD Research Data Management Policy, the Staff IP Policy, and with due regard for the need to safeguard information and knowledge sharing, for Cyber Security and for access control. Sensitive data must be securely stored and, where a shared platform is used for information exchange, data should be logically separated into different locations so that it is only accessible by authorised individuals. Access to sensitive data should only be given to individuals with a clear requirement for access, for the duration that such access is required. The basis for the handling and usage of the data should be clearly specified in either a Collaboration Agreement of Data Sharing Agreement so that it is understood and agreed by all parties prior to information being shared.
- **Commercial Application.** Collaboration agreements should be in place to ensure that sensitive data and any intellectual assets including intellectual property rights derived from the project are appropriately managed, particularly where there is potential for

[3] https://www.hhs.gov/ohrp/international/compilation-human-research-standards/index.html
[4] https://www.ukri.org/about-us/policies-standards-and-data/good-research-resource-hub/trusted-research-and-innovation/

future commercial outcomes to be realised which could benefit society and the economy including that of the UK.

- **Intellectual Assets and Intellectual Property Rights.** The intellectual assets including any intellectual property arising from the project should be managed in a professional and business-like manner. This might include deciding when it is most appropriate to seek protection for the intellectual property arising from the project and subsequently how to exploit, assign, license or disseminate it to maximise its impact.
- **Publishing Project Outputs.** Prior to any collaboration all partners should formally agree when commercially relevant and/or sensitive data and/or findings derived from the project can be made publicly available.
- **Export Controls.** All project activity and the handling of project outputs must be compliant with applicable export control legislation and any other legal requirements. UK export controls are designed to restrict the export and communication of sensitive technology, knowledge or strategic goods and apply equally to the academic community as to any other exporter. There are tools to check any restrictions or requirements regarding export control licenses and it should be noted that failure to comply with these controls may result in a criminal offence being committed.[5]

12. Data Protection Legislation

Research data processing required for the conducted of research carried out in and by the University should be undertaken in accordance with University's obligations as a Data Controller under the Data Protection Act 2018 and the General Data Protection Regulation 2018 ("UK GDPR"). This legislation defines the University's responsibility to ensure that there are appropriate organisational and technical measures in place to protect personal data. The legal obligations for data protection in research are set out in the University's Research Data Management Policy which must be referred to in the Ethics review process. In summary these are that personal data shall be processed with due regard for:

- **Lawfulness:** There must always be a lawful basis for processing personal data and, in the context of research activities, UWTSD's lawful basis is "the performance of a task carried out in the public interest or in the exercise of official authority vested the controller", known as 'public task'
- **Fairness and transparency**: Processed fairly and in a transparent manner in relation to the data subject
- **Purpose Limitation**: Collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes
- **Data minimisation:** Adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed
- **Accuracy:** Accurate and, where necessary, kept up to date; every reasonable step must be taken to ensure that personal data that are inaccurate, having regard to the purposes for which they are processed, are erased or rectified without delay
- **Storage limitation:** Kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed
- **Integrity and confidentiality:** Processed in a manner that ensures appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures.

[5] https://www.gov.uk/guidance/export-controls-applying-to-academic-research

When processing Research Data, researchers must follow the obligations which are set out in the UWTSD Research Data Management Policy. These detail obligations under the UK Data Protection Act (2018) and UK GDPR. This provides:

- Guidance on the lawful basis of processing
- Guidance on conducting DPIA
- Guidance on the use of privacy notices / approved privacy notices for use in particular contexts
- Data sharing policies and procedures
- Data retention policies and procedures
- Data destruction policies and procedures
- Data security guidelines, policies and procedures
- Guidance on international transfers of personal data
- Breach reporting guidelines, policies and procedures
- Data subject rights requests

12.1. The legal basis for processing personal research data

There must always be a lawful basis for processing personal data and, in the context of research activities, UWTSD's lawful basis is "the performance of a task carried out in the public interest or in the exercise of official authority vested the controller", known as 'public task'. The University can demonstrate that it meets the requirements to use this lawful basis under our Royal Charter, as the objects of the University are to "advance education and disseminate knowledge by teaching, scholarship and research for the public benefit". By using 'public task' as the legal basis, the University can ensure that as a publicly funded organisation, it is always one of our official public tasks when we use personal data from people who have agreed to take part in research. It also reassures data subjects that the researchers are part of a reputable organisation that has a genuine reason to hold and use personal data. This is in addition to the control given to participants through the research ethics consent process.

12.2. Consent

Under the UK GDPR, the University will not rely on consent as the legal basis for processing research data. This means that although researchers usually need to obtain the consent of participants to take part in research projects to meet ethical requirements, they do not need to have their consent to process their personal data. This is because the University's lawful basis for processing personal data in research activities is 'public task'. It is therefore important to distinguish consent for the processing of personal data from other consent processes or requirements.

13. Intellectual Property

It is important that researchers consider whether Intellectual Property may be generated by their project and that they are aware of the University policy on Intellectual Property Rights.
Provisions for the management of Intellectual Property (IP) are set out in the University's Intellectual Property Policy for Staff and Intellectual Property Policy for Students. Those seeking ethical approval for research are encouraged to contact INSPIRE to discuss the management of IP where IP will be generated through the research. This is particularly important where the proposed research is undertaken with collaborative partners, is funded, or has commercial potential. In other instances, issues of confidentiality may arise, in which case RIES will coordinate appropriate Non-Disclosure or Confidentiality Agreements.

14. Insurance

All research undertaken by the University's staff and students must be adequately covered by the University's Insurance provisions. The University's insurance policy will in most cases provide adequate cover and this will be checked as part of the ethical approval process. Researchers should be aware however that research in the health sector (for instance, working with medical devices, or in clinical settings, or where any medical intervention is undertaken) may require additional insurance to be put in place. In all such cases, research should on no account commence until ethical approval has been granted. Indemnity issues for research are coordinated by INSPIRE and applicants may wish to discuss indemnity prior to the application for ethical approval.

15. Approval

Applications for ethical approval should be submitted for consideration as early as possible. All projects must be signed off from an ethics perspective before that part of the work for which approval is being sought begins.

If projects are approved research may proceed. The applicant and in the case of student work, the supervisor[s] will receive a communication to this effect from the Ethics Committee. Projects will be approved for the duration of the research process subject to resubmission should the nature of the research change or on the identification of unforeseen ethical implications that arise during the research process.

If projects are approved subject to amendments the applicant and supervisor[s] will receive a communication to this effect that indicates the minor points that require clarification. The project should be amended and re-submitted to the Ethics Committee for approval.

If projects are not approved because they contain major flaws the applicant and supervisor[s] will receive a communication from the Ethics Committee, detailing the issues to be addressed. The project must be substantially revised and re-submitted to the Ethics Committee for approval. Where a project is not approved because it contains a major flaw, where the use of personal data is involved in the project, the DPO should be consulted. A new DPIA should also be carried out.

16. Continued review of all research projects

Staff undertaking research shall be continually review the involvement of participants, the subject matter and data sources, and methods employed for on-going and unforeseen ethical issues. All postgraduate research conducted for research degrees shall be reviewed for on-going and unforeseen ethical issues during the various points of a research degree candidature:

- Progress reviews with the supervisory team
- Submission of full research proposal
- Upgrade from MPhil / PhD (where applicable)
- Successful completion of Probationary Period (where applicable)
- Annual progress review

For all research, at undergraduate, postgraduate and staff levels, if projects which have initially been judged not to have ethical implications change and do subsequently have

ethical dimensions it is the responsibility project supervisors for all supervised research, or in other cases the staff responsible for the research, to ensure that ethical scrutiny procedures are invoked and followed through.

In all cases any adverse events occurring during the conduct of research projects must be reported to the Ethics Committee. In such cases the researcher, whether staff or student, shall withdraw from the research process with immediate effect until notified by the Ethics Committee that the University is satisfied that the research design has been modified in such a way as to mitigate further harm. Researchers and supervisory teams should consult with the DPO and the Chair of the Ethics Committee where any potential or actual concerns arise from a data protection compliance perspective.

17. Research Misconduct

Research misconduct is characterised as behaviour or actions that fall short of the standards of ethics, research and scholarship required to ensure that the integrity of research is upheld. It is a problem because it can cause harm (for example to patients, the public and the environment), damages the credibility of research, undermines the research record, and wastes resources.

The Concordat to Support Research Integrity recognises that academic freedom is fundamental to the production of excellent research. This means that responsibility for ensuring that no misconduct occurs rests primarily with individual researchers. However, the University as an employer of researchers has an active role to play in sustaining research integrity as enshrined in this Code of Practice. Research misconduct can take many forms, including:

- **Fabrication**: making up results or other outputs (eg, artefacts) and presenting them as if they were real
- **Falsification**: manipulating research processes or changing or omitting data without good cause
- **Plagiarism**: using other people's material without giving proper credit
- **Failure to meet ethical, legal and professional obligations**: for example, failure to declare competing interests; misrepresentation of involvement or authorship; misrepresentation of interests; breach of confidentiality; lack of informed consent; misuse of personal data; and abuse of research subjects or materials
- **Improper dealing with allegations of misconduct**: failing to address possible infringements such as attempts to cover up misconduct and reprisals against whistle-blowers

This list is not intended to be exhaustive. Honest errors and differences in, for example, research methodology and interpretations are not examples of research misconduct.

17.1. Dealing with Allegations of Research Misconduct: Undergraduate, Taught Post-Graduate and Postgraduate Research Degrees

The procedures for dealing with allegations research misconduct in undergraduate and taught postgraduate programmes and postgraduate research programmes are set out in the UWTSD Academic Misconduct Policy, which should be followed in all cases.

17.2. Dealing with Allegations of Research Misconduct: Staff

Principles

- Allegations of research misconduct will be:
  - handled with sensitivity and confidentiality
  - investigated fairly, thoroughly and in a timely manner
  - investigated using the UK Research Integrity Office (UKRIO) Procedure for the Investigation of Misconduct in Research
- Employees have the right to be accompanied to formal meetings by a trade union representative or workplace colleague. Complainants or respondents have the right to highlight, and have considered, any conflict of interest they perceive to exist on the part of anyone involved in the investigation process
- Employees who make allegations of research misconduct in the reasonable belief that misconduct may have occurred will be supported and will not be subject to any detriment
- Anyone accused of research misconduct is entitled to the presumption of innocence
- The identity of those involved and information on the allegation will not be released to third parties until the University is obliged to do so.

17.3 Reporting Allegations of Research Misconduct

Anyone who has concerns regarding the rigor and integrity of the research carried out at the University should report these to a Named Person. Should concerns be raised by other means, such as the UWTSD Whistleblowing Policy, the recipient of these concerns will report these to the appropriate Named Person. UWTSD's Named Person will be the Director of Academic Experience. The current postholder is:

- Professor Kyle Erickson
- Email: k.erickson@uwtsd.ac.uk

17.4 Procedure for Investigating Allegations of Research Misconduct

Allegations of research misconduct will be handled in line with the UK Research Integrity Office's Procedure for the Investigation of Misconduct in Research (*subject to HR approval*).[6]

a) **Initial Steps**: The Named Person receives the allegation of research misconduct, addresses any immediate risks, informs key senior management of the allegation, and informs the person (the Respondent) of the allegation and next steps.
b) **Screening Panel**: the Named Person determines if allegations are mistaken, frivolous, vexatious and/or malicious; if this is not the case, the Named Person appoints panel members (which may be internal staff or external appointments) to determine whether there is evidence of misconduct in research; where contractually required, informs third parties, e.g., research councils, of the allegation without disclosing the respondent's identity. The Screening Panel interviews complainant and respondent and informs Named Person whether there is evidence of misconduct in research and whether they recommend proceeding to Formal Investigation. The Named Person updates all relevant parties of the outcome of the Screening process, including, where contractually required, third parties such as funding bodies.
c) **Formal Investigation:** The Named Person, taking advice from their Head of HR, appoints a Panel, made up of at least two senior members of University staff and one external member to investigate the allegation. The allegation is fully investigated, which will include interviews with Complainant, Respondent and other relevant

[6] https://ukrio.org/wp-content/uploads/UKRIO-Procedure-for-the-Investigation-of-Misconduct-in-Research.pdf

parties. The Named Person updates all relevant parties of the Panel's conclusions, which, for an existing member of staff, could result in a Disciplinary Hearing.

d) **Disciplinary Policy**: If there is a case to answer then the University's disciplinary policies and procedures will be followed.

17.5 Cross-Institutional Research
Should an allegation of misconduct involve individuals from institutions other than the UWTSD, the Named Person will contact their counterpart(s) at the other institution(s) to agree:

- whether one institution will be nominated as the lead institution to investigate the allegation, or whether each institution will investigate separately, and
- how each institution will be involved in the process (for example, by providing panel members).

17.6 Reporting to Third Parties
Where contractually required, third parties such as Research Councils, must be informed of allegations of research misconduct at the start of the Screening Stage of the UKRIO procedure, and updated at all subsequent stages. Following investigation, where an allegation of research misconduct has been upheld, the Named Person will inform all relevant third parties (for example, editors of journals in which the respondent has published articles in order to correct the research record).

18. Monitoring

In meeting the requirements of the Concordat, the University will take steps to ensure that this Code of Practice is implemented, and that in doing so it:

- contributes to a research environment which promotes and embeds a commitment to research integrity,
- that we periodically review our processes to ensure that these remain fit for purpose,
- that suitable processes are in place to deal with misconduct.

The commitment to research ethics and integrity is made in the University's Research and Innovation Strategy, delivery of which is overseen by the Research Committee. The Committee receive reports from the Ethics Committee as a standing item of each agenda, Performance against the Strategic Action Plan for Research Integrity (Annex 7 of the R&I Strategy) will be monitored at each committee and subsequently reported to Senate and Council. To promote further accountability, the University will Produce an annual Research Integrity Report, which will be presented to the University Council, and subsequently be made publicly available on the UWTSD website at the following webpage: https://www.uwtsd.ac.uk/research/research-ethics/

19. Misuse of Code of Practice

Failure to follow the University's Code of Practice on ethical review of research may result in disciplinary action. If an individual becomes aware that ethics approval should have been sought then a form should be submitted as soon as possible, with an explanation concerning the reasons for later submission. Where the Ethics Committee become aware that research is being conducted in breach of this Code of Practice the matter may, in relevant cases be resolved by informal discussion with the researchers and remedial action being taken by

them. However, where necessary the matter may be formally presented to the University Ethics Committee. The matter will be reported to the University's DPO where it is considered that a personal data breach may have occurred or has occurred as a result of the unauthorised research, or that there has been or may have been unlawful processing of personal data as a result of the unauthorised research. Ultimately non-compliance that cannot be resolved through the channels mentioned previously may become a disciplinary matter. Please also refer to **Section 17** regarding the University's procedures for handling suspected cases of Research Misconduct.

20. Links to other policies / procedures

UWTSD Research and Innovation Strategy
Pending approval

UWTSD Research Data Management Policy
https://www.uwtsd.ac.uk/library/research-data-management/about-rdm/

UWTSD Staff IP Policy
www.uwtsd.ac.uk/media/uwtsd-website/content-assets/documents/strategies-policies/2.1-Staff-Intellectual-Property-Policy.pdf

UWTSD Student IP Policy
www.uwtsd.ac.uk/media/uwtsd-website/content-assets/documents/academic-office/aqh-chapters/chapters---en/Intellectual-Property-Policy-Students-Final.pdf

UWTSD Academic Misconduct Policy
www.uwtsd.ac.uk/media/uwtsd-website/content-assets/documents/academic-office/aqh-chapters/chapters---en/Academic-Misconduct-Policy-02-2020.pdf

UWTSD Whistleblowing Policy
https://uowtsd.sharepoint.com/HR/Shared%20Documents/Forms/AllItems.aspx?id=%2FHR%2FShared%20Documents%2FPolicies%20and%20Procedures%20%2D%20Polis%C3%AFau%20a%20Gweithdrefnau%2FGeneral%20HR%20Policies%20and%20Procedures%20%2D%20Polis%C3%AFau%20a%20Gweithdrefnau%20AD%20Cyffredinol%2FWhistleblowing%20Policy%2Epdf&parent=%2FHR%2FShared%20Documents%2FPolicies%20and%20Procedures%20%2D%20Polis%C3%AFau%20a%20Gweithdrefnau%2FGeneral%20HR%20Policies%20and%20Procedures%20%2D%20Polis%C3%AFau%20a%20Gweithdrefnau%20AD%20Cyffredinol

Appendix 1:

A Summary of Principles for the conduct of ethical research and legal data processing

1. Summary

The following is a summary of the guiding principles which Institutes and the University's Ethics Committee will refer to in making their decisions. It is not intended to be exhaustive, and of necessity, Institutes will need to reference the norms and conventions of their own disciplines in reaching any decision. Additionally, the Institutes, and staff, must comply with Data Protection Legislation as set out in the UWTSD Research Data Management Policy.

Above all it should be remembered that the integrity of any research depends not only on its scientific rigour, but also on its ethical adequacy. Ethical issues are many and varied and may be quite complex. Research involving human participants is undertaken by many different disciplines and conducted in a broad range of settings and institutions. While some issues are specific to professional groups, all research should be guided by a set of fundamental ethical principles to ensure the protection of human participants. Underpinning the standards are the ethical imperatives of 'do no harm' (non-malfeasance) and 'do good' (beneficence). Consideration of risks versus benefits need to be weighed up by researchers. In medical research, physically invasive procedures are easily defined, but what constitutes risk in social research is sometimes less clear cut. Questionnaires, observation and interviews can all be potentially intrusive and provoke anxiety in participants, or worse, involve psychological risk. It is important to think through carefully the likely impact on participants of any data collection methods. Certain groups are particularly vulnerable and may succumb to pressure, for example students, children or people with learning disabilities. Some participants are unable to give informed consent and are therefore less able to protect themselves, for example people with dementia. Research activities may be so unobtrusive that individual consent is not warranted, such as in the case of some community-based studies.

The following standards have been developed to guide staff and students undertaking research involving human participants. They are intended to cover general principles, but they may not address all situations and the researcher should seek further advice from their Institute's Research Ethics Officer, the University's Research Ethics Committee and their profession's code of practice for research ethics as appropriate. In general, the University's researcher should:

- **Beneficence**: 'do positive good'
- **Non-malfeasance**: 'do no harm'
- **Rights**: Protect participants' interests
- **Risk Management**: Ensure participant and researcher safety and risk: i.e., the need to avoid harm or potential harm.
- **Proportionality:** Consider and protect against where necessary the impact of work on others
- **Ensure informed consent**: i.e., the need to inform participants of the aims and procedures of the research and obtain their agreement to take part on the basis of this information (although this should not be the legal basis for processing research data under the Data Protection Act and UK GDPR)
- **Avoid deception:** i.e., the need to avoid deception in informing participants about the research, or to justify the need for deception if necessary
- **Provide debriefing**: i.e., the need to provide participants with additional information to support them after taking part in the research, and/or to provide true information if deception was necessary originally

- **Allow withdrawal from Investigation:** i.e., the need to inform participants of their right to withdraw from the research at any stage, including during or at the end of their involvement
- **Ensure confidentiality:** i.e., the need to reassure participants that information they provide will not be disclosed without prior consent to others other than within the context of the research, or at a minimum will be made anonymous
- **Data security and archiving**: i.e., to ensure that research data is held in a secure manner consonant with the requirements of the Data Protection Act and that it is archived in such a way that it will be accessible for future audit purposes. Special attention should be made with regard to funding body requirements to submit research data to open repositories.

2. Responsibilities to research participants

Researchers enter into a personal and moral relationship with those they study and should strive to protect their rights. Researchers have a responsibility to ensure that the physical, social and psychological well-being of the participant is not adversely affected by the research. So, while researchers are committed to the advancement of knowledge, the goal of the research does not provide a right to override the rights of others. Wherever possible, researchers should seek to:

- Minimise disturbance to both those participating in the research and to their relationships with their environment and those gatekeepers who may control access to participants - since these relationships will continue long after the researcher has left
- Anticipate and guard against consequences for research participants which can be predicted to be harmful and try to anticipate the long-term effects on individuals or groups as a result of the research
- Take special care where research participants are particularly vulnerable by virtue of age, social status and powerlessness
- Resort to covert research only where it is impossible to use other methods to obtain essential data (in such studies it is important to safeguard the anonymity of research participants)
- Take care to avoid falsification or misrepresentation of evidence, data, findings or conclusions
- Clarify with participants the extent to which they are allowed to see transcripts of any interviews and field notes and to alter the content or interpretation of the data.

3. Beneficence and Non-Malfeasance

Terms such as risk, harm and hazards include emotional and mental distress, and possible damage to financial and social standing, as well as to physical harm. In principle:

- The research should be methodologically sound, and the purpose should be to contribute to knowledge
- The research should be undertaken and supervised by those who are appropriately qualified and experienced
- The importance of the objective should be in proportion to the inherent risk to the subject. Concern for the interests of the subject must always prevail over the interests of science and society
- The research should be preceded by careful assessment of predictable risks in comparison with foreseeable benefits to the subject or to others
- Research should not be undertaken where the hazards involved are not believed to be predictable
- Adequate facilities and procedures should be in place to deal with any potential hazards.

4. Consent

4.1 The Legal Basis for Data Processing

Under the UK GDPR, the University will not rely on consent as the legal basis for processing research data. This means that although researchers usually need to obtain the consent of participants to take part in research projects to meet ethical requirements, they do not need to have their consent to process their personal data. This is because the University's lawful basis for processing personal data in research activities is 'public task', as set out below. Please refer to the UWTSD Research Data Management Policy which is available at the following webpage: https://www.uwtsd.ac.uk/library/research-data-management/about-rdm/

4.2 Informed Consent (Adults)

It is generally held that sane competent adults should be free to make their own decisions. Consequently, respect for the individual right to choose is at the core of ethical research. Gaining informed consent is an essential element of ethically valid social research. Thus three basic principles apply. Consent needs to be:

- Informed - given in possession and understanding of the principal, relevant information.
- Voluntary - given freely and not as a result of coercive pressure (real or perceived);
- Competent - given by somebody able, in virtue of their age, maturity and mental stability, of making a free, considered choice.

More specifically, it is necessary to ensure that the potential research participant is fully aware of, and fully understands,

- What the research is about
- Why it is being conducted
- Who it is being conducted for and who is funding it
- What the purpose of the study is and what will happen to the results
- Where the results will appear and who is likely to have access to them
- What will be expected of them if they agree to participate and how long their participation will take
- What anonymity and confidentiality mean in practice and an understanding that the participant does not *have* to participate; and having agreed to participate can withdraw any time without detriment.

In practice researchers should therefore ensure that:

- Each potential subject is adequately informed of the aims, methods, anticipated benefits and potential hazards of the research and any discomfort it may entail
- Any documentation given to potential participants must be comprehensible and there should be an opportunity for them to raise any issues of concern
- Consent should be acquired in writing and records of consent should be maintained
- Potential participants must be informed that they are free to withdraw consent to participation at any time
- There should be a procedure for making complaints and participants should be made aware of this
- All participants should be volunteers. Considerable care should be taken where consent is sought from those in a dependent position, and it should be made clear that refusal to

participate will not lead to any adverse consequences. For example, students must be assured that any decision not to participate will not prejudice in any way their academic progress
- Any inducement offered to participants should be declared.
- Consent must be obtained from a legal guardian in the case of minors or any others who do not have the legal competence to give informed consent.
- Asking participants to sign a written consent form is a widely accepted method of obtaining informed consent. In addition to ensuring that participants agree to participate of their own free will and understand what they are getting involved in, the existence of signed documentation protects the researcher from subsequent accusations by participants.

4.4 Informed Consent (Children)

- Young people aged 16-18 with sufficient understanding are able to give their full consent to participate in research independently of their parents and guardians.
- Where research involves children under the age of 16 assent should be obtained from parents or those in *loco parentis*. However, it is highly desirable that children themselves should be actively engaged in the consent process. It is arguable that children are capable of being partners in research and that they have rights to receive information, to be listened to, have their wishes and feelings considered and to give or withhold consent if judged competent to do so. From this perspective, assumptions about lack of competence to give informed consent can function to deny children valuable opportunities for involvement, thereby eroding their rights and excluding them from processes of developing shared understanding of social relationships. It may, therefore, be appropriate to seek consent from the parents of participating children *and* from the children themselves. However, if consent is gained from the relevant adult but the child clearly withholds consent or shows distress, the wishes of the child should prevail. Enabling children to engage in a meaningful way requires careful attention to practical considerations, including the use of information sheets and consent forms written in a child-friendly way
- One parent can give assent, but it is preferable to have both.
- Further guidance should be sought from the BERA Guidelines.

4.5 Exceptions
There are occasions when informed consent may be impracticable or meaningless in social research, for example:

- Research on ‘public behaviour’, e.g., street or crowd settings
- Where it would compromise the subjects of research (e.g., when studying those engaged in illicit or illegal behaviour, such as drug-taking), or
- Where written consent could put them at unnecessary risk.

4.6 Retrospective consent
In some contexts, consent can be gained retrospectively (and in this case informed consent refers more to consent to use the data gained and an understanding of how the data is to be used) e.g. as in the example of observational psychological experimentation, or where covert research is necessary and warranted – such as work in the field of deviance where it involves immoral or illegal behaviour.

4.7 When consent forms are not appropriate

It should be recognised that seeking written consent is not under all circumstances appropriate. For instance, illiteracy may be an issue, such that imposing written consent forms would not be a meaningful or legitimate means of establishing consent. In overseas research there may be circumstances where translation is not feasible; or it may be that asking for written agreement is culturally inappropriate. In such cases the researchers should seek informed verbal consent. In the case of children however informed consent must always be obtained.

4.8 Covert Research

Covert research cannot, by definition, involve informed consent, because informing the subject would render the research overt. If informed consent is ethically required for research, then covert research is not permissible.

If any member of staff or student is seeking to use research methods and designs covered in these exceptions, they should in the first instance seek the advice of their Research Ethics Committee.

5. Anonymity and Confidentiality

The University as a Data Controller, and researchers as members of staff have obligations under the Data Protection Act 2018 and the General Data Protection Regulation 2018 ("UK GDPR"). These are set out in the UWTSD Research Data Management Policy which must be followed at all times.

The right of the individual to privacy is a pre-eminent ethical driver in western societies. In the social researcher's relationship to participants this translates into two imperatives: anonymity and confidentiality. Anonymity and confidentiality may be defined as follows:

- Anonymity refers to concealing the identities of participants in all documents resulting from the research
- Confidentiality is concerned with who has the right of access to the data provided by the participants.

In practice the obligation of the researcher to the researched may be summarised thus:

- Anonymity and privacy should be respected. This means that care should be taken in deciding whether or not sensitive information or personal data should be recorded
- Identities and research records should be kept confidential whether or not an explicit pledge has been given

5.1 Confidentiality and common law

In this respect, researchers must comply with the common law of confidentiality. Information is considered confidential in common law if:

i. It can be related to an identifiable individual (similar definition of identifiable as used for personal data, but personal data can only relate to a living person, confidential information can relate to the living or deceased), ***and***

ii. It is not in the public domain (no such limit is placed on the definition of personal data), ***and***

iii. It is given with the expectation that it will be kept confidential. Individuals do not have to be explicit about their expectations, when entrusting others with their information this expectation is often implicit.

When an individual entrusts a researcher or research team with confidential information, the team must handle this in line with 'reasonable expectations'. In other words, confidential information should only normally be shared when there would be 'no surprises' for the individuals concerned. Where participants would not expect the researcher to be sharing their confidential information with others, researchers can manage their expectations by informing them of their intentions (e.g., in project materials or during discussions about participation) and asking them if they are happy with these plans. They should understand what is being proposed and what this might mean for them before they decide whether the researcher can share their confidential information with others. Researchers should also always consider if they could limit the sharing of information to robustly anonymised information only. Robustly anonymised information can be shared without having to consider reasonable expectations as information has to be identifiable to be subject to the common law of confidentiality. If in doubt as to the current status of the common law in relation to "confidential information" please refer to the DPO.

5.2 Anonymity, confidentiality and the greater good
Whilst respecting anonymity and confidentiality are core principles of social research, they are not absolutes. There may be situations when the researcher has a duty of care to reveal information that has been provided in confidence, or which the researcher has discovered through interactions with the participant. For example, if a researcher were to become aware of abuse in a care home, it would be necessary to act on this knowledge and inform the relevant authority. Who constitutes the relevant authority in any given case would depend on a variety of factors. In all cases, researchers should discuss this matter with the University's Data Protection Officer who will advise on the University's responsibilities, and legal and ethical obligations.

6. Special Category Data

The UK GDPR defines certain data as being special category data, and this requires ***additional*** conditions for processing. The special category data are as follows, and are very likely to be of particular relevance to research carried out in the humanities, arts and social sciences within the University:

- Personal data revealing **racial or ethnic origin**
- Personal data revealing **political opinions**
- Personal data revealing **religious or philosophical beliefs**
- Personal data revealing **trade union membership**
- **Genetic data**
- **Biometric data** (where used for identification purposes)
- Data concerning **health**
- Data concerning a person's **sex life**; and
- Data concerning a person's **sexual orientation**.

Safeguards: When processing special categories of data for research purposes, researchers must meet an additional condition, known as the **Article 89(1) safeguards**. These require that "suitable and specific measures to safeguard the fundamental rights and the interests of the data subject" are in place. These safeguards consist of technical and organisational measures and provide research participants with assurance that:

1. The data processing is necessary to support research
2. The data processing will only be used to support legitimate research activities that are considered to be in the public interest

3. Data subjects' interests are safeguarded/protected
4. Demonstrate that the processing is not likely to cause substantial damage or distress to individuals
5. Not use the data to take any action or make decisions in relation to the individuals concerned

Technical and organisational measures are:

6. The minimisation principle: that researchers only gather the minimum amount of personal data necessary for the specified research purpose (e.g., if we don't need to collect information about ethnicity, we don't ask for it)
7. Demonstrate why the research cannot use anonymised data (that data should be anonymised wherever possible, either at point of capture or once collated)
8. Consider whether the research could use pseudonymisation to make it more difficult to link the personal data back to specific individuals (where data cannot be anonymised, it is, wherever possible, pseudonymised)
9. Consider other appropriate safeguards and security measures (store the data securely and that appropriate technical and organisational measures are in place to protect personal data).

Public interest test
Besides having these technical and organisational measures in place, researchers must be able to prove that the research is in the public interest, and as discussed above, necessary for achieving that task. The types of evidence for proving that research is in the public interest will be familiar to researchers and very likely already in place. At UWTSD, this will best be determined by the researcher in conjunction with the Ethics Committee, who will ensure that approval for research is only given if:

9. The research is proportionate
10. The methodology is appropriate to the aims and intended outcomes of the research and confirms to field-specific standards and best practice
11. The research and methodology meets appropriate professional standards or codes of conduct and / or guidance
12. Is undertaken within an appropriate governance framework.

Where research has been through peer review (for example by a grant funding body such as UKRI or the EU) public interest is also likely to be demonstrated.

Appendix 2. Safeguarding - Disclosure and Barring Service (DBS)

The Disclosure and Barring Service's aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or to hold particular positions. The definition of a child in this context is a person aged under 18 years of age.

Staff and students at whatever level undertaking research work which involves one-to-one or other unsupervised contact with children will be checked. The need for a check should be identified by the researcher and supervisor on the basis of the nature of the activity involved. The Ethics Committees may also make recommendations regarding DBS checks for projects they review.

The Ethics Committee will require confirmation that an enhanced DBS check has been obtained where researchers are working individually or unsupervised with participants who are under 18 years of age. Evidence of the check should be presented alongside all other documentation provided when making an application to the Ethics Committee.

Processing the DBS forms

When it is identified that an individual post will require a DBS check then notification is made on the RS1 form (Permission to Recruit form). DBS checks are administered by the Human Resources Department.

Should the University receive notification of a criminal record that bars an individual from undertaking the proposed regulated activity, the matter will be considered by the Director of HR, the Chair of the Ethics Committee and the Chair of the Research Committee. Matters will proceed in accordance with the relevant Human Resources policy.

There are three different levels of DBS check available, and an enhanced check will be obtained:

- **Standard checks** are suitable for certain financial and security positions. A standard check will show any unspent convictions, cautions, warnings or reprimands along with any spent convictions and cautions that are not eligible for filtering.
- **Enhanced checks** are suitable for eligible roles where the applicant will be working/volunteering with children, young people and/or vulnerable groups. An enhanced check will show any unspent convictions, cautions, warnings or reprimands along with any spent convictions and cautions that are not eligible for filtering. Intelligence held by the police may also be included if the Police reasonably believe it is pertinent to a recruitment decision.
- **Enhanced with DBS Barred List checks** are suitable for roles where the applicant will be working/volunteering in a regulated activity with children and / or vulnerable adults. An enhanced check with DBS Barred list check will show the same information as an enhanced check along with any information held on the barred list(s) being checked.

Regulated Activity

Regulated activity is work that a barred person must not do. The definition of regulated activity (i.e. work that a barred person must not do) in relation to children comprises, in summary:

- unsupervised activities: teach, train, instruct, care for or supervise children, or provide advice/ guidance on well-being, or drive a vehicle only for children;
- work for a limited range of establishments ('specified places'), with opportunity for contact: e.g. schools, children's homes, childcare premises. Not work by supervised volunteers;

DBS Code of Practice

The DBS recognises that the Standard and Enhanced Disclosure information is extremely sensitive and personal, therefore it has published a Code of Practice and employers' guidance for recipients of Disclosures to ensure they are handled fairly and used properly. Organisations that wish to use DBS checks must comply with the DBSs Code of Practice. The University's policy is available from Human Resources.

Vulnerable Persons

While the DBS no longer recognises the category of 'vulnerable adult', particular attention must be paid to the research design, research implements, gaining consent and respecting confidentiality regarding research with a vulnerable adult. A vulnerable adult is a person who is aged 18 years or over and:

- is living in residential accommodation, such as a care home or a residential special school
- is living in sheltered housing
- is receiving domiciliary care in his or her own home
- is receiving any form of health care
- is detained in a prison, remand centre, young offenders institution, secure training centre or attendance centre or under the powers of the Immigration and Asylum Act 1999
- is in contact with probation services
- is receiving a welfare service of a description to be prescribed in regulations
- is receiving a service or participating in an activity which is specifically targeted at people with age-related needs, disabilities or prescribed physical or mental health conditions or expectant or nursing mothers living in residential care (age-related needs include needs associated with frailty, illness, disability or mental capacity);
- is receiving direct payments from local authority/HSS body in lieu of social care services
- requires assistance in the conduct of his or her own affairs.

From a data protection perspective, all vulnerable persons (child and adult) require special protection. As set out in Section 10, a DPIA should be carried out whenever working with vulnerable persons.

Appendix 3: Professional Frameworks and organisations.

The Concordat to support research integrity
The concordat to support research integrity asks universities, research institutes and individual researchers to commit to ensuring their work is underpinned by the highest standards of rigour and integrity.

https://www.universitiesuk.ac.uk/topics/research-and-innovation/concordat-support-research-integrity

Information Commissioners Office (ICO). The Information Commissioners Office (ICO) is the UK's independent authority set up to uphold information rights in the public interest, promoting openness by public bodies and data privacy for individuals. The ICO provides guidance about your obligations and how to comply, including protecting personal information, and providing access to official information. https://ico.org.uk/

Professional Bodies – Ethical Codes of Practice. Various professional groups have their own ethical guidelines and many of these are easily available on the internet and can be consulted by following the links below. In all cases the onus is placed on the researcher to meet the highest ethical thresholds set by the relevant professional body.

UKRI

- Research ethics guidance
- http://www.esrc.ac.uk/funding/guidance-for-applicants/research-ethics/

- Trusted Research and Innovation
- https://www.ukri.org/about-us/policies-standards-and-data/good-research-resource-hub/trusted-research-and-innovation/

Singapore Statement on Research Integrity

- http://www.singaporestatement.org/

European Code of Conduct for Research Integrity

- http://archives.esf.org/coordinating-research/mo-fora/research-integrity.html

Government Office for Science (www.bis.gov.uk/go-science)

- *Rigour, Respect, Responsibility: a Universal Ethical Code for Scientists*
- http://www.bis.gov.uk/assets/goscience/docs/u/universal-ethical-code-scientists.pdf

UK Research Integrity Office (www.ukrio.org)

- *Code of Practice for Research: Promoting good practice and preventing misconduct*
- https://ukrio.org/publications/code-of-practice-for-research

- *Procedure for the Investigation of Misconduct in Research*
- http://ukrio.org/publications/misconduct-investigation-procedure/