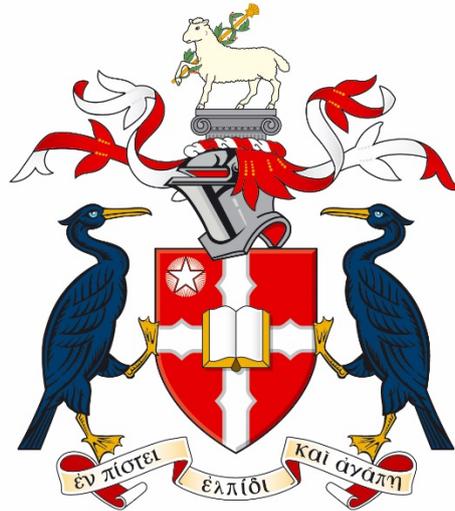


Liverpool Hope University



Research Ethics Policy

**APPROVED BY SENATE
and UNIVERSITY COUNCIL**

Version Control

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Original Policy	2008	
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1. Preamble

The previous Research Ethics Policy was introduced in 2008. After several years' operation of this policy, the Council Standing Committee on Research Ethics commissioned a review of the operation of research ethics across the University, and the report of that review was considered by the Research Ethics Sub-Committee, the Research Committee and the Council Standing Committee in the autumn of 2013. This policy takes account of the review findings as well as several years' experience of operating the policy and procedures.

2. Introduction

The responsibility for promoting and delivering good research practice is shared by the whole research community. Researchers should strive for the highest achievable standards in the planning, conduct and reporting of their research and demonstrate integrity in their dealings with others. Organisations funding, undertaking or engaged with research should foster a culture that supports and embeds good research practice and aims to prevent research misconduct. Researchers and research organisations have a duty to ensure that roles and responsibilities are clear, that appropriate resources and skills are in place and that a robust framework is in place to ensure the highest standards of integrity, including the standards required in relation to research ethics.

Whilst systems of ethics review and regulatory requirements change quite rapidly, there are a number of *ethical principles* that should be followed when undertaking research and they form the basis of this policy. At their core, these ethical principles stress the need to (a) *do good* (known as *beneficence*) and (b) *do no harm* (known as *non-maleficence*). In *practice*, these ethical principles mean that all researchers, whether staff or students, need to ensure that their research is designed and conducted to the highest standards possible. In order to achieve this, researchers may, dependent upon the nature of their project, be required to: (1) obtain *informed consent* from potential research participants or those responsible for their well-being (e.g. parents); (2) minimise the *risk of harm* to participants; (3) protect their *anonymity* and *confidentiality*; (4) avoid using *deceptive or covert practices*; and (5) give participants the *right to withdraw* from the research.

3. Scope

The Research Ethics Policy encompasses **all research at all levels** within the University. This includes

- Undergraduate research (including final year projects and dissertations)
- Postgraduate research projects (taught Master's, Master's by research, MPhil, EdD and PhD)
- Staff Research
- Research Consultancy

Clearly the level of ethical oversight required for some projects will be far greater than that required for others, but for the avoidance of doubt this policy applies to all research at all levels. Paragraph 6.3 in Section One provides more details of the level of approval required for particular scenarios.

The policy is divided into four sections.

- Section One outlines the principles upon which this policy is based.
- Section Two outlines the framework within which the policy is operated, including governance arrangements.
- Section Three sets out the approval procedures to be followed
- Section Four provides the necessary documentation required of those seeking approval for research projects.

Section One: Principles

1. Introduction

- 1.1 The primary responsibility for the conduct of ethical research lies with the researcher. It is a fundamental principle that all Liverpool Hope staff and students engaged in research adopt a continuing personal commitment to act ethically, to encourage ethical behaviour in those with whom they collaborate, to be aware of subject-specific ethical guidelines and to consult where appropriate concerning ethical issues. The University is fully committed to ensuring that all staff and students are fully apprised of their responsibilities in this regard.
- 1.2 Research undertaken by staff and students must conform to all UK legal requirements. This will include compliance with relevant data protection legislation and, if required, appropriate vetting of researchers working with vulnerable groups (Disclosure and Barring Service (DBS) approval, if required) and strict adherence to licensing requirements for any animal or biomedical research.
- 1.3 Supervisors of student research are responsible for ensuring that all students (be they undergraduate or postgraduate) are fully aware of their responsibilities under 1.1 and 1.2 above and should assist the student to meet this requirement and to seek ethical approval for research projects. Research supervisors should do everything possible to ensure that appropriate ethical scrutiny of their students' research occurs and are required to advise on the processes required. **Researchers are required to demonstrate that they have secured the appropriate approval for their research**
- 1.4 Supervisors of student research, be it at undergraduate or postgraduate level, and staff research group leaders, are required to be fully conversant with this policy and to maintain an up-to-date familiarity with ethical guidelines and principles operative within their discipline; they are to ensure that students and co-researchers are fully conversant and compliant with the appropriate ethical code/s.
- 1.5 The University acknowledges the importance of the professional codes of conduct of external agencies and organisations, and accords them primacy as a default position. It is the researcher's responsibility to ensure that any necessary external ethical approvals are obtained in advance of submitting an application for University approval, although some research requiring external approval may need prior screening by the University (see Appendix 1).
- 1.6 The University is a signatory to the Concordat to Support Research Integrity (available at <http://www.universitiesuk.ac.uk/highereducation/Documents/2012/TheConcordatToSupportResearchIntegrity.pdf>)

and as a signatory is committed to:

- maintaining 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 reviewing progress regularly and openly

- 1.7 Importantly, the University views the consideration of ethical issues as part of the educative process and not merely a question of compliance.
- 1.8 It is expected that all researchers will undertake research in accordance with the Concordat (see above) and any breaches may be subject to disciplinary action, as appropriate.

2. Informed Consent

2.1 Research involving human participants shall be based, as far as possible and practicable, on the freely given informed consent of those under study. Should deceptive or covert methods be considered absolutely necessary (i.e. where it would otherwise be impossible to obtain the data required) then the principles outlined in section 4 below must be adhered to.

2.2 It is the responsibility of the researcher to explain as fully as is reasonable and appropriate and in terms meaningful to the participants: the aims and nature of the research, who is undertaking it, who is funding it, its likely duration, why it is being undertaken, the possible consequences of the research, and how the results are to be disseminated.

2.3 The power imbalance between researcher and researched shall be considered and great care must be taken to ensure that the latter are not pressurised into participation. Research participants must be made aware of their right to refuse participation at any time.

2.4 Where the research involves a lengthy data-gathering period it must not be assumed that consent given earlier in the study extends over the longer period. It will be necessary to gain consent annually, unless the nature of the research or that of the data to be collected changes, necessitating a more frequent review.

- 2.5 The researcher shall explain clearly how far research participants will be afforded anonymity and confidentiality. If anonymity and/or confidentiality cannot be ensured, this must be made clear to research participants. All participants shall be fully aware that even if they agree to participate in the research, they have the option of rejecting the use of data-gathering devices such as tape-recorders and video cameras. The researcher should also explain to participants that they have the option at any stage to stop an interview if they feel any kind of discomfort or distress.
- 2.6 If there is a likelihood of data being shared with or divulged to other researchers, the potential uses of the data must be made known to the participants and their agreement to such use should be obtained.
- 2.7 Researchers should attempt to obtain the verbal assent of children and **must** obtain the written informed consent of their parent(s) or guardian and in relation to schoolchildren those who are *in loco parentis* in the place of research (e.g., if the research is to take place in school). It is the researcher's responsibility (or the supervisor in the case of students) to identify in good time if a Disclosure and Barring Service (DBS) check on the researcher is necessary, and to ensure that research does not begin until this has been received. Where research participants are young children or other vulnerable groups, it may be necessary to use a proxy in order to gather data. In this case great care must be taken not to intrude upon the privacy of the vulnerable participants. The researcher must consult relevant professionals and parents/guardians, as appropriate.

3. Deceptive And Covert Research/Research Into Illegal Activities

- 3.1 Wherever possible researchers shall endeavour to avoid the use of deception in their research methods, as this violates the principle of informed consent and may invade the privacy of those under study, particularly in non-public spaces.
- 3.2 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 over-ride the issues of free and informed consent. Where approval has been given, the implications arising from potential publication must be fully considered.
- 3.3 Covert research in non-public spaces (that is, where persons would not normally expect to be under observation), or experimental manipulation of research participants without their knowledge, should be a last resort when it is impossible to use other methods to obtain the required data. It is particularly important in such cases to safeguard the anonymity of participants.
- 3.4 Any research involving **deceptive or covert methods**, must go to the Faculty Research Ethics Sub-Committee, who will then seek approval

from the University Research Ethics Sub-Committee. **There is no delegated authority to approve at Faculty level in such cases.**

3.5 Any proposed empirical research into **illegal activities**, must go to the Faculty Research Ethics Sub-Committee, who will then seek approval from the University Research Ethics Sub-Committee. **There is no delegated authority to approve at Faculty level in such cases.** The University expects that empirical research into illegal activities shall not normally be undertaken by undergraduate students.

4. Confidentiality and Anonymity

4.1 The anonymity and privacy of research participants must be respected and personal information relating to them must be kept confidential and secure. Researchers must comply with the provisions of the Data Protection Act 1998 and shall consider whether it is proper or appropriate even to record certain kinds of sensitive information.

4.2 Whilst the researcher shall take every practicable measure to ensure the confidentiality and anonymity of research participants, s/he shall also take care not to give unrealistic assurances or guarantees of confidentiality. Research participants with easily identifiable characteristics or positions within an organisation, for example, must be reminded that it may be difficult to disguise their identity totally without distorting the data.

4.3 The identities and research records of participants must be kept confidential, whether or not an explicit pledge of confidentiality has been given

4.4 All assurances given to research participants of confidentiality and anonymity, whether written or oral, must be accompanied by a declaration that the researcher may need to disclose information relating to certain types of illegal or harmful behaviours.

5. Funded Research

5.1 It is the researcher's responsibility to ascertain whether a funding body is engaged in activity that might compromise the reputation of the University or be in conflict with the University's mission and values. The University Secretary's Office will provide advice if necessary.

5.2 Researchers must ensure that funding bodies are made fully aware that any funding given must be free from the expectation of particular results.

6. All research requires ethical approval

6.1 The scope of this policy (paragraph 3 in the Overview) confirms that it applies to all research undertaken at the University. This can be light touch approval in many cases (as set out below) but in all instances

approval in principle is subject to confirmation by the Faculty Research Ethics Sub-Committee, or University Research Ethics Sub-Committee (as set out under Section 3). For the avoidance of doubt, if the lead researcher is outwith a faculty structure (for example, a senior librarian) then the research must be considered by any one of the Faculty Research Ethics Sub-Committees in the first instance.

6.2 There are certain types of research which will normally require explicit consideration by a full Faculty Research Ethics Sub-Committee and in some cases by the University Research Ethics Sub-Committee.

6.3 The following list of types of research which would normally require detailed consideration at Faculty or University level is not exhaustive and each case must be considered on its own merits

- 6.3.1 Research into illegal activities;
- 6.3.2 Deceptive or covert research;
- 6.3.3 Research which directly involves biomedical or clinical intervention, including any use of human material;
- 6.3.4 Research involving animal experiments;
- 6.3.5 Research which might compromise the reputation of the University or be in conflict with the University's mission and values, although it is expected that this will be in very occasional cases given the rightful protection of academic freedom;
- 6.3.6 Research whose source of funding might compromise the reputation of the University or be in conflict with the University's mission and values;
- 6.3.7 Research which involves participation by those under the age of 18¹;
- 6.3.8 Research which involves participation by vulnerable individuals or groups.

6.4 Research which is related to external bodies will often require ethics approval through the external body's own systems. In these cases, the University will only give its own approval once the requirements of the external body have been met. It is the responsibility of the researcher to ensure that such approval is sought in good time. Specific guidance is given in Appendix 1 for all research which is subject to NHS and Social Care Governance procedures specified by the Department of Health (DoH).

6.5 Where an element of the research is conducted outside the UK, appropriate consideration must also be given to any legal and cultural issues prevailing in the location of the research which may have a bearing on the research.

¹ The age at which young people can legally and validly give informed consent to research is much debated, and to some extent depends on the context. For consistency and as a precautionary measure the University takes it to normally be the age of 18. Parental /guardian consent should be sought for all under that age.

7. Health and Safety

7.1 All those undertaking research must take account of any health or safety considerations affecting either the researcher or the research participants when preparing their proposal, and consider any ethical issues raised. Where health or safety concerns are raised, the first requirement is to undertake a suitable and sufficient risk assessment and to establish appropriate safeguards/measures.

8. Equality and Diversity

8.1 All research undertaken at the University must be in line with the Equality Act 2010 and with University policies on equality and diversity.

8.2 Equality and diversity matters in relation to research may impinge on ethical approval, should be taken into account when designing the research methodology, and should be made explicit in the application.

Section 2: Framework

9 Governance of Research Ethics

9.1 All research conducted by staff and/or students of Liverpool Hope University is subject to this research ethics policy. However, there will be different levels of approval depending on the nature of the research.

It is the researcher's responsibility to make the initial judgement as to the level of ethical approval that is required (assisted in the case of students by the supervisor). Researchers and their supervisors should take account of the guiding principles in paragraph 6.3.

9.2 Please note that it is custom and practice at Liverpool Hope University that responsibility for the implementation of University policy approved by Council and Senate is devolved to Faculty level. Consequently, it is expected that Faculties will adopt the principles of this Research Ethics Policy. If local practice requires variations in the operation of the policy, then these are allowed subject to appropriate consultation within the Faculty and explicit approval by the University Research Ethics Sub-Committee.

9.3 Faculty Research Ethics Leads

Each Faculty should appoint a Faculty Research Ethics Lead. It is the responsibility of the Faculty Research Ethics Leads to:-

- a. Chair the Faculty Research Ethics Sub-Committee, sit on the Faculty Research Committee and sit on the University Research Ethics Sub-Committee;
- b. Convene meetings of the Faculty Research Ethics Sub-Committee, at least twice a term;
- c. Oversee the training of Departmental² Leads, and maintain a record of needs identified and training delivered.
- d. Advise Faculty staff on research ethics matters;
- e. Ensure that a robust system is in place to record all Research Ethics Approvals given within the Faculty mapped to student cohorts;
- f. Ensure that reports are received on all Research Ethics Approvals granted at Departmental level at the next meeting of the Faculty Research Ethics Committee;
- g. Ensure that all cases requiring Faculty or University level approval are considered at the Faculty Research Ethics Sub-Committee in the first instance;
- h. Keep the Faculty informed of any developments relating to research ethics and this research ethics policy.

² Or equivalent (such as School / Subject Area) throughout

9.4 Ethical Approval

The level at which ethical approval is given should normally be the Faculty Research Ethics Committee or, exceptionally, through Chair's Action on its behalf.

However, in recognition of the large number of ethical approval requests which may arise, the varying level of risk that each presents and the likelihood that many of these will be presented within a narrow time-window, a limited and carefully monitored degree of authority to approve may *in certain circumstances* be vested in designated staff within the Departments of the Faculty.

The screening process involved in this hierarchy of delegation of authority is set out in Appendix 2. All reference to the activities of such designated staff should be taken as operating within this framework.

9.5 Departments/Schools/Subject Area Ethics Leads

Each Department should appoint one or more Research Ethics Lead/s who will serve on the Faculty Research Ethics Sub-Committee and ensure that the ethical approval of research within their Departments is managed effectively and in line with this policy. Full records of all approvals granted via the scheme of delegation (see page 14) must be maintained within the Department/Faculty and made available to the Faculty Research Ethics Sub-Committee. The approval documentation and the original proposal must be maintained for audit purposes.

Note that the Faculty Research Ethics Lead must **not** normally be a Departmental Ethics Lead to avoid potential conflicts of interest.

All staff appointed to the role of Departmental Ethics Lead (DEL) **must** be confirmed as appropriate by the Head of Department (or equivalent) AND the Faculty Research Ethics Lead. It is expected that staff will take part in regular training activities and keep up to date with the latest developments in the field.

Note: The primary source of advice for students on matters relating to research ethics should be the student's research supervisor/s or senior member/s of the teaching team. Where a supervisor/member of staff requires advice on ethical matters, the DEL should be the first point of contact. DEL's and the Faculty Research Ethics Committee should **not** be regarded as the primary source of advice to students, rather their role is to ensure that ethical matters have been adequately addressed, to advise on complex projects and to approve individual research projects (within the scheme of delegated authority). Any student requiring advice on ethics/ethical approval and research methodology should discuss this with their research supervisor or a member of their academic teaching team in the first instance.

9.6 Faculty Research Ethics Sub-Committee

Each Faculty must have a Faculty Research Ethics Sub-Committee which reports via the Faculty Research Committee to Faculty Board. The minutes of the Faculty Research Ethics Sub-Committee should also be submitted to the University Research Ethics Sub-Committee.

The Faculty Research Ethics Sub-Committee shall be constituted as follows:-

- a. Faculty Research Ethics Lead (in the Chair)
- b. All DEL's
- c. Co-opted members as appropriate, as agreed by a full meeting of the Faculty Research Ethics Sub-Committee. It is suggested that the Faculty considers co-opting students as members.

Exceptionally, the Faculty Research Ethics Sub-Committee Lead may request that additional expertise and advice be sought from another Faculty to ensure appropriate scrutiny of a proposal.

The Faculty should provide secretarial support for the Sub-Committee.

Terms of Reference for the Faculty Research Ethics Sub-Committee

- a. To oversee the operation of the research ethics policy within the Faculty
- b. To ensure that any proposed, local variations to the University policy are submitted to the University Research Ethics Sub-Committee for approval
- c. To receive lists at each meeting of any research ethics approval granted at Departmental level and to ensure records are kept of all research ethics approvals granted or referred back for action. It is expected that DELs will maintain up to date records against cohort data of all ethical approvals³.
- d. To consider cases submitted by the DEL for consideration
- e. To keep records of all research ethics training undertaken within the Faculty and to keep training needs and delivery under review.
- f. To report to each meeting of the University Research Ethics Sub-Committee and the Faculty Research Committee all research ethics approvals within the Faculty.

9.7 The University Research Ethics Sub-Committee

The University Research Ethics Sub-Committee is responsible for oversight of all matters relating to research ethics across the University and for the implementation and updating of this policy. It reports to the

³ For example, all Level H students are required to undertake either an extended project or a dissertation/all MA students will undertake a dissertation/ or similar project. Therefore each student should receive ethical approval for their project (at some level). It is important that accurate records are kept to ensure all students are managed in line with this policy (ie 100%).

Research Committee of Senate. The University Research Ethics Sub-Committee will meet at least twice a term to receive reports from the Faculty Research Ethics Sub-Committees and to consider any specific cases brought forward by the Faculties. The University Research Ethics Sub-Committee will also keep this policy under review and ensure that systems are in place to provide training and guidance for staff.

The University Research Ethics Sub-Committee should be constituted as follows:-

- a. The Chair, who will be of Professorial Rank and hence a member of Senate
- b. The Chairs of the Faculty Research Ethics Sub-Committees, one of whom shall be the Vice-Chair
- c. The University Secretary (or nominee)
- d. A member of staff from another UK HEI who has significant experience of research ethics across the sector. The external member is appointed by the University Secretary on a biennial basis (with a maximum of two terms).
- e. Other staff by invitation

The University Research Ethics Sub-Committee will be serviced by the University's Research Support Officer.

Terms of Reference for the University Research Ethics Sub-Committee

- a. To undertake oversight of all matters relating to research ethics at Liverpool Hope University
- b. To keep under review the Research Ethics Policy
- c. To consider and if appropriate approve any local variations to the Research Ethics Policy requested by Faculties
- d. To receive reports of research ethics approvals given at Faculty level
- e. To consider cases referred to it by the Faculty Research Ethics Sub-Committees
- f. To consider appeals against decisions of the Faculty Research Ethics Sub-Committees
- g. To ensure a programme of research ethics training is in place
- h. To keep abreast of developments in research ethics at a national / sector level
- i. To provide an annual report to the Council Standing Committee on Research Ethics

9.8 Council Standing Committee on Research Ethics

University Council has established a Standing Committee on Research Ethics which will provide assurance to Council, via its Audit Committee, that the risks associated with research ethics are being managed effectively.

The Council Standing Committee on Research Ethics shall be constituted as follows:

- a. At least two members of University Council, one of whom shall be the Chair and one the Vice-Chair
- b. The Chair of Research Committee
- c. The Chair of the University Research Ethics Sub-Committee
- d. The University Secretary

The Committee will be serviced by the Secretary's Office.

The Terms of Reference for the Council Standing Committee on Research Ethics are as follows:-

- a. To provide assurance to Audit Committee and to University Council that the processes in place for the consideration of the ethical implications of research projects are rigorous.
- b. To provide assurance to Audit Committee and to University Council that the requirements of research funding bodies for ethical approval are complied with.
- c. To provide assurance to Audit Committee and to University Council that legislative and regulatory compliance in matters of research ethics is achieved.
- d. To provide an annual report to Audit Committee and to University Council on compliance in matters of research ethics.

NB The Council Standing Committee on Research Ethics will **NOT** concern itself with ethical approval of individual research projects, which is the remit of the Research Ethics Sub-Committee of Senate.

The Council Standing Committee on Research Ethics shall normally meet at least once per year and shall report to University Council via Audit Committee

Section 3: Procedures

10 Ethical approval of research projects

The normal level for approval of requests for ethical approval shall be the Faculty Research Ethics Committee. However, some proposed projects **must** be considered by the University Research Ethics Sub-Committee (as described above), whilst approval of lower risk projects is devolved to the Departmental Ethics Leads or Research Supervisor.

The framework for approval / delegated approval is provided below:

Type of research	Approval by
Research involving deception, covert activity, empirical research into illegal activities, or where the proposed research is deemed to pose a significant risk to the University's reputation	University, after Faculty scrutiny and referral
Research involving health / social care patients, users, staff, organisations (covered by Health Research Authority/NHS Research Governance requirements)	Involving Patients / Service Users: Approval via Health Research Authority (HRA framework/IRAS) and site specific approvals under local research governance requirements; Faculty involvement as per HRA/IRAS and approval reported to Faculty. Involving NHS/Social Care Staff – use of HRA (IRAS) to review and screen. As applicable, specific approval under HRA and/or local research governance requirements, as applicable; Faculty involvement as per HRA/IRAS and approval reported to Faculty.
Research involving animals where the proposed research does not require license under the Animals Scientific Procedures Act (1986)	University Research Ethics Sub-Committee after Faculty scrutiny and referral
Research involving human participants	
Research involving children/young people under the age of 18 or vulnerable adults	Faculty Research Ethics Sub-Committee
Research not involving children/young people under the age of 18 or vulnerable adults	Departmental Ethics Lead ⁴ – subject to the researcher satisfactorily addressing ethical matters within the research proposal. (DEL required to complete checklist and declaration.)

⁴ A DEL may **not** approve their own student's research if it falls within this category. Approval must be sought from another DEL.

Research not involving human participants	
Text-based only	<ul style="list-style-type: none"> • If the researcher is a student – the research supervisor can approve (supervisor required to complete checklist and declaration) • If the researcher is a member of staff, the DEL is authorised to approve (DEL required to complete checklist and declaration)

The Faculty scrutiny may, and all individual (i.e. DEL/Supervisor) scrutiny MUST, use the checklist to demonstrate that key issues have been addressed.

Any research being undertaken under the aegis of Liverpool Hope University must follow the procedures as set out below:

Step 1:	<p>Researcher completes ethical approval form which captures the following:</p> <p>Part 1 – overview (aims, objectives, methodology) and screening filter (for approval of text based projects)</p> <p>Part 2 - to be completed for all research involving human participants</p> <p>Part 3 – approvals checklist to be completed for all research involving human participants</p>
Step 2:	<p>For student research, the supervisor reviews ethical approval form (including, if applicable, participant information sheets, consent forms etc.).</p> <ul style="list-style-type: none"> • If text based and no risk or text based and low risk (where risks have been identified and mitigated) supervisor approves and records approval. • If involving human participants, supervisor reviews all documentation and when confident that ethical matters have been appropriately addressed approved the documentation to be provided by the researcher to the DEL. <p>For staff research, all documentation should be provided directly to the DEL.</p>
Step 3:	<p>The DEL will review and scrutinise the documentation and either;</p> <ul style="list-style-type: none"> • Approve (in line with the scheme of delegation) using the checklist if necessary <p>OR</p> <ul style="list-style-type: none"> • Refer the matter back to the researcher for corrective action <p>OR</p> <ul style="list-style-type: none"> • Refer the project to the Faculty Research Ethics Sub-Committee in line with the scheme of delegation <p>DEL's in any doubt should seek advice from the Faculty Research Ethics Lead. It is assumed that core design and methodological issues (including the scope and scale of the research and the timeframe available) will have been addressed <i>in advance</i> of the proposal being received for consideration.</p>

Step 4:	<p>Faculty Research Ethics Sub-Committee may either:</p> <ul style="list-style-type: none"> • APPROVE the proposal without any further action being required. This will be formally recorded and reported back accordingly. • REFER the proposal back to the researcher for remedial action. The proposal must be submitted again, either for Chair's Action or consideration by the full Sub-Committee. • REFER the proposal to the University Research Ethics Sub-Committee for consideration (if required under the terms of this policy, or if for due cause they judge this to be appropriate). Where any research is being referred to the University Research Ethics Sub-Committee for consideration it is expected that any problematic issues have first been addressed
<p>Note that full records of all approvals must be maintained by Faculty Research Ethics Sub Committee and reported to the University Research Ethics Sub-Committee and Faculty Research Committee.</p>	

11. Where Chair's Action is required (either at Faculty or University Research Ethics Sub-Committee level) , it should be progressed by a meeting (possibly virtual) of the Chair and at least two other members of the Sub-Committee not directly involved in the process thus far. At University level, either the University Secretary or the External member must be one of the other two members involved.
12. It is the responsibility of the Faculty Research Ethics Committee to ensure that there is an effective and timely mechanism in place to communicate the decisions of Faculty Research Ethics Sub-Committee, University Research Ethics Sub-Committee, and of any Chair's Action, to the researcher.
13. The decision of the University Research Ethics Sub-Committee is final in all cases, with any appeal against Chair's Action being heard by the full Sub-Committee. Only if a researcher believes there has been maladministration or malpractice can they appeal to the Chair of Research Committee to overturn the decision of the University Research Ethics Sub-Committee. In such cases, the Chair of Research Committee will review the documentation with two other members of Research Committee. The right to interview the researcher and the Chair of the Research Ethics Sub-Committee is reserved, if necessary.

14 **Joint research**

Where joint or interdisciplinary research is being conducted by members of staff or students in more than one Faculty, the research need undergo ethics review in only one of them. For staff research, this would be the Faculty where the lead researcher is based. For students undertaking a joint dissertation project, either Faculty can approve the ethical approval.

In all cases of joint research, other participating Faculties must be informed of approvals given or resubmissions requested.

Where research is being conducted jointly with another institution, research ethical approval need not necessarily be sought from both the partner institution and from Liverpool Hope. The decision regarding which institution is the most appropriate from which to seek ethical approval should take into account the location of the principal investigator and/or research. Ethical approval from another institution does not, however, exempt Liverpool Hope members of staff from compliance with the University's own research ethics principles as set out in this policy. It is the researcher's responsibility to make known any such approval granted by another institution to the relevant Faculty Research Ethics Lead who should check the compatibility of the institution's ethics policy with that of Liverpool Hope and report that approval has been given by an appropriate body to the University Research Ethics Sub-Committee.

Research outwith a Faculty

If research is being undertaken by staff outside Faculties, then advice should be sought from the Chair of the University Research Ethics Sub-Committee.

ANY BREACH OF THIS POLICY MIGHT BE DEEMED ACADEMIC MISCONDUCT AND THE STAFF OR STUDENT CONCERNED MIGHT BE SUBJECT TO THE RELEVANT DISCIPLINARY PROCEDURES.⁵ IN PARTICULAR, WHERE THE RESEARCH INVOLVES HUMAN PARTICIPATION, NO APPROACHES TO POTENTIAL PARTICIPANTS MAY BE MADE UNTIL ETHICAL APPROVAL HAS BEEN GRANTED.

⁵ Preliminary reading and initial approaches to relevant gatekeepers (e.g.; head teachers) do not need to wait for this approval, although care must be taken with the latter so as not to misrepresent the project or its status.

Section Four

Research Ethics: Documentation

To be inserted. This will include the Research Ethics Approval Form, and the checklist governing scrutiny.

Appendix 1 - Approvals

Students must access the Health Research Authority portal and use the Integrated Research Application System (IRAS) and the NHS Research Ethics Committee Central Booking Service for obtaining the necessary approvals. For social care research there is a national Social Care Research Ethics Committee which shares the same system. Both systems require a detailed research protocol and an evaluation of the scientific quality of the research proposal to be undertaken before ethical approval is requested.

Proposals may need to be submitted for pre-approval ratification to the relevant Faculty Research Ethics Committee for methodological evaluation and any required changes must be undertaken before it is submitted to the local NHS Committee.

Comprehensive advice and guidance is available at <http://www.hra.nhs.uk/research-community/before-you-apply/> and information on IRAS is available at <http://www.hra.nhs.uk/resources/applying-for-reviews/integrated-research-application-system-iras/>

Following publication of revised governance arrangements for NHS Research Ethics Committees in 2011, the following types of research no longer automatically require approval by an NHS ethics Committee (REC):

- Research carried out on NHS premises
- Research carried out on NHS staff

In both cases, and subject to the guidance within the Health Research Authority portal, ethics approval can be sought via the University Ethics Review Procedure, as long as the research does not involve any other categories for which NHS REC approval would be required. Researchers should be aware that whilst full NHS REC approval may not be required, research in the aforementioned categories may still require research governance approval from the organisation in which it is taking place. **Researchers must contact the research and development / research governance office of the organisation in which the research is planned to check local requirements, obtain the necessary permissions and provide evidence of this to the University.**

For full guidance on the types of research for which NHS REC approval is required, please refer to the Department of Health's policy document, which is available at: <http://www.hra.nhs.uk/research-community/before-you-apply/determine-which-review-body-approvals-are-required/>

It should be noted that the definition of research applied by the NHS is not as broad as the definition applied by the University. Hence a research project that does not need to be ethically approved via the NHS Ethics Review Procedure will still come under the remit of the University's ethics policy.

Appendix 2 – Appeals

Researchers, whether student or staff, who are dissatisfied with the outcome of a request for Research Ethics clearance should first seek clarification from the person who notified them of the outcome, in case there has been a misunderstanding or there is an issue which can be readily resolved.

After this if they still wish to seek a change to the outcome, they should appeal in writing (an email is acceptable) to the Chair of the University Research Ethics Sub-committee, through the University Research Support Officer [RSO]. The appeal should set out concisely why the researcher finds the outcome unsatisfactory, the precise grounds on which the appeal is being made, and the desired outcome of the appeal. Any appropriate supporting evidence should also be presented, along with the information given in response to the request.

Those considering an appeal should note that simply disagreeing with the outcome is not of itself sufficient; there must be other aspects associated with the decision (e.g. material circumstances relating directly to the request of which the reviewing body was not aware; that material procedural irregularities occurred in the review process; or that there is demonstrable evidence of prejudice, bias, or inadequate review.)

The email or letter setting out the appeal should be copied to the Chair of the Faculty Research Ethics Sub-committee and, where appropriate, to the supervisor of a student research project or the Head of Department (or equivalent) for staff research. Note that only the researcher is able to make an appeal, although other parties (e.g. the supervisor for a student) may provide appropriate guidance and support.

The RSO will acknowledge receipt of the email or letter within one working week of its being sent, and will advise the appellant when the next meeting of the University Research Ethics Sub-committee is expected to take place. The RSO will ensure that the appeal is placed on the Agenda and that all relevant material is supplied to the meeting, and will communicate the outcome of the appeal within one working week of the meeting. The appeal will be entirely paper-based.

If the next meeting is so timed that waiting until it takes place might jeopardise the conduct of the research if the appeal were to be successful, the appellant may request that the Chair of the University Research Ethics Sub-committee take Chair's Action to consider the appeal ahead of the next meeting. The request should be made through the RSO, who will communicate the Chair's decision (which is final) as to whether the request is accepted, and the date by which the Chair's Action will be taken if the Chair accepts the request.

If the appellant is dissatisfied with the outcome of the appeal one final stage is permitted, which is an appeal to the University Research Committee. The process and timing of this final stage will be communicated along with the outcome of the appeal. The decision of the Research Committee is final.