Template: annual statement on research integrity

If you have any questions about this template, please contact: RIsecretariat@universitiesuk.ac.uk.

Section 1: Key contact information

Question	Response
1A. Name of organisation	University of Greenwich (part of London and South East University Group from 1 August 2026)
1B. Type of organisation: **higher education institution/industry/independent research performing organisation/other (please state)**	Higher education
1C. Date statement approved by governing body (DD/MM/YY)	28 October 2026
1D. Web address of organisation's research integrity page (if applicable)	https://www.gre.ac.uk/research/governance-and-awards/research-integrity
1E. Named senior member of staff to oversee research integrity	Name: Peter Garrod, Group University Secretary
	Email address: researchethics@greenwich.ac.uk
1F. Named member of staff who will act as a first point of contact for anyone wanting more	Name: Peter Garrod, Group University Secretary

information on matters of research integrity	Email address: researchethics@greenwich.ac.uk

Section 2: Promoting high standards of research integrity and positive research culture. Description of actions and activities undertaken

2A. Description of current systems and culture

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

- Policies and systems
- Communications and engagement
- Culture, development and leadership
- Monitoring and reporting

This report covers research integrity policies and systems in place at the University of Greenwich during the 2025/26 academic year and at the time of writing of this report. On 1 August 2026 the University of Greenwich and the University of Kent merged to form London and South East University Group (LASE University Group). The research integrity policies and procedures of Greenwich and Kent are currently operating distinctly but will be integrated in due course, and the intention is to produce a combined Annual Statement in 2027.

The University of Greenwich ('the University'), part of LASE University Group, is committed to the principles and commitments outlined in the Concordat to Support Research Integrity.

Policies and systems

Public visibility of the University's research integrity policies and processes is provided by the University Research Integrity webpage which links to the following key documents:

- The UK Research Integrity Office's (UKRIO) Code of Practice for Research. The University of Greenwich has adopted the UKRIO Code of Practice and intended to develop a University of Greenwich Code of Practice (now to be taken

forward as part of integrating research integrity policies and procedures following the merger);
- Staff and student policies for investigating research misconduct (see below);
- The University's Research Ethics Policy;
- The Ethical Research Collaboration Policy, which sets out how the University will manage research collaborations to ensure these are consistent with the University's values; and
- The Academic Regulations for Research Awards.

The Research Ethics webpage links to the Research Ethics Policy and the University's Research Ethics Guidance, and provides information about the University's research ethics committees (see below) and the research ethics applications process.

The Research Ethics Policy clarifies which procedures should be followed when investigating allegations of research misconduct:

- Allegations against staff are investigated under the Procedure for Investigating Research Misconduct;
- Allegations against postgraduate research students are investigated under the Postgraduate Student Research Misconduct Procedure;
- Allegations against undergraduate and taught postgraduate students are investigated under the Assessment Misconduct Procedure.

Communications and engagement

The University's key policies on research integrity are available to staff and students on the University's website, and any significant changes are communicated to staff via web articles in the staff e-newsletter. The Postgraduate Research Students' and Supervisors' Handbook includes information on Research Integrity, including the UKRIO Code of Practice, the UKRIO Research Integrity Checklist, plagiarism and how the University handles allegations, as well as explaining the University's Research Ethics procedures.

Culture and development

All staff who are undertaking or supervising research which requires ethical approval are required to complete two online ethics training courses, which must be refreshed every three years. Termly workshops on research ethics for staff and PGR students led by the chair and vice-chair of the University Research Ethics Board are organised through Greenwich Research and Innovation and have consistently received positive feedback from attendees. Staff are also able to complete the UKRIO online training course Introduction to Research Integrity, which the University subscribes to. Research integrity and research ethics are included in the mandatory core training provided by Greenwich Research and Innovation to postgraduate research students, which includes completing UKRIO's research integrity course. All applicants to the University Research Ethics Board

(staff and students) are required to demonstrate that they have completed the two online ethics training courses before their applications will be approved.

Governance, leadership and reporting

During 2025/26, the committee with primary responsibility for oversight of research integrity at the University of Greenwich was the University Research Ethics Board (UREB). Each Greenwich faculty had a Faculty Research Ethics Committee (FREC) reporting to UREB. UREB consulted over policy changes with the University Research and Knowledge Exchange Board. Governance structures for research integrity in LASE University Group are being reviewed in 2026/27, with UREB and the FRECs continuing to consider Greenwich research ethics applications in the interim.

As required by the Concordat to Support Research Integrity, cases of research misconduct and any lessons learnt were summarised in anonymised form in 2025/26 in an annual report approved by the University's Academic Council which was approved by the University's Governing Body.

Research ethics has been reviewed periodically by the University's internal auditors, with the results reported to the Greenwich's Audit and Risk Committee (ARC). A review in 2025/26 by KPMG's (Greenwich's internal auditors) had an overall assurance rating of 'significant assurance with minor improvement opportunities' (amber-green, the second highest). The audit identified a number of areas of good practice and recommended improvements in the induction and development of ethics committee members; developing standardised role descriptions for committee roles; communications; and standardising student research ethics application forms used by Greenwich's Faculties, all of which had been implemented by year end (see 2B).

2B. Changes and developments during the period under review

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

2025/26 saw the first full year of operation of major changes to the University's research ethics policies and procedures which were approved in 2024/25. As

detailed in the 2024/25 annual statement, these changes were intended to streamline the research ethics approval process overseen by the University Research Ethics Board (UREB) by introducing a more dynamic rolling process, with the vast majority of research ethics applications to UREB no longer requiring approval at committee meetings. Another intention of the review was to ensure that the research ethics process was fit for purpose in advance of the implementation of Worktribe, which was being implemented in phases as part of a Research and Knowledge Exchange Digital Transformation project approved in 2024/25, with research ethics scheduled for 2027/28 (now to be taken forward as part of post-merger integration).

An internal audit review of research ethics (see 2A) was included in the 2025/26 internal audit plan to assess the operation of the changes to research ethics process. The review's findings supported the conclusion that the changes approved in 2024/25 were operating effectively, with the auditors stating that their overall rating of 'significant assurance with minor improvement opportunities' was "driven by clear processes in place, including comprehensive policy and guidance documentation, sign off and escalation requirements for applications, and consistent training provided to researchers submitting high-risk applications". Opportunities for improvement were identified in the following areas and actioned by management, with all actions arising from the audit completed by their deadlines:

- Induction and development of committee members: UREB approved a framework for the induction and development of new UREB and FREC members, which includes structured induction sessions with the chair and vice-chair of UREB and the Research Ethics Officer.
- Role descriptions for committee members: standardised role descriptions were approved for UREB and FREC members and chairs.
- Standardisation of student research ethics applications: while the same application form was used for all applications submitted to UREB, the review identified differences in the application forms being used in the Faculties for undergraduate (UG) and postgraduate taught (PGT) students (these applications are normally approved by the FRECs under delegated authority). Not all the desired information was being captured in local application forms. In response, a standardised application form for UG and PGT students was developed which provides for local customisation (subject to approval by UREB) to meet disciplinary requirements.

Changes to the Research Ethics Policy and the terms of reference of UREB and FRECs were approved during the year to ensure that they aligned with the freedom of speech requirements of the Office for Students.

2025/26 also saw the continued roll out of the Greenwich Doctoral College as part of Greenwich Research and Innovation, replacing the Research and Enterprise Training Institute. The Doctoral College is intended to enhance the leadership and management of PGR students across the university, the coordination of the PGR student journey from application to graduation, and the coordination and delivery of training for PGR students. As part of this, Greenwich's Academic Council approved changes to the governance of research degrees intended to improve the PGR student experience, with Faculty Research Degrees Committees being replaced by a University Research Degrees Committee and PGR Experience Committees reporting to it in each Faculty.

2C. Reflections on progress and plans for future developments

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

As indicated, 2025/26 saw the full implementation and consolidation of the major changes to the Greenwich research ethics application process which were approved in 2024/25. The effectiveness of the design and operation of the system was confirmed by an internal audit review with an overall positive outcome, with some improvements made in response. Informal feedback from applicants has also indicated that the changes are broadly perceived as working well.

Following the merger with the University of Kent, the focus in 2026/27 will be on developing unified governance and processes for research integrity across LASE University Group. Kent already uses WorkTribe for research ethics applications and this provides an opportunity to accelerate its implementation at Greenwich.

2D. Case study on good practice (optional)

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

For the past five years, the University Research Ethics Board (UREB) has required applicants to demonstrate that they have completed the University's two online research ethics courses before their application will be approved. This is now universally accepted and ensures that the University's training requirements are met.

The changes to the ethical review process which were fully implemented in 2025/26 have continued to enable UREB meetings to focus on policy discussion rather than the approval of ethics applications. Dealing with applications on a rolling basis enables applicants to receive outcomes more quickly than in a meeting based approach. Peaks and troughs in ethics applications submitted to UREB can impact on processing times during periods of high volume, and we may need to review the process for reviewing 'higher risk' applications. Currently, these are normally circulated for comments to a panel of four reviewers (the Chair and Vice-Chair of UREB and two reviewers drawn from different faculties to the applicant), with final approval by the Chair or Vice-Chair once the applicant has incorporated comments. Whether to reduce the number of reviewers and how far Greenwich's approach is in line other universities are questions to consider.

Section 3: Addressing research misconduct

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

Please provide:

- a brief summary of relevant organisation policies/ processes (e.g. research misconduct procedure, whistle-blowing policy, bullying/harassment policy; appointment of a third party to act as confidential liaison for persons wishing to raise concerns) and brief information on the periodic review of research misconduct processes (e.g. date of last review; any major changes during the period under review; date when processes will next be reviewed).

- information on how the organisation creates and embeds a research environment in which all staff, researchers and students feel comfortable to report instances of misconduct (e.g. code of practice for research, whistle-blowing, research misconduct procedure, informal liaison process, website signposting for reporting systems, training, mentoring, reflection and evaluation of policies, practices and procedures).

- anonymised key lessons learned from any investigations into allegations of misconduct which either identified opportunities for improvements in the organisation's investigation procedure and/or related policies / processes/ culture or which showed that they were working well.

Policies and processes

As indicated (see 2A), the University of Greenwich in 2025/26 and at the time of writing has three procedures for investigating allegations of research misconduct. Allegations against staff are investigated under the Procedure for Investigating Research Misconduct while allegations against postgraduate research students are investigated under the Postgraduate Student Research Misconduct Procedure; allegations against undergraduate and taught postgraduate students are investigated under the Assessment Misconduct Procedure. The Postgraduate Student Research Misconduct Procedure and the Assessment Misconduct Procedure are reviewed every three years or as required, while the Procedure for Investigating Research Misconduct is reviewed as required.

The research misconduct procedures are intended to ensure that allegations are investigated fairly, with the student procedures intended to comply with the Office of the Independent Adjudicator's Good Practice Framework. Support for staff

making and subject to allegations is available from Greenwich's Employee Assistance Programme and line manager review, and support for students is available from the Student Wellbeing Service. The Procedure for Investigating Research Misconduct and the Postgraduate Student Research Misconduct Procedure provide that allegations found to be frivolous, malicious or vexatious may lead to action against the complainant under the relevant disciplinary procedure.

While not specifically related to research misconduct, Greenwich provides a Public Interest Disclosure (Whistleblowing) Policy and Procedure for the reporting of 'whistleblowing' concerns. Students and staff may report concerns related to harassment, bullying, sexual misconduct, hate crime and discrimination through the University's Report + Support portal.

Following the completion of the merger with the University of Kent, research misconduct policies and processes will be reviewed with a view to their harmonisation across LASE University Group.

The research environment

As indicated (see 2A), training on research ethics is mandatory for Greenwich postgraduate research students and research staff. Greenwich's procedures for investigating research misconduct are available on the University's website. Any changes to policies are communicated to staff via the staff e-newsletter. The Research Ethics Policy and guidance for staff explain which procedure should be used depending on whether the allegation concerns a staff member, a postgraduate research student or an undergraduate or postgraduate taught student.

Lessons learnt

There were no PGR student or staff research misconduct investigations during the year, so no lessons learnt from cases.

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

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

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

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

***If you listed any allegations under the 'Other' category, please give a brief, high-level summary of their type here. Do not give any identifying or confidential information when responding.**
There were no investigations under the Procedure for Investigating Research Misconduct (covering staff) or the Postgraduate Student Research Misconduct Procedure.