REF 2021 Codes of practice complaints & investigations process

Introduction

1. In the REF 2021 publication ‘Guidance on codes of practice’ (REF 2019/03), the UK funding bodies committed to putting in place measures to enable individuals to make a formal complaint where it is believed that the agreed processes set out within an HEI REF 2021 Code of Practice (“COP”) are not being followed by an HEI.

2. The COPs will aid institutions in their responsibilities in respect of promoting equality and diversity, complying with legislation and avoiding discrimination when preparing submissions to REF 2021. The purpose of the Complaints and Investigations (“C&I”) process is to provide assurance to the UK funding bodies that COPs are applied as set out by institutions participating in REF 2021. This assurance helps meet the obligations of the UK funding bodies concerning equality, diversity and inclusion.

Complaints & investigations process overview

3. Each institution submitting to REF 2021 is required to develop, document and apply a COP on the fair and transparent processes for:
   a. identifying staff with significant responsibility for research (where an HEI is not submitting 100 per cent of Category A eligible staff);
   b. determining who is an independent researcher; and
   c. the selection of outputs, including approaches to supporting staff with circumstances.

4. In the REF 2021 ‘Guidance on codes of practice’ the UK funding bodies committed to putting in place measures to enable individuals to make a formal complaint where it is believed that the agreed processes set out within a COP are not being followed by an HEI.

5. The purpose of the complaints and investigations process is to provide assurance to the UK funding bodies that COPs are being applied as set out by institutions participating in REF 2021 and provide assurance to the UK funding bodies of the accuracy of submissions to REF.
2021. This assurance helps meet the UK funding bodies’ obligations concerning equality, diversity and inclusion.

6. The C&I process will open 1 April 2021 and will close June 2022.

7. The C&I process will sit alongside REF 2021 Audit. Audit will concern the accuracy of submitted REF 2021 data, and data adjustments will be made where data cannot be verified; the C&I process will concern the process – how and why a breach of a COP has occurred. While there are differences between the functions of REF Audit and the C&I process, there are also areas of overlap - REF Audit and the C&I process will correct inaccuracies in submitted data. These functions will be used together judiciously to assure the accuracy of REF 2021 submissions.

8. C&Is may not concern the adequacy or suitability of a COP itself, only the application of the COP.

9. In the first instance, the funding bodies expect that complaints will be resolved through the internal HEI appeals process documented within each COP. The funding bodies expect HEIs to provide access to routes which settle an issue under the authority of the university (e.g. a board committee, arbitration) and reserve the right to recommend such actions as an outcome of this process. The funding bodies will require that where feasible an HEI’s internal routes for resolution have been exhausted through confirmation with both the complainant and HEI. Complainants not directly employed by the HEI (including former staff) will be requested, but not required, to provide evidence that available routes to resolution have been exhausted. The funding bodies will provide a robust and independent process to consider complaints that concern an alleged breach of COP process and take appropriate action where resolution has not been possible through an HEI’s internal processes.

10. The funding bodies will not provide adjudication upon matters that are viewed not to concern a breach of COP process and will refuse complaints on such a basis. The funding bodies recognise that complaints may relate to broader functions within HEIs, such as employment practices or grievance procedures. The COP C&I process will only operate to address a breach of a COP and assure the accuracy of REF 2021 and, where relevant, future research assessment exercises. The scope of the outcomes of the C&I process will not extend beyond this remit, and complaints that do so will be rejected and the complainant advised to contact the institution in question.

11. Where complaints or investigations are upheld and an HEI is found to have breached their COP it may be appropriate for the funding bodies to apply remedies affecting the institution’s REF 2021 submission. To ensure that such issues do not arise again, in particular circumstances the funding bodies may also apply remedies relating to future research assessment exercises. Remedies will be appropriate and proportionate to the scale of a COP breach and are discussed in more detail in paragraphs 43 – 51 and Table 1, in this document.
12. Either party (the complainant or the HEI) may appeal a funding body’s COP C&I outcome.

Investigations

13. The purpose of investigations will be for the UK funding bodies to determine whether a REF 2021 COP has been breached. In cases where it is determined that a COP has been breached, investigations will determine the extent of the breach and its impact upon an institution’s submission to REF 2021. Investigations will assure the funding bodies of the accuracy of REF 2021 submissions.

14. Should a funding body investigation conclude that a COP has not been effectively adhered to, the relevant funding body will employ proportionate measures to address this (as detailed in paragraphs 43 – 51 and Table 1).

15. Both complainants and HEIs will be required to provide evidence in relation to possible breaches of a COP. In the first instance, the complainant will be required to formulate the complaint in respect of the alleged non-adherence to a COP by the relevant HEI, and produce available evidence in support of the complaint. The HEI in question will then be required to respond to the complaint and evidence provided by the complainant, where necessary by providing further evidence in relation to the complaint. The types of evidence required will vary dependent upon the nature of a complaint, but may include records of decision making processes, relevant correspondence and other records that relate to the determination of significant responsibility to research, research independence and output selection. Where a party to a complaint refuses to comply with reasonable requests for evidence, an investigation may rule in favour of the opposing party.

16. There are two possible types of investigations as part of this C&I process and are discussed in the subsequent sections:

   a. Investigation of eligible individual complaints concerning the breach of a COP process
   b. Investigation of a suspected case of a systemic breach of a COP

Individual Complaints

17. Complaints may be submitted by any person. The C&I process will only investigate complaints that concern a potential breach of a COP. A complainant need not be the direct employee of an HEI. Where it is judged by the funding bodies that a complaint is vexatious or malicious, the complaint may not be taken forward.
18. Complainants are advised to make themselves familiar with both the relevant HEI’s COP and the ‘Guidance on codes of practice’ to satisfy themselves that they believe a breach of the code has taken place before they make a complaint.

19. Complaints of the following type do not fall within the scope of the C&I process and will not be investigated:
   a. Complaints that do not concern an HEI’s application of its COP.
   b. Complaints regarding academic judgement e.g. defining research activity, assessing research quality.
   c. Complaints regarding the conduct of specific staff members within an HEI.
   d. Complaints that have already been resolved through the funding bodies’ COP C&I process and for which there is no new relevant evidence.

20. Anonymous complaints will not be accepted. This is due to three primary reasons:
   a. To ensure that a rigorous process is delivered. Anonymous complaints would prohibit the examination of the specific circumstances of a breach of a COP.
   b. To enable HEIs to respond appropriately to a complaint and provide evidence concerning specific cases.
   c. To minimise the risk of vexatious or malicious complaints.

21. The funding bodies will ensure that complainants are well-informed about the use of their personal data and any information that they provide. This includes the potential sharing of information (including that which may potentially identify individuals) between funding bodies and with the HEI(s) to which the complaint applies.

22. Wherever possible the funding bodies will not share information that would identify individuals, unless it is necessary to the consideration of the complaint or part of an investigation. Complainants will be informed that their information may be used in such a way before it is shared.

23. The UK funding bodies may consider requests to maintain privacy in exceptional circumstances. Such instances will be managed on a case-by-case basis. In some instances the ability of the funding bodies to investigate a complaint may be prevented by the desire of the complainant to maintain confidentiality, as full investigation of the issue may not be possible without specific details.

**Systemic breach**

24. A systemic breach refers to a recurrent non-adherence to a COP. Rather than a single isolated breach, a systemic breach may be typified by an impact upon multiple people, indicating a routine or widespread misapplication of a COP.

25. Where a systemic breach is suspected, the funding bodies may investigate.
26. The REF Director may trigger a funding body systemic breach investigation where they determine that a systemic breach of an HEI’s COP may have occurred. The REF Director will determine that a systemic breach may have occurred where they consider that one of the following applies:
   a. An issue raised in a complaint could have an impact on people beyond the parties to the complaint; and/or
   b. A complaint, or pattern of complaints, indicates that an HEI’s practice may not be in line with its published COP; and/or
   c. Evidence suggests that an HEI’s practice is not in line with its published COP.

27. Potential systemic breaches may be referred to the attention of the REF Director through the following routes:
   a. Individual complaints;
   b. A referral by REF audit, the REF Equality and Diversity Advisory Panel (EDAP), or the REF team panel (see paragraphs 31 & 32);
   c. Self-referral from an HEI.

28. Referrals may take place where referring parties suspect that a systemic breach of a COP meeting the criteria set out in paragraphs 24 or 26 has occurred.

29. Systemic breaches may occur at submission level within a single unit of assessment (UOA), across multiple UOAs, or at an institution-wide level. The funding bodies will consider the extent of a potential systemic breach as part of any investigation and the application of associated remedies.

The Complaints and investigation process

30. The C&I Process has three stages;
   • Stage 1: REF team process
   • Stage 2: Funding body process
   • Stage 3: Appeals process

Stage 1: REF team process

31. Stage 1 (the REF team process) is designed to determine whether or not an individual complaint, or a possible systemic breach of a COP, should be investigated by the funding bodies.

32. For context, the REF Team is jointly funded by the UK funding bodies and runs the REF on behalf of all four. The REF Team is located at Research England. The REF team panel will comprise of the Head of REF Policy, the Head of Data Verification and Information Management, and a complaints lead. If one or more of these individuals is not available, a suitable deputy will be appointed by the funding bodies.
Individual complaints

33. The following process will be followed for individual complaints:

a. Complainants may submit their COP complaint via email, directly to the REF Team. Complaints will be initially managed by a REF team panel. This panel will consider whether a complaint falls within scope of the C&I process (as outlined in paragraphs 17-23) and whether there are sufficient grounds to investigate. The REF team panel will aim to reach an outcome within five working days.

b. HEIs will be notified when a complaint has been received regarding their institution. The Head of Institution and a nominated contact will receive this notification. The notification will only advise that a complaint has been received and provide no further detail beyond this.

c. There are three potential outcomes from the REF team panel assessment:
   i. **It is deemed that the complaint is not within scope of the COP C&I process** – The panel will advise the REF Director that the complaint should not be taken forwards and the complainant informed via email.
   ii. **There is deemed to be insufficient grounds to investigate the complaint** – the REF team panel may request further evidence or explanation from the complainant. Other than in exceptional circumstances, the complainant will have ten working days within which to respond. Where additional evidence is provided by a complainant, the complaint will be assessed again by the REF team panel.
   iii. **The complaint is deemed to meet the criteria for investigation.**

d. The REF Panel will advise the REF Director of REF team panel assessment outcomes.

e. The final decision on whether a case is referred to the funding bodies for investigation will be taken by the REF Director, based upon the evidence presented and the REF team panel’s advice. The REF Director will make this decision based upon whether the following criteria are met:
   i. The complaint concerns a breach of a REF 2021 code of practice
   ii. The complaint reasonably relates to the complainant
   iii. The complaint falls within the scope of the C&I process (paragraphs 17-23)
   iv. The complainant accepts the C&I policy on data sharing and use
   v. There is sufficient grounds to investigate a complaint
   f. HEIs will be informed at this point where cases are not taken forward.

34. Partial complaints may be considered where only certain elements of a complaint are determined to be in scope, or there are only grounds to investigate part of the complaint.

35. Overall, this stage of the process is expected to take place within an estimated 30 working days. The complainant and relevant HEI will be informed of the outcome.

Systemic breaches
36. In line with paragraphs 24-29 above, in cases of suspected systemic breaches, the REF Director may refer a case for a funding body investigation.

**Stage 2: Funding body process**

37. The funding bodies will be informed about a referred case by the REF Director.

38. The funding bodies will be informed of the overall numbers of complaints that are not referred on to the funding bodies and the reasons that they are not referred. This will not include details of the complainants, nor the HEI against which the complaint was raised.

39. Where the REF Director considers that there is sufficient grounds to warrant investigation the following process will be followed:

   a. The case will be considered by a funding body panel following the close of the REF submission process. A case may concern an individual complaint or suspected systemic breach of a COP. If there is a complainant, they will be informed of the progression of their case.
   b. The funding body panel will comprise of a representative from each funding body who are:
      i. members of appropriate seniority - it is at the discretion of each funding body to determine which staff have appropriate seniority.
      ii. independent of any other panels involved elsewhere in the C&I process.
   c. The funding body panel will invite the head of the HEI concerned to provide full evidence in relation to a case. The HEI will be provided with the information contained in the complaint, or upon which an investigation is based, in order to aid their gathering of evidence. The HEI will have 15 working days to provide this information.
   d. The funding body panel will consider the evidence submitted by the HEI and will aim to make a recommendation to the relevant funding body within 15 working days, on whether a case should be upheld and any remedies applied (remedies are discussed in paragraphs 43-51 and Table 1, in this document).
   e. Should the funding body panel require advice or additional information in order to reach a decision (such as legal advice, advice from EDAP and / or the REF Main Panel Chairs) it is possible that seeking and obtaining this advice will take longer than the intended 15 working days. In such cases the relevant funding body will aim to notify the affected HEI and any complainant of any delay.
   f. The relevant funding body will then write to the HEI and complainant, should there be one, with the final decision and recommendations. It will be made clear at the outset of any investigation that details of the outcome and any remedy will be shared in full with the complainant.
   g. Overall, the funding body panel will aim to process complaints at this stage within 40 working days.

**Stage 3: Appeals process**
40. A complainant or an HEI may choose to appeal a C&I process outcome.

41. Appeals may only challenge the management and application of the C&I process, not the suitability of outcomes or the action taken. Parties may not appeal decisions concerning complaint admissibility, taken by the REF Director. All parties to the original complaint or investigation will be notified upon the receipt of an appeal.

42. Appeals will follow the following process

a. Appeals must be made by the appellant to the most senior officer of the relevant funding body – the funding body that provides primary funding to the HEI the complaint relates - within ten working days of the issuing of the original C&I process outcome.

b. Appeals will be considered by a senior cross funding body appeals panel. The appeals panel will be independent of the funding body panel that considered the original complaint.

c. The appeals panel will comprise of a representative from each funding body, who are:
   i. members of appropriate seniority - it is at the discretion of each funding body to determine which staff have appropriate seniority.
   ii. members independent of any other panels involved earlier in the C&I process.

d. The appeals panel may decide to call for additional evidence from the HEI or complainant. In such cases ten working days will be permitted for this evidence to be provided. The panel may seek legal advice, or advice from EDAP and / or the REF Main Panel Chairs.

e. The appeals panel may make a recommendation to:
   i. Revoke the initial outcome
   ii. Amend the initial outcome
   iii. Confirm the initial outcome

f. Overall the appeals panel will aim for appeals to be considered within 15 working days of receipt.

g. The relevant funding body will then aim to write to the HEI and complainant within five working days of the appeals panel recommendations, with the outcome of the appeals process. It will be made clear at the outset of the C&I process that the outcome and remedy will be shared in full with the HEI and complainant.

Remedies

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1 Chief Executive for the Higher Education Funding Council for Wales, Chief Executive for the Scottish Funding Council, Executive Chair for Research England, and Director of Higher Education for the Department for the Economy Northern Ireland.
43. Remedies will be applied where complaints or investigations are upheld and an HEI is found to have breached its COP. Remedies will be proportionate to the COP breach.

44. A joint funding body process will help maintain consistency across the UK. Remedies will, as far is practicable, be applied consistently across the UK. Pre-existing variations in the way that the UK funding bodies calculate funding based upon the results of REF 2021, however, may result in differing impacts of remedies upon funding for HEIs located in the different UK nations.

45. Remedies will be decided on and issued by the relevant funding body, though they may be implemented in some cases by the REF team.

46. Remedies will be issued in order to correct the impact of a breach of a COP and, where relevant, provide the UK funding bodies with sufficient assurance that such a breach is less likely to occur in the future. Future-oriented remedies will primarily be deployed where the funding bodies have concerns that a similar breach may occur again in future research assessment exercises and may be applied when a systemic breach of a COP has occurred.

47. It will not be possible to apply retrospective remedies in the case of complaints or investigations carried out after the publication of REF results. Remedies in this instance will concentrate on reducing the risk of similar issues occurring in the future.

48. Table 1 outlines examples of remedies for breaches of COPs. Each breach contains a range of possible remedies which may be used separately or in conjunction depending on the nature and severity of the breach.

49. As the funding bodies cannot pre-empt the nature of COP breaches in advance, it is not possible to directly link specific breaches with remedies. Table 1 sets out example scenarios with the remedies that would applied and the rationale for those decisions. The examples are indicative only and applied remedies may vary from these examples.

50. The funding bodies will aim to ensure consistency in their approach to remedies. While aiming to minimise the variation between applied remedies, the nature of remedies will relate to the specific circumstances, timing and severity of the breach of a COP. The size of a submission will also be considered in the application of remedies.

51. As set out in Table 1 below, where the funding bodies have concerns about the causes of a COP breach, the funding bodies may apply a remedy requiring the HEI in question to engage in an ongoing dialogue about participation in future exercises. This would include the development of an action plan developed with the appropriate funding body in relation to the research assessment exercise following REF 2021. The aim of this approach is to ensure that such a breach does not occur again in the future. The contents of the action plan would be determined according to the nature of the originating breach and developed in tandem and in line with the rules of the next research assessment exercise.
<table>
<thead>
<tr>
<th>Type of Breach</th>
<th>Example breach</th>
<th>Example remedy</th>
<th>Rationale</th>
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<tbody>
<tr>
<td><strong>Individual</strong></td>
<td>Scenario 1: COP process for identifying significant responsibility for research (SRR) not implemented accurately</td>
<td>Volume measure adjusted to account for individual staff incorrectly added / omitted from submission. Where individual staff have been incorrectly omitted, the number of required outputs will be adjusted and unclassified score applied for missing outputs. Where individual staff have been submitted to the exercise incorrectly, all of the outputs attributed to that staff member in the submission will also be removed. Where this leads to a lower number of outputs in the submission than is required for the new total submitted FTE, any ‘missing’ outputs will receive an unclassified score. Where the total number of outputs is higher than the recalculated requirement, all remaining outputs will be included in the assessment.</td>
<td>The example remedy corrects the inaccuracy in submission. The individual breach does not present any concerns about routine misapplication of the COP, or the culture that has led to the breach. There are no concerns around ensuring the accuracy of future research assessment exercises.</td>
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<td></td>
<td>Scenario 2: COP process for determining research independence not implemented accurately</td>
<td>Volume measure adjusted to account for individual staff incorrectly added / omitted from submission. Where individual staff have been submitted to the exercise incorrectly, all of the outputs attributed to that staff member in the submission will also be removed. Where this leads to a lower number of outputs in the submission than is required for the new total submitted FTE, any ‘missing’ outputs will receive an unclassified score. Where the total number of outputs is higher than the recalculated requirement, all remaining outputs will be included in the assessment.</td>
<td>The example remedy corrects the inaccuracy in submission. The individual breach does not present any concerns about routine misapplication of the COP, or the culture that has led to the breach. There are no concerns around ensuring the accuracy of future research assessment exercises.</td>
</tr>
<tr>
<td>Scenario</td>
<td>Description</td>
<td>Example Actions</td>
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</table>
| **Systemic** | **Scenario 3:** Inaccurate evidence provided to the funding bodies concerning the delivery of the COP process. | - Additional evidence required for instances where the HEI is required to consult with staff.  
- HEI must provide additional support for staff to ensure that their views are represented in the development of research assessment processes.  
- Additional evidence required to support research assessment decision making.  
- The Head of the HEI to provide a statement to the funding bodies concerning their approach to mitigating the risk of this happening again in the next exercise.  
- The Head of the HEI is required to oversee and sign off on HEI’s REF procedures. |
| **Scenario 4:** Routine misapplication of Volume measure adjusted to account for multiple staff incorrectly added / omitted from submission. | The example remedy corrects the inaccuracy in submission. While there has been a routine
<table>
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<th>COP in the identification of SRR and research independence in a single UOA.</th>
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<tbody>
<tr>
<td>Where staff have been omitted, the number of required outputs will be adjusted and unclassified score applied for missing outputs. Where individual staff have been submitted to the exercise incorrectly, all of the outputs attributed to that staff member in the submission will also be removed. Where this leads to a lower number of outputs in the submission than is required for the new total submitted FTE, any 'missing' outputs will receive an unclassified score. Where the total number of outputs is higher than the recalculated requirement, all remaining outputs will be included in the assessment. The funding bodies apply a remedy, requiring the HEI in question to engage in an ongoing dialogue about participation in the next research assessment exercise. The HEI in question is required to deliver an action plan developed with the relevant funding body. The action plan places increased scrutiny upon the institution in question for the next research assessment exercise and is developed as the rules of the next exercise are created. Example actions for this scenario (may vary dependent upon the rules of the next exercise).</td>
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<tr>
<td>- Additional evidence required for instances where the HEI is required to consult with staff.</td>
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<td>- HEI must provide additional support for staff to ensure that their views are represented in the development of research assessment processes.</td>
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<td>- Additional evidence required to support research assessment decision making.</td>
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<td>- The Head of the HEI to provide a statement to the funding bodies.</td>
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<td>misapplication of the breach, there are no concerns around the culture that has led to the breach. To mitigate the risk of this happening again in the future, the funding bodies apply a remedy that aims to increase scrutiny upon the approach of the HEI to the next research assessment exercise. To support the sector in the next research assessment exercise, information is published regarding the complaint and the HEI in question, including details of the associated remedy.</td>
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</table>
bodies concerning their approach to mitigating the risk of this happening again in the next exercise.
- The Head of the HEI is required to oversee and sign off on HEI’s REF procedures.

| Scenario 5: Routine and widespread misapplication of COP in the identification of SRR and research independence. Inaccurate evidence provided to the funding bodies concerning the delivery of the COP process. | Volume measure adjusted to account for multiple staff incorrectly added / omitted from submission.

Where individual staff have been submitted to the exercise incorrectly, all of the outputs attributed to that staff member in the submission will also be removed. Where this leads to a lower number of outputs in the submission than is required for the new total submitted FTE, any ‘missing’ outputs will receive an unclassified score. Where the total number of outputs is higher than the recalculated requirement, all remaining outputs will be included in the assessment.

The funding bodies apply a remedy, requiring the HEI in question to engage in an ongoing dialogue about participation in the next research assessment exercise. The HEI in question is required to deliver an action plan developed with the relevant funding body. The action plan places increased scrutiny upon the institution in question for the next research assessment exercise and is developed as the rules of the next exercise are created.

Example actions for this scenario (may vary dependent upon the rules of the next exercise).

- Additional evidence required for instances where the HEI is required to consult with staff.
- HEI must provide additional support for staff to ensure that

The example remedy corrects the inaccuracy of the submission. The funding bodies have substantial concerns around the approach of the institution to the rules of the exercise and the culture that has led to the inaccuracies. To mitigate the risk of this happening again in the future, the funding bodies apply a remedy that aims to increase scrutiny upon the approach of the HEI to the next research assessment exercise and greater controls are placed upon the HEI in relation to the definition of the population for the next exercise. To support the sector in the next research assessment exercise, information is published regarding the complaint and the HEI in question, including details of the associated
| Scenario 6: Failure to follow/deliberate frustration of internal COP appeals process within HEI | The funding bodies apply a remedy, requiring the HEI in question to engage in an ongoing dialogue about participation in the next research assessment exercise. The HEI in question is required to deliver an action plan developed with the relevant funding body. The action plan places increased scrutiny upon the institution in question for the next research assessment exercise and is developed as the rules of the next exercise are created. Example actions for this scenario (may vary dependent upon the rules of the next exercise).  
- Additional evidence required for instances where the HEI is required to consult with staff.  
- HEI must provide additional support for staff to ensure that their views are represented in the development of research assessment processes.  
- Additional evidence required to support research assessment decision making. | The funding bodies have concerns around the approach of the institution to the rules of the exercise and the culture that has led to inaccuracies provided to the funding bodies. To mitigate the risk of this happening again in the future, the funding bodies apply a remedy that aims to increase scrutiny upon the approach of the HEI to the next research assessment exercise. To support the sector in the next research assessment exercise, information is published regarding the complaint and the remedy. |
|  | assessment decision making. - The Head of the HEI to provide a statement to the funding bodies concerning their approach to mitigating the risk of this happening again in the next exercise. The Head of the HEI is required to oversee and sign off on HEIs REF procedures. | HEI in question, including details of the associated remedy. |
Complaint and investigation outcomes

52. Following the completion of the REF 2021 COP C&I process, the funding bodies will publish the total number of complaints received, the number of complaints upheld and the number and type of remedies applied. The funding bodies will also publish the number of complaints upheld and the remedies applied for each relevant HEI; however the details of the complaints (e.g. complaint type, UOA) will not routinely be published for each institution (with the exception of the information published in instances of a systemic breach, as indicated in Table 1). The funding bodies will publish a sector level report on common complaints and issues arising from the C&I process. Published information will protect the identity of complainants. Publication will ensure transparency in the delivery of public funding and support the UK funding bodies’ commitment to equality, diversity and inclusion.

53. Wherever possible, each case will be published with broadly the same level of detail to ensure consistency. The funding bodies reserve the right to publish cases in a manner that protects the identity of individuals.

Confidentiality and data protection

54. The nature of the C&I process necessitates consideration of confidentiality and compliance with the current UK data protection legislation. All parties involved in the C&I process must comply with data protection legislation in their handling of personal data in relation to complaints or investigations.

55. The funding bodies will ensure that complainants are well-informed about how the information that they provide will be treated. This includes the potential sharing of information (including information that would potentially identify individuals) between funding bodies and with the HEI(s) to which the complaint applies. Where complaints include data concerning third parties, the funding bodies will assess the need to share information for a complaint to be investigated. The funding bodies will not share special category third party data.

56. Wherever possible the funding bodies will not share information that would identify individuals unless it is necessary to consideration of the complaint or part of an investigation. Complainants will be informed from the outset that their information may be used in such a way.

57. The funding bodies will aim to allow for exceptional circumstances in which they may grant requests to maintain privacy, if that is possible. Such instances will be managed on a case-by-case basis. In some instances, the ability of the funding bodies to investigate a complaint may be prevented by the desire of the complainant to maintain confidentiality.
58. In the investigation of complaints, the funding bodies may request information from an HEI. Foreseeably, HEIs may decide that they are unable to provide the necessary information required to fully inform an investigation due to issues of confidentiality and data protection. Such instances will be considered on a case-by-case basis. Legal advice may be sought in such instances. HEIs will be informed that it is for them to determine whether they are permitted to disclose personal data and if such information cannot be lawfully disclosed to the funding bodies a conclusion will be reached without it.

**Timelines**

59. The COP C&I process will open on the 01/04/2021, the day following the REF 2021 submission deadline.

60. There are two complaints deadlines.

   a. **Deadline 1** (30 Nov 2021) – A deadline for complaints that do not arise out of the publication of the final REF 2021 results.
   b. **Deadline 2** (30 June 2022) – A deadline for complaints directly arising out of the publication of the final REF 2021 results.

61. This approach has been taken to ensure that individuals that have not previously had opportunity, will be able to raise a complaint once the final REF 2021 results are made available (e.g. former staff).

62. For complaints received after the publication of REF 2021 results it will not be possible to correct REF submissions. Therefore, the UK funding bodies will make equivalent alterations to the formulas used to calculate associated funding. Any such alterations will be published as part of the funding bodies’ routine publication of funding information.

Table 2 – Timetable

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>31 March 2021</td>
<td>REF 2021 submission deadline</td>
</tr>
<tr>
<td>01 April 2021</td>
<td>C&amp;I process opens</td>
</tr>
<tr>
<td>30 November 2021</td>
<td>Deadline 1 – Process closes to all complaints, other than those arising out of the publication of REF 2021 results</td>
</tr>
<tr>
<td>February 2022</td>
<td>Remedies applied where they have been issued</td>
</tr>
<tr>
<td>April 2022</td>
<td>Publication of REF 2021 results</td>
</tr>
<tr>
<td>June 2022</td>
<td>Deadline 2 – Process closes to all complaints</td>
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<tr>
<td>August 2022</td>
<td>Remaining remedies applied</td>
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