1. **Scope**

This procedure covers research which can be reasonably regarded as the responsibility of Torrens University Australia. It applies to all research higher degree students, staff and other members of the University community engaged in research activity.

2. **Principles**

This procedure outlines the University’s process for addressing potential breaches of the [Australian Code for the Responsible Conduct of Research (2018)](https://www.auric.edu.au/code) (Code) and the University’s [Responsible Research Conduct Policy](https://www.auric.edu.au/rrc). It also describes the University’s process for managing research complaints according to the principles of procedural fairness.

3. **Definition of a breach of the Code**

The University defines a breach as a failure to meet the principles and responsibilities of the [Code](https://www.auric.edu.au/code) and the [Responsible Research Conduct Policy](https://www.auric.edu.au/rrc), and may refer to a single breach or multiple breaches. Breaches fall on a spectrum and once a breach has been found, its seriousness would be determined. Breaches of the [Code](https://www.auric.edu.au/code) may include matters including, but not limited to:

- failure to meet required research standards
- issues of fabrication, falsification and misrepresentation
- plagiarism
- issues related to research data management
- issues related to research supervision
- authorship
- conflict of interest or
- peer review processes.

4. **Definition of Research Misconduct**

The University defines research misconduct as a serious breach of the [Code](https://www.auric.edu.au/code), or the [Responsible Research Conduct Policy](https://www.auric.edu.au/rrc), other relevant University policies and procedures, and/or relevant legislation which is also intentional or reckless or negligent. Research misconduct does not include honest differences in judgement or unintentional, honest and minor errors.

5. **Responsibilities**

The University is responsible for creating and maintaining an environment where good research practice is valued and nurtured and where departures from best practice are managed appropriately.

Researchers must ensure that they:
• apply high ethical and research integrity standards when conducting research
• bring forward instances of questionable research
• cooperate in assessment or investigation of potential or found breaches of the Code
• if necessary, contribute evidence relevant to potential or found breaches of the Code.

<table>
<thead>
<tr>
<th>Who</th>
<th>Responsibilities/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible Executive Officer (REO)</td>
<td>Vice- Chancellor&lt;br&gt;The senior officer who is ultimately responsible for receiving reports of the outcomes of processes of assessment or investigation of potential or found breaches of the Code and deciding on the course of action to be taken.</td>
</tr>
<tr>
<td>Designated Officer (DO)</td>
<td>Pro-Vice Chancellor, Research&lt;br&gt;The senior professional or academic who receives complaints about the conduct of research or potential breaches of the Code and to oversee their management and investigation where required.</td>
</tr>
<tr>
<td>Assessment Officer (AO)</td>
<td>Pro-Vice Chancellor, Research&lt;br&gt;A person appointed to conduct a preliminary assessment of a complaint about research</td>
</tr>
<tr>
<td>Research Integrity Advisor(s) (RIA)</td>
<td>Research Centre Director(s)&lt;br&gt;A person or persons with knowledge of the Code and institutional processes nominated to promote the responsible conduct of research and provide advice to those with concerns or complaints about potential breaches of the Code</td>
</tr>
<tr>
<td>Research Integrity Officer (RIO)</td>
<td>Manager, Research Office&lt;br&gt;The staff responsible for managing research integrity</td>
</tr>
<tr>
<td>Review Officer (RO)</td>
<td>Pro-Vice Chancellor, Academic&lt;br&gt;The senior officer responsible for receiving requests for a procedural review of an investigation of a breach of the Code</td>
</tr>
<tr>
<td>Respondent</td>
<td>The person or persons subject to a complaint or allegation about a potential breach of the Code.</td>
</tr>
<tr>
<td>Complainant</td>
<td>The person or persons who has made a complaint about the conduct of research.</td>
</tr>
</tbody>
</table>

6. Reporting concerns about research conduct

Step 1
A person who has concerns about inappropriate research conduct may seek advice from a Research Integrity Advisor (RIA), a departmental head or the Research Office for assistance.

NOTE: RIAs do not undertake assessments or investigations of complaints and they are not involved in any subsequent inquiry.

Step 2
An individual considering making a complaint under the Code can:
• refer the matter directly to the person against whom the complaint is made
• refer the matter directly to a person in a supervisory capacity for the matter to be resolved through institutional processes
• make a complaint following the process outlined in this procedure
• decide not proceed with a complaint.

Step 3
• Recipients of research conduct concerns and complaints should notify the Research Office (via researchoffice@laureate.edu.au)
• Where a complainant chooses not to proceed with a complaint, the
7. Receipt and consideration of complaints

Step 1
A person who wishes to lodge a complaint about a potential breach of the Code can do so in writing to the Designated Officer (DO) via researchoffice@laureate.edu.au or by other means of written or verbal communication.

RIAs or other appropriate staff may assist the complainant in submitting a complaint.

Anonymous complaints will be considered on the basis of information provided.

Complainants are not required to identify parts of the Code or relevant University policies that may have been breached.

The complainant is encouraged to provide information they hold pertinent to the complaint, including, but not limited to:
- places and dates on which each breach is alleged to have occurred
- Identity of the person alleged to have engaged in the breach
- any other supporting evidence.

Step 2
Upon receiving a complaint, the designated officer (DO) shall determine whether the complaint relates to a potential breach of the Code, and if it does, the matter proceeds to preliminary assessment.

If the complaint does not represent a potential breach of the Code, it may be dismissed or referred to other institutional processes.

Step 3
Throughout investigation and management of a complaint, the welfare of the complainant is a key concern and the University will ensure the complainant is protected from adverse consequences for having made the complaint.

The DO will ensure appropriate communication with the complainant.

8. Preliminary Assessment of Potential Breach

The purpose of the preliminary assessment is to gather and evaluate facts and information, and assess whether the complaint, if proven, would constitute a breach of the Code.

An admission of breach by the respondent does not end the preliminary assessment process. In such cases, the University may still be required to proceed with an investigation.

Where a respondent cease employment or affiliation with the University during or following the complaint process, the complaint will still be addressed as necessary.

Step 1
The DO assigns the complaint to a suitable Assessment Officer (AO).
### Step 2
The AO is responsible for the conduct of the preliminary assessment and will ensure records of preliminary assessment are prepared and maintained and that appropriate processes are followed in a timely manner.

The AO will consider whether to consult with and involve other parties, both internal and external to the University. It may be necessary to obtain information and evidence, and to bring in expertise from other sources.

It may be necessary to discuss the matter with the respondent. In this case, the AO will notify the respondent with sufficient detail for the respondent to understand the nature of the complaint. Respondents will be offered an opportunity to respond in writing within ten working days. An invitation to meet may be extended, with the option for the respondent to bring a support person.

Meetings with the respondent will be recorded and/or documented and the respondent provided a copy.

### Step 3
On completion of the preliminary assessment, the AO will provide written advice to the DO in a timely manner. This will include a comprehensive overview of the process undertaken, facts and information, details of how the potential breach relates to the Code or institutional processes, and recommendations for further action.

### Step 4
The DO will determine whether the matter should be:
- dismissed
- resolved locally with or without corrective actions
- referred for investigation
- referred to other institutional processes

### Step 5
Where referral of an allegation of a breach of the Code for investigation is not supported, the following actions will be considered:
- efforts, if required, to restore the reputation of any affected parties
- efforts to address with the complainant vexatious complaints or complaints considered to have been made in bad faith through appropriate institutional processes
- efforts to address any systemic issues identified.

### Step 6
- The institution will provide outcomes, if appropriate, to the respondent and complainant at the conclusion of a preliminary assessment in a timely manner.

### 9. Investigation of a potential breach
The purpose of the investigation is to make findings of fact to allow the REO to assess whether a breach of the Code has occurred, the extent of the breach and the recommended actions. Principles of procedural fairness will be applied throughout the investigation, and the investigation shall be thorough, robust and free from bias.
### Step 1
Once it is determined that an investigation is required, the DO will:
- prepare statement of allegations
- develop terms of reference for the investigation
- nominate investigation panel members and a Panel Chair
- seek legal advice where appropriate.

Members of the panel may be internal or external to the University and an appropriate number of members will be selected. The DO will select an appropriately qualified Chair and panel members with the following principles in mind:
- experience and expertise in the relevant discipline
- prior or relevant experience with similar investigation panels
- knowledge and understanding of the responsible conduct of research
- conflicts of interest of bias
- gender and diversity issues to ensure a balanced panel.

Panel members will be appointed in writing and external members appropriately indemnified. The panel will be provided secretariat support by the Research Office. The Research Office will maintain investigation records.

Panel members must disclose and manage any real or perceived conflicts of interest, and will be replaced if the conflict of interest cannot be managed.

The panel will consider on a case-by-case basis and in exceptional circumstances only whether the respondent can engage legal representation or access representation through other appropriately qualified persons.

Where a panel permits the complainant and/or respondent to have legal representation, the panel also has the right to engage a similar level of legal representation.

### Step 2
Once panel members have been selected, the details of the panel will be provided to the respondent, and the respondent will be given the opportunity to raise valid concerns.

The complainant and respondent can choose to engage a support person, however the support person is to provide personal support only and is not to advocate, represent or speak on behalf of the complainant and respondent.

### Step 3
As part of the investigation, the respondent will be provided an opportunity to respond to the allegations and evidence and to provide additional evidence that the panel may consider.

In the event that a respondent chooses not to reply or appear before the panel, the investigation will continue in their absence.

### Step 4
The complainant may also be given the opportunity to see relevant evidence used in the investigation, where appropriate (eg: if they are directly affected by the investigation).

### Step 5
All those required to attend the Panel will be given adequate notification.
| Step 6 | All those asked to give evidence will be provided with relevant information, which may or may not be de-identified. This information may include:
- schedule of events
- relevant terms of reference for the investigation
- advice as to how the panel intends to conduct interview, if the interviews will be recorded and whether opportunities to comment on matters raised in interview will be available
- the possibility of the use of a support person
- disclosing interests
- confidentiality requirements
- procedures that the Panel intends to follow. |
| Step 7 | The panel may request that the DO re-scope the investigation if the terms are found to be too limiting. All relevant parties will be notified in such cases. |
| Step 8 | The panel shall determine, on the basis of evidence and balance of probabilities, whether the respondent has breached the Code and the seriousness of any breach. The panel shall provide a draft written report of findings. The draft report, or a summary of all relevant information on which the DO’s decision will be based, shall be provided to the respondent with a reasonable timeframe to comment. The draft report may also be provided to the complainant if they will be affected by the outcome. |
| Step 9 | Following consideration of any further information, the report is finalised. |
| Step 10 | The DO will consider findings of fact, evidence presented and any recommendations made by the panel. The DO will consider the extent of the breach, appropriate corrective actions and if referral to disciplinary procedures is required. The DO will provide the final report to the REO with recommendations. |
| Step 11 | The REO shall decide either:
- a finding of no breach of the Code
- a finding of a breach of the Code
If the REO decides that there has been no breach, the following will be considered:
- efforts to restore reputations of those alleged to have engaged in improper conduct
- Efforts to address with the complainant vexatious complaints or complaints considered to have been made in bad faith through appropriate institutional processes
- Communication and provision of support for respondent and complainant
If the REO accepts that a breach of the Code has been found, the REO decides the institution’s response, taking into account the extent of the breach and whether other institutions should be advised.
All efforts will be taken to correct the public record of the research, including publications. |
| Step 12 | Any decisions or actions will be communicated to the respondent and complainant. The REO shall consider whether a public statement is appropriate to communicate the outcome of an investigation. |
10. **Mechanisms for a review of appeal**

Only requests for a review of a Code investigation on the grounds of procedural fairness will be considered. The review will serve to confirm or not confirm the outcome of the investigation.

For non-Higher Degree Research (HDR) related cases:

<table>
<thead>
<tr>
<th>Step</th>
<th>Details</th>
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<tbody>
<tr>
<td>Step 1</td>
<td>Individuals who wish to request a review must submit the request in writing to the Research Office at <a href="mailto:researchoffice@laureate.edu.au">researchoffice@laureate.edu.au</a> within 20 working days of the final decision of the investigation outcome.</td>
</tr>
<tr>
<td>Step 2</td>
<td>A Review Officer (RO) will be allocated by the Research Office. The RO will consider whether the request is substantive and whether the investigation adequately addressed issues, was procedurally fair, and whether all evidence was appropriately considered. Every effort will be made to finalise the review within 30 working days. In instances where it is necessary to extend the timeframe, individuals will be notified.</td>
</tr>
<tr>
<td>Step 3</td>
<td>The RO may determine that the original panel reconsider their findings due to the presentation of new evidence, or the need to consider existing evidence in further detail. The RO may determine that issues raised in the review require consideration by a more senior person that the DO, who may be internal or external to the University.</td>
</tr>
<tr>
<td>Step 4</td>
<td>Individuals may also request an external review from the Australian Research Integrity Committee (ARIC). Details for ARIC will be included in the communication of the investigation outcome.</td>
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For HDR-related cases:

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<tbody>
<tr>
<td>Step 1</td>
<td>HDR Students who wish to request a review or appeal must follow the processes as outlined in the Student Complaints Policy.</td>
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</table>

11. **Record Keeping**

The University will store records relating to breaches confidentially retain these for seven years.