Policy Redesign Project

All policies and procedures are being reviewed as part of this project. This document is pending review, but remains in effect until the review is carried out.

Research Misconduct Policy

Establishment: Academic Senate, 29 June 2016

Last Amended:

Nature of Amendment:

Date Last Reviewed:

Responsible Officer: Deputy Vice-Chancellor (Research)

1. Scope and Objectives

1.1 This policy provides the University's framework for reporting and investigating an allegation that research has not been conducted responsibly.

1.2 This policy applies to all researchers conducting research under the auspices of Flinders University, including staff, students and affiliates.

2. Definitions

Breach means a less serious deviation from the Code; a breach may be characterised as lacking both intent and significant consequences. Continuation or repetition may constitute research misconduct.

The Code means the Australian Code for the Responsible Conduct of Research.

Plagiarism is defined in the University Policy on Academic Integrity.

Research as defined in accordance with Higher Education Research Data Collection (HERDC) Specifications means the creation of new knowledge and/or the use of existing knowledge in a new and creative way so as to generate new concepts, methodologies and understandings. This could include synthesis and analysis of previous research to the extent that it is new and creative. This definition of research is consistent with a broad notion of research and development, one that recognises research as comprising creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of humanity, culture and society, and the use of this stock of knowledge to devise applications.

Researcher means any individual who is engaged in research, as defined above, under the auspices of Flinders University, including staff, students and affiliates.
Research misconduct includes (but is not limited to) any of the following:

- fabrication, falsification, plagiarism, or deception in proposing, carrying out or reporting the results of research;
- failure to declare or manage a serious conflict of interest;
- conducting research requiring ethics or biosafety approval without such approval, and avoidable failure to follow research proposals as approved by a research ethics or biosafety committee, particularly where this failure may result in unreasonable risk or harm to humans, animals or the environment;
- misleading ascription of authorship;
- falsification or misrepresentation to obtain research funding;
- deviations from the Code through gross or persistent negligence; or
- the willful concealment or facilitation of research misconduct by others.

An allegation relates to research misconduct if it involves both intent and deliberation, recklessness or gross and persistent negligence; and serious consequences, such as false information on the public record, or adverse effects on research participants, animals or the environment.

Research misconduct does not include honest differences in judgement in the management of a research project, and honest errors that are minor or unintentional.

Supervisor means either a manager of a staff member or the supervisor of a research student.

3. Policy Statement

3.1 This Policy is based on the Code and is to be read in conjunction with it.

3.2 Allegations related to research may include:

- failure to take responsibility for achieving the standards of research conduct aspired to in Part A of the Code;
- minor breaches of the Code, for less serious deviations;
- and research misconduct, for more serious or deliberate deviations that warrant a formal written allegation and investigation.

3.3 Part B of the Code sets out a framework of institutional processes for responding to allegations that research has not been conducted responsibly. Any procedures pursuant to this policy for responding to allegations related to research will be consistent with this framework.

3.4 Unsatisfactory performance/misconduct proceedings and/or disciplinary action may proceed in the case of:

- a finding of research misconduct against a researcher;
- failure by University officers to properly exercise responsibilities for handling and resolving allegations of breaches of the Code or research misconduct in accordance with this policy; or
- an individual making an allegation of research misconduct that is found to have been mischievous or malicious.

4. Responsibilities

Responsibilities are outlined in Part B, Section 11 of the Code. The University has defined the following roles and responsibilities with regard to reporting, investigating and resolving allegations of breaches of the
Code and research misconduct:

4.1 Any individual concerned about a possible deviation from the Code by a researcher must act in a timely manner in accordance with this policy.

4.2 The Vice-Chancellor has overall responsibility for ensuring that procedures are in place for investigating and resolving allegations.

4.3 The Vice-Chancellor’s Delegated Officer, the Deputy Vice-Chancellor (Research):

- manages formal written allegations in accordance with this policy, and provides advice to the Vice-Chancellor;
- appoints Designated Persons to conduct preliminary investigations of allegations;
- appoints Research Integrity Advisors; and
- ensures that Academic Senate receives an annual report with de-identified data summarising findings of research misconduct and the University’s response.

4.4 The Designated Person undertakes a preliminary assessment or investigation of an allegation to determine whether a prima facie case may exist, provides advice to the Delegated Officer, and keeps appropriate records. The Designated Person should be a senior member of the University's management structure who is experienced in research and research management.

4.5 Research Integrity Advisors advise those making, or considering making, allegations on any matter concerning research integrity, including whether a breach of the Code or research misconduct may have occurred and how such a matter should be addressed in accordance with University policy. The Advisor’s role does not extend to assessment or investigation of the allegation. An Advisor must maintain strict confidentiality with respect to matters brought to their attention and must not make contact with the person who is the subject of an allegation. An Advisor should not provide advice if s/he has a conflict of interest.

4.6 Supervisors and line managers are responsible for:

- maintaining a high standard of research conduct in their respective areas;
- counselling and advising researchers in their respective areas about standards of research conduct, as required;
- reporting suspected research misconduct; and
- taking appropriate steps to remedy breaches of the Code and to prevent recurrence.

4.7 The Chair of a human research ethics, animal ethics or biosafety committee is responsible for providing advice on potential breaches of the Code or research misconduct involving research ethics or biosafety.

4.8 Academic Senate will monitor the University’s response to findings of research misconduct.

5. Procedures

5.1 Initial Handling of an Allegation

5.1.1 An individual concerned about a possible deviation from the Code may seek advice from:

- a supervisor / line manager / head of department;
- a Research Integrity Advisor; and/or
- the Chair of the relevant committee, if the matter involves a possible breach of research ethics or biosafety.

Available options include:
- referring the matter directly to the person against whom the allegation is being made;
- not proceeding, or withdrawing the allegation, if discussion resolves the concerns;
- referring the allegation to the person’s supervisor / manager (or that person’s line manager, should a conflict of interest be apparent) for resolution at the local level; or
- making an allegation of research misconduct, in writing, to the Delegated Officer.

5.1.2 Breaches of the Code that clearly do not constitute research misconduct will normally be handled at the Discipline, School / Division or Faculty / Portfolio level through performance management and provision of counselling and advice by supervisors or line managers, and by taking appropriate steps to remedy the consequences of the breach and to prevent recurrence. Provided the person acknowledges the breach, the consequences of the breach are remedied and appropriate steps are taken to prevent recurrence, the matter need not be escalated to a formal written allegation.

5.1.3 Where an allegation or complaint cannot be resolved at the Discipline, School / Division or Faculty / Portfolio level, or where it concerns or may concern research misconduct, a written allegation must be provided to the Delegated Officer. The allegation should be accompanied by a report (including associated documentation) of any Discipline, School / Division or Faculty / Portfolio level processes and actions undertaken or proposed.

5.1.4 For each new written allegation, the Delegated Officer will appoint a Designated Person to conduct a discreet, preliminary assessment or investigation to determine whether a prima facie case may exist, and advise her/him whether the allegation should be:

- dismissed;
- referred to the relevant supervisor or line manager with instructions for handling the matter;
- investigated further as possible misconduct unrelated to research misconduct (to be managed under other relevant University policies and procedures); or
- investigated further as possible research misconduct.

5.1.5 Following receipt of the case file (including the written allegation and any report as per 5.1.3, and the Designated Person’s preliminary investigation), the Delegated Officer will consider the documentation. The Delegated Officer may seek further information where this is necessary to inform his/her determination.

5.1.6 Where the Delegated Officer determines that the case should be investigated further as possible research misconduct by a staff member, the matter will be handled in accordance with clause 5.2.

5.1.7 Where the Delegated Officer determines that the case should be investigated further as possible research misconduct by a student, the matter will be handled in accordance with clause 5.3.

5.1.8 Where the Delegated Officer refers the matter to the supervisor / line manager for response, these officers will take such action as deemed appropriate in accordance with their responsibilities.

5.1.9 Allegations made by individuals or organisations external to the University will be handled in the same manner as internal allegations.

5.1.10 If the University receives an allegation of research misconduct directed against a former staff member or student but relating to research conducted at Flinders University, the University will use its best endeavours to respond to the allegation in accordance with this policy to the extent reasonable in the circumstances.

5.1.11 Allegations must be kept confidential to only those persons directly involved in the reporting and investigation of the allegations, unless wider disclosure is deemed appropriate by the Vice-Chancellor or Delegated Officer.

5.2 Allegations of Research Misconduct Involving Staff

5.2.1 Where the Delegated Officer determines that there is a prima facie case of research misconduct by a
staff member, s/he will refer the case file and her/his determination to the relevant Executive Dean / Portfolio Head or nominee (if unavailable or a conflict exists), for further management in accordance with discipline provisions of the prevailing Enterprise Agreement.

5.2.2 In the event of an admission of research misconduct by the staff member, the matter will be handled in accordance with the discipline provisions of the prevailing Enterprise Agreement.

5.2.3 If the staff member contests the allegation, the matter will be fully investigated and handled in accordance with the discipline provisions of the prevailing Enterprise Agreement. The investigation will involve an investigating officer or preferably a panel to be appointed, to include specialised knowledge about the area of research and expertise in the responsible conduct of research, in consultation with the Delegated Officer.

5.2.4 If a finding of research misconduct is made, subsequent disciplinary action will be in accordance with the discipline provisions of the prevailing Enterprise Agreement.

5.2.5 In the event of any inconsistency between the provisions of this procedure and the prevailing Enterprise Agreement, the discipline provisions of the prevailing Enterprise Agreement will apply.

5.3 Allegations of Research Misconduct Involving Students

5.3.1 Where the Delegated Officer determines that there is a prima facie case of research misconduct by a student, s/he will refer the case file and her/his determination to the Deputy Vice-Chancellor (Students) or nominee (if unavailable or a conflict exists), for further management, in accordance with Statute 6.4: Student Conduct.

5.3.2 Where a Board of Inquiry is established, in accordance with Statute 6.4: Student Conduct, and via liaison as required with the Deputy Vice-Chancellor (Students) or nominee and the Delegated Officer, the Board of Inquiry must include within its membership specialised knowledge about the area of research and expertise in the responsible conduct of research.

5.3.3 The findings of a formal inquiry will be provided in writing by the Chair of the Board of Inquiry to the Deputy Vice-Chancellor (Students) or nominee and the Delegated Officer.

5.3.4 If a finding of research misconduct is made, subsequent disciplinary action will be in accordance with Statute 6.4: Student Conduct.

5.4 Related and Subsequent Actions

5.4.1 The Vice-Chancellor or Delegated Officer must ensure that all relevant parties are informed of a finding of research misconduct and the actions taken by the University. Relevant parties may include directly affected staff and students, research collaborators (including those at other institutions), funding bodies, journal editors, and professional registration bodies.

5.4.2 The Vice-Chancellor or Delegated Officer must ensure that the Australian Research Council and the National Health and Medical Research Council are informed of allegations, investigations and findings of research misconduct, at appropriate stages, according to the current versions of their funding rules and relevant policies.

5.4.3 If research misconduct has affected the dissemination of research findings, the Vice-Chancellor or Delegated Officer will ensure that the public record, including publications, is corrected.

5.4.4 Where an allegation of research misconduct is determined to be unfounded, the Vice-Chancellor or Delegated Officer will ensure that all appropriate steps are taken to reinstate the good reputation of the person who was the subject of the allegation and her/his associates.

5.4.5 Records relating to research misconduct and disciplinary actions are highly sensitive and must be
kept confidential and in accordance with the University’s *Records Management Policy* and relevant *General Disposal Schedules* (such as GDS15)

Academic Discipline: Unsatisfactory Performance and Misconduct/Serious Misconduct Policy and Procedures

Academic Integrity Policy

Academic Status Policy

ARC funding rules
ARC Research Integrity and Research Misconduct Policy
Australian Code for the Responsible Conduct of Research Discipline - Professional Staff Policy and Procedures

Flinders University Enterprise Agreement
Grievances Policy

Handling a Matter under Statute 6.4: Student Conduct

NHMRC Funding Rules
NHMRC Policy on Misconduct related to NHMRC Funding
Records Management Policy

Responsible Conduct of Research Policy

South Australian Government General Disposal Schedule No. 15
Statute 6.4: Student Conduct
Suspension in the Case of Alleged Misconduct or Serious Misconduct Policy
Whistleblower Statement and Procedures