

Research Code of Conduct: Management of Potential Breaches Procedure



1 Purpose

To establish the responsibilities and process for managing, investigating and resolving potential breaches of the Research Code of Conduct Policy.

2 Scope

This procedure applies to all University Members. This procedure is of particular importance to Researchers.

3 Procedure Overview

This procedure establishes the responsibilities and processes for managing departures from the principles of and responsibilities arising under the Research Code of Conduct Policy.

The procedure adopts the guidance material outlined in the supplementary guide to the Australian Code for the Responsible Conduct of Research: the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research.

The USQ Enterprise Agreement or relevant employment contract has defined legally binding conditions pertaining to the requirements of investigations of misconduct/ serious misconduct relating to University Employees. A matter determined to be sufficiently serious and thus potential Research Misconduct will follow the agreed process of investigation as outlined in the Disciplinary Action for Misconduct or Serious Misconduct Procedure, the USQ Enterprise Agreement or the relevant employment contract.

It is important to note that matters defined as Research Misconduct and meeting the criteria of Corrupt Conduct would need to be handled according to the *Crime and Corruption Act 2001* which may override legally binding conditions in the USQ Enterprise Agreement.

4 Procedures

4.1 Definition of a breach

As per the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research, a breach is defined as a failure to meet the principle/s and responsibilities of the Australian Code for the Responsible Conduct of Research. Breaches occur on a spectrum from minor (less serious) to major (more serious or repeated breaches).

Major breaches which are intentional, reckless or negligent are regarded as Research Misconduct.

Examples of breaches are outlined in the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research.

4.2 Responsibilities

All Researchers must ensure that their research conduct and practice reflects the responsibilities as detailed in the University's Research Code of Conduct Policy and the Australian Code for the Responsible Conduct of Research. All Researchers who suspect that another Researcher has breached the University's Research Code of Conduct Policy, must notify the University in a timely manner.

Responsible research conduct is encouraged and fostered at the University. Responsible officers will manage concerns or Research Conduct Complaints and investigate when made aware of a potential deviation from the University's Research Code (and the Australian Code for the Responsible Conduct of Research). The University is committed to proportional, fair, confidential, transparent and timely management of alleged breaches.

In accordance with the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research, responsible officers have been identified to manage and investigate potential breaches.

Table 1: Roles and Responsibilities

Role	Definition (as per the Australian Code for the Responsible Conduct of Research)	USQ Responsible officer/s
Responsible Executive Officer (REO)	A senior officer in an institution who has final responsibility for receiving reports of the outcomes of processes of assessment or Research Investigation of potential or found breaches of the Australian Code for the Responsible Conduct of Research and deciding on the course of action to be taken.	Deputy Vice-Chancellor (Research and Innovation) [or nominee if a conflict of interest exists]
Designated Officer (DO)	A senior professional or academic institutional officer or officers appointed to receive Complaints about the conduct of research or potential	Manager, Research Integrity and Ethics

	breaches of the Australian Code for the Responsible Conduct of Research and to oversee their management and Research Investigation where required.	
Assessment Officer (AO)	A person or persons appointed by an institution to conduct a preliminary assessment of a Complaint about research.	Manager, Research Integrity and Ethics [or the Director (Integrity and Professional Conduct) if the Complaint relates to the Manager, Research Integrity and Ethics]
Research Integrity Office (RIO)	Area responsible for managing responses to potential and found breaches of the Australian Code for the Responsible Conduct of Research at an institution. Examples of functions of the RIO include the provision of education and advice on responsible conduct of research and the development and management of processes related to responsible conduct of research.	Research Integrity and Ethics, Office of Research
Research Integrity Advisor (RIA)	A person or persons with knowledge of the Australian Code for the Responsible Conduct of Research and University processes nominated by an institution to promote the responsible conduct of research and provide advice to those with concerns or Complaints about potential breaches of the Australian Code for the Responsible Conduct of Research.	Nominated and trained staff across University - see RIA website for current Advisor details
Review Officer (RO)	A senior officer not fulfilling any of the roles described	Director (Integrity and Professional Conduct)

	above with responsibility for receiving requests for a procedural review of a Research Investigation of a breach of the Australian Code for the Responsible Conduct of Research.	
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	For the University, the Review Officer role will only relate to Research Investigations that have been conducted in accordance with this procedure.	
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4.3 Consideration and management of Complaints

A Research Conduct Complaint occurs when a concern is raised or identified that one or more Researchers have engaged in conduct in connection with research that is not in accordance with the principles and responsibilities outlined in the University's Research Code of Conduct Policy.

Communication is key in the Complaint management process. Prior to making a Research Conduct Complaint, a Complainant should consider whether the matter may be able to be resolved informally or if informal resolution strategies are not appropriate due to the nature of the Complaint.

In particular, Complainants should consider consulting with a Research Integrity Advisor for informed advice as to whether the matter is related to a breach of the University's Research Code of Conduct Policy. The Research Integrity Advisor role does not extend to Research Investigation or assessment of the Research Conduct Complaint, it is simply an advisory role. Outcomes of the discussion between the Research Integrity Advisor and the Complainant may include:

- not proceeding if the Complaint is clearly not related to a breach of the Research Code of Conduct Policy;
- proceeding under other institutional processes; or
- making a Complaint about a potential breach of the Code in writing to the Designated Officer.

If the Complainant attempts to resolve the matter informally without success, they should proceed with the Research Conduct Complaint to the Assessment Officer as per the process

outlined in this section.

Misconduct/serious misconduct unrelated to the conduct of research falls outside the scope of this procedure and will be referred to the relevant processes for resolution. If, in following the initial steps outlined in this section, an Employee becomes aware of other issues which may be classified as a type of Complaint other than a Research Conduct Complaint, that Employee must report or refer such issues in accordance with the applicable policy or procedure.

Complaints may be dismissed at any stage outlined below for a variety of reasons (e.g. if it is determined to be a Vexatious Complaint, or without substance).

If at any stage in the management of a Research Conduct Complaint, there is a reasonable suspicion that the conduct giving rise to the Research Conduct Complaint may constitute an offence, or amount to conduct warranting dismissal of a University Employee, advice should be sought promptly from the Director, Integrity and Professional Conduct.

4.3.1 Initial receipt of Complaint

Any person may make a Research Conduct Complaint. Complaints may be made in confidence to the Designated Officer as defined in section 4.2. If a Research Conduct Complaint is made to another officer of the University (e.g. Head of School, supervisor, Deputy Vice-Chancellor (Academic Affairs), Centre Director), details of the Complaint should be promptly forwarded to the Assessment Officer or directly to the Designated Officer. If the Research Conduct Complaint relates to the Designated Officer, the matter should be escalated to the Responsible Executive Officer for appropriate review, prior to referral and nomination of a more appropriate Designated Officer.

Complainants should attempt to provide all information pertinent to the matter in the initial Research Conduct Complaint. At a minimum, a Research Conduct Complaint should contain:

- the name and contact details of the Complainant;
- the name of the individual(s) who they allege has/have committed a breach;
- details relating to individual(s) that the Complainant has discussed the matter with;
- information indicating how the Complainant or others are affected by the matter (if relevant);
- the nature and details of the potential breach;
- when the potential breach occurred;
- if applicable, indicate any immediate concerns related to human, animal or environmental safety; and
- an acknowledgement that as the Complainant, you will keep the matter confidential

while it is being assessed.

Research Conduct Complaints may be made on an anonymous basis, however Complainants should know that the capacity to deal with anonymous Research Conduct Complaints is restricted by the Complainant's desire to remain anonymous. Research Conduct Complaints of this type do not allow for the investigation of specific concerns.

Ideally, Research Conduct Complaints should be submitted in writing to researchintegrity@usq.edu.au. The designated officer will provide a written acknowledgment confirming receipt of a Research Conduct Complaint promptly after that Complaint is submitted.

If the Complainant subsequently notifies the University that they wish to withdraw the Research Conduct Complaint, the University is still obligated to assess the nature of the Research Conduct Complaint and determine whether there is sufficient grounds to proceed to preliminary assessment.

Throughout the assessment and Research Investigation stages, the welfare of the Complainant and Respondent should be considered and support services identified if a need arises. Reprisal and threatening behaviour from any parties involved in the matter will not be tolerated by the University and will be promptly referred to the appropriate University officer.

Please note that University Members who are determined to have made a Vexatious Complaint may be subject to Disciplinary Action in accordance with the relevant University policies and the provisions of the USQ Enterprise Agreement or relevant contract of employment.

4.3.2 Reviewing the nature of the Complaint

Following acknowledgement of the receipt of a Research Conduct Complaint, the Designated Officer will determine whether the matter relates to a potential breach of the University's Research Code of Conduct Policy and whether it should proceed to a preliminary assessment.

The Designated Officer will confidentially refer any issues (in full or part) not specifically pertaining to the conduct of research to the relevant University officer.

Where a Research Conduct Complaint may require or necessitate a Public Interest Disclosure, the Director (Integrity and Professional Conduct) must be notified within five University Business Working Days of the original receipt of the Complaint (where practicable). In such cases, the matter will progress no further until the Director (Integrity and Professional Conduct) has provided a response.

Where a matter relates to the conduct of Employees, and the matter is considered to be of a significantly serious nature to be defined as potential Research Misconduct, an investigation will need to be undertaken in accordance with the USQ Enterprise Agreement or relevant employment contract and advice should be sought from the relevant University officer.

In reviewing the nature of a Research Conduct Complaint, the Designated Officer may engage with the Complainant to seek additional information or points of clarification in order to

appropriately review the matter/s.

If the Designated Officer determines that there are no grounds to suggest that there has been a potential breach of the University's Research Code of Conduct Policy, the Research Conduct Complaint will be dismissed or referred to other University processes. The Complainant will be provided advice that the Research Conduct Complaint is not proceeding, outlining the reasons for that determination and any avenue for Appeal, if applicable.

If there are grounds to suggest there has been a potential breach, the matter continues to preliminary assessment.

4.3.3 Preliminary Assessment

At the University, the Manager, Research Integrity and Ethics may be both the Designated Officer and the Assessment Officer, receiving the initial Research Conduct Complaint and then undertaking/ overseeing the preliminary assessment.

The preliminary assessment involves the gathering and evaluation of facts and supporting information and materials, to properly assess whether the Research Conduct Complaint, if proven, would constitute a breach of the University's Research Code of Conduct Policy. The assessment time will vary depending on the complexity of the matter.

If the preliminary assessment relates to the conduct of a University Employee and there is evidence to suggest it that the conduct may constitute Research Misconduct, the Assessment Officer will alert the relevant University officer and seek advice on the appropriate handling of the matter in line with USQ Enterprise Agreement or relevant employment contract.

The Assessment Officer will conduct the preliminary assessment as outlined in the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research, including liaising with the Respondent, providing them with sufficient detail to understand the nature of the Research Conduct Complaint and giving them an opportunity to respond in writing within 10 University Business days (where necessary, alternative timeframes may be negotiated).

An overarching report outlining the process undertaken, an inventory of the facts gathered and analysed, an evaluation of facts, how the potential breach relates to the principles and responsibilities of the Research Code of Conduct Policy and recommendations for further action will be prepared by the Assessment Officer.

If a preliminary assessment involves meetings with the Complainant, Respondent or other relevant parties, a record of those meetings should be prepared and a copy provided to the individual/s who attended.

4.3.4 Outcome of the preliminary assessment

The Designated Officer oversees the preliminary assessment and determines whether a Research Conduct Complaint:

1. is to be dismissed;
2. is taken to be resolved without need for a Research Investigation (which may include a finding of a minor Breach in Research);
3. is to be addressed in accordance with other University processes (which may include resolution at a local level);
4. requires further review, and will progress to a Research Investigation; or
5. potentially constitutes Research Misconduct on the part of an Employee, and requires further investigation and consideration under the USQ Enterprise Agreement or relevant employment contract.

If the Designated Officer and the Assessment Officer are the same individual, the Responsible Executive Officer will be consulted prior to the Decision of the outcome of the preliminary assessment.

If a preliminary assessment identifies any systemic issues, or a lack of clarity concerning relevant University processes or procedures, attempts should be made to address those matters (e.g. by updating University support materials, policies, and/or procedures).

The Respondent and Complainant will be provided with advice on the outcome of the preliminary assessment in a timely manner, along with details of next steps, if applicable (e.g. an overview of the Research Investigation process if the matter is proceeding to that stage).

4.3.5 Research Investigation

A Research Investigation is undertaken to make findings of fact to allow the Responsible Executive Officer to assess whether a breach of the Research Code of Conduct Policy has occurred, the extent of the breach and the recommended actions. As the USQ Enterprise Agreement or relevant employment contract sets out obligations around Investigations relating to University Employees, matters relating to potential misconduct involving Employees will follow the process as per section 4.3.5.1.

4.3.5.1 Employees (for Research Misconduct)

If a Research Investigation panel is reviewing a matter relating to a University Employee, the panel will have an initial consideration of the seriousness of the issue based on the information available to them at the time of the meeting. If a determination is made that the matter is significantly serious to be considered alleged Research Misconduct, the matter will be forwarded to the appropriate University officer and managed in accordance with the USQ Enterprise Agreement or relevant employment contract. In this instance, the Research Investigation panel will not be required to continue with the Research Investigation and their involvement in the matter will be concluded.

If a matter involving a University Employee is referred to the relevant University officer for allegations of misconduct/serious misconduct, an investigation in accordance with the USQ Enterprise Agreement or relevant employment contract, the outcome of that process will be communicated to the Complainant and Respondent by the Vice-Chancellor.

4.3.5.2 Researchers (excluding Employees for Research Misconduct)

As a first step in the Research Investigation, the Designated Officer will liaise with the Assessment Officer to:

- prepare a clear statement of allegations;
- prepare an inventory of all items of relevance gathered in the preliminary assessment that may be considered evidence;
- seek legal advice on matters of process where appropriate;
- develop terms of reference for the Research Investigation; and
- nominate a Research Investigation panel and where the panel consists of more than one person, nominate a Chair of the panel.

4.3.5.3 Research Investigation Panel

When nominating a Research Investigation panel, the Designated Officer should consider a range of factors outlined in the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research.

Typically a panel at the University will consist of one, some or all of the following:

- Research Committee member/s;
- Chair of an appropriate University Ethics Committee;
- Dean, Graduate Research School (where matters involve a HDR Student);
- a representative from the Academic Division or relevant Faculty;
- a representative from the Research and Innovation Division; and/or
- external expert/s within the field of research.

Panel members are to be appointed in writing and external members (if required) are to be appropriately indemnified. Once the Research Investigation panel is constituted, the

Respondent will be advised of the composition and will have the opportunity to raise any concerns that they have with the membership. If the Respondent raises valid concerns about the membership of the Research Investigation panel, the University will adjust the membership of the Research Investigation panel, before proceeding with the review of the matter.

The Research Investigation panel will be provided with the terms of reference of the review, the detail of the allegation/s and supporting evidence. Panel members are expected to fulfil their requirements related to their membership and follow the guidelines around the conduct of a Research Investigation as defined in the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research.

An initial meeting for the panel members will be organised at which any conflicts of interests will be disclosed and (if disclosed) addressed, and relevant information from the preliminary assessment reviewed. Support for the panel process will be provided by the Research Integrity and Ethics team, Office of Research.

For Researchers (excluding Employees as per section 4.3.5.1), a Research Investigation plan will be developed that establishes timelines and identifies avenues of inquiry (e.g. meetings with Respondent, Complainant and/or other relevant parties).

During the Research Investigation, the Panel will conduct interviews as required. All those asked to give evidence during the process are provided with the relevant (and if necessary de-identified information) which will include:

- the schedule of meetings;
- the relevant part/s of the terms of reference;
- advice on the interview to be conducted;
- the ability for a support person to attend the meetings with them;
- advice about whether the interviews will be recorded;
- whether an opportunity will be provided to comment on matters raised in the interview;
- disclosure of interests;
- confidentiality requirements; and
- the panel's procedures.

If the Complainant or Respondent requires a support person during the Research Investigation, such a person may provide personal support, within reasonable limits. Their role is not to advocate, represent or speak on the other person's behalf.

The Research Investigation panel will determine whether, having regard to the evidence and on the balance of probabilities, the Respondent has breached the University's Research Code of Conduct Policy.

Once the panel have determined the outcome of the Research Investigation, they will prepare a detailed, accurate and clear draft written report of the Research Investigation that fully addresses their terms of reference. The panel should follow the guidelines in the Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research in drafting their report.

The draft report or a summary of all relevant information on which the Decision will be based will be sent to the Respondent for them to provide a response within 10 University Business Days. A copy of the information sent to the Respondent may also be sent to the Complainant if they will be affected by the outcome.

Following consideration of any further information received from the Respondent, the report is finalised.

4.3.6 Outcomes from the Research Investigation

The Designated Officer considers the report, the extent of any breach/es, appropriate corrective actions and if referral to disciplinary procedures is required. At this time, the Designated Officer will review if there have been past findings of a Breach in Research by the Researcher (a factor which will contribute to the final assessment of the seriousness of a breach).

The Designated Officer will provide the report and recommendations to the Responsible Executive Officer. Where the matter involves a HDR student, the Designated Officer will consult with the Dean, Graduate Research School.

The Responsible Executive Officer will review the report and recommendations and make a finding as to whether a breach (or breaches) has occurred. If the Responsible Executive Officer finds that a breach has occurred, the Responsible Executive Officer must determine the University's response (see Section 4.4), taking into account the determination of the seriousness of the breach.

The Responsible Executive Officer will communicate any Decisions or actions to the Respondent and the Complainant. When communicating the outcome of the Research Investigation, the Responsible Executive Officer will advise the Respondent, and possibly the Complainant (if they are directly affected by the outcome), of their right to request an Appeal/review of the Decision based on Procedural Fairness.

Where a Breach in Research has been found to have occurred, the Notice of the outcome will be sent to the relevant University officer to be stored confidentially on the Employee or Student file. The outcome will also be stored on the research conduct register maintained by the Designated Officer. An Employee may consult the Grievance Procedures in the USQ Enterprise Agreement should they be of the view that Procedural Fairness has not been afforded.

Any systemic issues identified in the Research Investigation will be referred to the relevant

University officer.

4.3.7 Subsequent action/s to be taken by the University

Following the conclusion of a Research Investigation, subsequent actions taken by the University may include:

- Notification of the outcome to external funding agencies: This occurs in the event that the Respondent is in receipt of external funding and their funding agreement requires disclosure of breaches in research.
- Notification of finding/s to other institutions: Where the Respondent holds a joint, adjunct and/or honorary appointments.
- Reasonable efforts to correct the public record of the research: Where the breach relates to attribution of authorship, validity of research findings, and/or falsification of data (e.g. retraction of a journal article).
- Issuing a public statement: If the matter is sufficiently serious, consideration should be given to issuing a public statement.

4.4 Disciplinary Action, or the imposition of sanctions or penalties

The University will seek to identify corrective actions appropriate to the type of Breach in Research. Where a minor/ less serious breach has been found, measures may relate to additional research training requirements, restrictions imposed on certain research activities undertaken at the University and/or increased reporting/monitoring of activities for a period of time.

If a Breach in Research amounts to Research Misconduct, the following will be consulted for the specific types of Researchers:

4.4.1 Employees

Disciplinary Action for Misconduct or Serious Misconduct Procedure in accordance with the relevant provisions of the USQ Enterprise Agreement or relevant employment contract.

4.4.2 HDR students

The Student Research Misconduct Penalty Schedule will be applied.

4.4.3 Researchers (excluding employees and HDR students)

The Non-Employee Researcher Penalty Schedule will be applied.

4.5 Corrupt Conduct and/or criminal behaviour

Some matters may involve potentially Corrupt Conduct and/or potential criminal behaviour. Where there is a reasonable suspicion of misconduct/serious misconduct having occurred, the Designated Officer will notify the University's Queensland Crime and Corruption Commission Liaison Officer to undertake an initial assessment and advice on whether a matter should be referred to the Queensland Police Service or the Crime and Corruption Commission.

Where an external agency chooses to investigate, the University must seek appropriate advice as to whether internal processing of the Complaint should continue or be kept in abeyance pending conclusion of a relevant external investigation.

4.6 Safety issues

When dealing with a Research Conduct Complaint and it is deemed that harm has occurred, or there is a risk of harm occurring to human or animal participants or the environment, the Vice-Chancellor (or nominee) must be apprised of the situation. Timely reporting of all safety related incidents and hazards is required in accordance with the Incident and Hazard Reporting and Investigation Procedure.

If the matter involves Student/s, the Vice-Chancellor (or nominee) may invoke the power of emergency Exclusion in accordance with the Student Code of Conduct Policy.

In some instances, matters may require quick referral or notification to an appropriate agency by a one of the responsible officers detailed in this procedure (e.g., regulatory agencies, Workplace Health and Safety Queensland or other relevant state/territory bodies).

4.7 Review of a Research Investigation

Requests for a review of a Research Investigation conducted in accordance with this procedure should only be considered on the grounds of Procedural Fairness and/or Natural Justice. A request for a review should be received within 20 University business days from the communication of the outcome of the Decision and be directed to the Review Officer.

If the individual designated as the Review Officer has been involved in the management of the Complaint, they should nominate another senior officer of the University independent of the matter to confidentially review the Research Investigation on the grounds of Procedural Fairness.

A Researcher has the right to refer matters to an external agency at any point during the Research Investigation process, however Researchers are encouraged to only make such a referral at the completion of the University's processes.

A Student who has found to have been responsible for a Breach in Research and/or Research Misconduct may be able to Appeal the Decision and/or penalty in accordance with the Student

Appeals Procedure.

Where research is funded by the National Health and Medical Research Council (NHMRC) or the Australian Research Council (ARC), the Australian Research Integrity Committee (ARIC) can be requested to provide an external review of any investigative processes into potential breaches of the Australian Code for the Responsible Conduct of Research used by the University.

4.8 Record keeping

The Designated Officer is responsible for ensuring record keeping for all material in accordance with University policy and regulatory obligations. Records will be kept of the Research Conduct Complaint resolution process and outcome.

4.9 Confidentiality

Confidentiality will be maintained to the greatest extent possible throughout the Research Conduct Complaint management process. Notifications required by law, or mandated or required by relevant government and funding agencies will be made.

5 References

Australian Government. (2018). Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research. Canberra, ACT: Australian Government, Retrieved from:
<https://nhmrc.gov.au/about-us/publications/guide-managing-and-investigating-potential-breaches-code>

Australian Government. (2018). Australian Code for the Responsible Conduct of Research. Canberra, ACT: Australian Government, Retrieved from <https://nhmrc.gov.au/about-us/publications/australian-code-responsible-conduct-research-2018>

6 Schedules

This procedure must be read in conjunction with its subordinate schedules as provided in the table below.

7 Procedure Information

Accountable Officer	Deputy Vice-Chancellor (Research and Innovation)
Responsible Officer	Deputy Vice-Chancellor (Research and Innovation)
Policy Type	University Procedure

Policy Suite	Research Code of Conduct Policy
Subordinate Schedules	Non-Employee Researcher Research Misconduct Penalty Schedule Student Research Misconduct Penalty Schedule
Approved Date	31/1/2022
Effective Date	31/1/2022
Review Date	1/7/2022
Relevant Legislation	Animal Care and Protection Act 2001 (Qld) Gene Technology Act 2000 (Cwlth) Information Privacy Act 2009 (Qld)
Related Policies	Animal Wellbeing and Ethics Policy Award Eligibility and Graduation Policy Code of Conduct Policy Public Interest Disclosure Policy Records and Information Management Policy Student Code of Conduct Policy Student Grievance Resolution Policy Work Health and Safety Policy
Related Procedures	Authorship Procedure Disciplinary Action for Misconduct or Serious Misconduct Procedure Higher Degree by Research Student Progress Procedure Incident and Hazard Reporting and Investigation Procedure Research Data and Primary Materials Management Procedure Student Appeals Procedure Student Grievance Resolution Procedure
Related forms, publications and websites	Australian Code for the Responsible Conduct of Research Australian code for the care and use of animals for scientific purposes

[8th Edition 2013](#)

[National Statement on Ethical Conduct in Human Research \(2007\) - Updated 2018](#)

[Student Complaints and Appeals Management System](#)

Definitions

Terms defined in the Definitions Dictionary

[Academic Misconduct](#)

Academic Misconduct encompasses all behaviours, including doing as well as attempting to do, any of the acts, omissions or activities that constitute Academic Misconduct: involving the misrepresentation of academic achievement; or undermining the core values (honesty, trust, fairness and respect) of Academic Integrity; or breaching Academic Integrity; whether intentional or unintentional. Academic Misconduct includes, but is not limited to the following: Plagiarism; submitting (for Assessment or review) work prepared by another person; Collusion, such as any unauthorised collaboration in preparation or presentation of work, including knowingly allowing personal work to be copied by others; all forms of Cheating in examinations and other Assessment tasks; Contract Cheating and Solicitation; offering or accepting bribes (money or sexual or other favours), e.g. for Admission or for Marks/Grades; and fabrication or falsification of information or Student identity (TEQSA Guidance Note: Academic Integrity, Version 1.2, 28 March 2019).

[Appeal](#)

A formal, written request made by a Student or Employee to a higher authority to have a Decision overturned.

[Breach in Research](#)

A breach is defined as a failure to meet the principles and responsibilities of the Code, and may refer to a single breach or multiple breaches. Breaches of the University Research Code of Conduct and the Australian Code for the Responsible Conduct of Research occur on a spectrum, from minor (less serious) to major (more serious).

[Complainant](#)

A person who has made a Complaint against another person of the University community.

[Complaint](#)

A Complaint is an “expression of dissatisfaction made to or about the University, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required”.

[Corrupt Conduct](#)

Defined in section 15 of the Crime and Corruption Act 2001.

[Decision](#)

A determination made by an Employee, contractor or other authorised delegate in the course of their duties on behalf of the University.

[Disciplinary Action](#)

Action by the University to discipline an Employee for misconduct or serious misconduct and includes: formal censure or counselling; demotion by one or more classification levels or increments; withholding of an increment; suspension with or without pay; or termination of employment for serious misconduct only.

[Employee](#)

A person employed by the University and whose conditions of employment are covered by the USQ Enterprise Agreement and includes persons employed on a continuing, fixed term or casual basis. Employees also include senior Employees whose conditions of employment are covered by a written agreement or contract with the University.

[Exclusion](#)

Prohibition from enrolling in a Course or a program for a specified period.

[Notice](#)

A Notice from the University is a document, whether physical or electronic. A Notice may be: given by hand to the addressee or delivered to the address provided by the addressee to the University; or sent by registered or pre-paid mail to the address provided by the addressee to the University; or sent by electronic communication to the University-issued email account provided by the University to a Student during the period of Enrolment until the completion of their program; or sent by electronic communication to the email address provided to the University by an addressee not enrolled at the University. A Notice is taken to be received if: given by hand to the

addressee or delivered to the address provided to the University by the addressee; or sent by registered or pre-paid mail - three University Business Days after the date of posting; or sent by electronic communication - at the time that would be the time of receipt under the Electronic Transactions Act 1999 or its succeeding legislation. A Notice that would be deemed to have been received out of business hours or on a non-University Business Day will instead be deemed received on the next University Business Day.

[Procedural Fairness](#)

Has the meaning ascribed to it from time to time by the applicable common law of the State of Queensland.

[Public Interest Disclosure](#)

A public interest disclosure is a disclosure under Chapter 2 of the Public Interest Disclosure Act 2010 and includes all information and help given by the discloser to a Proper Authority for the disclosure.

[Research Conduct Complaint](#)

A Complaint about a potential breach of the University Research Code of Conduct and the Australian Code for the Responsible Conduct of Research occurs when a concern is raised or identified that one or more Researchers have conducted research that is not in accordance with the principles and responsibilities outlined in those documents. All Research Conduct Complaints will be dealt with in accordance with the University's Managing and Investigating Potential Breaches of the Research Code of Conduct Procedure.

[Research Investigation](#)

The NHMRC Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research defines a Research Investigation as a process undertaken to make findings of fact to allow the responsible officer to assess whether a breach of the Australian Code for the Responsible Conduct of Research has occurred, the extent of the breach and the recommended actions. The USQ Enterprise Agreement has an agreed and legally binding process related to an Investigation of misconduct/serious misconduct, which applies to all Employees. For University Employees, the Research Investigation process outlined in this Procedure is regarded as a review process conducted prior to the commencement of an Investigation as outlined in the Disciplinary Action for Misconduct or Serious Misconduct Procedure.

[Research Misconduct](#)

Breaches of the University Research Code of Conduct and the Australian Code for the Responsible Conduct of Research occur on a spectrum, from minor (less serious) to major (more serious). Some major/serious breaches may be regarded as 'research misconduct'. The University uses the definition recommended in the National Health and Medical Research Council Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research and defines Research Misconduct as a serious breach of the Code which is also intentional or reckless or negligent. The use of the term Research Misconduct for serious breaches will be considered in the context of other institutional processes, Regardless of whether a Code investigation and an investigation done under an employment or student disciplinary agreement are separate or integrated, the University will take all reasonable steps to ensure that these do not conflict, or hinder the timely implementation of all corrective actions. Research misconduct does not include honest differences in judgement. Unintentional errors do not usually constitute research misconduct unless they result from behaviour that is reckless or negligent. Repeated or persistent breaches will likely constitute a serious breach, which will trigger consideration of Research Misconduct.

[Researcher](#)

Any person/s involved in Research Activities at, or on behalf of the University. This includes, but is not limited to Employees, Students, visiting scholars, research partners, research affiliates, holders of Honorary or Adjunct positions.

[Respondent](#)

A member of the University community against whom a Complaint has been made.

[Student](#)

A person who is admitted to an Award Program or Non-Award Program offered by the University and is: currently enrolled in one or more Courses or study units; or not currently enrolled but is on an approved Leave of Absence or whose admission has not been cancelled.

[University](#)

The term 'University' or 'USQ' means the University of Southern Queensland.

[University Business Days](#)

The days of Monday to Friday inclusive between 9am and 5pm Australian Eastern Standard Time (AEST), with the exclusion of gazetted Public Holidays for the relevant campus location, plus the closure of the University between 25 December and 1 January in the following year inclusive as specified in the USQ Enterprise Agreement, as well as any closure of the University either at one or several campuses in accordance with a direction of the Crisis Management Team.

[University Members](#)

Employees of the University whose conditions of employment are covered by the USQ Enterprise Agreement whether full time or fractional, continuing, fixed-term or casual, including senior Employees whose conditions of employment are covered by a written agreement or contract with the University; Members of the University Council and University Committees; Visiting and adjunct academics; Volunteers who contribute to University activities or who act on behalf of the University; Individuals who are granted access to University facilities or who are engaged in providing services to the University, such as contractors and consultants, where applicable.

[USQ Enterprise Agreement](#)

University of Southern Queensland Enterprise Agreement 2018-2021.

[Vexatious Complaint](#)

A Complaint may be decided to be vexatious or frivolous when the substance of the Complaint is reasonably recognised as one or more of the following: Trivial; Without merit; Not in good faith; Pursued with undue persistence or with malice.

Definitions that relate to this procedure only

Keywords

Record No

15/2076PL