Responsible Conduct of Research Procedure

Section 1 - Preamble

(1) Charles Darwin University ('the University', 'CDU') is committed to the highest standards of ethical conduct in academic research and considers any allegations or complaints of research misconduct by any member of the University as a serious matter.

(2) The University is committed to upholding the standards set out in the Australian Code for the Responsible Conduct of Research, 2018 (the Code).

Section 2 - Purpose

(3) This procedure prescribes how potential breaches of research integrity (breaches) are managed at the University. Specifically:

a. the means for making complaints of potential breaches;
b. the mechanisms for assessing and investigating potential breaches; and
c. the approved processes for managing and resolving potential and actual breaches, including requests for reviews of decisions.

Section 3 - Scope

(4) This procedure applies to all potential breaches of the Code. It applies to:

a. all staff;
b. Higher Degree by Research (HDR) candidates;
c. students completing a thesis or dissertation as part of a higher education coursework course;
d. academics; and
e. other members of the University community involved in academic research.

(5) This procedure does not apply to students undertaking coursework units at the University. Allegations of academic misconduct for coursework students are managed under the Academic Integrity Policy.

(6) This procedure does not apply to complaints of general misconduct made against researchers, which are governed by the Code of Conduct - Employees for staff members of the University or the Code of Conduct - Students for students, including HDR candidates. Matters of misconduct such as fraud or corruption are governed by the Whistleblower Reporting (Improper Conduct) Procedure.

Section 4 - Procedure

(7) This procedure is to be read in conjunction with the Australian Code for the Responsible Conduct of Research, 2018

(the Code) and the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research (the Guide).

(8) In the event of there being any inconsistency between either the Code or the Guide with the University's governance and other documents, the Code and the Guide will prevail.

(9) All researchers must conduct themselves in a manner consistent with the standards set out in the Code, the Guide, the Responsible Conduct of Research Policy, and other relevant governance documents, including any instructions and approvals from relevant ethics committees.

(10) A breach is defined as a failure to meet the principles and responsibilities of research integrity, as described in the Code, the Guide, and the University's related research policies and procedures.

(11) In accordance with the Code and the Guide, this procedure stipulates that the University has mechanisms in place for preventing, reporting, investigating and resolving potential breaches.

(12) Processes for managing and investigating concerns or complaints about potential breaches must be effective and in accordance with the principles of procedural fairness.

(13) The findings of investigations must be based on the balance of probabilities and any actions resulting from the investigation will be commensurate with the seriousness of the breach.

(14) The University supports the welfare of all parties involved in an investigation of a potential breach of the Code.

(15) The seriousness of a breach will be determined on a case-by-case basis, with consideration given to matters including:

a. the extent of the departure from the Code and principles and responsibilities of research integrity;
b. the extent of the departure from accepted research practice in the discipline(s);
c. any impacts on research participants, animals, the environment, or the wider community as a result of the breach;
d. any impact on the trustworthiness of the research, the University or any related research;
e. the level of experience of the researcher(s) involved and/or whether there have been previous or repeated breaches by any of the researchers involved; and
f. whether any institutional failures or internal systemic issues have contributed to the breach.

(16) A breach will be considered particularly serious if it is found to be intentional, reckless and/or negligent. Such breaches may be considered research misconduct and may trigger further institutional processes following an investigation.

(17) The Menzies School of Health Research (Menzies) has separate research integrity governance arrangements to the University. Complaints regarding research at Menzies may be made through this procedure or through the Menzies complaints management process. In these circumstances the Director of Menzies and the Deputy Vice-Chancellor Research and Community Connection will determine whether the matter is dealt with by the University or Menzies on a case-by-case basis.

(18) Where a complaint relates to collaborative research with another institution, the Deputy Vice-Chancellor Research and Community Connection will contact the Responsible Executive Officer at that institution and inform them that a complaint has been received.

(19) In general, only one investigation should be conducted for a complaint. The Deputy Vice-Chancellor Research and Community Connection will work with collaborating institutions to manage such investigations on a case-by-case

basis, considering factors including the lead institution, to which institution the complaint was lodged, contractual arrangements, and where an alleged incident occurred, if necessary conducting a joint investigation.

Roles and responsibilities

(20) The University encourages staff, students and third parties to report any potential breaches of the Code.

(21) Officers of the University responsible for assessing and investigating allegations of breaches are indemnified by the University.

(22) Officers of the University involved in the management and investigation of potential breaches are defined as follows:

a. Responsible Executive Officer (REO): The Deputy Vice-Chancellor Research and Community Connection or another senior professional or academic institutional officer nominated by the Vice-Chancellor who has overall responsibility for the responsible conduct of research at the University and receiving reports on the outcomes of assessments and investigations. They are also directly responsible for making final determinations on potential breaches that have been subject to investigation.
b. Designated Officer (DO): The Director Research, the Dean of Graduate Studies, or another senior professional or academic institutional officer nominated by the REO who receives complaints about the conduct of research or potential breaches and oversees their management and investigation where required.
c. Assessment Officer (AO): Person nominated by the DO on a case-by-case basis to conduct a preliminary assessment of a complaint about alleged research misconduct. The AO must be a senior member of staff, at Director level or higher. They should not have a conflict of interest in relation to the respondent and must not be from the same faculty as the respondent. In exceptional circumstances an external AO may be appointed.
d. Investigation Panel (the Panel): People nominated by the REO on a case-by-case basis to investigate a complaint and produce a report detailing findings of fact and recommendations for the REO. Panel members should not have a conflict of interest in relation to the respondent and must not be from the same faculty as the respondent.
e. Research Integrity Advisor (RIA): Person with knowledge of the Code and institutional processes nominated by the University to promote the responsible conduct of research and provide advice to those with concerns or complaints about potential breaches of the Code. Contact details for the RIAs can be found at Research integrity.
f. Research Integrity Office (RIO): Staff responsible for managing research integrity at the University.
g. Review Officer (RO): Senior executive nominated on a case-by-case basis to be responsible for conducting a procedural review of an investigation or assessment. The RO should not have a conflict of interest in relation to the respondent and must not be from the same faculty as the respondent. In exceptional circumstances an external RO may be appointed.

(23) The respondent of a complaint may not be appointed to act as REO, DO, AO, or RO or be appointed as a member of the Investigation Panel in relation to that complaint.

(24) Where a complaint is made against a DO, the REO will ensure an alternative DO manages that complaint.

(25) Where a complaint is made against the REO, the Vice-Chancellor will appoint an alternative REO.

Making a complaint and raising a potential breach

(26) A complaint about a potential breach of the Code may be made by any member of the University community or by third parties. Potential complainants are encouraged to seek advice from an RIA of the University.

(27) A complaint about a potential breach may be made verbally or in writing to the DO via the University's RIO. The

person lodging the complaint (the complainant) should be encouraged by the University to provide all relevant information about the complaint, but the process of making a complaint should not be onerous.

(28) Complaints can be made anonymously, however, lodging a complaint anonymously may limit the University's understanding of the complaint and adversely impact upon any resulting assessment or panel investigation.

(29) Verbal complaints made to the DO will be confirmed with the complainant in writing.

(30) The complainant can be requested by the University to provide additional information if necessary.

(31) The University may assist the complainant to lodge a complaint.

(32) A complaint referred from the Australian Research Council (ARC) or relating to research or work involving the ARC must be reported to the ARC, consistent with the ARC Research Integrity Policy.

(33) Complainants must not make a complaint in bad faith or provide information they know to be inaccurate or misleading. Doing so may result in disciplinary action and where appropriate will be reported to an appropriate external regulatory body or agency.

Protection of complainants

(34) The University will ensure the complainant is protected from adverse circumstances and adverse consequences for having made the complaint.

(35) In particular, the University will manage situations where a power imbalance exists, such as complaints brought by students and/or staff in more junior positions.

(36) The University does not tolerate reprisals, threatening behaviour or other actions that threaten the welfare of University members and third parties, which should they arise, will trigger other institutional processes.

(37) Anonymous complaints of potential breaches will be considered on the basis of the information provided. However, lodging a complaint anonymously may limit the University's understanding of the complaint and adversely impact upon any resulting assessment or Panel Investigation.

Consideration of complaints

(38) The DO receives all complaints regarding research conduct and considers whether the complaint relates to a potential breach of the Code.

(39) If the complaint does not represent a potential breach, it may be dismissed or referred to other relevant institutional processes if necessary.

(40) If the complaint does represent a potential breach of the Code, the matter is referred to the AO for assessment, unless the DO decides that further assessment and investigation is unnecessary.

(41) The DO may make a determination without further investigation if:

a. the matter may be addressed at the local level, such as where the matter is an unintentional administrative error, clerical error or oversight and relates to research administration;
b. the respondent has admitted to breaching the Code; or
c. an investigation into the matter has already commenced under another University process.

(42) Should the complainant withdraw the complaint, the DO will continue to consider the complaint and will advise the REO that the complaint was withdrawn.

(43) If the DO identifies a potentially significant risk to humans, animals, the environment or national security, they must immediately advise the REO.

Preliminary assessment

(44) The DO will assign the complaint to a suitable AO.

a. The AO must be a senior member of staff, at Director level or higher.
b. The AO must not be from the same faculty as the respondent.
c. The AO should not have a conflict of interest in relation to the respondent. Conflicts of interest must be managed in accordance with the Conflicts of Interest Policy and the Conflicts of Interest Procedure.

(45) The AO will conduct a preliminary assessment in a timely manner and in no more than 40 working days of the receipt of the complaint by the DO.

(46) The AO is authorised by the University to secure all documents and other evidence necessary to undertake the assessment. The AO will prepare and retain records of the assessment in accordance with the Records and Information Management Policy and Procedure.

(47) During the assessment, the AO may contact the person or persons against whom the complaint is made (the respondent) in writing. If the AO contacts the respondent they will:

a. notify the respondent of the complaint and advise them that an assessment of a potential breach is underway;
b. ensure the notification provides sufficient details about the complaint to allow the respondent to understand the nature of the complaint and respond;
c. invite the respondent to meet with the AO, with the option to bring a support person. A record of any meetings must be prepared and the respondent provided with a copy;
d. offer to clarify any aspects of the complaint with the respondent unless inappropriate to do so; and
e. invite the respondent to provide a written response in no less than 10 working days.

(48) During the assessment the AO will, where necessary:

a. seek further information from the complainant and the respondent;
b. seek the involvement of those in supervisory roles in the potential breach;
c. consider the need to involve other institutions, stakeholders or external experts in the matter;
d. consult with one or more experts to provide specific or independent advice about the conduct of the assessment.

(49) After completing the assessment, the AO will present a preliminary assessment report to the DO. This report must include:

a. recommendations for further action;
b. a summary of the assessment process;
c. an inventory and evaluation of the facts and information gathered and analysed, including the response from the respondent; and
d. an assessment of how the potential breach relates to the principles and responsibilities of the Code and to the University's policies, procedures and related processes.

(50) The preliminary assessment report will be considered by the DO who determines whether the matter should be:

a. dismissed;
b. resolved locally, with or without corrective actions;
c. referred for investigation; or
d. referred to other University processes.

(51) If the DO dismisses a complaint, they must consider the following:

a. If the complaint has no basis in fact (for example, due to a misunderstanding or because the complaint is frivolous or vexatious), then efforts, if required, must be made to restore the reputation of any affected parties.
b. If the complaint is considered to have been made in bad faith or is vexatious, the complainant should be subject to appropriate disciplinary measures and processes. Examples of frivolous, vexatious and bad faith complaints include, but are not limited to:
    i. fabricating a complaint;
    ii. making trivial or petty complaints;
    iii. making repeated, unsubstantiated complaints; or
    iv. seeking to re-agitate issues that have already been addressed or determined.
c. If the assessment raised systemic issues associated with the complaint, such as a lack of clarity on the ethical requirements of a research project, efforts may be necessary to address these issues.

(52) The outcome of this determination will be communicated to the respondent, the complainant, and other relevant stakeholders as appropriate.

Investigation

(53) The purpose of the investigation is to make findings of fact to allow the REO to:

a. determine whether a breach of the Code or the University's research policies and procedures has occurred;
b. assess the nature, seriousness and extent of the breach; and
c. consider any recommendations of the Panel.

(54) The investigation is conducted by an investigation panel. The Panel determines whether, on the balance of probabilities, the respondent has breached the Code.

(55) The Panel consists of one or more members appointed on a case-by-case basis by the REO with advice from the DO. In selecting members of the Panel, the REO will consider:

a. the expertise and skills required of the members, including:
    i. an appropriately qualified Chair when the Panel is more than one person;
    ii. experience and expertise in relevant disciplines;
    iii. prior experience of similar panels and/or other relevant experience; and
    iv. knowledge and understanding of research, research integrity and related processes;
b. the appropriate number of members (noting that a Panel can be comprised of one person);
c. the need for members to be free from conflicts of interest or bias. Panel members must ensure that relevant interests are disclosed to the REO and managed appropriately in accordance with the Conflicts of Interest Policy and Conflicts of Interest Procedure. Where a perceived or actual conflict of interest cannot be managed, the affected panel member must be recused.

(56) The DO will:

a. prepare a clear statement of the complaint and the associated allegations;
b. develop the terms of reference for the investigation with reference to the Guide;
c. advise the REO on membership of the Panel, with consideration of the composition of the Panel informed by the Guide; and
d. seek legal advice on matters of process where appropriate.

(57) Once potential Panel members have been selected, the DO will inform the respondent of the Panel's composition and provide an opportunity for the respondent to raise concerns and respond in writing.

(58) Once the Panel is finalised it will convene to develop an investigation plan and conduct the investigation in keeping with the principles of confidentiality, procedural fairness, the terms of reference as appropriate, institutional processes, the Guide and the Code.

(59) The University provides all information and resources needed by the Panel, including secretariat support, and maintains a record of evidence (Appendix 3 of the Guide provides a sample checklist).

(60) If the Panel should find during the investigation that the scope and/or the terms of reference are too limiting, the Chair will refer the matter to the DO with an explanation. The DO will consider the matter and determine whether to amend the scope of the investigation and the terms of reference. If the scope of the investigation is revised, the respondent and other relevant stakeholders will be advised, and the respondent given the opportunity to respond to any new material arising from the revised scope.

(61) Any party who requests or is required to attend the Investigation Panel for interview will be given no less than 10 working days' notice. They may bring a support person. A support person is not an advocate and does not represent or speak on behalf of any party. If the respondent or complainant requires a higher level of support, they should seek the Panel's approval. All those asked to give evidence are to be provided with relevant and if necessary de-identified information as prescribed by the Guide.

(62) Parties do not have the right to legal representation unless otherwise determined by the Panel for particular matters.

(63) The Panel will:

a. assess the evidence (including its veracity) and consider if more evidence is required;
b. provide the respondent an opportunity to respond to the allegations and to the evidence in writing or in person and to provide additional relevant evidence to the Investigation Panel;
c. give the complainant the opportunity to review and respond to relevant evidence if necessary; for example, if the complainant's interests may be directly or adversely affected by the Investigation;
d. arrive at findings of fact about the complaint;
e. consider whether the Code has been breached and the seriousness of any breaches; and
f. make recommendations as appropriate.

(64) At its discretion, the Panel may request expert advice to assist the investigation.

(65) If the respondent or complainant chooses not to respond to the invitation to attend the Panel, the investigation will continue regardless.

(66) The Panel will prepare a written report of the investigation, which must include its recommendations and findings of fact, consistent with its terms of reference.

(67) The Panel is encouraged to reach a consensus. If any member of the Panel has dissenting views, these views must be included in the investigation report.

(68) Prior to submitting the report to the DO, a draft report will be provided to the respondent for comment within 10 working days. Where a complainant will also be affected by the outcome, the draft report or a summary will be provided to the complainant for comment within 10 working days.

(69) Should the respondent or complainant not respond to or attend the Panel, the Panel will continue to finalise the report.

(70) Following consideration of any further information, including responses from the respondent and/or the complainant, the report will be finalised and presented to the REO.

(71) The REO will consider the Panel's report and recommendations and decide a finding of whether there has been a breach of the Code.

(72) If the REO finds there has not been a breach, the following will be considered:

a. if the complaint is found to have no basis in fact, then efforts or actions must be taken to restore the reputation of the respondent;
b. if a complaint is found to have been frivolous or vexatious, actions should be undertaken to address this with the complainant under appropriate institutional processes; and
c. the mechanisms for communicating with, and for support for, the respondent and the complainant.

(73) If the REO finds there has been a breach of research integrity, the REO will decide the University's response and consider a range of matters including but not limited to the following:

a. the nature, seriousness and extent of the breach;
b. any appointments of the respondent and appropriate management of these appointments with other institutions;
c. efforts or actions that can be undertaken to correct the public record; and
d. where any systemic issues identified, that these are referred appropriately within the University to ensure they are addressed.

(74) The REO may determine that a serious breach of the Code which is also intentional, reckless, or negligent constitutes research misconduct.

(75) The REO may also inform the Vice-Chancellor, relevant senior University managers, relevant funding agencies, journals, researchers, professional registration bodies, the general public and other relevant parties, as necessary and as determined by the REO.

(76) Where a breach involves corrupt conduct or criminal behaviour, the University will refer the matter to the Independent Commissioner Against Corruption (the ICAC), the police, or other external agencies as necessary.

(77) If at any time the respondent admits to the allegation(s) of the complaint in full, the REO will make a finding of a breach and consider disciplinary action under the Charles Darwin University and Union Enterprise Agreement 2025, in the case of a staff member, or the Code of Conduct - Students, in the case of a student. The REO must also consider if any corrective actions are required as prescribed by this procedure.

Communication of findings

(78) Following the REO's consideration of the report of the Panel, the University will communicate in writing the decisions and actions to the respondent and complainant. Other relevant parties (such as funding bodies, agencies, authorities or other institutions) will be informed as relevant and/or required.

(79) The University is obliged to address the findings of an investigation appropriately, even where a respondent leaves the University prior to or during an investigation. This may include appropriate and lawful disclosure, correction of the research record, or referral of the matter to the new employing institution.

(80) All efforts must be taken to correct the public record of the research, including publications, if a breach of the Code has affected the accuracy or trustworthiness of research findings and their dissemination.

Disciplinary action following a finding

(81) Where there has been a finding of a serious breach or of research misconduct, the REO may refer the case to the Vice-Chancellor, in the case of a staff member, or the Provost, in the case of a student.

(82) The panel's investigation and the REO's findings will form the preliminary investigation, unless the Vice-Chancellor or Provost, as applicable, decides that an additional investigation is required prior to taking disciplinary action.

(83) Disciplinary action in relation to a breach by an employee will be in accordance with the Charles Darwin University and Union Enterprise Agreement 2025.

(84) Disciplinary action in relation to a breach by a student will be in accordance with the Code of Conduct - Students.

Review of a breach of the Code investigation

(85) A request for a review of an investigation will only be considered on the grounds of procedural fairness. A review will consider the procedures and processes used by the Panel in conducting the investigation in order to affirm, or not, the outcome of the investigation.

(86) A request for a review of the investigation must be lodged by the respondent or the complainant with the RIO within ten (10) working days of notification of the outcome of the investigation.

(87) The request for a review should be sent to researchintegrity@cdu.edu.au and clearly outline the procedural fairness grounds relied upon, including any supporting material or documentation.

(88) The RIO will assess the request for review and appoint an RO if the request fulfills the following criteria:

a. Submission by a complainant or respondent of an investigation under this procedure;
b. Receipt by the RIO within ten (10) working days of the notification of the outcome of the investigation;
c. The request is based on the grounds of alleged procedural fairness deficiencies; and
d. Provision of sufficient evidence of the alleged procedural fairness deficiencies.

(89) If the request for a review does not fulfill these criteria, the RIO will not appoint an RO and will advise the applicant why a review will not be undertaken. The RIO will advise the applicant that they may seek external review by the Australian Research Integrity Committee (ARIC).

(90) Requests for review, which fulfil all of the above criteria, will be directed by the RIO to an appropriate RO within twenty (20) working days of receiving the request for review from the respondent or the complainant. The RO should not have a conflict of interest in relation to the complaint and must not be from the same Faculty as the respondent. Conflicts of interest must be managed in accordance with the Conflicts of Interest Policy and Conflicts of Interest Procedure.

(91) The RO will undertake a review in accordance with the Code, the Guide and the University's policies and procedures.

(92) The RO will consider the procedures and processes used by the Panel in conducting the investigation itself in order to affirm, or not, the related findings of fact and recommendations arising out of the investigation. Where necessary, the RO will seek further clarification of the procedures and processes used by the Panel in conducting the investigation itself.

(93) Upon completion of the review, the RO will determine whether the conduct of the investigation aligned with institutional processes, the Code and the Guide, and the principles of procedural fairness.

(94) Notice of the review determination must be provided to the applicant, advising:

a. a statement of reasons for the determination;
b. that the determination is final and conclusive, and may not be the subject of a further review within the University;
c. a website link to the relevant University policy and procedures; and
d. that if not satisfied with the result or the conduct of the appeals process as described, respondents and complainants may additionally seek external review by the ARIC or other appropriate external bodies or agencies.

(95) Interested third parties may not request a review from the RIO but they may seek external review by ARIC or other appropriate external bodies or agencies.

Section 5 - Non-compliance

(96) Non-compliance with Governance Documents is considered a breach of the Code of Conduct - Employees or the Code of Conduct - Students, as applicable, and is treated seriously by the University. Reports of concerns about non-compliance will be managed in accordance with the applicable disciplinary procedures outlined in the Charles Darwin University and Union Enterprise Agreement 2025 and the Code of Conduct - Students.

(97) Complaints may be raised in accordance with the Complaints and Grievance Policy and Procedure - Employees and Complaints Policy - Students.

(98) All staff members have an individual responsibility to raise any suspicion, allegation or report of fraud or corruption in accordance with the Fraud and Corruption Control Policy and Whistleblower Reporting (Improper Conduct) Procedure.

Status and Details

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Responsible Executive	Steve Rogers Deputy Vice-Chancellor Research and Community Connection +61 8 89466890
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Glossary Terms and Definitions

"**Faculty**" - An organisational and academic unit in the University that delivers courses and conducts research.