

Management of Breaches of Research Integrity Procedure

Section 1 - Context

(1) This procedure outlines how potential breaches of research integrity, including potential breaches of the [Australian Code for the Responsible Conduct of Research, 2018](#) (the Code) and/or RMIT [Research Policy](#), are managed at RMIT University. This process is in alignment with the Code and the supporting [Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research, 2018](#) (the Guide), related legislation, regulation and guidelines, as well as institutional policies and procedures.

Section 2 - Authority

(2) Authority for this document is established by the [Research Policy](#).

Section 3 - Scope

(3) Applicable to all staff, students, visiting researchers and honorary and adjunct appointees undertaking or supporting research at all RMIT University campuses and external research locations, and any research RMIT University is obliged to consider.

Section 4 - Procedure

Guiding Principles

(4) RMIT University (RMIT) has principles-based responsibilities for the prevention, detection, investigation and resolution of potential breaches of research integrity.

(5) A breach is defined as a failure to meet the principles and responsibilities of research integrity, as described in the Code and RMIT Research policy. Please see section 2.1 of the Guide for a non-exhaustive list of examples of breaches of the Code.

(6) The investigation and determination of a breach of research integrity requires rigour, sound deliberation and exercising of judgement.

(7) It is recognised that breaches of research integrity occur on a spectrum, from minor or less serious to major or more serious.

- a. The seriousness of a breach of research integrity will be determined on a case-by-case basis, with due consideration of
 - i. the extent of the departure from the principles and responsibilities of research integrity
 - ii. the extent of the departure from accepted research practice

- iii. the extent to which research participants, the wider community, animals and the environment are, or may have been, affected
- iv. the extent to which the breach affects the trustworthiness of research
- v. the level of experience of the researcher/s
- vi. whether there are repeated breaches by the researcher/s
- vii. whether institutional failures have contributed to the breach
- viii. any other mitigating or aggravating circumstances.

(8) The principles of procedural fairness apply to all aspects of management of a potential breach of research integrity, including any assessment or investigation.

- a. In keeping with these principles, RMIT's process and procedures for managing a potential breach of research integrity will be:
 - i. proportional, to the extent of the potential breach of the Code
 - ii. fair, in affording procedural fairness to respondents and, where appropriate complainants or others who may be adversely affected
 - iii. impartial, in requiring investigators to be impartial and to declare and appropriately manage any conflicts of interest
 - iv. timely, in conducting investigations in a timely manner and avoiding undue delays
 - v. transparent, in making information about related institutional processes and procedures readily available and ensuring accurate records are maintained
 - vi. confidential, in dealing with research integrity matters confidentially and not disclosing information unless required.
- b. The principles of procedural fairness do not include a right to legal representation.

(9) All complaints about a potential breach of research integrity lodged with the Research Ethics, Integrity and Governance team will be treated confidentially. RMIT may share information about the management and resolution of potential breaches of research integrity with, or seek input from, other internal and external parties where required to do so.

(10) Complaints must be made responsibly, in that they are made in good faith and without malice; based on facts that have not been substantially the subject of a previous complaint; and that may meet the definition of a research integrity breach.

(11) Complainants and Respondents will be informed of resources to support their welfare throughout the course of the process, including the opportunity to use a support person where appropriate.

(12) The University may take immediate action to protect research participants, animals, the environment, research data and records, or any other intervention where a complaint presents major or severe or ongoing risk.

(13) University employees and any other authorised persons who are involved in investigating a potential breach of research integrity must reach conclusions based on a fair hearing of each point of view and must respect the privacy and confidentiality of all parties as far as practicable.

Making a Complaint

(14) A complaint about a potential breach of research integrity occurs where a concern is raised or identified that one or more RMIT researchers have conducted research that is not in accordance with the principles and responsibilities of research integrity.

(15) Every person to whom this procedure applies, who has reasonable grounds to believe that a breach of research integrity has occurred will make a complaint.

(16) Anyone can make a complaint. Complaints may arise from a range of sources, internal or external to RMIT, including but not limited to researchers, research administrative, technical or support staff, examiners, editors, research participants, members of the public, research institutions and funding agencies.

(17) Complaints may be made anonymously; however, this may limit the assessment or investigation of the complaint and communications with the complainant.

(18) In considering whether to make a complaint, potential complainants may seek advice from a Research Integrity Advisor (RIA).

(19) Complaints should be submitted in writing and lodged with the Research Ethics, Integrity and Governance team (REIG) at RMIT University.

(20) In making a complaint, complainants are encouraged to provide all pertinent information and documentation, including:

- a. the type of breach/es alleged to have occurred, including any other relevant details, such as, the date/s (when) and site/s (where)
- b. the researcher/s against whom the complaint is being made
- c. all supporting evidence reasonably at hand.

(21) The Research Ethics, Integrity and Governance team may assist a complainant to lodge a complaint. In providing this assistance, staff of the Research Ethics, Integrity and Governance team will declare, and appropriately manage, any conflicts of interest.

(22) RMIT is obliged to assess the nature of all complaints and consider whether to proceed to a preliminary assessment, even where a complainant chooses not to proceed with a complaint.

Receipt and Consideration of Complaints

(23) The Designated Officer (DO) receives all complaints.

(24) Upon receipt of a complaint, the DO will consider the complaint and determine whether, or not, it relates to a potential breach of research integrity.

- a. Where the DO determines the complaint represents a potential breach of research integrity, it will proceed to preliminary assessment (see Preliminary Assessment Stage).
- b. Where the DO determines the complaint does not represent a potential breach of research integrity, it may be dismissed or referred to other institutional processes (such as, staff or student conduct processes), as appropriate.

(25) In undertaking the consideration, the DO or their delegate may engage with the complainant or other relevant stakeholders, to inform the appropriate consideration of the complaint.

Preliminary Assessment Stage

(26) The purpose of the preliminary assessment is to collect and evaluate facts and information, to inform the determination of whether a complaint, if proven, would constitute a breach of research integrity.

(27) An Assessment Officer (AO) assigned by the DO will oversee the conduct of the preliminary assessment,

including:

- a. identifying, collecting, evaluating and securing relevant facts, information and documentation
- b. considering the need to consult with the complainant and respondent to collect or clarify facts, information or documentation, and consulting as appropriate
- c. considering the need to consult with the DO and other relevant institutional stakeholders, and consulting as appropriate
- d. considering the need to engage with internal or external experts, to provide specific and/or independent advice to facilitate the preliminary assessment, and consulting as appropriate.

(28) Where it is considered necessary to engage with the respondent as part of the preliminary assessment, the AO will notify the respondent.

(29) On completion of the preliminary assessment, the AO provides written advice to the DO in a timely manner.

(30) The DO will consider the advice and will make a determination about the complaint. Possible determinations include that a complaint be:

- a. dismissed
- b. resolved locally, with or without corrective actions
- c. referred for investigation (see Investigation Stage)
- d. referred to other institutional processes, as appropriate.

(31) Following the making of the determination, the institution will provide the outcome, in a timely manner and as appropriate, to the respondent, complainant and other relevant stakeholders.

Investigation Stage

(32) The purpose of the investigation is to make a finding of fact which enables the Responsible Executive Officer (REO) at RMIT to assess whether a breach of research integrity has occurred, the seriousness and extent of the breach and the recommended actions.

(33) The investigation will be conducted by an investigation Panel (Panel) nominated by the DO.

(34) Following a determination that a matter be referred to investigation (see clause (30)), the DO will:

- a. prepare the statement of allegations
- b. establish the terms of reference for the investigation
- c. nominate the related Panel, including a Chair where the Panel comprises more than one person
- d. seek legal advice on matters of process, as appropriate.

(35) In nominating the Panel, the DO will consider:

- a. the expertise and skills required, including:
 - i. an appropriately qualified Chair
 - ii. appropriate level of experience and expertise in the relevant discipline
 - iii. the need for a person/s with prior experience of similar panels or relevant experience
 - iv. knowledge and understanding of research integrity and related processes.
- b. the appropriate number of members (noting that a Panel can be comprised of one person)
- c. the diversity of members required, including gender

d. the need for members to be free from conflicts of interest or bias.

(36) Prior to finalisation of the Panel, the DO will inform the respondent of the Panel's composition and the respondent will be provided an opportunity to raise any concerns.

(37) Once finalised the Panel will convene, develop an investigation plan and conduct the investigation in keeping with the principles of procedural fairness, the terms of reference as appropriate, institutional process, the Guide and the Code.

(38) The panel is to determine whether, having regard to evidence and on the balance of probabilities the respondent has breached research integrity. To do this, the Panel:

- a. assesses the evidence (including its veracity) and considers if more may be required
- b. may request expert advice to assist the investigation
- c. arrives at findings of fact about the allegation
- d. identifies whether the principles and responsibilities of the Code have been breached
- e. considers the seriousness of any breach
- f. provides a report into its findings of fact consistent with its terms of reference
- g. makes recommendations as appropriate.

(39) On completing the investigation, the Panel will prepare a written report of the investigation, including findings of fact, and any recommendations, to be submitted to the DO.

- a. Prior to finalising and submitting the report to the DO, the draft report, or a summary, will be provided to the respondent in a reasonable timeframe, for comment.
- b. Where a complainant will also be affected by the outcome, the draft report, or a summary, will be provided to the complainant in a reasonable timeframe, for comment.

(40) The DO will consider the findings of fact, evidence presented, and any recommendations made by the Panel. The DO will also consider the extent of the breach, the appropriate corrective actions and if referral to disciplinary procedures is required. The DO will provide the final report to the REO with recommendations. The REO will consider the Panel report and DO's recommendations, and decide a finding of whether, or not, there has been a breach of research integrity.

- a. If the REO finds there has not been a breach of research integrity, the following will be considered:
 - i. where a complaint is found to have no basis in fact, efforts or actions that will be undertaken to restore the reputation of those alleged to have breached research integrity
 - ii. where a complaint is found to have been made in bad faith or is vexatious, efforts or actions that can be undertaken to address this with the complainant, in keeping with appropriate institutional processes
 - iii. the mechanisms for communicating with and supporting the respondent and complainant.
- b. If the REO finds there has been a breach of research integrity, the REO will decide RMIT's institutional response, considering:
 - i. the seriousness and extent of the breach
 - ii. any adjunct and/or honorary appointments of the respondent and appropriate management of these appointments with other institutions
 - iii. efforts or actions that can be undertaken to correct the public record of research including publications, as appropriate.
- c. Where any systemic issues are identified, the REO will refer these as appropriate within RMIT to ensure they are addressed.

(41) Following the consideration of the report by the REO as outlined above, the institution will communicate 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.

(42) RMIT is obliged to address the findings of an investigation appropriately, even where a respondent leaves RMIT 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.

Review of a Code Investigation

(43) Requests for a review of a Code investigation should only be considered on the grounds of procedural fairness. That is, the procedures used by the Panel in conducting the investigation, rather than the findings of fact and recommendations arising out of the investigation.

(44) Requests for review will be directed to the Review Officer (RO) within a reasonable timeframe of the outcome of the investigation being communicated to the respondent and complainant.

(45) The RO will undertake an examination in accordance with institutional processes and procedures including:

- a. a thorough examination of procedures followed by the Panel in conducting the investigation (see Investigation Stage)
- b. further clarification of these procedures, as relevant or required.

(46) Upon completion of the review, the RO will determine an outcome, as follows:

- a. The conduct of the investigation aligns with institutional processes, the Guide and the Code, and the principles of procedural fairness.
- b. The conduct of the investigation does not align with institutional processes, the Guide and the Code, and the principles of procedural fairness.

(47) Respondents and complainants may additionally have a right to request a review by higher bodies, which may include without limitation the Australian Research Integrity Committee (ARIC).

Implementation

- a. This Procedure will be implemented from the effective date and apply prospectively to the management of potential breaches of research integrity at RMIT.
- b. The management of potential breaches of research integrity at RMIT received prior to the effective date will proceed under the Research misconduct policy process.

Section 5 - Resources

(48) Refer to the following documents which are established in accordance with this procedure:

- a. Research Integrity on the RMIT [Researcher Portal](#) [staff login]
- b. Research Misconduct Policy Process (for complaints received before 27 June 2019).

Section 6 - Definitions

Allegation	A claim or assertion arising from a preliminary assessment that there are reasonable grounds to believe a breach of the Code has occurred. May refer to a single allegation or multiple allegations.
Assessment Officer (AO)	A person or persons appointed by an institution to conduct a preliminary assessment of a complaint about research. At RMIT the AO role is generally appointed from Research Services, within the Research and Innovation Portfolio.
Balance of probabilities	The civil standard of proof, which requires that, on the weight of evidence, it is more probable than not that a breach has occurred.
Breach	A failure to meet the principles and responsibilities of research integrity, as described in the Code and RMIT Research Policy.
Code	The Australian Code for the Responsible Conduct of Research 2018.
Complainant	A person or persons who has made a complaint about the conduct of research.
Designated Officer (DO)	A senior professional or academic institutional officer or officers appointed to receive complaints about the conduct of research or potential breaches of the Code and to oversee their management and investigation where required. At RMIT this role is performed by the Executive Director, Research Strategy and Services, within the Research and Innovation Portfolio.
Evidence	Any document (hard copy or electronic, including e-mail, images and data), information, tangible item (for example, biological samples) or testimony offered or obtained that may be considered during the process of managing and investigating a potential breach.
Guide	The supporting Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research, 2018 .
Investigation	In this procedure, the term 'investigation' is used to describe the action of investigating an allegation of a breach of the Code by the Panel, following the preliminary assessment. The purpose of the investigation is to determine whether a breach of the Code has occurred, and if so, the extent of that breach, and to make recommendations about further actions.
Panel	Refers to the person or persons appointed by an institution to investigate a potential breach of the Code.
Preliminary assessment	In this Guide, the term 'preliminary assessment' is used to describe the gathering and evaluating of evidence to establish whether a potential breach of the Code warrants further investigation.
Procedural fairness	That a fair and proper procedure is used in making a decision.
Processes	This includes reference to policies, procedures, guidelines and standards.
Research	The concept of research is broad and includes the creation of new knowledge and/or the use of existing knowledge in a new and creative way to generate new concepts, methodologies, inventions and understandings. This could include synthesis and analysis of previous research, to the extent that it is new and creative.
Research Integrity Advisor (RIA)	A person with knowledge of the Code and institutional 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 Code.
Research Ethics, Integrity and Governance team (REIG)	The institutional office or area with responsibility for management of research integrity at the institution. At RMIT this responsibility resides with the Research Ethics, Integrity and Governance team, within Research Strategy and Services, Research and Innovation Portfolio.
Researcher	Person (or persons) who conducts, or assists with the conduct of, research.
Respondent	Person (or persons) subject to a complaint or allegation about a potential breach of research integrity.
Responsible Executive Officer (REO)	The senior officer in an institution who has final responsibility 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 actions to be taken. At RMIT the Responsible Executive Officer is the Deputy Vice-Chancellor Research and Innovation (for staff) and the Associate Deputy Vice-Chancellor, Research Training and Development (for students).
Review Officer (RO)	A senior officer with responsibility for receiving request for a procedural review of an investigation of a breach of the Code.

Support Person	A person who accompanies a party to an interview.
----------------	---

Status and Details

Status	Historic
Effective Date	22nd January 2021
Review Date	27th June 2022
Approval Authority	Senior Policy Advisor
Approval Date	22nd January 2021
Expiry Date	31st May 2021
Policy Owner	Jane Holt Executive Director, Research Strategy and Services
Policy Author	Jane Holt Executive Director, Research Strategy and Services
Enquiries Contact	Research Services