

## Research Misconduct Procedure

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### SCOPE

The University of Adelaide has an obligation to comply with the *Australian Code for the Responsible Conduct of Research* ('the Code'). This Procedure is designed to meet the requirements of the Code and the [Responsible Conduct of Research Policy](#). It outlines the University processes for receiving, investigating and managing Complaints of Research Misconduct and/or Breaches of the Code.

This Procedure applies to all staff, students and affiliates of the University of Adelaide who are involved in the conduct of research associated with the University. In this context, research is defined as 'original investigation undertaken to gain knowledge, understanding and insight'.<sup>1</sup>

This Procedure does not apply to students undertaking undergraduate or postgraduate coursework, where the primary focus is on education, unless in the course of their studies they are required to undertake 'research' as defined in this Procedure. In those circumstances, they are within the scope of the Code.

### PRIMARY DEFINITIONS (as derived from the Code)

#### Breach

A Breach involves specific actions or omissions that constitute a failure to follow the requirements of Part A of the Code, but lack the seriousness of consequence or wilfulness to constitute Research Misconduct. However, repeated or continuing Breaches of the Code may constitute Research Misconduct.

#### Research Misconduct

Research Misconduct involves all of the following:

- a Breach of the Code;
- intent and deliberation, recklessness or gross and persistent negligence; and
- serious consequences, such as false information on the public record, or adverse affects on research participants, animals or the environment.

Research Misconduct includes fabrication, falsification, plagiarism or deception in proposing, carrying out or reporting the results of research, failure to declare or manage a serious conflict of interest, and avoidable failure to follow research proposals as approved by a research ethics

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<sup>1</sup> The Australian Code for the Responsible Conduct of Research, 2007, p.1

committee, particularly where this failure may result in unreasonable risk or harm to humans, animals or the environment. It also includes the wilful concealment or facilitation of Research Misconduct by others.

Repeated or continuing findings of Breaches of the Code may also constitute Research Misconduct, and do so where these have been the subject of previous counselling or specific direction.

Research Misconduct does not include honest differences in judgment in management of the research project, and may not include honest errors that are minor or unintentional.

## 1. COMPLAINT HANDLING PRINCIPLES

1.1 All Complaints alleging a Breach of the Code or Research Misconduct will be treated seriously. The University will use all its reasonable endeavours to consider the interests of those persons whom the Delegated Officer determines to be interested parties in the particular circumstances, which may include:

- a) the person bringing the Complaint ('the Complainant');
- b) the person against whom the Complaint is made ('the Respondent');
- c) staff and students working with a Complainant and/or a Respondent;
- d) research publications;
- e) funding bodies; and
- f) the public.

1.2 Anonymous Complaints will only be dealt with under this Procedure under circumstances associated with the [Whistleblower Policy](#).<sup>2</sup> A person making a Complaint of Research Misconduct can seek protection against victimisation under the Whistleblower Policy.

1.3 The Delegated Officer will inform law enforcement bodies (for example, the Independent Commissioner Against Corruption) and/or the relevant research funding agency of an allegation of Research Misconduct and, where required, outcomes of an investigation, in accordance with relevant laws or where the University is obliged to do so as part of an agreement with a research funding agency.

1.4 Research Misconduct Complaints and investigations will be kept confidential to the extent possible. However, it may be necessary to disclose the investigation and the Complaint to relevant witnesses and third parties such as experts, to obtain relevant information, as determined by the Delegated Officer and/or Designated Person. Disclosure will also occur where it is required by law and contractual arrangements with funding bodies.<sup>3</sup>

1.5 A Complaint involving multiple Respondents will be dealt with as a single process, unless it is determined by the Delegated Officer, to be prejudicial to one or more of the Respondents.

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<sup>2</sup> The Whistleblower Policy permits the lodgement of anonymous Complaints where the disclosure is supported by the provision of all relevant details and evidence to substantiate the disclosure.

<sup>3</sup> For funding received from the United States Public Health Services (PHS), compliance with the PHS Policies on Research Misconduct [42CFR Part 93](#) may require notification of any Research Misconduct within PHS awards to the Office of Research Integrity (ORI) immediately.

- 1.6 If at any stage in the investigation process, it is determined that:
- i. a Complaint includes allegations of Research Misconduct against other persons not identified in the original Complaint, the Delegated Officer may establish a separate process or refer the matter to the appropriate institution; or
  - ii. a Complaint includes allegations of misconduct which are not specifically related to Research Misconduct, e.g. discrimination, fraud, unfair treatment, etc., the allegations will be referred to the appropriate area.

1.7 Investigations into multiple but separate matters as identified under 1.6 (ii) may be conducted concurrently. Where this occurs, the appropriate areas will co-ordinate their approaches to minimise the impact on all parties involved.

1.8 Complaints that are determined by the Delegated Officer to be trivial, frivolous, vexatious and/or ill-founded and/or made in bad faith will not be dealt with under this Procedure, and the Complainant in such a case may be subject to disciplinary actions.

1.9 In instances where the Delegated Officer becomes aware of a potential Breach of the Code or instance of Research Misconduct, even though no formal Complaint has been lodged, he/she will determine whether to instigate the evaluation and investigation processes outlined in this Procedure.

## **2. MAKING A COMPLAINT**

2.1 A Complaint alleging a Breach of the Code or Research Misconduct may be made in writing to the Vice-Chancellor, Deputy or Pro Vice-Chancellors, Heads of School, Faculty Executive Deans, Executive Director of Research Services, or staff in the Office of Research Ethics, Compliance and Integrity. A Complaint can also be made to an Authorised Disclosure Officer under the [Whistleblower Policy](#). [Appendix 1](#) provides a procedural flowchart outlining the University's procedure for dealing with Complaints.

2.2 Before lodging a Complaint, confidential advice may be sought from [Research Integrity Advisors](#), Heads of School, the Office of Research Ethics, Compliance and Integrity, or other relevant sources.

2.3 Research Integrity Advisors can be approached in confidence to advise a staff member, research student or affiliate who is unsure about a research conduct issue and may be considering whether to make an allegation. The adviser will discuss the matter, the Code and the policies and procedures of the University, and explain the options for taking action.

## **3. INITIAL EVALUATION**

3.1 On receipt of a Complaint, the recipient of that Complaint must inform the Delegated Officer. The latter will acknowledge receipt of the Complaint in writing.

3.2 If the Delegated Officer forms the view that the Complaint concerns the safety of human and/or animal research participants and the environment, she/he will inform the Manager, Office of Research Ethics, Compliance and Integrity, who will initiate any actions required under University animal and human ethics requirements, and/or inform appropriate authorised areas, and report back to the Delegated Officer.

3.3 The Delegated Officer may request a person to conduct an Initial Evaluation, which may occur at the local level if there is no conflict of interest, to determine whether, on the face of it, there is a reasonable belief that a Breach (as a minimum) may have occurred, and whether or not the Complaint warrants the establishment of a formal Preliminary Assessment process.

Where an Initial Evaluation is undertaken at a local level, the person responsible will report back to the Delegated Officer who will determine whether the Complaint warrants further investigation under a Preliminary Assessment, or can be resolved at the local level through guidance, counselling, staff development and/or disciplinary action. The Delegated Officer will determine what further action, if any, is required.

An Initial Evaluation will be undertaken as discreetly and expeditiously as possible, without necessarily making reference to the person against whom the Complaint is made ('the Respondent').

***Responsibility: Delegated Officer***

- a) Upon receipt of a written Complaint, may request a person to conduct an Initial Evaluation.
- b) Provide written acknowledgement to the Complainant of receipt of their Complaint.
- c) Refer non-Research Misconduct allegations to the appropriate area.

#### **4. PRELIMINARY ASSESSMENT**

4.1 If the Delegated Officer forms the view that the Complaint warrants a Preliminary Assessment, he/she will conduct a Preliminary Assessment, to advise as to whether there is a [\*prima facie\*](#) case to support a Complaint of a Breach of the Code or Research Misconduct.

4.2 The Preliminary Assessment will be conducted by a Designated Person, appointed by the Delegated Officer and confirmed by the Vice-Chancellor. The Designated Person will be a senior member of the University's management structure who is experienced in research and research management.

4.3 Subject to the principles of confidentiality under the [Whistleblower Policy](#) (if applicable), the Delegated Officer will inform the Vice-Chancellor, General Counsel, the Director, Human Resources, and other interested parties as he/she determines have a need to know.

4.4 The Designated Person will take immediate steps to secure any relevant evidence including experimental material, IT records, other documents and names of witnesses, as necessary.

4.5 The Respondent will be advised of the nature of the Complaint and the Preliminary Assessment process in writing by the Delegated Officer, including the appointment of the Designated Person.

4.6 The Designated Person will undertake the Preliminary Assessment and may conduct any inquiries relevant to the allegation(s) under investigation. These inquiries will include communicating with the Respondent and may include communicating with the Complainant, particularly in an instance where the Designated Person is considering dismissing the Complaint. Where specialist understanding of the subject matter or area of practice (for

example, Aboriginal and Torres Strait Islander research) is necessary to assess the allegation, the Designated Person should consult with a subject matter expert.

4.7 The Designated Person will determine if the Complaint involves any allegations of a Breach of the Code or Research Misconduct which are required to be dealt with in accordance with this Procedure.

4.8 As part of the Preliminary Assessment, where the Designated Person determines that there is evidence of a *prima facie* case of a Breach of the Code or of Research Misconduct, he/she must determine if the Respondent admits or contests the finding.

4.9 The Respondent must be provided with the draft finding and reasons for the finding in writing, and asked to respond in writing within 10 working days of receipt of that draft finding. The Designated Person will provide the Respondent with a copy of the draft Preliminary Assessment report, unless there are factors that restrict open disclosure of the report (e.g. unreasonable disclosure of personal information of others; confidentiality obligations). If the University is restricted from providing a copy of the report, then the Respondent should be provided with sufficient detail to enable to her/him to understand the evidence taken into account by the Designated Person, and on what basis the draft finding has been determined. The Respondent's response will be incorporated into the final Preliminary Assessment report.

4.10 For University staff members, the Preliminary Assessment meets the investigation and response to allegations criteria of clause 8.2.2. of the *University of Adelaide Enterprise Agreement 2014-2017*.

4.11 Following the conclusion of the Preliminary Assessment investigation, the Designated Person will advise the Delegated Officer of his/her findings and associated reasoning in writing, recommending one of the following:

- Dismissing the Complaint or any part of it, in which case no further action will be taken regarding the Complaint or the part(s) that are dismissed;
- Determining that a *prima facie* case exists for a Breach of the Code, but not an instance of Research Misconduct; or
- Determining that a *prima facie* case exists for Research Misconduct.

4.12 Following provision of the Preliminary Assessment report, the Designated Person will play no further role in the matter, although he/she may be called to give evidence or expert opinion.

4.13 Upon receiving the Designated Person's advice, the Delegated Officer will decide, based on findings of fact, whether to accept the advice and how to proceed. The Delegated Officer must inform, at least, the Complainant(s), the Respondent, the Vice-Chancellor and the Designated Person of how he/she intends to proceed with the Complaint.

- a) Where it is determined that the case be dismissed as there is no finding of a Breach or Research Misconduct, this will be the end of the process. In cases where the Respondent is the recipient of external research funding, the Delegated Officer will advise the relevant funding agency, where appropriate, of the outcome of the Preliminary Assessment.

- b) If the Delegated Officer determines that a case exists for a Breach of the Code or Research Misconduct, he/she will notify the Respondent in writing. The Respondent will be given sufficient detail to enable them to understand and consider the precise nature of the determination, and be asked to confirm whether he/she admits or contests that determination. The Respondent will be given 10 working days from the receipt of the Delegated Officer's letter to respond in writing.

4.14 Following receipt of the Respondent's response, the Delegated Officer has the following options:

- i. If the Respondent admits to a finding of a Breach or Research Misconduct, the matter may be resolved as determined by the Delegated Officer.
- ii. If the Respondent contests a finding of a Breach of the Code, the Delegated Officer will appoint up to three University staff members to conduct a supplementary review of the matter, and provide a written report as to whether a case of a Breach of the Code exists. The review panel will be provided with a copy of the Preliminary Assessment report and its associated evidence, and may request additional information if required. The Delegated Officer will subsequently make a determination to resolve the matter, which may include dismissing the original finding or recommending a sanction proportional to the offence.
- iii. If the Respondent contests a finding of Research Misconduct, the Delegated Officer will establish either an internal institutional Research Misconduct inquiry or an independent external Research Misconduct inquiry, depending on the level of seriousness of the matter.

In each of the options above, where the Respondent is a University of Adelaide staff member, and there is a finding of a Breach or Research Misconduct, the Delegated Officer will provide a report which includes recommended sanctions proportional to the offence to the Deputy Vice-Chancellor (Academic), in accordance with clause 8.2.4 of the Enterprise Agreement. The latter will accept the finding and determine the appropriate sanctions, informing the Delegated Officer of her/his decision.

4.15 In making the decision to proceed to an internal or external Research Misconduct inquiry, the Delegated Officer must:

- take into consideration the advice received from the Designated Person;
- take into account the potential consequences for the Respondent, other parties and institutions in the event that the allegations were upheld; and
- the need to maintain public confidence in research.

In circumstances where the Delegated Officer, in his/her judgment, is of the view that the consequences of upholding the allegations would be serious, the Delegated Officer must establish an independent external Research Misconduct inquiry.

***Responsibility: Vice-Chancellor***

- a) Confirm the appointment of a Designated Person, on recommendation of the Delegated Officer.

***Responsibility: Delegated Officer***

- b) Inform the Vice-Chancellor, General Counsel, the Director, Human Resources, and other interested parties as he/she determines.

- c) Institute a Preliminary Assessment process, and refer the Complaint to the Designated Person, requesting a written report of her/his findings and associated reasoning.
- d) Inform the Respondent of the Preliminary Assessment process.
- e) On receipt of the Preliminary Assessment report, make a determination on how to proceed.
- f) In the case of a contested Breach of the Code, arrange for a supplementary review of the matter.
- g) In the case of a contested finding of Research Misconduct, establish either an internal institutional Research Misconduct inquiry or an independent external Research Misconduct inquiry, depending on the level of seriousness of the matter.

***Responsibility: Designated Person***

- h) Conduct a Preliminary Assessment of the Complaint by making any inquiries he/she considers appropriate, including communicating with the Respondent and, where necessary, the Complainant.
- i) Where a *prima facie* finding of a Breach or Research Misconduct is found, determine whether the Respondent admits or denies the finding.
- j) Provide a written report on his/her findings and associated reasoning to the Delegated Officer.

**5. INTERNAL INSTITUTIONAL RESEARCH MISCONDUCT INQUIRY**

5.1 Where the Delegated Officer has determined to appoint an internal institutional Research Misconduct inquiry panel, it will include at least:

- one member with knowledge and experience in the relevant field of research;
- one member who is familiar with the responsible conduct of research; and
- one member with experience on similar panels or relevant experience or expertise.

All members of the inquiry panel will be confirmed by the Vice-Chancellor, and one member will be appointed as inquiry panel convener by the Delegated Officer. The inquiry panel may include members internal or external to the University, taking into account that all members must be free from bias or conflicts of interest.

5.2 The Delegated Officer will prepare terms of reference for the inquiry panel, and arrange for any material they require to perform their task. The inquiry panel will be provided with a copy of the Preliminary Assessment report and its associated evidence, and may request additional information, if required.

5.3 The University will provide executive support to the inquiry panel and the Delegated Officer in undertaking administrative functions and drafting correspondence.

5.4 The Delegated Officer will inform the Respondent, the Complainant and any other relevant parties of the decision to conduct the internal institutional Research Misconduct inquiry.

5.5 Any person appearing before an internal institutional Research Misconduct inquiry panel is entitled to be accompanied and/or represented by a support person, although legal representation is not permitted.

5.6 The inquiry panel will:

- act expeditiously, fairly, impartially and confidentially, and ensure the inquiry is demonstrably conducted free from bias or preconception or conflicts of interest;
- consider all material relevant to the matter, and may request additional material;
- accord the Respondent procedural fairness including the opportunity for a fair hearing, and the option to make representations and challenge evidence in writing and in person;
- interview any other persons as determined by the inquiry panel;
- permit the University and Respondent, and if they so request, their representatives (or support person in the case of the Respondent), to be present at all hearings where evidence is taken or submissions are being made; and,
- prepare a written report for the Delegated Officer detailing their findings of fact and associated reasoning, providing a determination as to whether:
  - i. the Complaint should be dismissed; or
  - ii. there has been a Breach of the Code, but not an instance of Research Misconduct; or
  - iii. there has been a case of Research Misconduct.

5.7 If the Respondent chooses not to make representations to, or appear before, the inquiry panel, the inquiry will continue in their absence.

5.8 If during the course of the internal institutional inquiry, the Delegated Officer is advised by the inquiry panel or becomes aware at any point in the process that the potential consequences of the Complaint allegation(s) are more serious than originally anticipated, he/she may disband the internal inquiry and replace it with an independent external inquiry.

***Responsibility: Vice-Chancellor***

- a) Confirm the appointment of inquiry panel members, on recommendation of the Delegated Officer.

***Responsibility: Delegated Officer***

- b) Appoint members, including a convenor, to an internal institutional Research Misconduct inquiry panel, and prepare inquiry terms of reference.
- c) Inform the Respondent, the Complainant and other relevant parties of the decision to conduct the internal institutional Research Misconduct inquiry.
- d) Provide the internal institutional Research Misconduct inquiry panel with terms of reference and arrange for any material they require to perform their task.

## **6. INDEPENDENT EXTERNAL RESEARCH MISCONDUCT INQUIRY**

6.1 Where the Delegated Officer has determined to appoint an independent external Research Misconduct inquiry panel, that panel will include a minimum of three members, including:

- one member who is legally qualified or has extensive experience as a member of a tribunal or similar body; and
- one member with knowledge and research experience in a relevant, related field of research, but not directly in the research area of the allegations.

All members of the inquiry panel will be confirmed by the Vice-Chancellor, and one member will be appointed as inquiry panel convenor by the Delegated Officer. Panel members must not be



employed by or have any recent or current dealings with the University, and must be free from conflicts of interest and any reasonable perception of bias.

6.2 The Delegated Officer will prepare terms of reference for the external Research Misconduct inquiry panel, and arrange for any material they require to perform their task.

6.3 The inquiry panel will:

- conduct itself in accordance with the terms and conditions set out in the Code;
- consider all material relevant to the matter, and may request additional material. The inquiry panel will be provided with a copy of the Preliminary Assessment report and its associated evidence, and may request additional information if required;
- accord the Respondent procedural fairness including the opportunity for a fair hearing, and the option to make representations and challenge evidence in writing and in person;
- interview any other persons as determined by itself;
- ensure the inquiry is demonstrably conducted free from bias or preconception or conflicts of interest;
- permit the University and Respondent, and if they so request, their representatives (or support person in the case of the Respondent), to be present at all hearings where evidence is taken or submissions are being made;
- determine whether the inquiry is open to the public or conducted in private; and
- prepare a written report for the Delegated Officer detailing their findings of fact and associated reasoning, as to whether:
  - i. the Complaint should be dismissed; or
  - ii. there has been a Breach of the Code, but not an instance of Research Misconduct; or
  - iii. there has been a case of Research Misconduct.

6.4 The Respondent is entitled to legal representation when appearing before an independent, external Research Misconduct inquiry panel.

6.5 If the Respondent chooses not to make representations to, or appear before, the inquiry panel, the inquiry will continue in their absence.

6.6 The findings of an independent, external Research Misconduct inquiry should be made available to the public, with any necessary redactions to maintain confidentiality or privacy.

6.7 The University may provide executive support to the inquiry panel and the Delegated Officer in undertaking administrative functions and drafting correspondence.

***Responsibility: Vice-Chancellor***

- a) Confirm the appointment of inquiry panel members, on recommendation of the Delegated Officer.

***Responsibility: Delegated Officer***

- b) Appoint members, including a convenor, to an independent external Research Misconduct inquiry panel, and prepare inquiry terms of reference.
- c) Inform the Respondent, the Complainant and other relevant parties of the decision to conduct the independent external Research Misconduct inquiry.

- d) Provide the independent external Research Misconduct inquiry panel with terms of reference and arrange for any material they require to perform their task.

## 7. OUTCOMES

7.1 The Delegated Officer will accept as final the findings of a duly constituted Research Misconduct inquiry panel, as defined by this Procedure.

7.2 Based on the findings of the Research Misconduct inquiry panel, the Delegated Officer will:

(a) for **staff members** where there is a finding of a Breach or Research Misconduct, provide a report which includes recommended sanctions to the Deputy Vice-Chancellor (Academic), in accordance with clause 8.2.4 of the Enterprise Agreement. The latter will accept the finding and determine the appropriate sanctions, informing the Delegated Officer of her/his decision.

(b) for **research students** determine whether the findings should be referred to the Student Misconduct Tribunal Chair for action in accordance with the Student Misconduct Rules.

(c) for **other parties** (including Affiliates and Titleholders) determine whether the findings should be referred to the employing institution and/or funding body.

7.3 Both the Respondent and the Complainant will be advised in writing by the Delegated Officer of the findings of the Research Misconduct inquiry.

7.4 Where it is determined a Complaint is to be dismissed, the University will make reasonable efforts to restore the reputation of the Respondent, if required.

7.5 If the Delegated Officer determines that a member of University staff or a student enrolled in a course at the University has improperly made a Complaint, he/she may refer the matter to the Complainant's supervisor (for staff) to be dealt with under University of Adelaide Staff Complaints Procedure, or to an authorised officer (for students) as per the 'Student Misconduct Rules', to determine whether any further action should be taken.

7.6 The Delegated Officer will report all findings of Research Misconduct, and actions taken by the University in response to them, to the Complainant, the Vice-Chancellor, relevant senior University managers, relevant funding agencies, journals, collaborating institutions, researchers, professional registration bodies, the general public and other relevant parties, as determined by the Delegated Officer.

7.7 Following the completion of a Research Misconduct investigation, the Delegated Officer will discuss and document any opportunities for improvement with relevant parties.

### ***Responsibility: Delegated Officer***

- a) Where a finding of Research Misconduct is determined and is accepted by the Respondent, implement actions against the Respondent, proportionate to the offence or, where required, refer the decision for disciplinary action to the Deputy Vice-Chancellor (Academic).
- b) Inform all relevant parties of the outcome of any Research Misconduct inquiry.

## 8. APPEALS

8.1 The finding of a Research Misconduct inquiry (as defined in sections 5 and 6 of this Procedure), having been accepted by the Delegated Officer, may be appealed by the Respondent. This must be done in writing to the Deputy Vice-Chancellor (Academic) within 10 working days of the Respondent being informed of the inquiry outcome by the Delegated Officer.

8.2 The Deputy Vice-Chancellor (Academic) will undertake a process to consider whether the finding was arrived at reasonably, taking into account the facts of the matter and the procedure followed. He/she will report the outcome of the appeal to the Vice-Chancellor for final determination.

8.3 The recommendation for disciplinary action associated with a finding of Research Misconduct may be appealed:

- a) by staff in accordance with the University of Adelaide Enterprise Agreement (as amended), and
- b) by students in accordance with the Student Misconduct Rules.

Nothing in this Procedure prevents a person from making a Complaint about the University's application of this Procedure to the Australian Research Integrity Committee.

***Responsibility: Deputy Vice-Chancellor (Academic)***

- a) Manage the appeals process relating to findings of Research Misconduct.

## DEFINITIONS

**Code**

Refers to the *Australian Code for the Responsible Conduct of Research*.

**Complaint**

A written document containing an allegation or allegations of a Breach of the Code and/or Research Misconduct.

**Complainant**

The person or persons lodging a Complaint.

**Delegated Officer**

The Delegated Officer is appointed by the Vice-Chancellor to oversee and carry out, where appropriate, the functions of the CEO under the Code, in accordance with this Procedure, and defined as an 'area manager' in the University of Adelaide Enterprise Agreement. This person will normally be the Provost and Deputy Vice-Chancellor and Vice-President (Research), and all Research Misconduct Complaints will be referred to this person for action.

**Designated Person**

The Designated Person is appointed by the Delegated Officer, and confirmed by the Vice-Chancellor, to manage the Preliminary Assessment of all written Complaints of Research

Misconduct. He/she will be a senior member of the University's management structure who is experienced in research and research management.

### **Initial Evaluation**

A brief evaluation to advise the Delegated Officer as to whether a Complaint warrants the establishment of a formal Preliminary Assessment process.

### **Internal Institutional Research Misconduct Inquiry**

An investigation, established by the Delegated Officer following the conclusion of a Preliminary Assessment, where the Delegated Officer accepts a *prima facie* finding of Research Misconduct which is denied by the Respondent.

### **Independent External Research Misconduct Inquiry**

An investigation, established by the Delegated Officer following the conclusion of a Preliminary Assessment, where the Delegated Officer accepts a *prima facie* finding of Research Misconduct which is denied by the Respondent, and where he/she judges that the potential consequences for the parties involved, and for the need to maintain public confidence in research, are likely to be serious.

### **Preliminary Assessment**

An initial investigation undertaken by the Designated Person to advise the Delegated Officer as to whether there is a *prima facie* case to support a Complaint of Research Misconduct.

### **Prima Facie**

Literally meaning 'at first sight', this term refers to a case where there appears to be sufficient evidence to support a case.

### **Research**

Original investigation undertaken to gain knowledge, understanding and insight.

### **Research Integrity Advisors**

Research Integrity Advisors are available to provide confidential advice to staff and students about what constitutes Research Misconduct, the rights and responsibilities of a potential Complainant, and the procedures for dealing with Complaints of Research Misconduct within the University. A list of Research Integrity Advisors is available at <http://www.adelaide.edu.au/research/integrity/advisors/>.

### **Respondent**

The person against whom a Complaint has been made.

### **Trivial, frivolous, vexatious, ill-founded and/or bad faith Complaints**

- "trivial" means trifling; inconsiderable; of small worth or importance. Trivial does not require an assessment of reasonableness of the matter.
- "frivolous" means lacking a legal basis or legal merit; a matter that has little prospect of success; not serious, not reasonably purposeful.
- "vexatious" means without reasonable or probable cause or excuse; harassing; annoying; instituted maliciously or on the basis of improper motives; intended to harass or annoy.
- "bad faith" means brought with an ulterior motive. For example, motivated by ill will, hostility, malice, personal animosity, lack of fairness or impartiality, lack of total honesty

such as withholding information. It includes serious carelessness, recklessness and intentional fault. It can be established by direct or circumstantial evidence.

### Whistleblower

- A person who makes or attempts to make an appropriate disclosure of wrongdoing and wants to avail themselves of protection against victimisation. (Refer to the Whistleblower Policy).

<b>RMO File/Document Number</b>	2016/745
<b>Policy Custodian</b>	Provost and Deputy Vice-Chancellor and Vice-President (Research)
<b>Responsible Officer</b>	Pro Vice-Chancellor (Research Operations)
<b>Endorsed by</b>	Academic Board on 5 April 2017
<b>Approved by</b>	Vice-Chancellor and President on April 2017
<b>Related Documents and Policies</b>	ARC Research Integrity and Misconduct Policy Australian Code for the Responsible Conduct of Research Australian Code for the Care and Use of Animals for Scientific Purposes, 8th edition Australian Institute for Aboriginal and Torres Strait Islander Studies Authorship Policy Behaviour and Conduct Policy Fraud and Corruption Control Policy and Plan Guidelines for Ethical Research in Australian Indigenous Studies National Statement on Ethical Conduct in Human Research NHMRC Policy on Misconduct related to NHMRC Funding Research Data and Primary Materials Policy Responsible Conduct of Research Policy Student Misconduct Rules University of Adelaide Enterprise Agreement University Records Policy Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research Whistleblower Policy
<b>Related Legislation</b>	Independent Commissioner Against Corruption Act 2012 (SA) Whistleblower Protection Act 1993 (SA)
<b>Superseded Policies</b>	Procedure for Managing Complaints of Research Misconduct/Serious Misconduct and Breaches of the Code
<b>Date Effective</b>	6 April 2017
<b>Next Review Date</b>	5 April 2020
<b>Contact for queries about the Procedure</b>	Research Integrity Officer

## Appendix 1: Research Misconduct Procedure flowchart

DO = Delegated Officer; DP = Designated Person; EA = Enterprise Agreement (as amended); RM = Research Misconduct; ORECI = Office of Research Ethics, Compliance and Integrity

