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Contraventions of the Responsible Conduct of Research Policy: Procedural Guidelines

These guidelines should be read in conjunction with the University's
Responsible Conduct of Research Policy

Contents

Introduction 3
Purpose and Application 3
Definitions 3
Examples of contraventions 4
Principles 6
Investigation Process 7
Review and External Referral 10

Introduction

(1) These guidelines are the Contraventions of the Responsible Conduct of Research Policy Procedural Guidelines and align with Clause 51 of Western Sydney University's Academic Staff Enterprise Agreements and do not apply to casual employees or employees serving a probationary period.

Purpose and Application

(2) These guidelines:

- support the research misconduct process provided in the WSU Academic Staff Agreement
- provide further examples of potential breaches of the Responsible Conduct of Research Policy
- outline the principles that will guide investigations into potential research misconduct.

Any conflict between the Guidelines and the Responsible Conduct of Research Policy or Academic Staff Agreement is unintentional and will be resolved in favour of the Policy or the Agreement.

Definitions

(3) The following definitions apply to these guidelines:

Assessment Officer means the staff member to whom a suspected contravention of the Policy is referred by the Deputy Vice-Chancellor Research and Innovation (DVCRI) for preliminary assessment under subclause 45.18. An Assessment Officer may be the relevant Dean, Institute Director, or Academic Unit Director of Research, or an alternative senior member of staff with experience in research.

Breach means a contravention of the Policy that does not amount to Research Misconduct

Policy means the University's Responsible Conduct of Research Policy as amended or replaced from time to time.

Disciplinary Action may include one or more of the following:

(i) formal counselling

(ii) staff development (including training)

(iii) written warnings

(iv) withholding an increment for up to one year

(v) demotion by one or more classification levels or increments

(vi) termination of employment (in cases of Research Misconduct only).

DVCRI means the Deputy Vice-Chancellor Research and Innovation

Research Misconduct means a serious breach of the Policy that is also intentional, reckless, or negligent. A repeated or persistent Breach may also amount to Research Misconduct

Examples of contraventions

(4) Examples of contraventions of the Responsible Conduct of Research Policy that may constitute a Breach or Research Misconduct include but are not limited to the following:

- **Intentional infringements** of the Policy or those which occur through gross or persistent neglect.
- **Not meeting required Research Standards**
    - Conducting research without required ethics approvals (and failing to conduct research as approved by an appropriate ethics review body), permits or licenses.
    - Deliberate inclusion of inaccurate or misleading information relating to research activity and publications in: curriculum vitae, grant applications, job applications or public statements; or the failure to provide relevant information.
    - Misuse of research funds.
    - Willful concealment or facilitation of breaches (or potential breaches) of the Policy by others.
- **Publication and Dissemination of Research**
    - The fabrication, falsification or misrepresentation of research data or source material in a research output or any communication, including social media and grant applications including claiming results where none have been obtained.
    - Failure to maintain records required by an export control body as a condition of publication and dissemination
    - Failure to take active, reasonable and timely steps to correct the public record upon becoming aware of errors or misleading information in their published research outputs public dissemination of research (e.g., via social media) that is yet to be tested in peer review without providing an appropriate caution or caveat.
    - Failure to honour a restriction on publication or dissemination imposed by a sponsor, ethics or biosafety review body or other approval body (including an export control authority).
- **Plagiarism**
    - A form of academic misconduct that involves submitting work that is not the author's own; or submitting ideas, words, theories, concepts, research data and source material taken from a source and presented without appropriate acknowledgment
    - Duplicate publication (also known as redundant or multiple publication, or self-plagiarism) without acknowledgment of the source
- **Research Data Management**
    - Failure to retain clear, accurate, secure and complete records of all research including research data and primary materials

- Failure to appropriately maintain research records.
- Inappropriate destruction of research records, research data and/or source material.
- Inappropriate disclosure of, or access to, research records, research data and/or source material.
- Failure to notify the institution and relevant authorities in a timely manner of a data breach or instance of inappropriate access to data held by the researcher.
- Failure to adhere to the conditions of any institutional policy or project-specific approvals that relate to the retention, sharing or destruction of research data or primary materials
- Selective retention of research data or primary materials so as to hinder the verifiability of a research output or access request
- Failure to apply appropriate security controls to research data or primary materials
- Failure to obtain necessary approvals or acting inconsistently with a condition of any approval granted in relation to the management of research data or primary materials.

- **Supervision**
  - Failure to provide adequate guidance or mentorship on responsible research conduct to researchers or research trainees under their supervision.
  - Failure by a supervisor to provide adequate guidance or mentorship on the responsible conduct of research to researchers or research trainees under their supervision
  - Demanding or accepting authorship of a research output on the basis of supervision, where the individual does not also satisfy the authorship criteria.
- **Authorship**
  - Failure to acknowledge the contributions of others fairly.
  - Misleading ascription of authorship, including failure to offer authorship to those who qualify, attributing authorship to individuals without their consent
  - The listing of authors without their permission; attributing work to others who have not in fact contributed to the research; and the lack of appropriate acknowledgment of work primarily produced by a research student/trainee or associate. It does not include honest errors or honest differences in interpretation or judgments of data.
  - Publishing research without the final approval of the attributed authors
  - Failure to comply with an authorship agreement
  - Making false claims about the authorship in a grant application.

- **Conflicts of Interest**
    - Failure to declare or manage conflicts of interest in a timely manner
    - Failing to abide by any decisions as to the management of a conflict of interest.
- **Peer Review**
    - Failure to conduct peer review responsibly
    - Taking advantage of knowledge obtained through peer review processes
    - Disclosing the content or outcome of peer review processes
- Risking the safety of human participants or the well-being of animals or the environment
- Other practices that seriously deviate from those commonly accepted within the research community for proposing, conducting and reporting research.

Principles

(5) The principles of procedural fairness will apply to managing and investigating potential contraventions of the Responsible Research Conduct Policy. All investigations undertaken will be:

- ***Proportional:*** to the extent of the potential contravention of the Policy.
- ***Fair:*** by affording procedural fairness to respondents and where appropriate to complainants and others who may be adversely affected by any investigation.
- ***Impartial:*** where any potential, perceived, or declared conflicts of interests of investigators and decision-makers are appropriately managed.
- ***Timely:*** to avoid undue delays and impact on those involved (subject to the timing of the complaint).
- ***Transparent:*** Accurate records will be maintained for all parts of the process and information about processes used for managing contraventions of the Responsible Research Conduct Policy will be readily available for all staff and students engaged in research.
- ***Confidential:*** Information will be treated as confidential and not disclosed unless required.
- ***Consistency:*** All concerns will be managed through a centrally coordinated triage process to ensure consistency in decision-making and application of these Guidelines.
- ***Protection of Participants:*** The University will take reasonable steps to protect complainants, respondents, and other involved parties from adverse consequences, including maintaining confidentiality and managing risks of reprisal where appropriate.
- ***Appropriate Escalation:*** Matters will be directed to the most appropriate University process based on their nature, seriousness, and context.

Investigation Process

(6) The processes used to manage contraventions of the Responsible Conduct of Research Policy are provided in Table 1 and in Figure 1.

Table 1: Managing Contraventions of the Responsible Conduct of Research Policy

Step	Process*
Reporting	Suspected contraventions of the Responsible Conduct of Research Policy must be promptly reported via one of the following channels: (a) the relevant Academic Unit Director of Research (or equivalent); (b) the Research Office via research.integrity@westernsydney.edu.au; or (c) the Complaints and Misconduct Reporting Portal; or (d) other University functions, including Ethics Secretariat or Conduct and Investigations Office (CIO), which may receive and refer concerns. All concerns are centrally coordinated by the Research Integrity and Compliance team, who then consults with the Director of Research Integrity and Infrastructure and Director of Operations for initial triage of the concern prior to consideration by the DVCRI.
Preliminary Assessment	If a determination is made that a report relates to a potential contravention of the Policy by an Employee, the DVCRI will refer the matter to an Assessment Officer for preliminary assessment. In carrying out the preliminary assessment, the Assessment Officer will gather and evaluate information relating to the reported conduct to determine whether, if proven, the conduct would amount to a contravention of the Policy. The Assessment Officer may also discuss the matter with the Employee, in which case the Assessment Officer will provide the Employee with: (a) written particulars of the potential contravention in sufficient detail for the Employee to understand the nature of the contravention; (b) an opportunity to respond in writing within a nominated timeframe; and (c) the option to meet with the Assessment Officer, accompanied by the Employee's Representative. Following conclusion of the preliminary assessment, the Assessment Officer will provide the DVCRI with written advice regarding the following: (a) a summary of the process undertaken by the Assessment Officer; (b) an inventory of the facts and information gathered by the Assessment Officer;

	(c) an evaluation of the facts and information gathered by the Assessment Officer; (d) how the suspected contravention relates to the Policy and/or the University's research processes; and (e) the Assessment Officer's recommendation(s) for further action.
Determination	The DVCRI will consider the Assessment Officer's report provided under subclause 51.18 and determine whether the matter should be: (a) dismissed; (b) resolved at the Employee's academic unit level, either with or without corrective actions; (c) referred for action in accordance with other University processes; or (d) referred for Research Investigation.
Research Investigation	The purpose of the Research Investigation is to determine whether, having regard to the evidence and on the balance of probabilities, the Employee has contravened the Policy. - If a matter is referred for Research Investigation, the DVCRI will: (a) prepare a clear statement of allegations; and (b) develop the terms of reference for the investigation. - The Research Investigation will: (a) examine the facts and information gathered as part of the preliminary assessment; and (b) gather and examine any further relevant evidence as required. - The Research Investigation (any investigator must be experienced in research and/or research management) may be carried out by: (a) an investigator; or (b) an investigation panel (Panel). - A Panel may comprise members from within, and external to, the University. The size and composition of the Panel will depend on: (a) the potential consequences for the Employee; (b) the seniority of the Employee; and (c) the need to maintain public confidence in research. - In selecting Panel members, the DVCRI will consider: (a) the expertise and skills required of a person appointed as Panel Chair; (b) the appropriate level of experience and expertise in the relevant

	discipline area(s); (c) the need for a person with prior experience of similar investigation panels or relevant experience, knowledge, and understanding of the responsible conduct of research; (d) the need for Panel members to be free from conflicts of interest or bias; and
Consideration and Final Determination	The DVCRI will consider the Research Investigation report. If the DVCRI determines that: (a) the Employee has not contravened the Policy, the matter will conclude and the DVCRI will advise the Employee accordingly in writing; or (b) the Employee has contravened the Policy, the DVCRI will determine what Disciplinary Action is to be imposed and advise the Employee accordingly in writing, provided that: (i) termination of employment is available in cases of Research Misconduct only; and (ii) if the DVCRI determines that the Employee's employment should be terminated for Research Misconduct, they will refer the determination to the Vice-Chancellor for approval If the DVCRI refers a determination to the Vice-Chancellor for approval pursuant to subclause 51.32(b)(ii), the Vice-Chancellor will: (a) provide the Employee with 5 working days to respond to a show cause letter; (b) have regard to any matters submitted by the Employee in their response to the show cause letter; and (c) advise the Employee in writing of the Vice-Chancellor's determination within 10 working days of receiving the Employee's response to the show cause letter (if any).

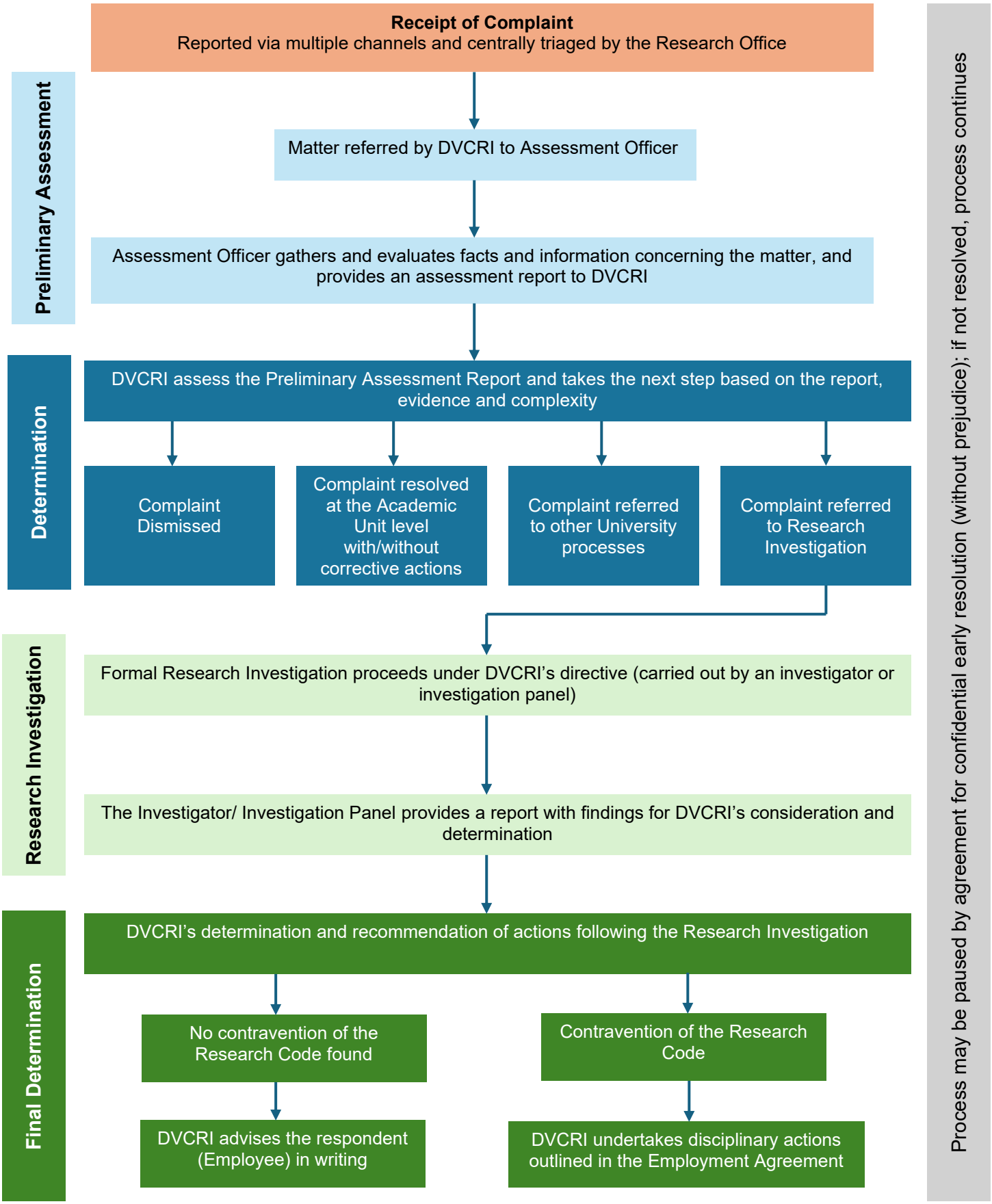
* **Please note:**

- At any stage of this process, the University and the Employee may agree to place the process on hold for up to 10 working days (or longer period as agreed) and enter into confidential and without prejudice discussions with a view to reaching a mutually agreed early resolution of the matter.
- If the University and the Employee cannot reach a mutually agreed early resolution of the matter within the agreed timeframe, the process will be resumed.
- Unless otherwise agreed, any information a party provides during attempted agreed early resolution cannot be relied upon by the other party for any other purpose.

Review and External Referral

(7) Where appropriate, concerns regarding the procedural conduct of an investigation may be referred for review in accordance with applicable University processes or enterprise agreement provisions.

The University may also, where required or appropriate:

- notify or report matters to relevant external bodies (including funding agencies, regulators, or publishers);
- notify another university where an individual involved in a matter under assessment or investigation is employed by that institution, to support coordination and avoid duplication of investigative effort; and
- take appropriate steps to correct the public record.

Appendix: Research Investigation Process Workflow