

Procedure Title: Managing Potential Breaches of the Code

Procedure Owner: Deputy Vice Chancellor (Research)

This procedure ensures the University complies with its obligations under the Australian Code for Responsible Conduct of Research and supports the operationalisation of the Conducting Research with Integrity Policy.

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1. INTENT

The purpose of this procedure is document the process for managing and assessing potential breaches of the [Australian Code for the Responsible Conduct of Research, 2018](#) (the Code).

2. ORGANISATIONAL SCOPE

This procedure applies to all University staff including adjunct, honorary and visiting academic appointments. If it is found that a Breach has occurred, the matter will be referred to the individual's employing institution for appropriate action.

Potential Breaches of the Code by students (including Higher Degree by Research students) are managed under the [Academic Misconduct Rules \(Students\)](#). When a Higher-Degree by Research student is also a staff member, the investigation will consider their role in the context of the Concern raised.

The [Conducting Research with Integrity Policy](#) and this procedure are to be read in conjunction with an individual's employment contract or letter of appointment, and the Enterprise Agreement if relevant. The applicable terms of an individual's employment contract or letter of appointment, and the Enterprise Agreement if relevant, will prevail over the terms of this procedure to the extent of any inconsistency.

3. DEFINITIONS

The [University Glossary](#) and the following definitions apply to this procedure:

TERM	DEFINITION
Assessment Officer	A person appointed by the Designated Officer or nominee to conduct a preliminary assessment.
Breach	<p>A failure to meet the principles and responsibilities as set out in the Code, including:</p> <ul style="list-style-type: none"> • Failure to meet required research standards • Fabrication, falsification, misrepresentation • Plagiarism • Research data mismanagement • Inadequate supervision of other researchers, including higher degree by research candidates • Inappropriate authorship attribution • Conflicts of interest • Peer review mismanagement <p>Breaches occur on a spectrum, from minor to serious.</p>
Code	The Australian Code for the Responsible Conduct of Research 2018.
Complainant	A person who raises a Concern about the conduct of research
Concern	A claim alleging that a potential breach of the Code may have occurred.
Designated Officer	The person holding the position of Director, Research Services (or substantially equivalent role), or a person acting in that position, or their nominee.
Procedural Fairness	<p>Procedural fairness encapsulates the opportunity to be heard, that decision makers do not have a personal interest in the outcome and that decisions are based on evidence.</p> <p>Approaches are intended to be proportional, fair, impartial, timely (relative to the case), transparent and confidential.</p>
Research Integrity Advisor	A Person nominated by the Deputy Vice-Chancellor (Research), or their delegate, who has knowledge of the Code and University processes.
Research Misconduct	A serious Breach which is also intentional or reckless or negligent, which may amount to misconduct or serious misconduct under the Enterprise Agreement.
Research Staff	ECU staff involved in research including adjunct, honorary and visiting academic appointments.
Respondent	The Research Staff member who is the subject of the relevant Concern.
Support person	A support person is someone chosen by a complainant or respondent to attend and observe meetings, provide emotional support, clarify processes, and take notes. They cannot act as an advocate.

4. PROCEDURE CONTENT

Principles

- 4.1. Consistent with the University's values of integrity, respect, rational inquiry, personal excellence, and courage, Research Staff must ensure that their research conduct and practice reflects the principles and responsibilities set out in the Code.
- 4.2. In dealing with Concerns of a Breach, the University will follow the Code's principles of procedural fairness, transparency, timeliness, confidentiality, proportionality, and impartiality.
- 4.3. The University supports the timely disclosure and reporting of Concerns through the [Research Complaint Form](#). The University will take appropriate action in respect of a complainant where a Concern is deemed by the Designated Officer to be frivolous or vexatious.
- 4.4. The University and its staff will take reasonable steps to ensure that information obtained in following these procedures is kept confidential wherever practicable and accessed only by those with a legitimate need to the information. This is subject to the University's statutory, contractual, reporting, auditing, and funding obligations.
- 4.5. Any action or penalty imposed under this policy or its related procedures, may be suspended if required by law, or if the matter is investigated by an external agency, providing reasons to an affected person where practicable.
- 4.6. If any investigation uncovers activities that would be considered suspected criminal activity, or acts of fraud, corruption and misconduct, as defined by the Fraud and Misconduct Prevention and Management Guidelines, consistent with those guidelines, such activities will be reported in a timely manner to the Director, Strategic and Governance Services Centre and the Director, People and Culture.

Advice available prior to raising a formal Concern

- 4.7. A person considering raising a Concern may obtain advice from a [Research Integrity Advisor](#) whose role is to promote the responsible conduct of Research, and to provide advice on Research integrity processes and options for reporting Concerns. Research Integrity Advisors are not responsible for assessing or investigating research integrity Concerns and will not contact potential Respondents. A list of the University's Research Integrity Advisors can be found [here](#).

Raising a Concern of a potential Breach

- 4.8. Concerns should be raised in a timely manner, through the [Research Complaint Form](#), or by email to research.integrity@ecu.edu.au providing all information or evidence, relevant to the Concern. Concerns may be raised anonymously however this limits the University's ability to seek further information or provide an outcome.
- 4.9. Written acknowledgement of the Concern raised will be provided to the complainant.
- 4.10. The Designated Officer may decide to;
 - a. **refer** the Concern to an appropriate staff member to be dealt with in accordance with the relevant University policy if the matter does not relate to Research or to a potential Breach;

- b. **dismiss** the Concern if the matter does not relate to a potential Breach, if there is insufficient information, or it is frivolous or vexatious; or
- c. if it is deemed to be an administrative or technical breach (without significant consequence, risk or finding of Research Misconduct), **finalise the matter** with appropriate recommendations (copied to relevant Line Manager at the Designated Officer's discretion); or
- d. request the Assessment Officer to conduct a **preliminary assessment** of the matter.

The Designated Officer may seek further advice prior to making a decision. The Deputy Vice-Chancellor (Research) may be notified of the Concern at any time, in particular if the matter is considered to pose a risk to the University's reputational or commercial interests.

Preliminary Assessment

- 4.11. An Assessment Officer conducting a preliminary assessment must not have a conflict of interest with respect to the subject matter or the persons involved in the Concern, that could reasonably affect the preliminary assessment.
- 4.12. The Assessment Officer will:
 - a. gather and evaluate facts and information relevant to the concern;
 - b. notify the Respondent in writing:
 - i) that they are subject to a Concern involving a potential Breach;
 - ii) that a preliminary assessment is being conducted; and
 - iii) provide the Respondent with sufficient information to enable them to respond to the Concern; and
 - c. provide the Respondent with a reasonable opportunity (usually no less than 10 working days, unless requested by the Respondent, or unless it is appropriate for the matter to be dealt with more urgently) to meet with the Assessment Officer and/or submit a concise written response (at the Respondent's discretion) to the Concern. The Respondent may elect to bring a support person to be present at any meeting arranged by the Assessment Officer, however the Respondent must not be legally represented at a meeting.
- 4.13. In conducting a preliminary assessment, the Assessment Officer may:
 - a) seek internal or external advice subject to the principles relating to record keeping and disclosures section of this procedure;
 - b) seek legal advice from within the University;
 - c) with the Designated Officer's approval, include additional respondents to the assessment, if supported by the evidence. These individuals must be notified in writing to allow them a reasonable opportunity to respond; and
 - d) seek the Designated Officer's approval to include additional Concerns that arise during the assessment, to which the Respondent must have a reasonable opportunity to respond to.

- 4.14. The University may continue to conduct a preliminary assessment if a Respondent has left the University.
- 4.15. The Assessment Officer will, in a timely manner (in proportion to the matter), provide the Designated Officer with a preliminary assessment report. The report will document the Concern, how the potential Breach relates to the principles and responsibilities of the Code and/or the University processes, a summary of the report process undertaken, an inventory and evaluation of the facts and information that was gathered and analysed, and recommendations for further action. The preliminary assessment report must result in the findings of fact to enable an assessment of whether a Breach has occurred.
- 4.16. The Designated Officer will consider the preliminary assessment report and will:
 - a. **refer** the matter back to the Assessment Officer for further inquiry;
 - b. **dismiss** the matter on reasonable grounds, including where there is insufficient information to proceed, the matter is frivolous or vexatious, or the matter does not warrant further investigation. Where a Concern is dismissed, the Designated Officer may still make recommendations or actions for suggested improvements;
 - c. if the Concern amounts to a **Breach**, determine whether any recommendations or actions are to be undertaken; or
 - d. if the Concern amounts to **Research Misconduct**, refer the matter with sufficient written information to the school Executive Dean or Line Executive for appropriate action, including disciplinary action.
- 4.17. The Designated Officer will notify the respondent and their line manager in writing, of the outcome of the preliminary assessment. Where the Designated Officer makes a determination that the Concern amounts to a Breach, the Designated Officer will also notify the Deputy Vice Chancellor (Research), and provide recommendations or corrective actions to be undertaken.
- 4.18. If the Concern amounts to a Breach, the Respondent may, within 10 working days of the Designated Officer making a decision, make a concise written request that the Deputy Vice-Chancellor (Research) review and remake the decision. A request for review can only be made on grounds that there has been a lack of procedural fairness, that University policies, procedures, and/or guidelines have not been followed, or the Assessment Officer's report or the Designated Officer's decision was affected by discrimination, prejudice, or bias. The grounds of review must be specified. The Deputy Vice-Chancellor (Research) will notify the Designated Officer and the Respondent of their decision in writing as soon as practicable.
- 4.19. The school Executive Dean or Line Executive is responsible for notifying the Designated Officer of the outcome of any matter referred to them as research misconduct within 10 working days of the matter being finalised by the University.
- 4.20. The Deputy Vice-Chancellor (Research), in conjunction with the Designated Officer, will take steps to address any systemic issues that are identified during a preliminary assessment or subsequent investigation, upon which the University could improve.

Record keeping and disclosure

- 4.21. All decisions made in accordance with this procedure should be recorded in writing.
- 4.22. Staff responsible for managing research integrity Concerns or conducting preliminary assessments or other actions in accordance with this procedure, are to maintain full and

adequate records in accordance with University policies, which are to be stored on a formal restricted access file. A finding of Breach, and any corrective action imposed, will be placed on the employee's personal file subject to direction from People and Culture.

- 4.23. All correspondence, documentation and assessments associated with a Concern are to be treated as confidential, and be accessible only by staff who have a legitimate need, subject to:
- a) the respondent's right to procedural fairness;
 - b) the University's statutory or legal obligations;
 - c) the University's internal and external contractual reporting and audit obligations (including to research funders and collaborators);
 - d) appropriate communications with a complainant, as determined by the Designated Officer; and
 - e) correction of the public record (see below).
- 4.24. The Designated Officer will be required to approve any disclosure to third parties of matters pertaining to a preliminary assessment or decision or report made under this procedure. This includes contact with third parties during a preliminary assessment or notifying funding bodies and collaborators where required.

Correction of the public record

- 4.25. If a matter is dismissed, the Designated Officer may make reasonable efforts to restore an affected party's reputation in consultation with the Respondent.

Managing conflicts of interest

- 4.26. Where an Assessment Officer has, or discovers that they have, a conflict of interest that could reasonably affect the preliminary assessment, the Designated Officer or Deputy Vice-Chancellor (Research) may appoint a new Assessment Officer. The new Assessment Officer must conduct the preliminary assessment exercising their own independent judgment but may rely upon documentation and other evidence previously collected.
- 4.27. Where the Designated Officer, a school Executive Dean, or a line executive has a conflict of interest, or their position is vacant, the Deputy Vice-Chancellor (Research) or their nominee will undertake the relevant responsibilities.
- 4.28. If the Deputy Vice-Chancellor (Research) has a conflict of interest, that could reasonably affect the matter, the Vice-Chancellor or their nominee will undertake their relevant responsibilities.

Implementation

- 4.29. This procedure applies to any Concerns received by the Designated Officer on or after the effective date shown below, irrespective of when the alleged conduct occurred.

5. ACCOUNTABILITIES AND RESPONSIBILITIES

The Procedures Owner is *the* Deputy Vice Chancellor of Research, and has overall responsibility for the content of these procedures and their operation.

The Manager of Research Governance is responsible for currency of information and provision of advice relating to these procedures.

6. RELATED DOCUMENTS

Other documents which are relevant to the operation of this procedure are as follows:

- [Australian Code for the Responsible Conduct of Research 2018](#)
- [ARC Research Integrity Policy 2019](#)
- [NHMRC Research Integrity and Misconduct Policy 2019](#)
- [Conducting Research with Integrity Policy](#)
- [Managing and Reporting Breaches of the Code – ECU’s SharePoint site](#)
- [Authorship, Publication of Research, and Peer Review Guidelines](#)
- [Staff Code of Conduct](#)
- [Fraud and Misconduct Prevention and Management Guidelines](#)
- [Procedures relating to ECU’s obligations under the Public Interest Disclosure Act \(WA\) 2003](#)
- [Edith Cowan University Enterprise Agreement 2022](#)

7. CONTACT INFORMATION

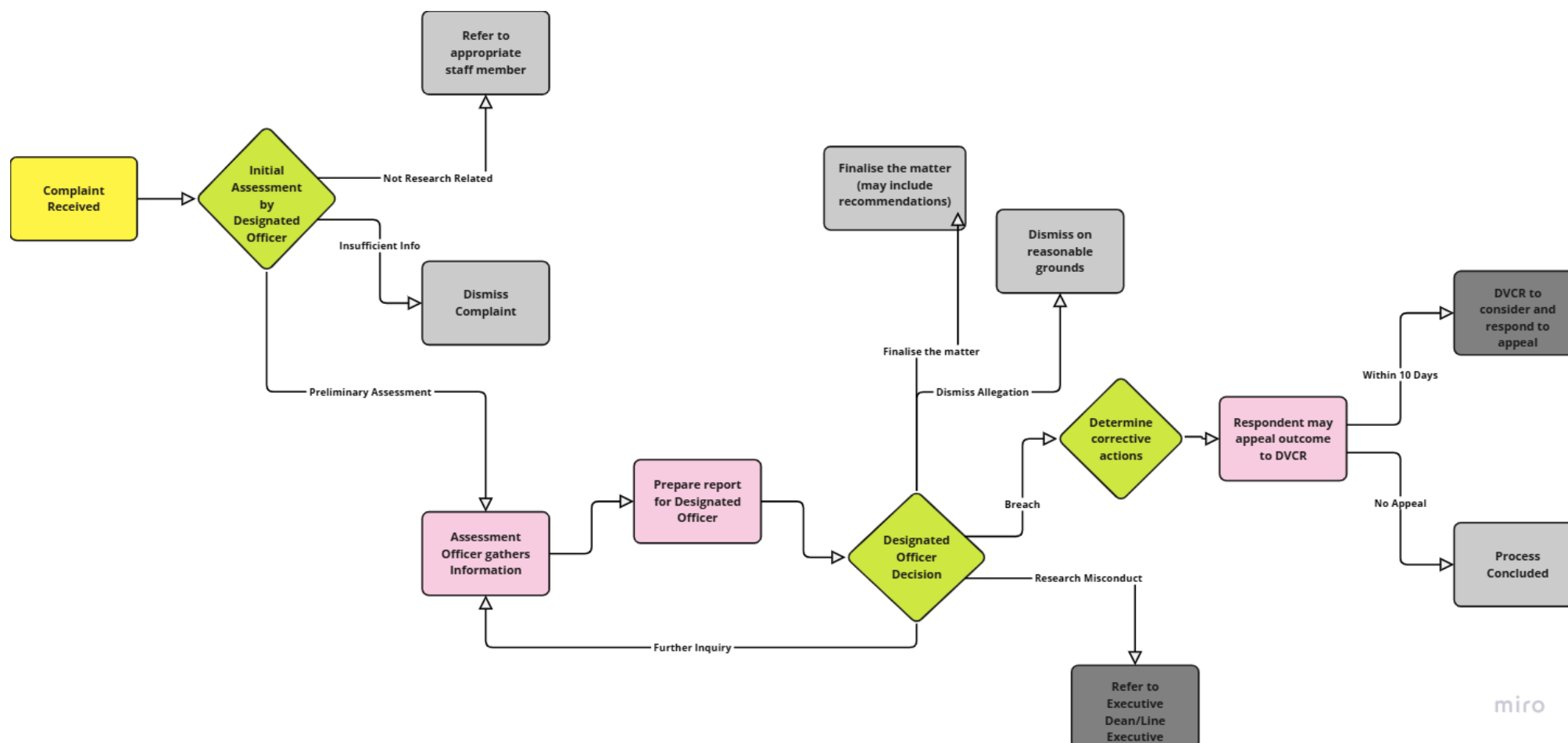
For queries relating to this document please contact:

Procedure Owner	Deputy Vice Chancellor, Research
All Enquiries Contact	Manager, Research Governance
Email address:	research.integrity@ecu.edu.au

8. APPROVAL HISTORY

Procedure approved by:	Professor Caroline Finch
Date procedure first approved:	8 th July 2025 (replaced previous Research Misconduct Guidelines)
Date last modified:	n/a
Revision history:	n/a
Next revision due:	8 th July 2027

Appendix 1 – Managing Breaches of the Code – Flowchart



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