

MANAGING COMPLAINTS ABOUT THE CONDUCT OF RESEARCH PROCEDURE

Governing Policy

[Research and Scholarship Policy](#)

Purpose

This procedure outlines how potential Research Integrity breaches of the *Australian Code for the Responsible Conduct of Research, 2018* (“**the Code**”) and/or AIB Research and Scholarship Policy, are managed at AIB. The procedure is aligned to the [Guide to Managing and Investigating Potential Breaches of the Code](#), related legislation, regulation and guidelines, as well as institutional policies and process.

Definitions

Unless otherwise defined in this document, all capitalised terms are defined in the [glossary](#).

Breach of the Code

The [Code](#) defines a breach as “a failure to meet the principles and responsibilities of the Code, and may refer to a single breach or multiple breaches.” (Code 2018 p 5) and the [Research and Scholarship Policy](#), and may refer to a single breach or multiple breaches. Breaches of the [Code](#) are listed as (and not limited to):

- failure to meet required Research standards;
- issues of fabrication, falsification and misrepresentation;
- plagiarism;
- issues related to Research data management;
- issues related to Research supervision;
- authorship;
- Conflict of Interest; or
- Peer Review processes.

Research Misconduct

AIB defines Research Misconduct as a serious breach of the [Code](#), or the [Research and Scholarship Policy](#), other relevant AIB policies and procedures, and/or relevant legislation which is also intentional or reckless or negligent. Research Misconduct does not include honest differences in judgement or unintentional, honest and minor errors.

Procedure

1. Responsibilities

- 1.1. Researchers must ensure that they:
 - (a) apply high ethical and Research Integrity standards when conducting Research;
 - (b) bring forward instances of questionable Research;

- (c) cooperate in assessment or investigation of potential or found breaches of the [Code](#); and
- (d) if necessary, contribute evidence relevant to potential or found breaches of the [Code](#).

Who	Responsibilities/Role
Academic Dean (AD)	The AD is ultimately responsible 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 action to be taken.
Associate Dean, Research (ADR)	The ADR receives Complaints about the conduct of Research or potential Breaches of the Code and oversees their management and investigation where required.
Research Coordinator; Research Discipline Lead; Discipline Leaders; Ethics Committee Members; Academic Integrity Manager	A person or persons with knowledge of the Code and AIB processes nominated to promote the responsible conduct of Research and provide advice to those with concerns or complaints about potential Breaches of the Code .
Respondent	The person or persons who is/are the subject of a complaint or allegation about an alleged Breach of the Code .
Complainant	The person or persons who has lodged a complaint about the conduct of Research.
Review Officer	Chief Executive Officer

2. Reporting Concerns About Research Conduct

- 2.1. A person who has concerns about inappropriate Research conduct may seek advice from the Research Coordinator, Research Discipline Lead, a Discipline Leader and/or Ethics Committee Members.
- 2.2. An individual considering making a complaint under the Code can:
 - (a) refer the matter directly to the person against whom the complaint is made;
 - (b) refer the matter directly to a person in a supervisory capacity for the matter to be resolved through AIB processes;
 - (c) make a complaint following the process outlined in this procedure;
 - (d) decide not to proceed with a complaint.
- 2.3. Recipients of Research conduct concerns and complaints should notify the Academic Research team (via rdh@aib.edu.au).
- 2.4. Where a complainant chooses not to proceed with a complaint, AIB still has an obligation to assess the nature of the complaint and whether to proceed to a preliminary assessment.

3. Receipt and Consideration of Complaints

- 3.1. A person who wishes to lodge a complaint about a potential Breach of the Code can do so in writing to the Associate Dean, Research (ADR) via rdh@aib.edu.au.
 - (a) Other appropriate staff may assist the complainant in submitting a complaint.

- (b) Anonymous complaints will be considered based on information provided.
 - (c) Complainants are not required to identify parts of the Code or relevant AIB policies that may have been breached.
 - (d) The complainant is encouraged to provide information they hold pertinent to the complaint, including, but not limited to:
 - places and dates on which each breach is alleged to have occurred;
 - identity of the person alleged to have engaged in the breach;
 - any other supporting evidence.
- 3.2. Once received, complaints are to be acknowledged within 4 working days and recorded in a confidential register managed by the Academic Research team.
- 3.3. Upon receiving a complaint, the ADR shall determine whether the complaint relates to a potential Breach of the Code, and if it does, the matter proceeds to preliminary assessment. If the complaint does not represent a potential Breach of the Code, it may be dismissed or referred to other AIB processes.
- 3.4. Throughout investigation and management of a complaint, the welfare of the complainant is a key concern and AIB will ensure confidentiality and that the complainant is protected from adverse consequences for having made the complaint. The ADR will ensure appropriate communication with the complainant.

4. Preliminary Assessment of Potential Breach

- 4.1. The purpose of the preliminary assessment is to gather and evaluate facts and information, and assess whether the complaint, if proven, would constitute a Breach of the [Code](#). An admission of a breach by the respondent does not end the preliminary assessment process. In such cases, AIB may still be required to proceed with an investigation.
- 4.2. Where a respondent ceases employment or affiliation with AIB during or following the complaint process, the complaint will still be assessed/investigated as necessary.
- 4.3. The ADR ensures Records of preliminary assessment are prepared and maintained and that appropriate processes are followed in a timely manner.
- 4.4. The ADR will consider whether to consult with and involve other parties, both internal and external to AIB. It may be necessary to obtain information and evidence, and to bring in expertise from other sources.
- 4.5. It may be necessary to discuss the matter with the respondent. In this case, the ADR will notify the respondent with sufficient detail for the respondent to understand the nature of the complaint. Respondents will be offered an opportunity to respond in writing within 10 working days. An invitation to meet may be extended, with the option for the respondent to bring a support person.
- 4.6. On completion of the preliminary assessment, the ADR will provide written advice to the AD in a timely manner. This will include a comprehensive overview of the process undertaken, facts and information, details of how the potential breach relates to the Code or institutional processes, and recommendations for further action.
- 4.7. The AD will determine whether the matter should be:

- dismissed;
 - resolved locally with or without corrective actions;
 - referred for investigation; or
 - referred to other AIB processes.
- 4.8. Where referral of an allegation of a Breach of the Code for investigation is not supported, the following actions will be considered:
- efforts, if required, to restore the reputation of any affected parties;
 - efforts to address with the complainant vexatious complaints or complaints considered to have been made in bad faith through appropriate AIB processes;
 - efforts to address any systemic issues identified.
- 4.9. AIB will provide outcomes, if appropriate, to the respondent and complainant at the conclusion of a preliminary assessment in a timely manner.

5. Investigation of a Potential Breach

- 5.1. The purpose of the investigation is to make findings of fact to allow the AD to assess whether a Breach of the [Code](#) has occurred, the extent of the breach and the recommended actions. Principles of procedural fairness will be applied throughout the investigation, and the investigation shall be thorough, robust and free from bias.
- 5.2. Once it is determined that an investigation is required, the ADR will:
- prepare statement of allegations;
 - develop terms of reference for the investigation;
 - nominate investigation panel members and a Panel Chair;
 - seek legal advice where appropriate.
- 5.3. In selecting the panel, the ADR 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.
- 5.4. Where a panel permits the complainant and/or respondent to have legal representation, the panel also has the right to engage a similar level of legal representation.
- 5.5. Details of the panel membership will be provided to the respondent, and the respondent will be given the opportunity to raise concerns of any perceived conflict of interest.
- 5.6. The complainant and respondent can choose to engage a support person; however, the support person is to provide personal support only and is not to advocate, represent or speak on behalf of the complainant and respondent.

- 5.7. As part of the investigation, the respondent will be provided an opportunity to respond to the allegations and evidence and to provide additional evidence that the panel may consider. If a respondent chooses not to reply or appear before the panel, the investigation will continue in their absence.
- 5.8. The complainant may also be given the opportunity to see relevant evidence used in the investigation, where appropriate (e.g. if they are directly affected by the investigation).
- 5.9. Once finalised the panel will convene and 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.
- 5.10. All those asked to give evidence will be provided with relevant information, which may or may not be de-identified. This information may include:
- schedule of events;
 - relevant terms of reference for the investigation;
 - advice as to how the panel intends to conduct interviews, if the interviews will be recorded and whether opportunities to comment on matters raised in interview will be available;
 - the possibility for the use of a support person;
 - disclosing interests;
 - confidentiality requirement;
 - procedures that the Panel intends to follow.
- 5.11. The panel shall determine, on the basis of evidence and balance of probabilities, whether the respondent has breached the Code and the seriousness of any breach.
- 5.12. The panel shall provide a draft written report of findings. The draft report, or a summary of all relevant information on which the ADR's decision will be based, shall be provided to the respondent with a reasonable timeframe to comment. The draft report may also be provided to the complainant if they will be affected by the outcome.
- 5.13. Following consideration of any further information, the report is finalised.
- 5.14. The ADR will consider findings of fact, evidence presented and any recommendations made by the panel. The ADR will consider the extent of the breach, appropriate corrective actions and if referral to disciplinary procedures is required. The ADR will provide the final report to the AD with recommendations.
- 5.15. The AD shall decide either:
- a finding of no Breach of the Code;
 - a finding of a Breach of the Code.
- 5.16. If the AD decides that there has been no breach, the following will be considered:
- efforts to restore reputations of those alleged to have engaged in improper conduct;
 - efforts to address with the complainant vexatious complaints or complaints considered to have been made in bad faith through appropriate institutional processes;
 - communication and provision of support for respondent and complainant;

- any areas for continuous improvement could be implemented within AIB's policy, procedures or processes.
- 5.17. If the AD accepts that a Breach of the Code has been found, the AD decides AIB's response, taking into account the extent of the breach and whether other institutions should be advised.
- 5.18. All efforts will be taken to correct the public record of the research, including publications.
- 5.19. Any decisions or actions will be communicated in writing within 20 business days with a summary of facts underpinning the decision, to the respondent and complainant. The AD shall consider whether a public statement is appropriate to communicate the outcome of an investigation.

6. Mechanisms for a Review of Appeal

- 6.1. Requests for a review of a decision resulting from a Code investigation may only be granted on the grounds of procedural fairness. The aim of a review will serve to confirm or not confirm the outcome of the investigation.
- 6.2. *For AIB Higher Degree by Research (HDR) Candidate related cases:*
- (a) Individuals who wish to request a review may refer to Stage One of the [Student Complaints, Grievances and Appeals Procedure](#).
- 6.3. *For AIB Staff related cases:*
- (a) Individuals who wish to request a review must submit the request in writing to the Academic Research team at Quality@aib.edu.au within 20 working days of the final decision of the investigation outcome.
 - (b) The CEO will consider whether the request is substantive and whether the investigation adequately addressed issues, was procedurally fair, and whether all evidence was appropriately considered. Every effort will be made to finalise the review within 30 working days.
 - (c) The CEO may determine that the panel reconsider their findings due to the presentation of new evidence, or the need to consider existing evidence in further detail. The CEO may determine that issues raised in the review require consideration by members external to AIB.
 - (d) Individuals may alternatively, or following 6.3(c) above, seek external review by appropriate bodies or agencies, which may include without limitation the National Student Ombudsman (NSO), specifically for candidates and students undertaking research.

7. Record Keeping

- 7.1. AIB will ensure the confidential storage of Records relating to breaches for a period of seven years.

Responsibility:
Academic Dean

External Legislative References

The AIB Managing Complaints about the Conduct of Research Procedure is modelled on and makes reference to sections of the Universities Australia (2018) Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research. Accessed at: <https://www.nhmrc.gov.au/about-us/publications/australian-code-responsible-conduct-Research-2018#block-views-block-file-attachments-content-block-1>

Current Status:	Version 2
Approved By:	Academic Board
Effective From:	10 September 2025
Date of Approval:	10 September 2025
Previous Versions:	<i>Research Integrity Breach Management Procedure V1 (14 July 2022)</i> <i>Responsible Research Conduct Procedure V1.1 (6 July 2021)</i>
Date of Next Review:	10 September 2028