SAHMRI is committed to the conduct of methodologically and ethically sound research that complies with the core principles of research conduct as outlined by the *Australian Code for the Responsible Conduct of Research*:

- Honesty and Integrity;
- Respect for human participants, animals and the environment;
- Responsible use of public resources to conduct research;
- Appropriate acknowledgement of the role of others in research; and
- Responsible communication of research results.

All SAHMRI staff, students and visiting researchers must comply with the *Australian Code for the Responsible Conduct of Research* and associated SAHMRI Research Policies.

Concerns regarding research misconduct will be taken very seriously by the Institute. Staff are encouraged to contact the SAHMRI Designated Officer in the first instance to discuss their concerns (please refer to attached flowchart for further detail).

**Advisor in Research Integrity**

The Research Integrity Advisor can provide confidential advice to staff, students or other persons about:

- Actions that might constitute misconduct;
- The rights and responsibilities of the complainant; and
- The procedures that will apply in the handling of allegations of research misconduct at SAHMRI.

**Professor Maria Makrides** is SAHMRI’s Advisor in Research Integrity.

**Research Misconduct Designated Officer**

SAHMRI has appointed a senior staff member from the Research Office as the Misconduct Designated Officer. Any allegation of research misconduct should be made to the Designated Officer who will obtain the information required to undertake an initial assessment. The documentation will then be discussed in detail with the Research Integrity Advisor. Following assessment of whether the allegation can or cannot be dismissed, the matter will then be directed to the Executive Director as appropriate.

**Dr Leanne Sutherland** is SAHMRI’s Research Misconduct Designated Officer.
### Institutional Roles - Managing and Investigating Potential Breaches of the Code

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Responsible Executive Officer</strong></td>
<td>A 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 action to be taken.</td>
</tr>
<tr>
<td><strong>Designated Officer</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Assessment Officer</strong></td>
<td>A person or persons appointed by an institution to conduct a preliminary assessment of a complaint about research.</td>
</tr>
<tr>
<td><strong>Research Integrity Advisor</strong></td>
<td>A person or persons 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.</td>
</tr>
<tr>
<td><strong>Research Integrity Office</strong></td>
<td>Staff with responsibility for management of research integrity at an Institution.</td>
</tr>
<tr>
<td><strong>Review Officer</strong></td>
<td>A senior officer with responsibility for receiving requests for a procedural review of an investigation of a breach of the Code.</td>
</tr>
</tbody>
</table>
An individual develops suspicion of research misconduct.

Individual contacts the Designated Officer in the SAHMRI Research Office to raise their concern.

Designated Officer informs the Research Integrity Advisor and provides any information that the complainant has presented about the matter. Together they determine whether the complaint relates to a potential breach.

If a breach is identified and an investigation is to be undertaken:

Designated Officer and Assessment Officer undertake a preliminary assessment and determine:
- the need for further investigation;
- if the issue can be resolved without need for investigation;
- if the issue can be referred to other institutional processes; or
- if it is to be dismissed.

Designated Officer, Assessment Officer, and Research Integrity Advisor convene an internal investigation panel and make the appropriate notifications.

If research misconduct is established:

Designated Officer and Research Integrity Advisor will discuss with Responsible Executive Officer who will advise the person against whom the allegation was made and inform what disciplinary actions are to be taken.

If that person contests the finding of the internal investigation panel:

Designated Officer will refer the matter to an independent external research misconduct panel and will ensure that procedural fairness is afforded to the person against whom the allegation has been made.

External panel makes a decision taking into account results of internal finding plus submissions put by person against whom finding is made.

Decision communicated to the Executive Director, person who made allegation, person against whom allegation made, any funding body, SAHMRI Board.

If research misconduct is established:

External panel will make a recommendation as to the appropriate course of action which will be implemented by the Responsible Executive Officer.

Confidentiality will be maintained throughout this process. Conflicts of interest must also be reported and will be managed. Further detail regarding all components of this process can be found within the SAHMRI Research Procedures Policy.