



Charles Sturt
University

Institutional Research Integrity Report

Calendar Year 2024

Research Integrity Unit

Ver 3 30 June 2025

**For further information please contact
Elizabeth Harangozo
Research Integrity Manager**

Charles Sturt University - TEQSA Provider Identification:
PRV12018 (Australian University). CRICOS Provider: 00005F.

Contents

Introduction	3
Promotion of research integrity	3
Mandate and Commitment.....	3
Framework for the conduct of research with integrity	4
Research Integrity Unit service charter.....	4
Achievements in 2024	5
Research integrity risk management	7
Research integrity matters	13
Matters received.....	13
Who is making the complaints?	14
Areas and type of complaint	14
Research integrity matters reviewed and resolved	15
Research Integrity operational performance	16
Animal Ethics	16
Animal Ethics operational statistics.....	16
Human Research Ethics	18
Human Research Ethics operational statistics	18
Institutional Biosafety	21
Institutional Biosafety operational statistics	21
National Security Compliance	21
National security compliance committee	21
Radiation Safety	22
Radiation Safety operational statistics	22
Glossary of terms	22

Introduction

The Australian Code for the Responsible Conduct of Research (Research Code) underpins Charles Sturt University's approach to research integrity. Through the Research Code, the University recognises the shared responsibilities that exist between the University, researchers, research trainees and research trainee supervisors.

The University's systemic approach to ensuring research is conducted with integrity is supported by activities to:

- Provide advice and support to applicants throughout the research proposal review process,
- Provide robust and timely reviews of research project proposals,
- Review and consider research project progress reports keeping research performance on track,
- Collaborate with researchers to identify solutions to real world issues encountered in the conduct of research.
- Facilitate the work of Research Integrity Advisors to provide experienced and practical advice,
- Provide ongoing education and skill developments for our researcher community.

Despite these efforts there are occasions when concerns are raised regarding the conduct of research. When this occurs we also have mechanisms to:

- Detect failures to conduct research with integrity, and
- Respond appropriately to reports of suspected instances of research integrity failures.

The Research Code is supported by a number of specialist practice guides and notably the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research (the Guide). The Research Code and the Guide are referred to extensively in this report.

Over 2024 we recorded 33 research integrity matters of those only one was determined to be potential research misconduct. During the same period, we considered 525 research and teaching proposals and more than 1200 other items requiring review.

Version 1 of this report was reviewed by the University Research Committee in April 2025. Subsequent minor amendments were made to enhance the reporting of research integrity work relating to the emerging risk area of Artificial Intelligence

Further minor amendments were applied in subsequent reviews to prepare the report for external publication.

Promotion of research integrity

Mandate and Commitment

A robust approach to maintaining high standards of research integrity relies on the mandate and commitment of the senior leaders of the University. In this regard, the University has clearly committed itself to uncompromising standards of research integrity through the incorporation of research integrity considerations in the University's risk management framework.

The University's Risk Appetite Statement is clear in its commitment to the avoidance of risk that may compromise research integrity. Further to the extract at Figure 1, in support of the highest expectations of research integrity, the Risk Appetite Statement also references a low appetite

Figure 1 Risk Appetite Statement published 20 December 2024, extract

Research, Development, Innovation and Entrepreneurship

*Charles Sturt University has a **Low Appetite** to take risks that may impact research quality, research integrity or the University's standing in research excellence.*

for “behaviours and conduct potentially leading to legislative and regulatory non-compliance” and to “take risks that may impact negatively on the University’s existing relationships and reputation for quality learning, teaching, research and the student experience.

The University goes further in the Risk Appetite Statement by identifying zero tolerance for behaviours involving:

- Intentional failure to comply with relevant laws, regulations and sector standards,
- Intentional failure to follow University policy or procedure, and
- deliberate research misconduct, breach of relevant National Codes, fraudulent research, or false publication of data or material.

These convictions position the University on a strong platform of support for research integrity.

Framework for the conduct of research with integrity

The University’s framework to ensure research integrity is not a single policy, activity or process nor do positive research integrity outcomes rely on an individual or group. The culture of research integrity at Charles Sturt is reflected in an interwoven range of responsibilities distributed across the University.

While the University has a Research Integrity Unit, consistent with standards in the sector, the Research Integrity Unit itself does not, in itself, deliver research integrity for the University. The University’s outcomes in research integrity are entirely dependent on the decisions and conduct of all the University’s staff and students as they engage in research activities.

It is the role of the Research Integrity Unit to inform, educate and support staff and students in the responsible conduct of research.

The University’s framework of research integrity includes, but is not limited to:

- the University’s statements of its ethos and values,
- Code of Conduct, Conflict of Interest Procedure and other University policies and procedures specifically intended to guide positive behaviour,
- Student Charter,
- the mandate and commitment to research integrity set out in the Risk Appetite Statement,
- the roles and responsibilities of the Research Integrity Unit,
- the roles and responsibilities of the Research Integrity Leadership Team (including all research integrity committee office holders and the members of the Research Integrity Advisor Network),
- mechanisms for reporting and managing wrongdoing and misconduct,
- complaints management processes, and
- mechanisms to review and approve projects to ensure and support ethical standards in research.

Research Integrity Unit service charter

Undertaking research that is ethical and conducted with integrity contributes to the positive reputation of the University as an institution that can be relied on to deliver high quality research outcomes. In turn, this reputation attracts collaborators from other institutions enhancing the quality of research outcomes and gives confidence to funding bodies that we will properly steward the use of research funding.

The research Integrity Unit is a key facilitator of institutional research integrity via our service charter.

Research Integrity Unit Mission Statement

We provide excellence in the promotion of research integrity at Charles Sturt. We serve as crucial facilitators for research and teaching activities, providing support, resources, education, and advice to our stakeholders. Our dedicated committees ensure research and teaching-related endeavours are ethical and compliant through timely expert review and assessment.

Achievements in 2024

Table 1 Research integrity achievements 2024

Description	Achievement
Raising awareness of Research Integrity responsibilities	<p>Contribution of new research integrity content to the Higher Degree by Research professional development program</p> <p>Seminar presentation and Q&A at every HDR student induction workshop held in 2024</p> <p>Seminar presentation and Q&A for the supervisor professional development program.</p>
Developing best practice	<p>Attendance at sector leading networking events such as:</p> <ul style="list-style-type: none"> • Australasian Research Management Society conference. • Australian New Zealand Council for the Care of Animals in Research and Teaching (ANZCCART) conference. <p>Participation in the NSW Research Integrity Group. A network of comprising of 42 members from higher education and specialist research institutes across Australia.</p> <p>Commendations from the NSW Department of Primary Industries in their review of the operation of the Animal Ethics Committee (AEC).</p> <p>The development of a novel and sector leading process to assess the cumulative use of horses in research and teaching activities.</p>
Becoming a signatory to the Australian Openness Agreement on Animal Research and Teaching in Australia.	<p>Negative scrutiny and public criticism can erode societal support for research and teaching activities involving animals and can lead to increased public pressure on regulatory bodies to restrict or ban research activities.</p> <p>The openness movement facilitates societal acceptance for the use of animals in research and teaching, where organisations are open in their public dialogue around the high standard of care towards the ethical use of animals in research and teaching and the resultant benefits that come from these activities.</p> <p>Charles Sturt University joined 23 organisations, 14 of which are Australian Universities, as a signatory to the Agreement in July 2024</p>

Description

Achievement

Research Integrity Internal Audit 2024

Participation in the audit required commitment and transparency from all members of the Research Integrity Unit, and other stakeholders from across the University. Successes recognised by the auditors included:

- the promotion of practical approaches to the use of Artificial Intelligence (AI) tools in research,
- development work across the spectrum of the research integrity framework,
- development of a supported approach for persons appointed as Assessment Officers in complaint management,
- the role of the Human Research Ethics Committee executive in streamlining application reviews,
- the launch of the broad ranging National Security Compliance Committee,
- the establishment of a number of specialist groups across the University to respond to emerging issues relating to Artificial Intelligence.

Notwithstanding these positive observations the audit concluded improvements were required in:

- Ensure research activity approvals are documented, monitored and reported by enhancing Research Master functionality to track approval status, and report on monitoring in research integrity reporting
- Define criteria for high-risk research activities and enhance compliance monitoring by Chief Investigators, escalation procedures for reporting noncompliance and formalising mechanisms for learning from non-compliances
- Improve management of sensitive research data by undertaking regular review of research data management plans, amending the research data management plan template, providing an appropriate system for research data storage and review the existing research data management framework against the Australian Research Data Commons model.
- Improve training in the identification of research misconduct and research data management, enhance collaboration with research integrity training conducted through library services and implement an approval framework for First Nations research
- Amend the Research Policy suite to ensure alignment with NHMRC research guidelines, including roles and responsibilities, proactive duties to uphold research integrity and incorporation of reporting of breaches of the Research Code. Also required to develop a risk-informed approach to the timelines for complaint management.

Description

Achievement

NSW Department of Primary Industries (DPI) animal ethics management review 2023

The DPI inspection was conducted in September 2023, though the inspection report was not provided until November 2024. The DPI noted six commendations for the University in the management of animals for research and teaching, these were for:

- The development and implementation of a practical tool quantifying the cumulative research/teaching impact on horses.
- Identifying the need for the establishment of a Horse Advisory Group to facilitate the sharing of the intimate knowledge held by a relatively small cohort of staff working with the horses every day.
- The novel enrichment developed by the research group/AEC for piglets.
- The extensive use of non-animal alternatives e.g. simulation models, the development of artificial skin and sub-cut tissues for surgical training, cadavers, abattoir tissues, artificial canine ears, etc.
- The documentation reviewed regarding complaint investigation referred to the institution from the AEC (e.g. Research Misconduct Procedure, Assessment Officer Report, etc) demonstrated effective self-regulation.
- The diligence of the AEC was evidenced by their thorough review of agenda papers, input/representation from all AEC member categories, open discussion to deliver and capture well-developed consensus. Their collective demonstrable understanding and commitment to the 3Rs was commended.

The report contained 10 recommendations for the consideration of the University, none of which raised concern regarding future or ongoing compliance. An action plan was developed, submitted to the DPI and is subject to ongoing oversight by the AEC.

The recommendations and status of each item, at February 2025, are summarised as follows:

- Add item to AEC documentation prompting for environmental enrichment – COMPLETE.
- Implement improved animal environmental enrichment practices – In Progress
- Upgrade the Aviary on Wagga campus – COMPLETE.
- Improve the ability of the University to respond to animal welfare issues raised by the AEC – In Progress.
- Ensure SOPs are reviewed every three years – Process of reviewing SOPs at AEC - COMPLETE.
- Add item to AEC documentation requiring justification when commercial standards of animal welfare are to be applied in a research or teaching setting – In progress.
- Track when farm animals are covered by an Animal Research Authority – Not started
- Monitor the cumulative use of sheep and cattle in research and teaching projects – In Progress
- Review AEC activities to reduce workload in committee meetings – In Progress
- Add item to AEC documentation to ensure applicants are prompted to submit complete applications – In Progress
- Defining “Minor Modification” in the AEC Terms of Reference – Not started
- Improve researcher performance in responding to Adverse Events - COMPLETE

Research integrity risk management

The risk areas identified for discussion below are derived from a number of sources, including:

- The Australian Research Integrity Committee (ARIC), Annual Report 2023 – 2024, representing the most common procedural concerns identified by ARIC in the period.
- Specific concerns raised by Charles Sturt stakeholders and internal auditors.
- The Charles Sturt Research Risk Profile, published by the Risk and Compliance Unit, Q1 2025.

Table 2 Research integrity risks and controls

Risk area	Description	Discussion / Controls
Authorship	Failure to provide clear guidance on appropriate standards for authorship and authorship dispute resolution processes. The Research Code requires authorship of research outputs to be attributed to all those, and only those, who made a significant intellectual or scholarly contribution to the research. Authorship agreements, at the point of conceiving and starting on a research paper, are highly desirable.	<p>The University has a Research Authorship, Publication and Dissemination Procedure updated in 2023 to include with authorship, publication and dissemination procedures to bring the procedure in line with the Research Code.</p> <p>Research authorship agreements are available and authorship arrangements are included in HDR induction seminars.</p> <p>There are only three authorship related matters in the research integrity database (since 2022). These were all enquiry only (refer table 3).</p> <p>The University's research integrity advisors also provide guidance to researchers regarding proper practice in relation to authorship.</p>
The time taken to manage matters	A lack of timeliness for institutional investigations can compromise procedural fairness.	<p>This is an area of challenge for the Research Integrity Unit as complaint management is reactive while resourcing is fixed.</p> <p>Activities to support the timely management of complaints include:</p> <ul style="list-style-type: none"> • The development of template documents to guide the complaint assessment and management process. • The development of a bespoke communications plan for every complex matter to manage respondent expectations. <p>For matters raised in 2024 requiring a preliminary assessment and where this is closed, the average time to complete is 220 days. (since data collection commenced in 2022, the average completion time is 223 days). This is a simple count of days which includes any period waiting for respondent input.</p>

Risk area	Description	Discussion / Controls
<p>Failure to provide adequate explanation of the findings of an investigation and the reasons for those findings.</p>	<p>The Australian Research Integrity Committee has observed that institutions are sometimes reluctant to give parties a copy (or an extended summary) of the full investigation report, even in cases where the party is directly affected by the outcome. However, doing this may give reassurance that the matter has been carefully and thoroughly investigated, and make it more likely that parties will accept the outcome.</p>	<p>The Research Integrity Unit has a business process in place which outlines the steps required to close a complaint after a preliminary assessment is complete. The procedure includes guidance on final reporting to the complainant, internal stakeholders and governance bodies such as URC, ARC etc.</p> <p>At Charles Sturt, respondents are given an extended summary of the preliminary assessment which re-states the complaints and gives a qualitative explanation for the findings against each article of complaint.</p> <p>Complainants are also advised of the outcome of a complaint, though the nature of the communication to the complainant is adjusted depending on how much the complainant is aware of the circumstances of the complaint. For example, a member of the public raising a general concern about the conduct of a research activity is likely to receive a less detailed advice of outcome in comparison to a complainant internal to the University who has a direct knowledge of the research activity. Where a complainant has indicated their desired outcome from a complaint review this is always addressed in the feedback they receive.</p>
<p>Not complying with the provisions of the Research Code, the Investigation Guide, and/or other relevant policies including institutional research integrity policies.</p>	<p>The Research Code is the accepted standard for the conduct of research in the Australian Higher Education sector.</p> <p>While compliance with the Research Code is not directed by law, institutions in receipt of funding from the ARC and NHMRC are required to develop, apply, and make publicly accessible policies and procedures that align with the Code and Investigation Guide.</p> <p>Institutions are also required to provide ongoing training and education on responsible research practices</p>	<p>Over 2024 a comprehensive review of the Research Misconduct Procedure was undertaken, identifying several opportunities to improve alignment with the Research Code and associated Guide.</p> <p>It was proposed to completely re-write and restructure the procedure to create consistency with the Guide and also with the University's complaint management policy and procedures. Publication of a new Research Integrity Complaint Management Procedure was held over waiting on the final report from the Research Integrity internal audit of 2024.</p> <p>The new procedure, very closely aligned to the Guide, will be published in early 2025.</p> <p>All University procedures are publicly available online.</p> <p>The University has a mandatory training program in Research Integrity for all academic staff and all professional staff in roles supporting academic staff.</p>

Risk area	Description	Discussion / Controls
Not maintaining confidentiality in the management and investigation of potential breaches of the Code.	Ensuring that all information related to an investigation is treated as confidential is an essential part of procedural fairness. Likewise, institutional processes may be jeopardised where complainants or respondents fail to maintain appropriate confidentiality.	<p>Induction processes for all members of the Research Integrity Unit cover aspects of confidentiality as these apply within the unit.</p> <p>All terms of reference for the research integrity committees include provisions identifying and maintaining the confidentiality of business before the committee.</p> <p>All staff of the University are bound by the Code of Conduct which states “<i>staff are expected to maintain the confidentiality, integrity and security of information to which they have access as a result of their employment within the University.</i>”</p> <p>All records relating to research integrity investigations are held in UniRecords in a secure file folder with restricted security access.</p>
Failure to give parties that are directly affected by a matter an adequate opportunity to respond to allegations during the course of an investigation.	Ideally, all parties would be informed in writing of relevant allegations and other matters as the investigation proceeds and given an opportunity to make submissions in relation to them. In many cases, it is appropriate to provide the draft investigation report to the parties for comment before the report is finalised.	<p>Procedures require allegations to be put to respondents in writing, with all the accompanying evidence supporting a complaint.</p> <p>Respondents are nominally afforded 10 working days to respond to allegations, they are also provided with information relating to the support services available to them and their ability to engage a support person to accompany them to any meetings with University representatives in relation to the complaint.</p> <p>This letter of allegation, together with the respondent’s input, is incorporated into the preliminary assessment.</p>
Management of conflicts of interest	Conflict of interest management should focus not just on actual conflicts of interest but also on perceived conflicts. Investigation reports should document declared conflicts and how they are managed.	The University has a comprehensive conflict of interest procedure that recognises “ <i>actual, potential or perceived divergence between the individual interests of a staff member and their professional and work-related obligations to the University</i> ”.
Inadequate monitoring of research activities	Not adequately monitoring research can lead to the conduct of research without review or conduct of research contrary to the approved project protocol. This risks invalid results, loss of public trust, legal consequences, and reputational harm to institutions and researchers. It could also compromise the physical, psychological and cultural safety of research participants.	<p>Research activities approved by a research integrity committee are monitored via progress reporting. All projects require the submission of an annual progress report (or final report).</p> <p>Projects using animals which fall into high risk categories, as defined by the NSW Department of Primary Industries, are reviewed by observation by the Animal Welfare Officer (AWO). In 2024 the AWO conducted the first observation of a remote project (in Laos) via digital means.</p> <p>Research activities approved by a research integrity committee have mechanisms for the reporting of incidents where unexpected events occur, or the</p>

Risk area	Description	Discussion / Controls
		<p>researcher is unable to comply with the research protocol.</p> <p>The research Integrity Unit conducts an audit of 10% of the projects before committees each year to test if all required research integrity reviews were obtained.</p> <p>Failure to maintain research standards is the largest category of research integrity complaint recorded at the University (Refer Table 4).</p>
<p>Failure to detect research integrity breaches</p>	<p>Failing to detect breaches of the Research Code risks promoting unethical behaviour and reduces the University's capability to develop positive practice in relation to research integrity.</p> <p>The broad integrity of research findings and institutional reputation suffers when failures in research integrity are identified in the public domain.</p>	<p>The most common source of research integrity complaints come from the research integrity committees themselves and the RIU staff that support them (Refer table 5). This is indicative of the robust internal reviews of projects that are conducted by the research integrity governance structures.</p> <p>The next most common source of complaint are other members of staff.</p> <p>The risk control in this regard appears to be a strong self-regulating reporting culture within the University.</p> <p>All projects involving humans provide information to the research participants on the nature and objectives of the research activity as well as mechanisms to raise concerns regarding the conduct of research.</p> <p>Detection of potential breaches of the Research Code are reliant on reporting, and the University provides information across several platforms regarding how to make reports and the complaint management process.</p> <p>The Research Integrity Unit also has very strong collaborative relationships with other areas of the University that deal with complaints, particularly the Ombudsman and DPC.</p>

Risk area	Description	Discussion / Controls
Failure to manage the impact of artificial intelligence (AI) on research activities	Inappropriate use of artificial intelligence tools in research risks biased algorithms corrupting data analysis, unethical use of AI-generated outputs, or intellectual property violations.	<p>The University's response to the emerging risk area of artificial intelligence was galvanised over 2024 by the "TEQSA request for information". Areas specific to research integrity that were addressed through that program included:</p> <ul style="list-style-type: none"> ▪ The development of an action plan to support research, research training and research integrity. ▪ The development of guidance material for the use of AI in HDR studies. ▪ Incorporation of AI subject material into online research training modules. ▪ Delivery of training sessions for HDR students and staff. <p>Other items identified for completion include</p> <ul style="list-style-type: none"> ▪ Revision of the Research policy suite specific to AI. ▪ Review of research integrity training module to AI considerations. ▪ Conversion of HDR training materials for general researcher training. <p>In September 2024 the Artificial Intelligence & Research Integrity (AIRI) Working Group was established in response to the growing use of generative artificial intelligence (Gen-AI) in research and the associated research integrity risks. The purpose of the group is to provide oversight and review of issues related to the impact of Gen-AI on research ethics and integrity.</p> <p>During the remainder of 2024, the group reviewed and updated the <i>Statement of Principles for the use of Artificial Intelligence</i> adding material specific to the research context.</p>
Poor Research Integrity	While something of an amalgam of all the risk areas described above, the Risk and Compliance Unit describes this risk area as the University fails to present or detect research misconduct. Failure to comply with the Research Code of Conduct. Breaches of research standards and requirements resulting in loss of research licences, reputational risk, research funding and research project delivery capabilities.	<ul style="list-style-type: none"> ▪ Mandatory research ethics awareness training. ▪ Relevant research ethics committee approval of research proposals. ▪ Peer review of research outputs. ▪ Research AI Principles / AI Working Group. ▪ Actions arising from Research Integrity Internal Audit.

Research integrity matters

Matters received

In 2024, there were 33 matters received by the Research Integrity Unit (RIU), the largest number in three years.

Table 4 indicates this increase is attributable to the increase in data and record keeping complaints. In 2024, the RIU initiated processes within the governance of human research projects to escalate failures to submit project progress reports as research integrity matters. Historically, there was no follow up (after 3 reminders and 3 overdue emails were sent from the research management system) and no reporting of failures to submit reports. Consistent with practices in other areas of the unit, these failures are now followed up as research integrity complaints. Since adopting this process, there has been 100% success in obtaining the required report from members of staff and continuing students.

There were nine reports of this nature in 2024.

Table 3 Research integrity matters recorded by year

Number of matters	2024	2023	2022
Research Integrity matters recorded	33	20	22

Table 4 Type of research integrity mater recorded

Type of matters	2024	2023	2022
Authorship	1		2
Data and Records	11	3	1
Fabrication Falsification Misrepresentation	4		
Other		2	
Plagiarism			2
Process			5
Research Design	2	2	1
Research standards	13	13	11
Supervision	2		
TOTAL	33	20	22

Type of research integrity matter is categorised according to the categories used in the Guide. Table 4 indicates a consistent trend in complaints arising from research standards. These matters include:

- Concealment of code breaches by other.
- Conducting research without (other) approval/licence.
- Conducting research without Animal Ethics Committee approval.
- Conducting research without Human Research Ethics Committee approval.
- Failing to conduct research as approved.
- Misuse of funds.

- Not meeting required research standards.

Of the 37 instances of failing to meet research standards over the last three years, approximately one third of those complaints relate to allegedly conducting research without HREC approval and one third relate to failing to conduct research as approved.

Who is making the complaints?

Table 5 Nature of complainant

Complainant	2024	2023	2022
Research integrity committee	15	11	7
External stakeholder	3	2	1
Member of the public (includes research participants)	3	2	2
Member of staff	8	3	6
Research Integrity Advisor	2		3
Student	2	2	3
TOTAL	33	20	22

The two largest categories of complainants are employees of the University. Most often, and consistently, potential failures of research integrity are detected within the review committee areas. The next most common source of complaint is from other members of staff.

Areas and type of complaint

Table 6 Analysis of 2024 matters

Type of matter	AICFI	FoAE	FoBJBS	FoSH	GUL	RHRI	NA	TOTAL
Authorship			1					1
Data and records		3	5	2		1		11
Fabrication falsification misrepresentation	1		1	1	1			4
Research design		1		1				2
Research standards		4	3	5	1			13
Supervision			1				1	2
TOTAL	1	8	11	9	2	1	1	33

In consideration of the complaints received in 2024, most complaints related to research within the Faculty of Business, Justice and Behavioural Sciences. Data and records and research standards were the most common types of complaint.

Research integrity matters reviewed and resolved

Table 7 Mechanism of review

Matter type	2024	2023	2022
Advice only – Research Integrity Advisor	3		3
Advice only – Research Integrity Unit	4	4	4
Complaint	7	7	7
Correspondence	9		
Assessment - Committee	3	6	3
Assessment - other	1		
Assessment - RIU	6	3	5
TOTAL	33	20	22

Table 7 indicates the mechanisms adopted to address the matters received. Advice matters are simple matters that do not involve a risk of breach of the Research Code. Complaints are matters where a person has raised a concern relating to a research activity but no breach of the Research Code is found. Correspondence matters are typically administrative failures in the submission of progress reports (Usually also a minor breach of the Research Code). Assessments indicate some form of rigorous enquiry was required to determine if there had been a breach of the Research Code (or not). The purpose of the table is to give an overview of how many matters of varying degrees of resource requirement were considered in each year.

Table 8 Research integrity matter outcomes by year

Type of outcome	2024	2023	2022
Research Integrity matters recorded	33	20	22
Of those, matters where the Research Code was breached (mostly resolved locally)	18	6	8
Of those, matters subject to Preliminary Assessment	5	2	4
Of those, matters determined to be potential research misconduct	1 ¹	1	3

Table 8 demonstrates the profile of seriousness of all research integrity matters received by year.

In 2024 there were a total of 33 matters received. Of those 33 matters 18 involved breaches of the Research Code. Breaches of the code occur on a spectrum and in most cases the breaches were determined to be

¹ Not all preliminary assessments commenced in 2024 are complete. This may result in additional matters being determined as potential research misconduct.

minor and resolved at a local level through direct engagement with the researchers and corrective actions. Of the 18 breaches of the code five were serious enough to warrant a Preliminary Assessment. Of the five preliminary assessments the outcomes were as follows:

- No breach of the Research Code, but some poor practice to be reviewed between the respondent and HREC Presiding Officers. Respondent to undertake Research Integrity training.
- Breaches of the Research Code occurred, but were not intentional and not research misconduct. Resolved locally. Respondent counselled by school.
- Breach of the Research Code, resolved via warning and counselling. Research output barred from publication.
- Potential research misconduct, referred to other university process for investigation.
- One matter, received in December 2024, carried over into 2025 (undetermined).

Where there is a finding of potential research misconduct, the matter is referred to other University processes for resolution. These are:

- Disciplinary processes through DPC for staff.
- Student Misconduct Committee for students.

Research Integrity operational performance

The following sections of the report set out the operational performance highlights and statistics in each committee area over 2024.

Animal Ethics

Animal Ethics operational statistics

Table 9: Committee business by type by year

Item	2024	2023	2022	2021	2020	2019
Applications	96	82	109	100	106	130
Exempt activities	18	28	13	17		
Modification requests	114	98	116	156	132	141
Adverse event reports	64	49	34	29	24	15
Annual reports	90	86	71	81	85	83
End of project reports	77	88	91	88	85	118
Standard operating procedures	34	26	13	13	70	19

Table 9 is a simple count of the type of agenda items considered by the committee over the year.

Table 10: AEC application outcomes by year – excludes exemptions

Item	2024	2023	2022	2021	2020	2019
Approved	63	61	102	85	84	113
Approved %	91.3%	91.0%	99.0%	96.6%	98.8%	96.6%
Declined	0	2	1	2	1	2
Did not Progress	6	4	0	1	0	2
TOTAL	69	67	103	88	85	117

Approved: projects considered in the year where approval was granted, independent of the time taken to receive that approval.

Declined: projects considered in the year that were declined or rejected by the committee.

Did not progress: projects considered in the year that failed to meet approval requirements. This is normally due to the applicant and may occur because the applicant fails to provide additional information requested by the committee, withdraws their application or does not take up their approval.

Table 11: Days to approve an application once reviewed

Number of days to approval	2024	2023	2022	2021	2020	2019
Approval ready: zero days	32	16	46	78	64	90
Approved % zero days	50.8%	26.2%	45.1%	91.8%	76.2%	79.6%
1-7	1	1	6	1	8	11
8-14	2	11	14	2	3	6
Approved % up to 14 days	55.6%	45.9%	64.7%	95.3%	89.3%	94.7%
15-28	16	23	25	0	3	2
29-56	5	10	6	1	0	2
More than 56	7	0	5	3	6	2
Total	63	61	102	85	84	113

These figures are a simple calculation from the research management database from date of review meeting to date of approval. The calculation is indicative of the profile of review time for applications, but does not account for:

- The 14-day period from agenda close date to meeting date. The approval timer technically commences on the agenda close date.
- Any period where the application is returned to the applicant for further information or amendment. The timer stops for periods when the application is not in the custody of the RIU.

Human Research Ethics

Human Research Ethics operational statistics

Table 12: Committee business by type by year

Item	2024	2023	2022	2021
Applications	394	377	362	406
Modification requests	337	298	235	300
Annual reports	181	119	113	130
End of project reports	300	277	277	212
Incident reports	1	2	0	0

Table 12 is a simple count of the type of agenda items considered by the committee over the year.

Table 13 Risk rating of applications since the establishment of the low-risk review pathway.

Application Risk Rating	2024	2023	2022	2021
Low risk	122	137	117	100
Not low risk	255	233	234	278
Total	377	370	351	378

The low-risk review pathway was only established in April 2021.

Table 14: HREC application outcomes by year

Outcome	2024	2023	2022	2021	2020	2019
Approved	341	355	326	353	277	275
Approved %	90.5%	95.9%	92.9%	93.4%	90.5%	87.0%
Declined	9	6	7	4	18	30
Did not Progress	27	9	18	21	11	11
TOTAL	377	370	351	378	306	316

The data above is point in time and project status may vary over time, this is more likely in data from the most recent calendar year.

Approved: projects considered in the year where approval was granted, independent of the time taken to receive that approval.

Declined: projects considered in the year that were declined or rejected by the committee.

Did not progress: projects considered in the year that failed to meet approval requirements or were not commenced by the applicant. This is normally due to the applicant and may occur because the applicant fails to provide additional information requested by the committee, withdraws their application or does not take up their approval.

Table 15: Days to approve an application once reviewed.

Number of days to approval	2024	2023	2022	2021	2020	2019
Approval ready: zero days	3	14	5	8	8	7
Approved % zero days	0.9%	3.9%	1.5%	2.3%	2.9%	2.5%
1-7	34	65	35	83	27	22
8-14	84	101	82	76	32	33
Approved % up to 14 days	35.5%	50.7%	37.4%	47.3%	24.2%	22.5%
15-28	101	95	108	98	95	79
29-56	86	61	71	51	80	84
More than 56	33	19	25	37	35	50
Total	341	355	326	353	277	275

These figures are a simple calculation from the research information database from date of review meeting to date of approval. The calculation is indicative of the profile of review time for applications, but does not account for:

- The 14-day period from agenda close date to meeting date. The approval timer technically commences on the agenda close date.
- Any period where the application is returned to the applicant for further information or amendment. The timer stops for periods when the application is not in the custody of the RIU.

Approval ready applications

An approval ready application is approved in committee at the first presentation of the application. Prior to 2024, the proportion of approval ready applications was 1.5 – 4.0%. The apparent reduction in this result for 2024 arises from a minor data processing change where the approval date was recorded as the date the formal approval was sent, instead of the date approval was granted. In this model most applications that were actually approved on first presentation to the committee were recorded with an approval period of 2 or 3 days instead of 0 days.

Also presented in Table 15 above, is the percentage of applications approved within 14 days of committee meeting which has varied between 22% and 51% of applications over the last six years. The selection of a 14-day measure is arbitrary but is taken to indicate a single loop of clarifying review with the HREC after committee consideration.

Table 16: Applications by cohort by year

Cohort	Number of Applications					
	2024	2023	2022	2021	2020	2019
Research	191	148	123	115	128	137
Higher Degree by Research (Student)	50	58	44	51	61	55
Masters	56	63	68	71	32	47
Honours	77	97	113	135	84	75
Undergraduate	1	3	2	6	1	2
Not specified	2	1	1	0	0	0
Total	377	370	351	378	306	316

Table 17: Applications by area by year

Area	Number of Applications					
	2024	2023	2022	2021	2020	2019
Faculty of Arts and Education	75	70	76	58	62	66
Faculty Business, Justice, and Behavioural Sciences	131	165	164	204	118	143
Faculty Science and Health	138	118	94	104	110	97
Research (not otherwise associated with faculty)	16	7	3	3	13	5
Other	3	4	12	8	3	5
Not recorded	14	6	2	1		
Total	377	370	351	378	306	316

Institutional Biosafety

Institutional Biosafety operational statistics

Table 18: Type of biosafety applications by year

Application type	2024	2023	2022	2021
Exempt dealings	7	13	3	1
Human biospecimens	0	2	4	2
Notifiable low risk dealings	0	3	3	0
Total	7	18	10	3

Table 19: Biological organism purchase applications by year

	2024	2023	2022	2021
Purchase requests	3	10	9	1

National Security Compliance

National security compliance committee

2024 saw the establishment of the National Security Compliance Committee (NSCC), replacing the more narrowly focussed Defence Trade Controls Committee. The purpose of the committee is to provide organisational oversight and coordination of processes and mechanisms to ensure that the University's people and information are safeguarded from foreign influence and interference, and compliant with legislated obligations over a range of emerging and sensitive areas of activity and interest to the University.

The NSCC oversees a broad range of legislative compliance responsibilities for the University, including:

- The University Foreign Interference Taskforce (UFIT) guidelines and implementation and actions under the Countering Foreign Interference Procedure.
- Membership of the Defence Industry Security Program.
- Adherence to a range of legislation related to foreign interference and influence, including:
 - Australia's Foreign Relations (State and Territory Arrangements) Act 2020 (Cth) including the Foreign Arrangements Scheme.
 - Foreign Influence Transparency Scheme Act 2018 (Cth) including the Foreign Influence Transparency Scheme.
 - Crimes Legislation Amendment (Combatting Foreign Bribery) Act 2024 (Cth).
 - Defence Act 1903 (Cth), including the Safeguarding Australia's Military Secrets Program.
 - Defence Trade Controls Act 2012 (Cth).
 - Security of Critical Infrastructure Act 2018 (Cth).

Operationally, this committee undertakes a very different range of functions to the other research integrity committees, in that it focusses on intuitional compliance rather than the review and approval of specific research activities

Two meetings of the new committee were conducted in the second half of 2024.

Radiation Safety

Radiation Safety operational statistics

Table 20: Type of radiation safety application by year

Application type	2024	2023	2022	2021
Research	5	5	6	2
Teaching (including placements)	23	21	21	31
Total	28	26	27	33

Glossary of terms

Table 21: Glossary of terms

AEC	Animal Ethics Committee
AI	Artificial intelligence
AIRI	Artificial intelligence and Research Integrity, as in working group
Animal Code	National Health and Medical Research Council (2013) Australian code for the care and use of animals for scientific purposes, 8th edition. Canberra: National Health and Medical Research Council.
ARC	Audit and Risk Committee
ARIC	Australian Research Integrity Committee
AWO	Animal Welfare Officer
DPC	Division of People and Culture
DPI	NSW Department of Primary Industries, now NSW department of Primary Industries and Regional Development (DPIRD)

HDR	Higher Degree by Research, often used as HDR Student.
HREC	Human Research Ethics Committee
IBC	Institutional Biosafety Committee
Investigation Guide (or Guide)	Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research 2018. National Health and Medical Research Council, Australian Research Council and Universities Australia. Commonwealth of Australia, Canberra
National Statement	National Health and Medical Research Council, Australian Research Council and Universities Australia (2025). National Statement on Ethical Conduct in Human Research. Canberra: National Health and Medical Research Council.
NHMRC	National Health and Medical Research Council
NSCC	National Security Compliance Committee
PO	Presiding Officer
Research Code	Australian Code for the Responsible Conduct of Research 2018. National Health and Medical Research Council, Australian Research Council and Universities Australia. Commonwealth of Australia, Canberra.
RI	Research Integrity
RIA	Research Integrity Advisor
RIU	Research Integrity Unit
RSC	Radiation Safety Committee
SOP	Standard operating procedure
TEQSA	Tertiary Education Quality Standards Association
URC	University Research Committee

Prepared by: Ms Elizabeth Harangozó, Research Integrity Manager and members of the Research Integrity Unit

Cleared by: Professor Michael Friend, Pro Vice-Chancellor Research (Performance and Governance)

Acknowledgement

The assistance of Mr John Burns, Research Reporting Officer, is acknowledged with gratitude in relation to the data analysis in this report