

Booklet 7

Processes for responding to complaints from research participants, alleged breaches of ethical standards, or appeals

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1.0 Introduction

Griffith University is committed to the highest ethical standards in the conduct of research at Griffith and the research community realises how privileged they are that members of the community are willing to participate in research, often without direct benefit to them.

Typically human research involves some degree of interaction between people. Sometimes such relationships can break down, leaving the parties confused, distressed and frustrated. In response to community expectation that the conduct of human research should be subjected to independent review, and the University's commitment to ethical practice, independent processes for responding to both concerns or complaints from the participants in University research, and to allegations of breaches of ethical standards have been established.

The standard of the University's human research ethics arrangements have been nationally recognised. These processes are based upon the principle of facilitating excellent and ethical research, through processes and resources that are responsive, timely and relevant. Nevertheless, there will still be circumstances where a researcher feels unable to resolve a matter with some element of the University's arrangements. Even though there is an attempt to approach all such matters as a discourse, with the parties working together to find a solution, there will be situations where this is not possible. The University has established an independent appeal process to respond to such situations.

This Booklet provides an overview in regards to the University's processes to deal with concerns/complaints, alleged breaches, and appeals.

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2.0 National guidelines

The [National Statement on Ethical Conduct in Human Research](#) is the Australian reference for human research ethics matters. Chapter 5.6 of the [National Statement](#) relates to the handling of complaints about researchers. This chapter specifies requirements in regards to:

- the initial receipt and handling of complaints;
- the formal investigation of complaints;
- the treatment of serious matters;
- the availability of external independent review;
- the interface with research misconduct processes; and
- the publication of institutional procedures in this regard.

The [Australian Code for the Responsible Conduct of Research](#) provides a framework for considering unresolved allegations of breaches of ethical standards and/or research misconduct.

Section 5.6.4 of the [National Statement](#) indicates that institutions must establish processes to deal with complaints about the conduct of review bodies in the review of proposed research.

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3.0 Researcher responsibilities

Researchers have principle responsibility for the ethical conduct of their research. These responsibilities include:

1. A researcher conducting human research must immediately report:
 - a) serious or unexpected adverse effects on participants;
 - b) proposed changes in the protocol; and
 - c) unforeseen events[*] that might affect continued ethical acceptability of the project.

* The University interprets this responsibility as referring to matters that were not canvassed in the application for ethical clearance, or situations where it becomes apparent that the risks associated with the project are no longer justified by the benefits.

The following are the standard conditions of Griffith University ethical clearance, which relate to reporting / monitoring.

Commentary

Historical experience with the 'types' of research that can generate complaints and other problems

Some of the most famous cases of significant ethical problems in research have related to clinical research (eg the Tuskegee and NZ 'Unfortunate Experiment' cases). However, it is worthwhile noting that the recent Australian cases that have generated media and community interest have related to research involving a telephone questionnaire and the production of a video 'documentary'.

Furthermore, in the case of universities it is often the case that the most common source of at least informal concerns relate to research in the broad social sciences and the fine arts.

This is because such research is typically people-based, and can raise issues where a participant can suffer a social, economic, professional or legal risk. These are matters which individuals are increasingly willing to take action.

The researchers must always:

- immediately advise the Secretary of the Griffith University Human Research Ethics Committee (HREC) if any complaints are made, or expressions of concern are raised, in relation to the project;
- suspend or modify the project if the risks are found to be disproportionate to the benefits, and immediately advise the Secretary of this action;
- withdraw any research participant from the project if continuation may be harmful to that person*, and immediately advise the Secretary of this action;
- respond in a timely manner to any instructions or requests from the HREC; and
- provide reports on the progress of the project (including at the completion of data collection / testing / experimentation), as requested by the Office for Research.

* This refers to risks / harms that were not canvassed in the application for ethical clearance or the informed consent materials that were supplied to participants.

Researchers who are any way unclear of their responsibilities in this regard should consult the Research Ethics Adviser (REA) in their element (see [Contacts](#) at the end of this Booklet).

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4.0 Supervisor responsibilities

The University considers the principal supervisor as the chief investigator for student research, even if the student holds an academic appointment in their own right.

The principal supervisor has primary responsibility for the ethical conduct of the project. The student is a named member of the research team and has shared responsibility for the ethical conduct of the project.

Even though the student can be the listed contact for a clearance (meaning that correspondence will be sent to them, and copied to her or his supervisor), the supervisor must stay abreast of the actual conduct of their student's project, and offer informed advice on ethical, responsible conduct, and regulatory matters.

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Hint and Tips

How to get the most from ethical review

1. During the planning phase of your research, consult the [National Statement on Ethical Conduct in Human Research](#) (2007).
2. Refer to the relevant Booklets of the *Griffith University Research Ethics Manual*.
3. When preparing your application for ethical clearance 'tell the story' of the issues you have identified, the available approaches and why you have selected a particular approach.
4. If the reviewers identify additional issues and / or propose a different approach, be prepared to enter into a constructive discourse to reach a solution which is ethically sound and enables you to conduct the research.
5. Make use of the REA for your area (see [Contacts](#) towards the end of this Booklet) if you advice or guidance.

Remember that your responsibility for the ethical dimensions of your research does not end with the completion of the ethical review process.

5.0 HREC responsibilities

The [National Statement](#) specifies the role and responsibilities of HRECs. Even more so than the 1999 edition of the *National Statement*, the 2007 edition stresses the importance of the transparency of ethical review and other processes, the need for positive two-way communication, and the responsibility of the institution to monitor the operation of its policies, systems and processes.

In response to these expectations, the University has adopted the following principles:

- the composition and operation of the committee should be available for public scrutiny (in a *Standard Operating Procedure* which is available from the research ethics web site (see [Contacts](#) for details);
- the deliberations of the committee and expedited reviewers should be based upon the [National Statement](#);
- the policy positions that underpin the decisions of the ethics committee and expedited reviewers should be transparent and consistent (which is one of the roles of the *Griffith University Research Ethics Manual*);
- the decisions of the committee and expedited reviewers should be communicated to applicants in a timely and clear manner, with advice on how best to resolve any outstanding matters;
- the committee and expedited reviewers should strive to engage and consult with the various elements of the University, and respond to the needs and challenges faced by researchers; and
- the committee should provide the University with regular reports in relation to its work.

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6.0 Institutional responsibilities

Both the [National Statement](#) and the [Australian Code](#) specify a range of institutional responsibilities in regards to the ethical and appropriate conduct of research.

These responsibilities include:

- promoting awareness of the [National Statement](#) and the [Australian Code](#);

Commentary

One of the advantages of ethical review

Since the 1960s the ethical review framework in Australia has been based upon the concept of persons who are independent from the research team reviewing the proposed work with reference to established national ethical standards. More recently this review has been conducted with a balance of internal and external perspectives, with technical, legal and disciplinary input, and with a prescribed community 'lay' input.

When designing a project it can sometimes be difficult to 'step back' and see ethical issues or problems with the project. The very familiarity the researcher(s) have of the project can sometimes make it hard to perceive such matters.

One of the significant advantages arising from the ethical review process is that a 'fresh set of eyes' looks at a project, with the related prompt for the research(s) to engage in a discourse about the ethical facets of a proposed project.

- promoting a culture of ethical and appropriate conduct;
- providing training in matters such as research ethics, responsible conduct, privacy, and conflicts of interest;
- resourcing of the ethical review processes;
- monitoring the conduct and operation of the ethical review processes and other elements of the University's human research ethics arrangements;
- responding to the recommendations of the Griffith University Human Research Ethics Committee; and
- establishing formal processes for the generation of policy, handling of complaints, and operation of the committee.

Griffith University has established human research ethics arrangements which meet and exceed the national standards.

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7.0 Independent contact

Section 5.6.1 of the [National Statement](#) directs that there must be a nominated person, who is available to participants, who can be contacted in relation to concerns or complaints about the ethical conduct of human research. This section also indicates that there must be processes to attempt to resolve the issues.

The University has nominated that the standard independent contact person is the Manager, Research Ethics (see [Contacts](#) for further information). Where there are situations where the Manager, Research Ethics is a potential respondent to a matter, the Senior Manager Research Policy (see [Contacts](#)) is the contact person.

There will be situations where language, geographic, access and/or contextual factors necessitate the identification of a different contact. See section [7.1](#) of this Booklet for further commentary on this matter.

7.1 Alternative contact

There can be circumstances where it is not practical or appropriate to list in the informed consent materials the standard University contact for concerns or complaints about the ethical conduct of a project.

Commentary

Another advantage of ethical review

Things can still go wrong with, and participants can still lodge complaints about, research that has gone through the ethical review process. As discussed above, review can help reduce the risks of this happening, but it cannot completely negate the risks.

However, if something does go wrong with a project that has been through ethical review, the investigation will almost be focussed on the University as a respondent (eg did the University's policies, processes or systems fail in some way).

By contrast, if a project has not been submitted for review, and something then goes wrong, it is more likely that the individual researcher(s) will be the focus of any investigation.

Commentary suggests that in the case of a researcher who fails to appropriately submit their work for ethical review, that researcher may not enjoy the full protection of the University's indemnification and insurance arrangements.

It is appropriate to not use the University's standard independent contact where:

- the participants cannot readily access a telephone or email;
- the participants do not speak English; or
- the participants might be apprehensive about contacting a University staff member.

In such situations an alternative contact should be identified. Ideally this contact should be someone who is independent from the research (and in the case of student research, the supervisory) team. However, there will be situations where this is simply impractical. Refer to the [Commentary side bar](#) for further discussion on the selection of an appropriate alternative contact.

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8.0 Concerns or complaints about a researcher and/or the ethical conduct of a research project

Section 5.6.1(b) of the [National Statement](#) specifies that institutions must establish processes for the receipt, handling and resolution of complaints. This section outlines the University's arrangements in regards to such concerns or complaints.

8.1 Scope

This section relates to situations where a concern or complaint is raised in regards to the conduct of a Griffith University researcher or research project (eg a research participant who raises concerns about the exclusion criteria that were used during the recruitment phase of a project).

8.2 Who has 'standing' to raise a concern or complaint?

Concerns or a complaint about research and/or the ethical conduct of a project will most typically be raised by a research participant or someone who is close to a participant. However, concerns or complaints could be raised by other parties, if they are considered to be in a position to know about the conduct of the researcher or project (see [Commentary side bar](#)).

Commentary

Providing information to potential participants

The [National Statement on Ethical Conduct in Human Research](#) (2007) specifies that potential participants must be provided with the details of the independent contact for any concerns or complaints about the ethical conduct of the project they are being asked to participate in (s5.6.1 and 5.6.7).

Consequently, the University's guidelines for the preparation of informed consent materials (Booklet 22 of the *Griffith University Research Ethics Manual*) specify that to be valid an informed consent package must include the details of the independent contact.

The University has also produced a publicly available information sheet which explains the University's approach to concerns or complaints about the ethical conduct of our research.

This is available from the 'public' human research ethics page (see the end of this Booklet for the URL).

8.3 Initial receipt

In most cases, an expression of concern or complaint will be made to the independent contact person (see section [7.0](#) of this Booklet). However, in some cases they will initially be received by the research team and then forwarded onto the Manager, Research Ethics.

In most cases, recruitment and data collection for a project will be suspended during the initial consideration of a concern or complaint. However, upon request from the research team, the Manager, Research Ethics can determine whether part or the entire project can continue to be conducted as per the approved protocol.

The Manager, Research Ethics will explore whether the matter should be handled as a formal complaint and be subject to investigation (see section [11.0](#) of this Booklet) or whether it is possible to resolve the matter informally. In the case of a more informal matter, the Manager, Research Ethics will liaise between the complainant and researcher(s) to see whether it is possible to reach a mutually satisfactory conclusion. In the case of an informal process, it may not be necessary (or indeed appropriate) for the complainant to be identified to the researcher(s).

The Manager, Research Ethics will keep the Chair and Deputy Chair of the HREC informed. During this process there should be a reflection on:

- i) Whether there is a need to modify the ethical clearance for the project;
- ii) Whether there are matters which should be drawn to the attention of reviewers in the review of similar projects in the future;
- iii) Whether there is need to modify or add to University policy; and/or
- iv) Whether there is a need for additional training resources for University researchers.

If such a matter is successfully resolved, the Manager, Research Ethics, and the Chair and Deputy Chair of the HREC will decide what, if any reporting, there should be (eg to the HREC and to the Deputy Vice Chancellor (Research)).

Where the matters cannot, or have not, been resolved to the satisfaction of all the parties, the matter needs to be referred for further review (as per sections [11.0](#) or [12.0](#) of this Booklet).

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Commentary

When is an alternative independent contact justifiable and/or necessary?

As was discussed in [s7.1](#) of this Booklet, there will be circumstances where giving the contact details for the Manager, Research Ethics, may not be appropriate or particularly helpful.

This can be the case where the potential participants do not have reasonable access to a means by which to contact the Manager, Research Ethics (example: a refugee in a border camp is unlikely to have easy access to email, phone or even perhaps postal services).

The use of an alternative contact can also be appropriate where language issues could be a problem (example: where the participants cannot confidently communicate in English).

This can also be appropriate where cultural or other facts mean that participants might be more comfortable discussing their concerns with a local person (example: an Australian Indigenous person might prefer that a local Elder was their contact).

8.4 Escalation to a formal complaint

As was noted in section [8.3](#) of this Booklet some expressions of concern or complaint will be immediately escalated to a formal complaint. In other cases, it may have proven impossible to satisfactorily resolve the matter via an informal process, and so a formal review is required.

Ordinarily a formal complaint should be in writing and indicate both the matters of concern, and (if relevant) why the result of the informal process was unsatisfactory.

See section [11.0](#) of this Booklet for more about the formal review process.

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9.0 Alleged breaches of ethical standards

The University uses the term 'alleged breaches of ethical standards' to describe matters of apparent significant concern that are identified by ethics reviewers (eg members of the HREC), staff members in the Office for Research, or other members of the University community.

For example a University officer may discover that a research team has changed an element of their project without submitting a variation request.

Alleged breaches of ethical standards are subject to formal review. See section [11.0](#) of this Booklet for more about the formal review process.

Matters that should be considered 'research misconduct' are handled differently (see section [13.0](#) of this Booklet).

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10.0 Failure to work with the ethics reviewers

There are a number of occasions when a researcher will interact with ethics reviewers (such as the HREC), or the Office for Research, on behalf of a review body.

Some examples are:

Commentary

Who is an appropriate alternative independent contact?

Having determined that the use of an alternative independent contact is appropriate, or indeed required (see above), the next step is selecting who that contact might be.

Ideally an alternative contact will:

- i) be independent of the research and/or supervisory team;
- ii) have no actual, or perceived conflict of interest;
- iii) be readily contactable by the participants;
- iv) be a credible independent contact; and
- v) be knowledgeable of the [National Statement](#) and (if appropriate) the local ethical requirements.

However, it is frequently not possible to identify such a person. At the very least, to be appropriate, the contact should be independent, credible and readily contactable.

Continued overleaf

- during the review when a researcher may be asked to clarify the reasons for her or his selected approach to an issue;
- after the review when a research might be asked to provide some paperwork for the file;
- during the conduct of research when a research may be asked for an ethical conduct report or to participate in an audit; and
- at the completion of data collection when the researcher(s) will be asked for a final ethical conduct report.

There will be valid circumstances where there can be reasons for a delay in responding to a request from the Office for Research (on behalf of a reviewer) – for example the research student might be on a leave of absence. The University's research ethics system has provision for such circumstances. However, a member of the team must contact the Office for Research so a 'deferral date' for the matter can be added to the system.

The University's system will continue to issue reminders until either the outstanding matter has been satisfactorily resolved or the matter is recorded as deferred.

If the matter remains unresolved after repeated reminders, the system will flag the project for formal breach action. Breaches are reviewed via the formal review process. See section [11.0](#) of this Booklet for more about the formal review process.

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11.0 Formal investigation

As was noted previously in this Booklet, when a matter of concern or dispute arises, there will ordinarily be an attempt to resolve these matters via an informal process of consultation and mediation. However, the University has a formal investigatory process for situations where either: a) the informal process was unable to resolve the matters to the satisfaction of the parties; or b) the matters are considered to be serious enough that there should only be a formal investigation.

This section outlines the University's standard arrangements in regards to the commencement, conduct and outcomes of a formal investigation.

Where it is not practicable to find a person or agency to serve as an alternative contact, the research team may themselves have to be the first contact point for any concerns or complaints about the ethical conduct of the research.

Clearly, this is less than ideal, but sometimes may be the only practical solution. In such cases, the researcher(s) must be careful to be accepting and sensitive if approaches with a concern or complaint.

Whatever the arrangements in regards to an alternative independent contact, the research team must promptly notify the Manager, Research Ethics once they become aware that a concern or complaint has been received.

When applying for ethical clearance, any such arrangements must be described, this should be discussed in the informed consent materials, and an assurance must be provided that the research team will promptly notify the Manager, Research Ethics once they become aware that a concern or complaint has been received.

11.1 Scope

These arrangements are to be used for the following matters, where a concern or complaint has arisen, and it was either not considered appropriate, or was not possible, to resolve the matter via an informal process:

- a concern or complaint from a research participant;
- a concern or complaint about the ethical conduct of a project;
- a concern or complaint about the ethical conduct of a researcher;
- an allegation of a breach of ethical standards;
- a failure by a researcher to work appropriately with the ethics reviewers and/or the Office for Research; or
- a concern or complaint about the HREC, ethics reviewers and/or the Office for Research.

11.2 Documentation

Generally a formal complaint should be in writing or via email. However, the Deputy Vice-Chancellor (Research) may elect to commence a formal investigation process without a formal complaint.

There must be an established and documented agreement on whether the complainant will be identified to the subject of the complaint and the nature of the documentation that will be provided to the subject of the complaint. The approach in this regard must comply with the standards of natural justice, procedural fairness and privacy.

The Office for Research will compile the following documentation for the Deputy Vice-Chancellor (Research):

- A covering briefing note providing commentary on the potential breach.
- A copy of the allegation about the potential breach.
- A copy of the original application, and any reports or modifications to the project.
- A report from the University's research ethics database, that provides details of the operative dates of the project, the outcomes of the original ethics review, and any other matters relevant to the approval status of the project.
- Details of any informal action that has already been taken.

Commentary

Assessing the standing of an individual to raise a concern or complaint about the conduct of a research project

The [National Statement](#) specifies no explicit limit on who can raise a concern or complaint about the ethical conduct of the research project.

Consequently, when assessing the 'standing' of a complainant, the University will take a broad interpretation of who can raise a concern or complaint.

In the case of formal complaints and investigations, generally it would be expected that a complainant would have experienced a direct harm and/or have a direct interest that has been adversely impacted upon by the research (so this would include family members or others who are associated with a participant).

In the case of less formal proceedings, anyone with direct knowledge of the conduct of a project might be considered to be able to raise a concern or complaint.

11.3 Conduct of the investigation

The conduct of an investigation will be in a manner determined by the Deputy Vice-Chancellor (Research). However, the following general principles must be observed in the conduct of such an investigation:

- The office of the Deputy Vice-Chancellor (Research) will confirm receipt of the formal complaint, and this will include an indication of the investigation process that will be followed and the anticipated timeframe for the investigation.
- The subject to the complaint should have the opportunity to respond to the details of the allegation (see [11.2](#))
- In the case of all matters except the investigation into the HREC, other reviewers and/or the Office for Research, during the course of the investigation, the ethical clearance for the project will be suspended, and no further work (recruitment or data collection) will be undertaken until the outcome of the investigation is known (see [Commentary](#)).
- The Deputy Vice-Chancellor (Research) may interview other parties in relation to the project (eg relevant Head of School, an external stakeholder or an external expert advice).
- Notification of the outcome of the investigation must be provided in writing to the complainant, the researcher and the HREC.

11.4 Outcomes of the investigation of an alleged breach

The typical outcome for an investigation includes:

- No further action is required.
- The researcher is instructed to modify the design and / or conduct of their project.
- The ethical clearance for the particular project is withdrawn.
- The ethical clearance for the particular project is withdrawn, and all other clearances held by the researcher are suspended pending further investigation.
- The matter is to be considered further as a potential matter of research misconduct (see [13.0](#)).
- The original review decision is upheld, referred for comment by another body, set aside and to be referred for review by another body.

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Commentary

The continuation of data collection during a formal investigation

There can be circumstances where it might be appropriate to continue a component of a project, or even all of the data collection, during the conduct of a formal investigation.

The researcher(s) must request permission for such a continuation. This request is considered by the Deputy Vice-Chancellor (Research) who will usually seek the advice of both the Office for Research and the Chair of the HREC.

Generally the decision of whether such a continuation is appropriate will depend upon factors such as:

- i) the seriousness of the matter being investigated; and
- ii) the degree to which the investigation relates to the component of work the researcher(s) wish to proceed.

The researcher(s) will be notified in writing if their request has been approved.

12.0 External independent investigation

Section 5.6.6 of the [National Statement](#) specifies that institutions must identify an external individual or agency where unresolved matters can be taken for an independent external review.

An appropriate external review body will be arranged by Griffith University based upon the specifics of the research methodology, context and complaint.

When the complainant and the subject of the complaint are advised of the outcome of the formal internal investigation they are advised of the existence of the external independent investigation mechanism.

If the Deputy Vice-Chancellor (Research) or the Office for Research (see Contact details towards the end of this Booklet) is advised by one of the parties that they wish to seek such a further investigation, an external reviewer will be advised, so they can contact the party directly.

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13.0 Research misconduct

The [Australian Code](#) outlines the processes to be followed in the case of an allegation of research misconduct. The arrangements described in this Booklet do not apply to allegations of research misconduct. However, an outcome of a formal investigation could be to commence research misconduct proceedings.

There are also some human research ethics matters that are more appropriately handled as potential research misconduct. For example: an allegation that a researcher consistently fails to seek ethical clearance for their work; or an allegation that a researcher has intentionally, or through apparent significant negligence, places participants at serious risk, may be handled as a research misconduct investigation. This determination is at the discretion of the Deputy Vice-Chancellor (Research).

See the Appropriate conduct in research web site for more about the University's approach to allegations of research misconduct.

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Contacts

There are a number of resources available to assist researchers formulate an appropriate response to a question or challenge. This includes the Griffith University Research Ethics Manual and the Human Research Ethics Information Sheet Series. These documents are available from the URL below.

Research students –

The first point of contact for research students for advice on any research ethics matter is always your supervisors.

REAs – All academic elements of the University have been asked to appoint at least one member of academic staff as a Research Ethics Advisor. REAs are a local contact for advice, information and suggestions. The contact details of all the current REAs can be found on the URL below.

Office for Research – Staff in the Office for Research (see below) are available to advise with the process of lodging an application or other administrative matters, procedural or policy questions. However, you will be asked what advice you have sought at received already (eg consultation with the REA for your area).

Continued overleaf

14.0 Staff misconduct

Neither the [National Statement](#), the [Australian Code](#) nor the processes outlined in this Booklet are intended for use in regards to staff misconduct matters (eg the bullying of more junior staff members, or the misuse of University facilities).

The handling of such matters is as per the manner specified in current industrial agreements and/or contracts.

Please contact the University's human resources department with any questions in regards to staff misconduct matters or processes.

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15.0 Informing policies, processes, systems and the conduct of ethical review

Sections 5.1.13 and 5.1.14 [National Statement](#) establish an expectation that institutions will remain reflective about, and monitor the operation of, its policies, processes and systems, and be responsive to the documented experience of research participants.

In a significant proportion of cases, the matters described in this Booklet will not relate to a serious and intentional breach of ethical standards. Even though modifications to a clearance, the discontinuation of a project and/or action against a researcher, will rarely result from the investigations into these matters, it is important that the University have a mechanism to feed the expressed concerns or complaint into the process of reviewing and improving the University's research ethics arrangements.

During the handling of any matter, whether via the informal, formal or external pathways, there will be consideration whether the case provides useful commentary to inform a change to the relevant policies, processes or systems. At the very least, as an element of the final reporting on the handling of the matter, there will be a prominent reflection on, and recommendations concerning any 'lessons' for the University.

Experience suggests that, in the case of many complainants, such a thoughtful and responsive attitude towards their concerns is their primary objective in raising the matter.

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Contacts

Continued from previous

Manager, Research Ethics

Dr Gary Allen
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g.allen@griffith.edu.au

Research Ethics Administrator

Ph 3735 4375
Ph 5552 7226

On the ethics web site you will find:

The other booklets of
the *Griffith University
Research Ethics
Manual*

The *Griffith University
Human Research
Ethics Information
Sheet Series*

Either downloadable
copies of, or links to,
the various
application forms

Contact information
for the REAs and
other contacts

Educational and other
resource material

Useful external links

16.0 Protections for complainants

Historically individuals who raise concerns, whether as a whistleblower or within some other frame, have too often suffered negative consequences. The University is committed to the principle that research ethics resides in a 'shared space' where members of the wider community can and should feel free to engage in a healthy (and sometimes public) discourse about ethical issues. As such, the University would apply the same standards and protections to a person who raises a concern about research ethics at Griffith University, as would be applied to a whistleblower (ie that an individual should suffer no economic or professional harm from raising a concern).

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17.0 Media enquiries

In the event that a staff member or student receives a direct enquiry about an allegation of a breach of ethical standards, the details of the enquiry and called should be noted, and the offer made to telephone the caller back. The staff member or student should then immediately contact the research ethics team (see left), who will liaise with Office of the Deputy Vice-Chancellor (Research) to organise a reply to the enquiry. This ensures a consistent, informed and strategic response to any such enquiries.

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