

Academic Misconduct Policy

Department	Education Services
Audience	Doctors in training
Maintenance	Manager Standards and Accreditation
Approved by	ACRRM Board
Approved date	December 2017
Effective date	1 January 2018
Review date	December 2020

1. Purpose

1.1 The purpose of this policy is to define how alleged breaches of the Academic Code of Conduct will be investigated and the penalties that may be applied for proven academic or personal misconduct.

2. Application and scope

- 2.1 The policy applies to doctors seeking selection into training or in training, on the following:
 - 2.1.1 Training Pathways; Australian General Practice Training (AGPT), Independent Pathway (IP) and Remote Vocational Training Scheme (RVTS)
 - 2.1.2 Assessment Pathway: Specialist Pathway
 - 2.1.3 Advanced Specialised Training (AST); outside the ACRRM Training Program

3. Policy

- 3.1 The College expects high levels of academic integrity and personal behaviour of doctors in education and training programs.
- 3.2 The College encourages reporting where there are reasonable grounds to allege that misconduct has occurred.
- 3.3 Misconduct may be reported by any organisation or individual involved in College education or training programs.
- 3.4 All instances of alleged misconduct will be investigated and, if proven, penalties applied.
- 3.5 Except as required by law or other applicable regulations:



- 3.5.1 Any allegation of misconduct or any disclosure will be kept confidential, unless or until such time as the allegation is proven.
- 3.5.2 The name of any individual or organisation alleging misconduct against a doctor will remain confidential, irrespective of if or when the allegation is proven.

4. Misconduct procedure

- 4.1 Allegations must be made in writing to the College in a timely way, within 14 days of the misconduct occurring or the writer becoming aware of the misconduct.
- 4.2 Allegations must be supported by evidence.
- 4.3 The College will notify the nominated doctor of the allegation/s in writing.
- 4.4 The nominated doctor will have 14 days to respond in writing to the allegation/s.
- 4.5 The initial investigation will be conducted by the College, with reference to relevant policies.
- 4.6 The College will determine if the nominated doctor's misconduct is 'minor' or 'substantial'.
- 4.7 In cases of 'minor misconduct', the College will evaluate the evidence and consider whether it is more likely than not, on the balance of probability, that the allegations are proven.
- 4.8 Where the 'minor misconduct' is proven the College will determine the penalty.
- 4.9 The College will advise the nominated doctor within 14 days of receiving the nominated doctor's response to the allegations, either:
 - 4.9.1 the outcome of the investigation and any penalties; or
 - 4.9.2 the alleged misconduct is considered a 'substantial misconduct' and a Misconduct Committee is to be established.
- 4.10 Where the allegation is proven, the body responsible for the doctor's training program (i.e. Regional Training Organisation, Remote Vocational Training Scheme or the College) will be notified of the misconduct and penalty applied.

5. Substantial misconduct procedure

- 5.1 Where the College determines that the misconduct is 'substantial misconduct' a Misconduct Committee will be convened.
- 5.2 The Misconduct Committee will be comprised of a minimum of three voting members:
 - 5.2.1 Censor in Chief or delegate
 - 5.2.2 Chief Executive Officer or delegate
 - 5.2.3 Director of Training or delegate
- 5.3 The Censor in Chief will chair the committee.
- 5.4 The Censor in Chief or delegate shall notify the nominated doctor that a Misconduct Committee will be convened and advise of:



- 5.4.1 the date, time and location (if face to face) of the conduct hearing
- 5.4.2 the membership of the Misconduct Committee
- 5.4.3 the right of the nominated doctor to present his/her case to the Misconduct Committee and that this presentation may be by teleconference
- 5.4.4 the right to be advised by a legal representative or support person during the hearing
- 5.4.5 all relevant information concerning the nominated doctor's misconduct held by the College (subject to those obligations of privacy and confidentiality which may apply).
- 5.5 At least five working days prior to the hearing, the nominated doctor must:
 - 5.5.1 provide the College with written submissions and copies of any documents and records upon which they wish to rely
 - 5.5.2 advise in writing if they will be accompanied by a legal representative or a support person providing the name and position of this person.
- 5.6 Additional information or notification of an accompanying person provided after this date will only be considered with leave from the Chair of the Misconduct Committee, and only if the Chair in their unfettered discretion considers that the material is significant and relevant to the hearing.
- 5.7 The Censor in Chief or delegated nominee will notify the subject of the investigation of its outcome and any penalties imposed within 14 days of an outcome being determined.
- 5.8 Where the allegation is proven, the body responsible for the doctor's education or training program (for example a Regional Training Organisation) will be notified of the misconduct and penalty implemented.

6. Misconduct Committee

- 6.1 The Misconduct Committee will conduct its affairs with as little formality as possible and in accordance with the procedures set out in these rules but otherwise, subject to these rules, will have full power to regulate its conduct and operation.
- 6.2 The nominated doctor has the right to appear before the Misconduct Committee.
- 6.3 The nominated doctor has the right to be advised by a legal representative or support person during the hearing. Legal advisors and/or support persons may not address the Misconduct Committee or act as advocate for the nominated doctor but the legal advisor (if any) may, in special circumstances, be invited to address the Misconduct Committee regarding any particular legal issue that the Misconduct Committee believes cannot adequately be addressed by the nominated doctor.
- 6.4 The Misconduct Committee must act according to the rules of procedural fairness and natural justice and decide each allegation on its merits.
- 6.5 The Misconduct Committee is not bound by the rules of evidence and, subject to the rules of procedural fairness and natural justice, may inform itself on any matter and in such a manner as it thinks fit.
- 6.6 The Misconduct Committee shall be entitled to consider all information which it considers relevant and may invite any person to appear before it or to provide information. Witnesses are not compellable.



- 6.7 All proceedings shall remain confidential except for information relating to decisions distributed to the College President, the College Board, the relevant College Department, Committee and the training organisation responsible for the doctor's education.
- 6.8 All voting members of the Misconduct Committee are entitled to vote on decisions and penalties.
- 6.9 Decisions will be on a simple majority voting basis by those comprising the Misconduct Committee. In the event of a tied vote, the Chair will exercise a casting vote.

7. Penalties

- 7.1 When determining a penalty, the following will be taken into account:
 - 7.1.1 previous misconduct
 - 7.1.2 any intention behind the misconduct, and the level and effect of that conduct
 - 7.1.3 any personal health, family or other factors that contributed to the conduct
 - 7.1.4 other matters relevant to the particular circumstances.
- 7.2 Penalties for proven 'minor misconduct' may include one or more of the following:
 - 7.2.1 no penalty
 - 7.2.2 no penalty but misconduct recorded on file
 - 7.2.3 a private reprimand
 - 7.2.4 require an apology to any person aggrieved by the conduct
 - 7.2.5 require that the individual receive counselling
 - 7.2.6 require completion of additional training or activity e.g. project or essay
 - 7.2.7 withhold assessment outcome until other penalty completed
 - 7.2.8 other penalty as considered appropriate.
- 7.3 Penalties for proven 'substantial misconduct' may include one or more of the following (in addition to penalties outlined above):
 - 7.3.1 revise assessment score to a fail grade
 - 7.3.2 require a different form of assessment, at the cost of the doctor in training
 - 7.3.3 require reimbursement of any costs associated with the investigation
 - 7.3.4 suspend from participating in training and/or assessment for a period of time
 - 7.3.5 remove from training or education program
 - 7.3.6 suspend or remove College membership
 - 7.3.7 notify the Australian Health Practitioner Regulation Agency



7.3.8 other penalty as considered appropriate.

8. Reconsideration, review and appeal

8.1 Decisions of a misconduct investigation are subject to reconsideration, review and appeal. These provisions are outlined in the Reconsideration, Review and Appeals Policy.

9. Related Documentation

- 9.1 Academic Code of Conduct
- 9.2 Fellowship Assessment Handbook
- 9.3 Fellowship Training Handbook
- 9.4 Performance and Progression Policy
- 9.5 Registrars in Difficulty Policy
- 9.6 Withdrawal from Training Policy
- 9.7 Reconsideration, Review and Appeals Policy

10. Definitions

Term	Definition (with examples if required)
Academic misconduct	 Includes, but not limited to: cheating in assessments taking prohibited resources into an assessment activity misrepresenting academic or other material as original, such as creating or submitting false documentation or impersonating another author sharing confidential information with others, including assessment content inappropriate use of patient information when used for the purpose of training or assessment disrespect for intellectual property, including intentional plagiarism failure to obtain or implement ethical approval when required attempting, inciting or assisting others to undertake any of the above acts making an allegation of misconduct against another vexatiously, in bad faith or knowing the allegation to be untrue.



Personal misconduct	 Includes, but not limited to: inappropriate conduct during education or training activities that interferes with others' participation or presenters' delivery inappropriate conduct when interacting with those delivering or supporting delivery of training or assessment behaviour likely to bring the training program or the College into disrepute review of or changes to medical registration status other breaches of the Academic Code of Conduct
Minor/substantial misconduct'	The term 'minor misconduct' is used when the nominated doctor's misconduct is of a less serious nature in the College's view and the term 'substantial misconduct' when the nominated doctor's misconduct is of a more serious nature in the College's view. Factors that are taken into consideration when determining the seriousness of the act of misconduct are: type of misconduct the extent of misconduct the frequency of misconduct the intent of the doctor in training the impact of the misconduct. Academic misconduct is considered 'substantial misconduct' unless it may reasonably be judged to result from careless practices and/or not following specific guidelines and the misconduct outcome compromises assessment to a limited extent only.
	Personal misconduct is assessed using the factors listed above to determine if it is minor or substantial misconduct.

6. Revision History

Date of Version	Pages revised/brief explanation of revision
December 2017	First version of policy