

Academic Staff Misconduct Policy

Health Education and Training Institute Higher Education

Document Reference Number	HEP18/6
Superseded Version	Academic Staff Misconduct Policy v1.1
NSWIOP Document Number	IOPD17/10179[v2]
TRIM Document Classification	Governance
Framework Part	Part 4 – Course Impact (Encompassing Academic Learning Standards)
Approval date	17 January 2025
Publication date	21 January 2025
Summary	This policy informs and raises the awareness of Academic Staff to the risks and exposures they may encounter in the workplace in terms of potential misconduct and provides information about how such exposures may be avoided and about the behavioural and conduct standards which apply.
Keywords	Staff, students, misconduct
Authoring Portfolio	Mental Health
Contact	Associate Director Education and Training
Consultation	as per Document History
Distribution	Higher Education
Applies to	Higher Education
Related documents	HEP18/24 Health Education and Training Institute Higher Education Student Academic Misconduct Policy HEP18/19 Health Education and Training Institute Higher Education Quality Assurance Policy HEP18/2 Health Education and Training Institute Higher Education Academic Governance Framework Policy NSW Health Policy Directive PD2015_049 Code of Conduct NSW Health Policy Directive PD2018_031 Managing Misconduct NSW Health Policy Directive PD2015_045 Conflicts of Interest and Gifts and Benefits NSW Health Policy Directive PD2023_007 Intellectual Property Arising From Health Research NSW Health Policy Directive PD2021_030 Prevention and Management of Workplace Bullying in NSW Health NSW Health Policy Directive PD2013_007 Child Wellbeing and Child Protection Policies and Procedures for NSW Health NSW Health Policy Directive PD2020_044 Managing Child Related Allegations, Charges and Convictions against NSW Health Staff NSW Health Policy Directive PD2016_029 Corrupt Conduct - Reporting to the Independent Commission Against Corruption (ICAC) NSW Health Policy Directive PD2009_076 Communications – Use and Management of Misuse of NSW Health Communication Systems
Review date	February 2027
Risk Assessment	As per Attachment 1 to this document.

Issued under the authority of the Health Education and Training Institute Higher Education Governing Council

Please note printed copies of this document are uncontrolled, to ensure you are viewing the latest version of this document, please refer to our website <http://www.heti.edu.au/policies-and-procedures>

Health Education and Training Institute Higher Education Academic Staff Misconduct Policy

Policy Statement

Health Education and Training Institute (HETI) Higher Education is committed to academic integrity, honesty and the promotion of ethical scholarship as well to the observance of the NSW Health Code of Conduct and other Policies. It expects its academic staff (however engaged) to respect these values.

Aims and Objectives

1. The policy identifies key behaviours and practices that academic staff are required to demonstrate.
2. The policy is a key component of the HETI Higher Education's approach to ethical scholarship and aims to integrate all elements of academic staff conduct and behaviour that impinge on ethical scholarship. This includes standards of both conduct and behaviour that apply to activities of a scholarly character and those which do not, but are of general application and are required of all staff working in NSW Health as set out in the NSW Health Code of Conduct in force from time to time. Should any inconsistency arise at any time between the terms of this document and any NSW Health Policy Directive, the latter shall prevail to the extent of such inconsistency.
3. The policy applies to all academic staff of HETI Higher Education, irrespective of the nature of their engagement. Academic staff may be employees (permanent, casual or temporary), contractors or visiting staff, whether paid or unpaid.
4. The list of topics addressed in the policy is not exhaustive but represents the range of conduct and behavioural risks that academic staff are most likely to encounter.

Overview

5. Academic staff must not engage in any form of academic misconduct. They must discharge their responsibilities set out in the HETI Higher Education Quality Assurance Policy to the best of their ability.
6. Academic staff undertaking research must ensure that they do so at all times in accordance with any HETI Higher Education Research Code of Practice in effect from time to time and which is formulated in accordance with the Australian Code for the Responsible Conduct of Research (2007 – currently under review).
7. Academic staff must ensure that they are familiar with all other relevant NSW Health policies (non-academic) and comply with them, ensuring that they guard against the risk of exposing themselves to committing breaches of such policies.
8. All cases of suspected or alleged misconduct by academic staff will be managed:
 - a. In accordance with NSW Health Policy Directive PD2018_031 Managing Misconduct and;
 - b. Where academic misconduct is involved, including research misconduct, also in accordance with the processes established for investigating and determining such matters under the HETI Higher Education Academic Governance Framework Policy.

Definitions

9. The following definitions apply for the purposes of this policy:
 - a. Benefit: is a service or intangible item which is of value to the receiver. Examples include access to a private box at a sporting event, a new job or promotion, preferential treatment, or access to confidential information;
 - b. Bribe: is a gift or benefit offered to, or solicited by a staff member to influence that person to act (or not act) in a particular way;
 - c. Bullying (as defined in NSW Health policy): means behaviour which is offensive, intimidating, intended to humiliate, or threatening, and is directed at a staff member or a group of staff members, and occurring in the course of or related to work in NSW Health. Workplace bullying will generally meet the following criteria:
 - i. It is repeated and systematic (although a serious single incident can also constitute bullying);
 - ii. It is unwelcome and unsolicited;

- iii. The recipient/s consider/s the behaviour to be offensive, intimidating, intended to humiliate or threatening;
 - iv. A reasonable person would consider the behaviour to be offensive, intimidating, intended to humiliate or threatening.
- d. Corrupt conduct (as defined in NSW Health policy): is deliberate or intentional wrongdoing, not negligence or a mistake, which involves or affects a NSW public official or public sector organisation. It can take many forms and occurs when:
 - 1. A public official improperly uses, or tries to improperly use, the knowledge, power or resources of their position for personal gain or the advantage of others;
 - 2. A public official dishonestly exercises official functions, improperly exercises official functions in a partial manner, breaches public trust or misuses information or material acquired during the course of his or her official functions;
 - 3. A member of the public influences or tries to influence, a public official to use his or her position in a way that is dishonest, biased or breaches public trust.
- e. Expert comment: means comment within the staff member's area of academic and/or professional expertise;
- f. Gift or benefit: means any item, service, prize, hospitality or travel, offered or provided by a customer, client, applicant, supplier, potential supplier or external organisation, which has an intrinsic value and/or a value to the recipient, a member of their family, relation, friend or associate;
- g. Media: means all forms of print, radio, television, film, online, digital and social media;
- h. NSW Health: means all public health organisations (including HETI Higher Education, the HETI and the NSW Institute of Psychiatry), the NSW Ministry of Health, the Ambulance Service of NSW and all other organisations under the control of the Minister or Director-General of the Ministry of Health;
- i. Personal relationship: refers to relationships between staff and individuals or people that extend outside HETI Higher Education or related duties, or a relationship where a reasonable person might perceive that there could be some bias, either positive or negative, resulting from that relationship. These include relationships with:
 - 1. Immediate family, e.g. spouse or partner, parents, children, step-children, etc.;

2. Close relatives, e.g. aunts, uncles, cousins, nephews, nieces etc.;
 3. Friends where the friendships extends outside the workplace;
 4. Sexual partners;
 5. Rivals, e.g. competitors or persons with who one has a history of serious conflict or enmity; and
 6. The relatives of any of the above listed at iii to v.
- j. Public commentary: means comments made under the name of HETI Higher Education or HETI that may reach the community, including but not limited to media interviews, public speaking engagements, public inquiries or submissions, forums and blogs, letters to newspapers and comments on websites and social networks;
- k. Social media: means any facility for online publication and commentary through and on the internet, including but not limited to blogs, wikis, podcasts, forums, video and photo posts, RSS, social bookmarking and any social networks or networking sites including but not limited to, Facebook, LinkedIn, Twitter, Pinterest, Instagram, Google and Flickr;
- l. Staff: refers to any person working in a permanent, temporary, casual, term appointment or honorary capacity within NSW Health. It includes volunteers, contractors, visiting practitioners, visiting medical officers, students, consultants and researchers.

Academic Misconduct

10. Academic staff should be familiar with long recognised forms of academic misconduct such as plagiarism, cheating and collusion and must not engage in such activities themselves, in their teaching, research or associated activities. Academic staff who detect or suspect such misconduct by students must report the matter in accordance with the HETI Higher Education Student Academic Misconduct Policy which applies to students.
11. HETI Higher Education Academic Staff conducting research must comply with the following at all times:
 - a. Promote the highest possible standards of research practice;
 - b. Protect all those associated with the research from any avoidable harm that may arise from failures to maintain high standards of research conduct;
 - c. Discourage misconduct and fraud by encouraging the open presentation and discussion of results via peer review mechanisms;
 - d. Apply clear procedures for dealing with allegations of research misconduct;

- e. Protect or otherwise balance the rights of all those associated with the research.
-

Other forms of misconduct which academic staff might be at risk of exposure to:

12. Apart from Academic Misconduct there is a range of other forms of conduct which are prohibited under the NSW Health Code of Conduct because they offend the NSW Health CORE values of:
 - Collaboration
 - Openness
 - Respect
 - Empowerment

And/or also offend the following expected standards of conduct set out in the Code to:

- Promote a positive work environment
- Demonstrate honesty and integrity
- Act professionally and ethically
- Use official resources lawfully, efficiently and only as authorised
- Maintain the security of confidential and/or sensitive official information
- Maintain professional relationships

13. The following list and associated explanations is not exhaustive but represents some forms of conduct to which academic staff might be at greater risk of exposure and which may amount to misconduct. Note that the list includes a number of mandatory reporting requirements, which if not met, will likely amount to misconduct.
-

Conflicts of Interest and Gifts and Benefits

14. A conflict of interest can arise where a staff member could be influenced or perceived to be influenced, by a competing interest when carrying out their official duties. Competing interests may arise through personal or private interests, or through separate professional interests. Having a conflict of interest is not necessarily a problem; it is how it is managed that is important.
-

15. Academic staff must familiarise themselves with NSW Health Policy Directive PD2015_045 Conflicts of Interest and Gifts and Benefits which requires that staff identify and declare their own conflicts of interest including actual, potential or perceived conflicts of interest. HETI Higher Education has a procedure in place for the declaration and management of conflicts of interest which must be adhered to.
16. Personal or private interests are those interests that can bring personal benefit or advantage (or disadvantage), or the perception of a personal benefit or advantage (or disadvantage), to a staff member as an individual, or to others to whom the staff member has personal, professional or business relationships or otherwise associates and whom they may wish to benefit, advantage or disadvantage.
17. A conflict can also arise where a staff member has more than one role or roles in a number of organisations. Failure to keep these roles separate may give rise to significant, adverse consequences, ranging from poor performance in one or more roles, to unethical, unlawful or improper decision making (for example improper use of information which gives advantage to the second organisation). These types of conflicts can be more difficult to recognise because they do not involve obvious private interests. They may sometimes be described as competing interests or a conflict of duty and should be managed as conflicts of interest.
18. An “interest “ can either be:
 - a. A pecuniary interest: one associated with a reasonable likelihood or expectation of financial gain (or loss) to a person or someone associated with them – e.g. relatives, friends, partners, work or professional colleagues or other associates;
 - b. A non-pecuniary interest: one which does not relate to money but which may relate to a non-financial gain or loss to a person or someone associated with them. Examples might include kinship, friendship, or membership of an association, society or trade union.
19. Conflicts of interest can be:
 - a. Actual: where a person’s duties as a member of staff (that is the principal goals of the profession or activity, the duties of the position, the protection of clients, the health of patients, or the integrity of research) may be unduly

- influenced by a secondary interest (such as a personal or competing professional interest, including secondary employment or office);

 - b. Perceived or apparent: where it could reasonably be perceived that the competing interests could improperly influence the performance of duties – whether or not this is in fact the case;
 - c. Potential: where the competing interests have the potential to conflict with official duties in the future.

20. The following examples are provided to develop a better understanding through illustration, of the nature of conflicts of interest that may arise in a higher education setting so that staff will be able to recognise conflicts of interest when they arise and take appropriate action to avoid and/or manage them.

Relationships with Students

21. Conflicts of interest may arise where a staff member has or enters into a personal relationship or private interest relationship with a student or students.
 22. Where a staff member has a personal relationship (as defined in this policy) with a student the following activities will almost certainly represent a conflict of interest:
 - a. Teaching, marking or assessing the work of that student;
 - b. Undertaking administrative tasks such as registering or accepting assessment items, processing results or invigilating exams for that student;
 - c. Recommending or approving the allocation of resources such as for travel and accommodation, or the awarding of a prize or scholarship to that student;
 - d. Participating in a process relating to the admission, advanced standing, progress or similar in relation to the student;
 - e. Participating in misconduct or disciplinary proceedings for that student.
 23. Whilst it is appropriate for academic staff to establish good rapport with students, appropriate boundaries need to be maintained and staff should avoid actions or activities that may create the perception of favouritism or unfairness, such as:
 - a. Allowing access to HETI Higher Education resources that are not normally available to students such as staff computers, staff offices or staff log-ins;

- b. Excessive socialising with a student or students outside of the teaching and learning setting;
 - c. Lending money to or borrowing money from a student or students; and
 - d. Giving gifts to or accepting gifts from a student or students (Refer to 27 and 28 below).
24. Offering or providing private tuition to HETI Higher Education students, whether or not for payment is considered a clear conflict of interest and is prohibited.

Gifts and Benefits

- 25. As required by NSW Health Policy Directive PD2015_045 Conflicts of Interest and Gifts and Benefits, staff must not seek or accept any payment, gift or benefit intended or likely influence, or that could be reasonably perceived by an impartial observer as being intended or likely to influence the staff member:
 - a. To act in a particular way (including making a particular decision);
 - b. To fail to act in a particular circumstance; or
 - c. To otherwise deviate from the proper exercise of their official duties.
- 26. Staff must:
 - a. Not solicit gifts and benefits;
 - b. Not accept gifts of money;
 - c. Always consider the value and purpose of a gift or benefit before making any decisions about accepting it.
- 27. Academic staff should guard against the possibility that students could seek to influence decisions concerning their assessment, progression, or the imposition of penalties through the offering of gifts or benefits.
- 28. NSW Health policy recognises that token gifts or benefits such as moderate acts of hospitality of a nominal value (under \$75 as at November 2024) may be accepted only if offered a gesture of appreciation and not to secure a favour. HETI Higher Education has procedures in place for gifts and benefits to be declared, documented and managed.

29. Staff should also be aware that conflicts of interest and receiving gifts and benefits that lead to partial decision making may lead to disciplinary action and may constitute corrupt conduct.
30. For more detailed information about Conflicts of Interest and Gifts and Benefits, reference should be made to NSW Health Policy Directive PD2015_045.

External (Secondary) Employment

31. The NSW Health Code of Conduct permits secondary / external employment for staff with the approval of the Chief Executive. For the majority of academic staff at HETI Higher Education, their engagement here is itself of a “secondary” employment nature.
32. As a Higher Education Provider, HETI Higher Education recognises the value of its academic staff having the opportunity to work at an appropriate level of commitment, in other health, education and professional settings. It is recognised that such opportunities can enhance their professional and practical skills and improve and share their knowledge and expertise and help to establish good relations with other industry providers and the community.
33. Any external work undertaken must be consistent with the mission and goals of HETI Higher Education.
34. There must be no conflict of interest arising from any external work and such work must be conducted in a manner that protects HETI Higher Education and the employee from liability and risk.
35. The total time commitment for all roles undertaken must not be excessive so as to adversely affect the employee’s performance in their role at HETI Higher Education.
36. External work undertaken must not be represented in any way as being associated with HETI Higher Education.
37. External work undertaken must not utilise HETI’s resources, including intellectual property.

38. The staff member undertaking external work must ensure there is appropriate and separate insurance coverage in place for the activities to be undertaken.
39. The staff member must obtain the approval of HETI Higher Education for the external work to be undertaken, using the prescribed procedures. Such approval will not be unreasonably withheld.
40. The external work must not be prohibited external work as described in Clause 43.
41. This policy does not apply to the following external activities that are considered to be part of the normal expectations of academic and professional work:
 - a. The refereeing of journal articles, papers and books;
 - b. Occasional lectures, conference attendances, media appearances and the like;
 - c. The undertaking of reviews related to academic programs, quality assessments and the like;
 - d. Writing, editing or publishing scholarly works or membership of editorial boards;
 - e. Examining for educational and professional bodies; and
 - f. Serving on educational, professional and community committees, boards and the like.
42. External work that is prohibited, must not be undertaken and will not be approved is work that:
 - a. Represents a conflict of interest with the staff member's employment with HETI Higher Education, including engaging in activities that compete directly with HETI Higher Education activities, including the private tuition of its students, whether for payment or not;
 - b. Adversely affects the capacity of the staff member to perform the duties of their role with HETI Higher Education;
 - c. Adversely affects the reputation or standing of HETI Higher Education, creates a risk for it or is inconsistent with the values, code of conduct or policies of NSW Health and HETI Higher Education.
43. Any breach by a staff member of the External Work Policy may lead to disciplinary action.

Intellectual Property and Copyright Policy

44. Academic staff must at all times comply with the NSW Health policy on intellectual property in place from time to time – currently PD2023_007 published on 16 February 2023, together with any additional provisions published by HETI Higher Education.
45. As both a creator and user of copyright content, HETI Higher Education is committed to ensuring that all academic staff and students meet the legal and compliance obligations imposed by the Copyright Act 1968 (Commonwealth) and any copyright licence agreements it may be a party to from time to time. At all times it aims to conduct its educational, learning, research and other activities in a manner that is compliant with these requirements.
46. HETI Higher Education encourages and supports the legal use of third party copyright content in digital, electronic, print or other format to enhance its educational, learning, research and other activities.
47. Staff and students must comply at all times with all applicable legal requirements and obligations relating to copyright.
48. HETI Higher Education will respond appropriately to internal copyright issues and external notifications of alleged copyright infringement.

Prevention and Management of Workplace Bullying

49. The NSW Health Code of Conduct requires that staff, students, researchers and others undertaking or delivering training or education in NSW Health must not bully or harass other persons in the workplace, or discriminate against them on the basis of sex, race, ethnic or ethno-religious background, marital status, pregnancy, disability, age, sexual orientation, transgender or carers' responsibilities. Nor must they encourage or support others to do so.
50. As leaders and exemplars within HETI Higher Education, members of the academic staff have a particular responsibility to foster an environment which is free from bullying and also to identify and act to eliminate or minimise the potential for it to occur.

51. Staff should refer to NSW Health Policy Directive PD2021_030 Prevention and Management of Workplace Bullying in NSW Health for detailed information about the requirements, roles and responsibilities which apply.
 52. Any member of staff who is found to have breached the policy by engaging in bullying or harassment will be managed in accordance with the NSW Health policy for managing misconduct.
-

Professional Registration

53. The NSW Health Code of Conduct provides that staff whose profession, occupation, or role within NSW Health requires them to maintain any form of professional registration or membership (for example with the Australian Health Professional Regulation Agency or a relevant professional body) are personally responsible to ensure that:
 - a. The required registration or membership is current at all times;
 - b. That they observe all laws, professional codes of conduct and ethics relating to their profession;
 - c. They maintain and enhance their professional standards and skills and keep up to date with best practice; and
 - d. They immediately report all changes in professional registration (such as the imposition of conditions on registration) to the Associate Director of Education and Training (or other specified officer).
 - e. They maintain current the information about their Highest qualification and professional registration current via the appropriate system (Teaching and Learning Network)

Administrative duties

54. From time to time, academic staff may be called upon to undertake a range of administrative duties as part of their role. While these may be seen as ancillary or secondary to the primary role as teacher and educator, such duties are no less responsible and important ones. Examples include:
 - a. Human Resources related matters such as:
 - i. Participation in staff selection committees;
 - ii. Recommending or approving development opportunities or the allocation of funding for travel and accommodation;

- iii. Engaging casual or temporary staff;
 - iv. Conducting performance appraisals; and
 - v. Participating in disciplinary processes.
- b. Financial related matters such as:
- i. Participating in purchasing or tender processing or contractual arrangements;
 - ii. Management of funds;
 - iii. Assessing or recommending the acquisition of goods or services or the entering into commercial agreements.
- c. Accreditation, compliance and quality assurance related matters such as:
- i. Participating in Tertiary Education Quality and Standards Agency compliance committees and reporting processes;
 - ii. Participating in institutional external accreditation and reporting processes (e.g. the Australian Medical Council and the Royal Australian and New Zealand College of Psychiatrists)
 - iii. Participation in HETI Higher Education's own quality assurance activities as described in its Quality Assurance Policy.
55. The NSW Health Code of Conduct requires that staff participating in such processes must avoid situations which may give rise to pecuniary or other conflicts of interest, and that should such conflicts arise, declare them immediately. Staff must also ensure that their actions and decisions are not influenced by self-interest or considerations of personal gain or other improper motives. (Refer to Clauses 14-19 – Conflicts of Interest).

Mandatory Reporting Obligations

56. All NSW Health staff are subject to a number of mandatory reporting obligations under the NSW Health Code of Conduct. For more detailed information about these reporting obligations refer to Appendix 6 – Summary of Notification Requirements – to NSW Health Policy Directive PD2018_031, Managing Misconduct.
57. Failure to comply with these mandatory reporting obligations may lead to disciplinary action.
58. Specific reporting requirements described in the Summary of Notification Requirements are summarised as follows:

- a. Criminal charges and convictions:
 - i. Staff must self-report criminal charges and convictions against them involving offences punishable by imprisonment for 12 months or more to their Chief Executive within 7 days of the charge being laid or the conviction being recorded.
- b. Child Protection:
 - i. Staff must report any allegation, charge or conviction of a child protection nature involving another NSW health worker of which they become aware as prescribed in local procedures;
 - ii. Staff must self-report in writing to the Chief Executive if the staff member is charged with having committed, or is convicted of, a serious sex or violence offence, with 7 days of the charge being laid, or the conviction being recorded;
 - iii. Staff must report children and young people and unborn children assessed as being at risk of serious harm;
 - iv. In order to fully understand the full range of child protection reporting and other obligations, reference should be made to the NSW Health Policy Directive PD2013_007 Child Wellbeing and Child Protection Policies and Procedures for NSW Health and to NSW Health Policy Directive PD2020_004 Managing Child Related Allegations, Charges and Convictions against NSW Health Staff.
- c. Corrupt Conduct and other wrongdoing:
 - i. All NSW Health staff who become aware of wrongdoing including corruption must report it to a more senior member of staff via the internal reporting system in place, or to the appropriate external body, such as the Independent Commission Against Corruption. Refer to NSW Health Policy Directive PD2016_029 Corrupt Conduct - Reporting to the Independent Commission Against Corruption (ICAC).
- d. Misuse of Communications Systems:
 - i. Staff members of NSW Health who become aware of the misuse of communications systems/devices (including both NSW Health systems/devices and any other systems/ devices) by any other staff member or other person involving child pornography must ensure that the matter is immediately reported to NSW Police and to the Chief Executive. Such use is unlawful and failure to report by any employee may lead to a criminal conviction for such failure;
 - ii. Reference must be made to NSW Health Policy Directive PD2009_076 Communications – Use and Management of Misuse of NSW Health

- Communication Systems for specific direction on how individual instances of misuse are to be reported and managed. Particular care must be exercised in cases where criminal conduct may be involved and immediate reporting to police is required, so as avoid compromising Police investigations. Refer in particular to Section 3.4 of the Policy – Unlawful use of NSW Health communication systems and devices.
- iii. Staff of NSW Health who become aware of the inappropriate use by another employee of NSW Health communication systems/ devices involving pornographic, sexually explicit or offensive material must report the matter to their immediate manager or another manager and if the matter concerns a health professional, must ensure that the Director Mental Health Portfolio and Higher Education (or equivalent) is also informed as soon as practicable.
 - e. Notifiable Conduct under the Health Practitioner Regulation National Law (NSW):
 - i. Registered health practitioners must notify the Australian Health Practitioner Regulation Agency* of another health practitioner's notifiable conduct as soon as practicable after forming a reasonable belief that notifiable conduct has occurred;
 - ii. The Director Mental Health Portfolio and Higher Education (or equivalent) must also be notified as soon as practicable.
 - f. Research Misconduct:
 - i. Research Misconduct referenced at Clause 6 is the subject of a separate policy and must be reported in the manner described there.

Media, Social Media and Public Commentary Policy

59. The NSW Health Code of Conduct requires all NSW Health staff:
- a. To avoid conduct that could bring NSW Health or any of its staff, patients or clients into disrepute, including when using social media;
 - b. Act in a way which protects and promotes the interests and reputation of NSW Health and the particular NSW Health Agency where they work;
 - c. Only provide official comment on matters related to NSW Health if authorised to do so;
 - d. When making public comment on issues or participating in political or industrial activities, not indicate or imply that their views are those of NSW Health;

- e. Carry out their duties in a politically neutral manner.
60. HETI Higher Education recognises, values and protects academic freedom. However, all staff have a responsibility to conduct themselves in a professional manner in compliance with the Code of Conduct when engaging with all forms of media and making public comment.
-

Expert comment

- 61. HETI Higher Education encourages its academic staff to participate in public debate within their field of academic and professional expertise. Similarly, academic staff may also make submissions to government or public inquiries within their areas of academic and professional expertise.
 - 62. When making media, social media or other forms of public comment, academic staff are expected to act in good faith and not misrepresent their expertise nor bring HETI Higher Education or NSW Health into disrepute.
 - 63. This freedom of academic staff to make expert comment does not imply that HETI Higher Education endorses particular views expressed in any given case. Rather it is an acknowledgment of the right of academic staff to speak in the area of their expertise.
 - 64. Only the Chairs of the HETI Higher Education Governing Council and the HETI Higher Education Academic Board are authorised to approve of or make official comment on academic matters.
-

Corporate comment

- 65. Only the Chief Executive, HETI may authorise or make official comment on matters of non-academic, management and a corporate nature.
-

Compliance

- 66. Breaches of this policy will be addressed in accordance with NSW Health Policy Directive PD2018_031 Managing Misconduct, provided that where academic misconduct is involved:
-

- a. Any investigation process will include involvement of an appropriately experienced academic;
- b. Any resultant decision making process will incorporate review and recommendation by the Chair of the Academic Board; and
- c. Where Research Misconduct is involved, in addition to the requirements of NSW Health Policy Directive PD2014_042 Managing Misconduct, any additional procedures that may be prescribed for the management of such breaches will also be followed.

DOCUMENT HISTORY

Version	Issued	Status	Author	Reason for Change
v1.0	21 April 2017	Final	Rhonda Loftus	Publishing
v1.1	16 May 2017	Draft	Valerie Rhodes	Amendment of reference to the Academic Misconduct Policy to include the word Student.
v2.0	29 June 2017	Final	Mark Wilbourn	Approved as a minor wording change in policy by Chair T&L Committee
v1.0	22 August 2018	Final	Valerie Rhodes	Updated logos, template and new TRIM Reference
v1.1	03 February 2020	Noted	Susan Grimes	Organisational changes; new position title, and responsibilities. Noted by the T&L Committee.
v1.1	14 February 2020	Final	-	Published
V1.2	27 February 2024	Draft	Lorenzo Vigentini	Amendments made to organisational titles, branding as approved at HEAB 20240227.
V1.2	5 November 2024	Draft	Susan Grimes	All policy numbers checked and updated as required. New Teaching and Learning Network system referenced.
V1.2	19 December 2024	Draft	Susan Grimes	Endorsed at HEAB
V1.2	17 January 2025	Draft	Susan Grimes	Approved at HEGC.
V1.2	21 January 2025	Published	-	-

IMPLEMENTATION CHECKLIST – COMPLIANCE SELF ASSESSMENT

Assessed by:	Date of Assessment:		
IMPLEMENTATION REQUIREMENTS	Not commenced	Partial compliance	Full compliance
1.			
	Notes:		
2.			
	Notes: Relevant Director		
3.			
	Notes: TRIM reference number -		
4.			
	Notes:		
5.			
6.			
	Notes:		

Attachment 1 - RISK ASSESSMENT

<Document Title>

1.	Policy/Process being assessed	Notes
	Academic Staff Misconduct Policy v1.0	
	Document Number	
	Publication date	
	Scheduled review date	June 2018
	Date of this risk assessment	
	Name & position of assessing officer	
2.	Summary of policy purpose (from PD Cover Page)	
	This policy informs and raises the awareness of Academic Staff to the risks and exposures they may encounter in the workplace in terms of potential misconduct and provides information about how such exposures may be avoided and about the behavioural and conduct standards which apply.	
3.	Agency (HETI) key roles & responsibilities as per PD	
4.	Risk Assessment	
4.1	Identification of risks – what might happen & how?	
	1.	
	2.	
4.2	Analysis of risks – combined estimate of the consequence & likelihood of the risk, using NSW Health Risk Matrix (attached)	
	<ul style="list-style-type: none"> • Consequence: • Likelihood: • Risk rating : 	
4.3	Evaluation of risks – comparison of the level of risk as determined against a predetermined criteria to determine whether a level of risk is acceptable or needs to be treated. Risk level assessed after implementing treatment: <ul style="list-style-type: none"> • Consequence: • Likelihood: • Risk rating : Evaluation –	

Risk Assessment Approval

Name & position of approving T2 Officer:	
Date:	