

POLICY AND PROCEDURES

Research Integrity

This policy is important to:

all University staffall University students

POLICY NUMBER: POR120215000

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POLICY CATEGORY: Research

POLICY OWNER: Pro Vice-Chancellor (Research and Research

Training)

1. CONTEXT

This policy was created to implement Part A of the *Australian Code for the Responsible Conduct of Research* (the Australian Code). The Australian Code was jointly developed in 2007 by the Australian Research Council (ARC) and National Health and Medical Research Council (NHMRC) to guide and promote the responsible, ethical and safe conduct of research.

Part A of the Australian Code imposes obligations on research institutions, establishes minimum standards and sets out the general and specific responsibilities of all **persons involved in research**. Part A of the Australian Code is implemented in this Policy.

Part B of the Australian Code requires research institutions establish systems to respond to allegations that research has not been conducted in accordance with the Australian Code. Part B of the Australian Code is implemented in the Victoria University *Research Misconduct Policy*.

The values, principles and standards enshrined in Part A of the Australian Code are captured in this policy and should underpin all research decisions and research conduct, including the management of:

- Research data and materials
- 2. Supervision of researchers
- 3. Publication and dissemination of research findings
- 4. Authorship
- 5. Peer review
- Conflicts of interest

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7. Collaborative research with organisation and individuals outside Victoria University

The Australian Code and this policy applies to all **persons involved in research**, and should be read in conjunction with Commonwealth and State laws, relevant industry standards, professional codes of conduct, contractual obligations and other instruments governing the responsible, ethical and safe conduct of research.

2. **DEFINITIONS**

Acknowledgement means crediting a contribution to a publication or **research** project where the contribution is not a **substantial scholarly contribution** sufficient for a person to be named as an author under **4.4.3** of this policy.

Bio-safety means the management of risks associated with genetically modified organisms.

Breach means conduct that:

- (a) fails to comply with any part of the Australian Code and this policy, and
- (b) is not so serious as to constitute **research misconduct**.

Clinical trial means **research** designed to find out the effects of an intervention on a human, including a treatment or diagnostic procedure. It can involve testing a drug, a surgical procedure, another therapeutic procedure or device, a preventative procedure, or a diagnostic device or procedure.

Confidential information means commercially valuable information or a trade secret, a secret or sacred information (usually communicated by indigenous people) or other information which is treated as confidential by a research participant, a person involved in research, or the University. It does not include information which:

- (a) is in or becomes part of the public domain (other than through a breach of confidence); or
- (b) was known to the recipient at the time of disclosure (unless such knowledge arose through a breach of confidence); or
- (c) the recipient can prove that the information was independently acquired or developed without breaching any obligations of confidence.

Conflicts of interest occur where the personal associations or interests of a staff member or student interferes, or could be perceived to interfere with their conduct, duties or responsibilities.

Corresponding author means executive author.

Ethics committee means either, the Human Research Ethics Committee, a Faculty-based Human Research Ethics Subcommittee, or the Animal Experimentation Ethics Committee.

Executive author (also known as **corresponding author**) is the person appointed to manage issues related to authorship in **Part 4.4** of this policy.

Immediate organisational unit leader means the head of the organisational unit in which:

- (a) in the case of a student, the relevant unit in the Faculty in which they are enrolled;
- (b) in the case of an academic or general staff member, the organisational unit in which they are employed.

Examples include Heads of School, Faculty Executive Deans, Heads of Department/Unit, Institute Directors or Research Centre Directors.

Peer review means the impartial and independent assessment of **research** by others working in the same or a related field, and the expert scrutiny of a **research** project.

Persons involved in research means researcher, research supervisor, research trainee, and technical and other support staff when directly involved in research.

Plagiarism involves the use of another person's intellectual output and presenting it (without appropriate attribution) as one's own.

Principal investigator means the person named as the principal investigator or chief investigator on a project or, if no one is named, the person actually responsible for the project. Where there are more than one, the first named principal investigator or chief investigator is considered to be the person responsible for the project.

Records means the material form of information, related to or derived from **research**. For the purposes of this policy, records do not include **research data and materials**. Records may include correspondence, grant or ethics applications, technical reports, signed consent forms, information sheets for research participants or other similar documents.

Research means all conduct leading up to, in preparation for, during and after the completion and reporting of:

- (a) a creative work undertaken on a systematic basis in order to increase the stock of knowledge; or
- (b) an investigation undertaken to gain original knowledge, validate previous **research**, or use existing knowledge in a new and creative way to generate new concepts, methodologies and understandings¹.

Activities that directly support the conduct of research fall within the definition of research including, but not limited to²:

- (a) **researchers**, professional, technical, administrative or clerical support staff directly engaged in activities essential to the conduct of **research**; or
- (b) management of staff who are directly engaged in the conduct of **research**;
- (c) activities of research trainees;
- (d) training and supervision of research trainees;
- (e) **research** and experimental development into applications software, new programming languages and new operating systems.

Research does not include the following activities³:

- (a) preparation of coursework and teaching materials; or
- (b) scientific and technical information services;
- (c) general purpose and routine data collection;
- (d) standardisation and routine testing;
- (e) feasibility studies (except into research and experimental development projects whether or not they include a pilot);
- (f) routine medical care:
- (g) commercial, legal and administrative aspects of patenting, copyright or licensing activities;
- (h) routine computer programming, systems work or software maintenance;
- (i) the creation, development or maintenance of tools where, although these tools are used in a specific research project, this activity is merely incidental to the conduct of the research.

Research data and materials include:

- (a) questionnaires; or
- (b) recordings;
- (c) samples;

¹ Department of Innovation, Industry, Science and Research "2011 HERD Specifications for the collection of 2010 Data". p.7-8, January 2011.

OECD "Frascati Manual 2002. Proposed Standard Practice for Surveys on Research and Experimental Development". OECD: Paris, p.30, January 2003.

² See footnote 1

³ See footnote 1

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- (d) biological material;
- (e) assays;
- (f) test results:
- (g) transcripts;
- (h) laboratory notes;
- (i) field notes;
- (j) digital collections, datasets, databases and artefacts;
- (k) other primary or secondary data and materials.

Research misconduct means intentionally, recklessly or negligently engage in any of the following conduct:

- (a) fabricating or falsifying results or analysis; or
- (b) deceiving or engaging in conduct likely to deceive;
- (c) failing to declare or manage a serious **conflict of interest**;
- (d) plagiarism;
- (e) failing to follow research proposals as approved by the ethics committee where the failure is:
 - i. avoidable; and
 - ii. may result in an unreasonable risk or harm to humans, animals, biosafety or the environment.
- (f) repeatedly **breaching** this Code where breaches have been the subject of previous counselling or directions;
- (g) concealing or facilitating research misconduct by others.

For the purposes of the definition of **research misconduct**, negligence means gross or persistent negligence.

Research supervisor means the **principal investigator** and, if different, the person responsible for the training, development, academic support or mentoring of a **researcher** or **research trainee**. In the case of a student project, the **research supervisor** is the nominated supervisor on the project.

Research trainee means a person who is new to research, returning to research, or a student undertaking or involved in research.

Researcher means a person who undertakes, produces or performs **research**.

University means Victoria University.

3. STATEMENT OF POLICY

This policy sets out the minimum standards expected of all **persons involved in research** and promotes the values and principles that underpin quality research. It constitutes a research governance and management framework designed to create an environment that promotes the responsible, safe and ethical conduct of research and enhance the reputation of the University.

3.1 Research integrity

- 3.1.1 All **persons involved in research** must maintain high standards of research integrity, ensuring they:
 - (a) respect and protect human research participants, animals and the environment;
 - (b) protect the privacy and confidences of **research** participants;
 - (c) design, conduct and report **research** findings in a responsible, ethical and safe manner;
 - (d) ensure **research** material and data are safely and securely stored, retained and disposed of in an appropriate manner;

- (e) encourage and respect freedom of expression and academic enquiry;
- (f) accurately and honestly report findings within a reasonable time;
- (g) accurately acknowledge the role of others in research;
- (h) are not influenced or affected by conflicts of interest;
- (i) respond to concerns about research integrity in a fair and timely manner.
- 3.1.2 No person involved in **research** should commit a **breach** or **research misconduct**. Where it is alleged a **breach** or **research misconduct** has occurred, the matter will be dealt with under the University *Research Misconduct Policy*.

3.2 Ethics

3.2.1 Research integrity and ethics

The University has established processes to promote **research** integrity, including formal mechanisms designed to ensure **research** involving or impacting on humans or animals is designed, conducted and reported in accordance with relevant ethical guidelines. These ethical standards are consistent with, and additional to, the obligations, values and principles enshrined in the Australian Code and this policy.

- (a) All persons involved in research have a concurrent obligation to uphold the values and principles underpinning research integrity and the values, principles and obligations enshrined in relevant ethical guidelines, including the:
 - National Statement on Ethical Conduct in Human Research (2007)
 - Australian Code of Practice for the Care and Use of Animals for Scientific Purposes (2004)
- (b) The **principal investigator**, or in the case of a student, the **research supervisor**, must ensure that:
 - ethics approval is obtained from the relevant ethics committee prior to the commencement of a project involving or impacting on humans or animals; and
 - ii. all ethical requirements are complied with, leading up to, in preparation for, during and after the completion and reporting of a project.
- (c) A failure to comply with relevant ethical standards may also constitute a breach or research misconduct under the Australian Code and this policy.

3.2.2 Human ethics

- (a) The University *Human Research Ethics Committee* (HREC) is responsible for ensuring all **research** projects involving or impacting on humans are designed and conducted ethically.
- (b) The University has also established Faculty-based Human Research Ethics Subcommittees (FHRES) to review and where appropriate, approve research proposals considered to be 'minimal risk' to research participants or the community. The HREC oversees the operation of the FHRES.
- (c) All **persons involved in research** involving or impacting on humans must comply with this policy, as well as the University *Human Ethics Policy*, human research ethics procedures and any conditions or special requirements imposed by the HREC or a FHRES.

3.2.3 Animal ethics

(a) The University Animal Experimentation Ethics Committee (AEEC) is responsible for ensuring all teaching and research activities involving animals are designed and conducted ethically. The primary responsibility of the AEEC is to ensure the welfare of animals is protected, and their use in teaching and research is ethically justified. The

- University has established the AEEC to review and, where appropriate, approve and monitor teaching and **research** proposals involving animals.
- (b) All **persons involved in research** involving animals must comply with this policy, as well as the University *Animal Ethics Policy*, procedures for teaching and research involving animals, and any conditions or special requirements imposed by the AEEC.

3.3 Occupational health and safety

3.3.1 General responsibility

Nothing in this policy alters any legal obligation related to or involving occupational health and safety **(OHS)**. All **persons involved in research** must be aware that they may be personally liable at law for breaches of OHS which occur in the conduct of **research**.

3.3.2 Persons involved in research at Victoria University

- (a) Each **person involved in research** must manage OHS at all stages of a **research** project to ensure all other persons are given an appropriate level of protection against risks to their health and safety.
- (b) Each **research supervisor** must establish and implement an *Occupational Health* and *Safety Plan* for their research project(s). The plan is to establish procedures to identify hazards, and assess and controls risks to health and safety consistent with the University OHS policies and relevant Institute/Faculty/organisational unit OHS requirements.

3.4 General responsibilities

3.4.1 Victoria University

- (a) The University recognises, and all **persons involved in research** must respect, the contribution of the community to **research**.
- (b) Members of the community have the right to:
 - i. be involved in the **research** process via the University's dissemination of information about the role, benefits and results of **research**; and
 - ii. benefit from the consequences of new areas of **research**;
 - iii. have input into ethical issues related to **research**.
- (c) The University has established a governance and management framework that:
 - promotes quality research that is underpinned by a culture of responsible and ethical conduct that enhances the reputation of the University and research as a profession;
 - includes the adoption and implementation of institutional policies, guidelines and procedures that outline roles, responsibilities and accountabilities, and appropriately minimise and manage risk; and
 - provides formal training and continuing professional development on all aspects of the Australian Code and this policy.

The governance and management framework is established by this policy.

(d) The University has implemented systems to respond to allegations of research misconduct or breaches of the Australian Code and this policy by all persons involved in research. These systems are implemented in the University Research Misconduct Policy.

3.4.2 Management of research activities

(a) The Office of the Deputy Vice-Chancellor (Research and Knowledge Exchange), and/or nominee, has overall responsibility for the implementation of the governance

and management framework established in this policy to promote and support responsible, ethical and safe **research** conduct.

(b) Immediate organisational unit leaders are responsible for:

- implementing and maintaining local level processes to manage the implementation of this policy; and
- ii. ensuring all **persons involved in research** in their organisational unit comply with this policy.

3.4.3 Persons involved in research

- (a) All persons involved in research must comply with their responsibilities under the Australian Code and this policy, as well as Commonwealth and State laws, relevant industry standards, professional codes of conduct, contractual obligations and other instruments governing the responsible, ethical and safe conduct of research.
- (b) **Principal investigators** cannot delegate their responsibilities except where accepted University process is followed.

3.5 Specific responsibilities

Research involving Aboriginal and Torres Strait Islander peoples

All **persons involved in research** involving or affecting Aboriginal and Torres Strait Islander peoples must comply with special responsibilities set out in:

- Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (National Health and Medical Research Council 2003);
- Guidelines for Ethical Research in Indigenous Studies (Australian Institute of Aboriginal and Torres Strait Islander Studies 2002).

4. SPECIFIC RESEARCH ACTIVITY

4.1 Research data and materials

Researchers must maintain comprehensive notes, books, and records related to research activities, including details of observations, processes and other significant actions or findings, together with any research data and materials necessary to verify the integrity of a research project.

Research data and materials must be retained for a prescribed period beyond the completion of a **research** project to enable **research** outcomes to be validated and justified.

4.1.1 Ownership of research data and materials and records

(a) Ownership by a party outside the University

Where a **research** project is undertaken as a part of a collaboration with another organisation or individual outside the University, ownership of and access to **research data and materials** and **records** will be dealt with in accordance with **4.7** of this Policy. The University will take all reasonable steps to ensure access to **research data and material** and **records** is maintained.

(b) Ownership of research data and material brought to the University

- i. Where a person brings **research data and material** to the University, ownership and control of that **research data and material** continues to vest in the original owner.
- ii. A person who brings **research data and material** to the University must establish and register a *Research Data and Materials Plan* in accordance with **4.1.3** and **4.1.4** of this Policy.

(c) Ownership by the University

- i. Except where 4.1.1(a) and (b) applies, the University owns all research data and materials and records related to research undertaken by a student (if an employee) or a staff member in the course of their employment by the University, including periods of leave or by using University facilities or resources, unless otherwise agreed in writing prior to the commencement of the project.
- ii. Where it is possible to produce a copy of the research data and material the University grants the researcher or research trainee who collected the research data and material a fee-free irrevocable non-exclusive licence to access or copy of the research data and material for teaching or research at another university or educational institution, but not for any commercial purpose.
- iii. Where a researcher or research trainee intends to use research data and material for a commercial purpose, consent must be obtained in writing from the Pro Vice-Chancellor Research and Research Training.
- iv. **Research data and material** that involves intellectual property or has commercial potential is dealt with under 4.1 to 4.4 of the University *Intellectual Property Policy*.
- v. Where it is not possible to produce a copy of the **research data and material**, the University will retain the original, unless otherwise authorised in writing by the Pro Vice-Chancellor Research and Research Training.
- vi. Where an agreement regarding the ownership, storage and access to **research data** and materials exists, the agreement should be reviewed when:
 - a researcher moves or leaves the University; or
 - circumstances require a change to existing arrangements.
- vii. **Records** related to **research** must be managed in accordance with the University *Records Management Policy* and the Public Records Office Victoria.

4.1.2 Research Data and Materials Procedures

- (a) The Office of the Pro Vice-Chancellor Research and Research Training will establish and maintain *Common Research Data and Materials Procedures* (Common RDM Procedures).
- (b) The Common RDM Procedures will establish:
 - the institutional framework for the management of research data and materials and records; and
 - university wide procedures to manage **research data and materials** and **records** to ensure compliance with the Australian Code and this policy;
 - processes and systems for the management of central and shared storage facilities (both physical and digital/electronic).
- (c) Each Institute, Faculty or other operational unit undertaking research will adopt the *Common RDM Procedures*.
- (d) Each Institute, Faculty or other organisational unit should tailor the *Common RDM Procedures* to ensure they meet the needs of the organisational unit and any discipline specific requirements, including obligations under relevant laws, other codes of practice, professional and industry standards, contractual obligations and other University policies.
- (e) Each Institute, Faculty or other organisational unit *RDM procedures* must be approved by the Pro Vice-Chancellor Research and Research Training before they commence operation.
- (f) The Institute, Faculty or other operational unit *RDM Procedures* must be accessible to all persons involved in research.
- (g) At least once each year the Institute Director, Faculty Executive Dean or organisational unit leader will review the practices adopted in the organisational unit to ensure compliance.

4.1.3 Research Data and Materials Plan

- (a) All research supervisors must establish a *Research Data and Materials Plan* (RDM Plan) prior to the commencement of a research project.
- (b) An *RDM Plan* should ensure the same level of care and protection is applied to primary records and analysed research data.
- (c) An RDM Plan must contain:
 - i. a complete record of proposed sources of data and materials; and
 - ii. reference to, and location of, any catalogue of data and materials;
 - iii. procedures to be adopted to ensure safe and secure storage of, and access to data and materials;
 - iv. requirements for sharing and reuse, public access to, or deposit in a subject repository and/or institutional repository, taking into account confidentiality requirements, privacy laws and any contractual obligations;
 - v. procedures to be adopted to re-evaluate and dispose of **research data and materials** (if necessary) after a clearly defined period of time;
 - vi. other information and processes necessary to locate and access **research data and materials** to validate or justify **research** outcomes and ensure the integrity of the project.
- (d) A *RDM Plan* should take into account, and include obligations under relevant laws, other codes of practice, professional and industry standards, contractual obligations and other University policies.
- (e) All research supervisors must update their RDM Plan when:
 - i. there is a significant change to the *RDM Plan*; or
 - ii. the project is completed;
 - iii. they are no longer involved in the research project;
 - iv. they leave the **University**.

4.1.4 Approval and registration of a RDM Plan

- (a) All *RDM Plans* must be approved by the **immediate organisational unit leader** or **research supervisor** (as appropriate) and registered in the *RDM Register* in the University Office for Research.
- (b) The *RDM Register* in the Office for Research will contain:
 - location of physical and/or electronic/digital data and materials; and
 - location of copies or backups;
 - minimum retention period;
 - responsible person(s);
 - location of the RDM Plan.

4.1.5 Minimum retention requirements

- (a) Except where otherwise required, research data and material for short-term research projects that are for assessment purposes only should be retained for a minimum of 12 months from the completion of the project. This does not apply to a PhD or Masters by Research project, or any research activity resulting in a publication.
- (b) Research data and material from clinical trials should be retained for a minimum of 15 years.

- (c) Research data and material from, or related to children and young people (under 18 years of age) must be retained for a minimum of seven years.
- (d) Research data and material relating to the following must be permanently retained:
 - gene therapy; or
 - ii. work that has community or heritage value.
- (e) **Research data and material** from work that has significant community or heritage value should also be retained in a national collection.
- (f) All other research data and material must be retained for a minimum of five years from the date of publication, unless a longer period is required by an ethics committee or a particular discipline.
- (g) Where it is not practicable to retain **research data and materials** in their original form, then durable records derived from the **data and materials** must be retained.

4.1.6 Challenges to research

If research is challenged all relevant **research data and materials** must be retained until the matter is resolved.

4.1.7 Allegations of research misconduct

Where records may be relevant to allegations of **research misconduct** or a **breach** of the Australian Code or this policy, **research data and material** must not be destroyed.

4.1.8 Storage

- (a) Research data and materials and records must be stored in accordance with the Common RDM Procedures and relevant Institute/Faculty/organisational unit RDM Procedures.
- (b) **Records** should be stored and archived in accordance with the University *Records Management Policy* and the Public Records Office Victoria.

4.1.9 Disposal

- (a) **Research data and materials** must be disposed of in accordance with the *Common RDM Procedures* and relevant Institute/Faculty/organisational unit *RDM Procedures*.
- (b) At the end of the prescribed retention period, **research data and materials** should be reevaluated to determine if the retention period should be extended.
- (c) **Records** should be disposed of in accordance with the University *Records Management Policy* and the Public Records Office Victoria.

4.2 Supervision of researchers

4.2.1. Research supervisor responsibilities

- (a) Research supervisors will mentor and guide the professional development of researchers and research trainees.
- (b) Research supervisors will regularly review and tailor support and supervision to meet the changing needs of researchers and research trainees. They will supervise all stages of the research process to ensue the values and principles underpinning the responsible, ethical and safe conduct of research are adopted.

To ensure **researchers** and **research trainees** conduct their **research** with integrity, **research supervisors** are expected to oversee the:

 identification and selection of appropriate research objectives and approaches, including the merit and integrity of research design and discipline-based methods; and

- management of research data and materials and records during and after the completion of the project;
- ethics and other approval processes;
- acquisition and expenditure of funding and other support for research;
- management of risks associated with the project, including occupational health and safety;
- practices adopted in the conduct of the project;
- reporting research outcomes;
- attribution and appropriate credit for work;
- other factors relevant to the project or a researcher or research trainee's career development.
- (c) Research supervisors are responsible for ensuring researchers and research trainees possess the knowledge and skills required to undertake each component of the project and comply with their obligations under the Australian Code and all relevant VU policies, Commonwealth and State laws, industry standards or professional codes of conduct, contracts and agreements impacting on the project, as well as other instruments governing the responsible, ethical and safe conduct of research.

4.2.2. Researcher and research trainee responsibilities

- (a) Researchers and research trainees must maintain a professional attitude towards their work, and conduct their research in a responsible, ethical and safe manner. They are expected to:
 - become part of a research community of practice built on a culture of excellence, integrity, and mutual respect; and
 - plan and manage all phases of their research;
 - be proactive in seeking regular guidance and assistance from their research supervisor;
 - maximise developmental opportunities and discipline-based professional development, including participating in research induction, research skills training and completing all required coursework;
 - develop the attributes expected at each stage of their research, including the
 responsible and ethical decision-making, scholarly exploration, intellectual autonomy,
 research design and methods appropriate for their discipline, information literacy, IT
 and technical skills, problem solving, written and oral communication skills, and other
 attributes to achieve milestones and complete a research project;
 - establish and participate in networks to support their research and maximise opportunities to enhance their research career.
- (b) Researchers and research trainees must comply with the Australian Code and all relevant Victoria University policies, Commonwealth and State laws, industry standards or professional codes of conduct, contracts and agreements impacting on the project, other instruments governing the responsible, ethical and safe conduct of research.

4.3 Publication and dissemination of research findings

Disseminating **research** findings through publication in academic journals, conference papers, books, exhibitions, films, websites, other media or professional and institutional repositories is an essential part of the **research** process.

The Australian Code and this policy applies to all forms of refereed and non-refereed publications that enable the benefits of **research** to be shared by other **researchers** and professionals and the wider community.

4.3.1. Dissemination of research findings and results

- (a) Researchers must take all reasonable steps to ensure their work is accurately disseminated and reported.
- (b) Accurately disseminating and reporting research findings and results requires researchers to provide a full account of their work, subject to the restrictions on communications in 4.3.4 of this policy.
- (c) In providing a full account of their work researchers must include all research findings and results, including findings and results that are contrary to their hypotheses.
- (d) When disseminating and reporting their work **researchers** must accurately cite and acknowledge:
 - i. work of others used in their research; and
 - ii. sources of financial and in-kind support for the **research**;
 - iii. the host institution.

4.3.2. Correcting the record

If a **researcher** becomes aware of misleading or inaccurate statements made about their work, they must correct the record as soon as possible.

4.3.3. Submissions

- (a) A **researcher** must not substantially reproduce the same **research** findings in several publications unless it is:
 - i. a review article; or
 - ii. an anthology;
 - iii. a collection:
 - iv. a translation.
- (b) At the time of submitting work for publication, a **researcher** must inform the publisher if the work is:
 - i. substantially similar to work submitted to another publisher; or
 - ii. similar to a work that is already published.
- (c) A **researcher** must take all reasonable steps to obtain permission from the original publisher before republishing **research** findings.

4.3.4. Restrictions on communications

- (a) Before publicly communicating **research** findings and results a **researcher** must:
 - i. comply with requirements related to culturally sensitive data; and
 - ii. comply with confidentiality agreements and restrictions in other contracts or agreements related to the communication of **research** findings and results;
 - iii. comply with other legal obligations and accepted practices that require findings and results be provided to an organisation or party;
 - iv. inform those directly affected by research outcomes and other interested parties;
 - v. ensure the findings and results have been tested and assessed through a **peer review** or similar quality control process;

- vi. ensure intellectual property with a commercial potential is assessed and protected in accordance with **4.1.3** of the *Intellectual Property Policy*.
- (b) Where a confidentiality agreement or other contractual restriction on the communication of research requires findings and results be provided to a sponsor before they are peer reviewed, a researcher should inform the sponsor:
 - i. that the findings and results have not been **peer reviewed**; and
 - ii. about the importance and role of **peer review** in **research**.
- (c) Where the sponsor has agreed to **peer review**, a **researcher** must:
 - i. make all **research** findings and results available for an impartial and independent assessment by others in the same or related fields; and
 - ii. ensure those involved in **peer review** agree to any confidentiality requirements.

4.3.5. Research participants

Where feasible, **researchers** must provide **research** participants with an appropriate summary of **research** results.

4.3.6. Clinical trials

Clinical trials must be registered on a recognised register to promote access to information about **clinical trials**.

4.4 Authorship

Attributing authorship and acknowledging contributions to scholarly works recognises the moral rights of others and avoids **plagiarism**.

4.4.1. Moral right to authorship

- (a) The moral right to authorship is a legal right possessed by an individual who creates works that are protected under the *Copyright Act 1968 (Cth)*. Moral rights cannot be transferred, falsely attributed or claimed by another person.
- (b) Moral rights include the right to:
 - i. have authorship attributed to the work; or
 - ii. not to have the work falsely attributed;
 - iii. not to have the work treated in a derogatory manner.
- (c) Infringing the moral rights of another person, or failing to properly cite, reference or acknowledge their contribution to the work, is a breach of Copyright Act 1968 (Cth) and this policy.

Ownership of copyright works is determined in accordance with **3.3** of the University *Intellectual Property Policy*.

4.4.2. Plagiarism and authorship

Authorship must be offered to all persons who meet the authorship criteria, including **research trainees**. Failure to attribute authorship or **acknowledge** the contribution of others is **plagiarism**.

4.4.3. Authorship criteria

- (a) To be named as an author on a publication or **research** project a person must:
 - i. make a **substantial scholarly contribution** to the publication or **research** project, having regard to accepted practice in that discipline; and

- ii. be able to take responsibility for the part of the work they contributed.
- (b) A substantial **scholarly contribution** means a person has had substantial intellectual involvement in:
 - i. conception and design of the publication or research project; or
 - ii. analysis and interpretation of research data;
 - iii. drafting of significant parts of the work;
 - iv. critically revising the work so as to contribute to its interpretation.
- (c) A substantial **scholarly contribution** to a publication or **research** project requires more than:
 - i. general supervision of a student, research group or project; or
 - ii. acquisition of funding;
 - iii. provision of routine technical support;
 - iv. provision of facilities, materials or other resources;
 - v. provision of funding or support in kind;
 - vi. institutional, community or industry partnership;
 - vii. sponsorship.
- (d) The role, position or profession of the person making the contribution should not be taken into account when determining authorship.

4.4.4. Consent to authorship

- (a) A person who qualifies as an author must not be:
 - named as an author without their permission in writing, or
 - ii. excluded as an author without their permission in writing
- (b) Written permission in **4.4.4(a)** of this policy should contain a description of the contribution made to the work.

4.4.5. Acknowledgements

Contributions to works that do not meet the criteria for **authorship** must be recognised in the 'acknowledgements'.

4.4.6. Editors

- (a) An **editor** is a person who has made a significant contribution to the intellectual shaping of a publication.
- (b) An editor may be named as an author where the:
 - i. contribution to the work is more than the intellectual shaping of the publication; and
 - ii. authorship criteria in 4.4.3 of this policy is established.

4.4.7. Management of authorship

- (a) All **persons involved in research** should agree on **authorship** of a publication and confirm in writing in the early stages of a research project.
- (b) A written *Statement of Authorship* must be completed as soon as practicable, and periodically reviewed to ensure authorship criteria are established and the *Statement of Authorship* is current.
- (c) The completed *Statement of Authorship* must be registered in the Office for Research.

- (d) Where the publication is undertaken as a part of a collaboration with another organisation or individual outside the University, **4.7** of this Policy also applies.
- (e) Where a work has more than one author, one person should be appointed **Executive**Author or Corresponding Author.

(f) The Executive Author or Corresponding Author must:

- i. Consult all parties who have, or will make, a contribution to the work to determine who will be named as an author. This should occur at the commencement of the work and any time there is a change to contributions to the work to ensure the Statement of Authorship accurately reflects contributions to the project or publication.
- ii. Record authorship.
- iii. Manage communications about the work with publishers.

4.5 Peer Review

Peer review is the impartial and independent assessment of **research** by others working in the same or a related field, and the expert scrutiny of a project. It aims to maintain standards in a discipline or field of **research** and encourage the accurate, thorough and credible reporting of **research findings**.

4.5.1 Participating in Peer Review

Researchers and research supervisors are expected to participate in peer review, and mentor and assist research trainees to develop the skills and knowledge needed to engage in the peer review process.

4.5.2 Values and principles underpinning the peer review process

Everyone involved in the **peer review** process must ensure they:

- (a) act in a fair and timely manner with their review; and
- (b) act in confidence and not disclose the content or outcome of any process in which they are involved;
- (c) declare all conflicts of interest;
- (d) do not permit personal prejudice to influence the **peer review** process;
- (e) do not introduce considerations that are not relevant to the review criteria:
- (f) do not take undue or calculated advantage of knowledge obtained during the **peer review** process;
- (g) are informed about, and comply with, the criteria to be applied in the **peer review**;
- (h) do not participate in **peer review** outside their area of expertise;
- (i) give proper consideration to **research** that challenges or changes accepted ways of thinking.

4.5.3 Principles for researchers whose work is peer reviewed

A person who is the subject of **peer review**, must not interfere with, or attempt influence the **peer review** process or outcome.

4.6 Conflicts of interest

Conflicts of interest can arise in a range of contexts and must be managed to ensure judgements and decisions are not influenced by, or perceived to be influenced by, personal interests or associations.

All **persons involved in research** must recognise and manage actual, potential and perceived **conflicts** of interest.

Managing conflicts of interest

- (a) Record activities that may lead to **conflicts of interest** such as, memberships of Committees, Boards, Advisory Groups, or circumstances in which services or equipment have been received from outside bodies to support **research** activities.
- (b) Review activities for actual, potential and perceived **conflicts of interests**.
- (c) Disclose any actual, potential or perceived conflicts of interest to the principal investigator or research supervisor on a project, whether internal or external to the University, as well as your Immediate Organisational Unit Leader as soon as they become apparent. This disclosure must include a plan to eliminate or manage the conflict to ensure the integrity of the project is maintained.
- (d) Manage conflicts of interest by implementing the plan established and agreed to by the principal investigator or research supervisor on a project and your immediate organisational unit leader.
- (e) Withdraw from the situation if there is no way to manage the **conflict of interest**.

Where a **conflict of interest** involves intellectual property, it is dealt with under **4.5** of the University *Intellectual Property Policy*. All other **conflicts of interest** are dealt with under this policy.

4.7 Collaborative research with organisations and individuals outside Victoria University

4.7.1 Management of research agreements

A collaboration with an organisation or individual external to Victoria University arises where there is a commitment of resources by both the parties. Whilst this commitment may vary, collaborations raise specific research integrity issues that must be dealt with in either a written Research Integrity Agreement or a Research Collaboration Contract prior to the commencement of the project.

(a) Research Integrity Agreement

A **Research Integrity Agreement** is an expression of the parties' intentions, and not a legally binding contract. It should be used to manage matters related to research integrity where the only outcome is an academic publication or a research proposal.

A Research Integrity Agreement would not normally be used where the proposed collaboration:

- involves human research that is categorised as 'high risk', requiring ethics approval from the University Human Research Ethics Committee; or
- ii. requires ethics approval from the University Animal Experimentation Ethic Committee;
- iii. is an externally funded **research** project;
- iv. is likely to result in the creation of commercialisable intellectual property;
- v. is likely to generate income or provide a commercial return;
- vi. is otherwise considered inappropriate by the head of an organisational unit.

Where any one of these circumstances exist, a **Research Collaboration Contract** must be established to govern the relationship between the parties.

(b) Research Collaboration Contract

A **Research Collaboration Contract** is a legally binding agreement that sets out the rights and responsibilities of the parties to the agreement. All persons involved in a collaborative research project must comply with terms in the contract, as well as any additional obligations under the Australian Code and this policy.

Research Collaboration Contracts are entered into in accordance with the University *Contracts Policy.*

(c) Research agreements prepared by other organisations

A Research Integrity Agreement or Research Collaboration Contract prepared by an organisation outside Victoria University may be used so long as it contains comparable provisions and addresses all the requirements in the equivalent Victoria University document.

4.7.2 Maintaining research integrity in collaborative research projects

A **Research Collaboration Contract** should include clauses specifically designed to maintain the integrity of the project, including clauses related to:

- (a) ethics approvals and compliance; and
- (b) occupational health and safety;
- (c) ownership and management research data and materials and records;
- (d) reporting to agencies;
- (e) publication and dissemination research outcomes;
- (f) authorship;
- (g) confidentiality and privacy;
- (h) intellectual property ownership, protection and commercialisation;
- (i) how potential commercial returns will be shared;
- (i) management of potential conflicts of interest;
- (k) resolution of issues related to **research** integrity;
- (I) other factors necessary to validate the **research** and ensure the integrity of the project.

4.7.3 Conflicts of interest

Conflicts of interest relating to any aspect of a collaborative **research** project must be managed in accordance with **4.6** of this Policy.

4.8 Breaches of the Australian Code and research misconduct

Unless otherwise stated, failure to comply with the Australian Code and the obligations set out in this policy will be dealt with under the University *Research Misconduct Policy* and:

- in the case of staff, the discipline provisions of the relevant workplace agreement
- in the case of students, the discipline provisions in University Regulation 2.4

4.9 Transitional arrangements

The Australian Code for the Responsible Conduct of Research 2007 applies to all **research** conduct undertaken at or on behalf of the University from the commencement of the Code, whether or not the conduct predates the implementation of this policy.

5. PROCEDURES

The Office of the Pro Vice-Chancellor Research and Research Training will establish University-wide procedures to support the implementation of this policy in consultation with key stakeholders. The procedures will create a range of mechanisms and tools including:

- Research Data and Materials Procedures (under development)
- Research Data and Materials Plan
- Statement of Authorship
- Research Integrity Agreement

"The current official version of this policy is maintained on the Victoria University Central Policy Register and downloading and printing of this policy will produce an uncontrolled copy which may not be current."

- Research Collaboration Contract
- Teaching and Research Involving Animals Procedures (under development)
- Human Research Ethics Procedures (under development)

Procedures, forms and tools can be obtained from the Office for Research.

6. POLICY ADVISOR

Senior Advisor, Research and Research Training
Office of the Pro Vice Chancellor Research and Research Training

7. RELATED POLICIES AND LEGISLATION

Research Misconduct Policy (POA100524001)

Intellectual Property Policy (POR101116000)

Higher Degree by Research Policy (POR101215000)

Registration of Higher Degree by Research (HDR) Supervisors Policy (POA080730000)

Joint Supervision of Higher Degree by Research Students Policy (POA080730001)

External Supervision of Higher Degree by Research Students Policy (POA081222000)

Records Management policy (POU110506000)

Staff Code of Conduct Policy (POH110829000)

Student Charter Policy (POS100820000)

Intellectual Freedom Policy (under development)

Human Ethics Policy (under development)

Animal Ethics Policy (under development)

Various Workplace Agreements

Australian Code for the Responsible Conduct of Research

National Statement on Ethical Conduct in Human Research (2007)

Australian Code of Practice for the Care and Use of Animals for Scientific Purposes

Commonwealth and State laws related to the implementation of relevant Australian Codes of Practice and Professional Standards

POLICY HISTORY

Version approval date	Summary of changes
30 March 2012 (POR120215000)	New policy