

CODE OF RESPONSIBLE RESEARCH CONDUCT

Part 1: Code of Responsible Research Conduct

Purpose and Background:

The perception of Massey University's research by national and international stakeholders including academic peers,



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As part of the above, Massey will promote effective mentoring and supervision of researchers and research trainees. This includes advising on research integrity, research ethics, research design and methods, and the responsible conduct of research through these mechanisms and through relevant ethics committees.

Massey also has a responsibility to respond to, investigate and deal appropriately with any allegations of research practices not complying with the standards expressed in this policy, in accordance with the principles for dealing with research misconduct in Part 2 and with the procedures given in Appendix 2.

Responsibilities of Researchers:

It is the responsibility of all researchers to comply with the principles of research integrity as expressed in this policy and with the professional standards of their individual discipline. Researchers must foster and maintain a research environment of intellectual honesty and scholarly rigour.

In addition to following the above Principles, Massey researchers must:

- Manage conflict
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Massey University Policy Guide

Retaining research data is important because it may be all that remains of the research work at the end of a project. Researchers should keep clear, accurate records of all research in ways that will allow verification and replication of their work by others.

While it may not be practical to keep all the primary material (such as ore, biological material, questionnaires or recordings), records derived from them (such as assays, test results, transcripts, and laboratory and field notes) must be retained in an accessible form. It is the responsibility of the researcher to determine what records and data should be kept, in-line with any requirements set out in law, funding agreements, publisher’s agreements or through disciplinary conventions. At a minimum, researchers should keep detailed records describing the methods used and the results observed, as well as records of any approvals granted as part of the research process.

Unless otherwise defined through policy or funders requirements, research records and data should be retained as defined in [Section 13 of the General Disposal Authority](#). Where the policy or funders requirements indicate shorter retention periods for research records and data, the General Disposal Authority will take precedence. All academic units must have a procedure in place for storage and destruction (once the retention period has elapsed) of research data.

When storing research records and data, consideration should be given to:

- The safety and security of the research records and data;
- The durability of the data storage method (as a general rule, storage of data on computer hard drives is not suitable);
- The privacy and confidentiality requirements for the data;
- Requirements ascribed to the storage of data as part of ethical approvals;
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- Have made a creative and significant intellectual contribution to the research (e.g. through conception and design of the research, execution of research, or analysis and interpretation of research data);
- Given their permission to be named as an author;
- Not be named as an author solely on the basis of being the supervisor of the researcher or student undertaking the research, or the leader of the research group, where a creative and significant contribution has not been made to the research;
- Not be involved solely in writing the publication, unless contributing to critically revising the interpretation.

The work and contribution of all contributors should be acknowledged appropriately, with their permission.

The sequence of authors should be agreed by all authors and may follow national and/or disciplinary codes.

5. Peer Review

Peer review is a critical part of the research process, providing an impartial and independent assessment of the quality and novelty of the research by others experienced in the same field or discipline.



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Appendix 2:

Schedule 1: Procedures for Dealing with Minor Breaches and Research Misconduct

1. Informal Resolution Procedures

- 1.1. Wherever possible, before a formal allegation of research misconduct is made, attempts should be made to resolve the issues at a local level. This will be most appropriate when the issues are of a relatively minor nature or involve personal grievances. The issues should be dealt with at the following levels (in escalating order) where possible, before a formal allegation is made.
 - a) Between the staff and / or students involved.
 - b) By the Head of Unit (or delegate) if the issue cannot be resolved directly or is of a more serious nature.
- 1.2. Questionable Research Practices and Breaches of Research Conduct should, wherever possible, be dealt with at a local level, including by referral of the issue to the Head of Unit or senior academic colleague, or through

6. Preliminary Enquiry

- 6.1. In the case of students, the Assistant Vice-Chancellor (Research, Academic and Enterprise) shall follow the [Procedure of Managing Breaches of Academic Integrity](#). (Note that Paragraphs 3.1 – 3.4, 5.1 and 11.2(c-e) of these procedures and these paragraphs only continue to apply to allegations or complaints of research misconduct relating to students).
- 6.2. In the case of staff, the Assistant Vice-Chancellor (Research, Academic and Enterprise) shall:
 - a) Immediately notify the respondent in writing that an Allegation has been made and that a preliminary enquiry will be conducted. The written notification should include: the nature and detail of the allegation; the procedures to be followed; and the name of the complainant, unless the complainant is protected under the [Protected Disclosure Policy](#) or the Protected Disclosures Act 2000. The notification should also include an invitation to submit a written response to the allegation;
 - b) Conduct a preliminary enquiry. The preliminary enquiry will gather evidence, including through interviews or other communication with the complainant, the respondent and other interested or affected parties (e.g. Heads of Department). Interviews and other evidence should be documented as part of the record of the investigation;
 - c) Examine the evidence provided in support or rebuttal of the allegation, taking precautions against real or perceived conflicts of interest on the part of those involved in the preliminary enquiry;
 - d) Seek the assistance of such technical experts as is required to complete the preliminary enquiry;
 - e) Decide whether a prima facie case exists in relation to the allegation so as to warrant an Investigation.
- 6.3. Both the complainant and the respondent shall have the right to seek independent advice and to be represented by any person they choose during the preliminary enquiry.
- 6.4. The preliminary enquiry shall be concluded as quickly as possible and shall be completed within 60 calendar

6.8.

circumstances for the University to make a contribution to the respondent's legal costs and the extent of that contribution.

Schedule 2: Procedures for dealing with Allegations related to an application for, or research funded by, an external research funding agency with its own policy for dealing with and repo

- j) Restoration of reputations of complainants/respondents.



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