

## RESEARCH POLICY

<b>Policy owner</b>	Education Committee
<b>Policy category</b>	Academic
<b>Policy status</b>	Approved
<b>Approval body</b>	Academic Board
<b>Last amended</b>	14 <sup>th</sup> May 2024

### PURPOSE

This policy prescribes the structure, requirements, and management of research scholarship at MIECAT. It outlines responsibilities and good practice that establish the environment and culture in which MIECAT researchers work and supports the highest quality candidature experience and outcomes for them. This policy provides the necessary structure for researchers to act responsibly, with rigour and honesty, fostering responsible leadership at all levels of research. It promotes fairness, respect and recognition of all those involved in research and ensures transparency and accountability in reporting research methodologies and findings. Finally, it provides for the management of research data in a secure and accessible manner and enables open, equitable access to research outcomes wherever possible.

### SCOPE

This policy and associated procedures apply to the Masters degree that specialises in arts-based research (AQF 9), Professional Doctorate degree (AQF 10), and all other Institute-related research. It applies to all students enrolled in these degrees. This policy and associated procedures apply to all staff and students representing MIECAT as researchers.

## **POLICY AND PROCEDURES**

### **1. Principles**

The Australian Code for the Responsible Conduct of Research (2018) establishes a framework for responsible and ethical research practices and principles. MIECAT researchers must be familiar with and comply with the principles and responsibilities outlined in the Australian Code and this policy. MIECAT also complies with the National Statement on Ethical Conduct in Human Research (2023) and the AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research (2020).

### **2. Definition of Research**

Research at The MIECAT Institute (MIECAT) comprises forms of arts-based inquiry undertaken to contribute to the creation of new knowledge and/or existing knowledge in a new and creative way in order to generate new concepts, methodologies, or understandings.

Research involves producing artefacts related to therapeutic arts practice and disseminating them outwardly. We encourage collaborating on research projects as a sustainable approach to researching. Collaborative research authorship aligns with our relationality, emergence, and collaboration values, which are core to our inquiry approach.

Research may be embodied in artistic works, performances, print and online publications, conference or webinar presentations, and other field-related talks or seminars. It can also include a commitment to a topic or area of interest with a formally planned arrangement to produce an outwardly-facing artefact over time (such as, enrolment in our Professional Doctorate course and submission of a final thesis/creative work and exegesis).

Research outputs must be open to external, independent feedback by experts from within/associated with the field of inquiry. Research does not include activities MIECAT defines as part of a teaching practice or teaching-related scholarship.

### 3. Ethical and responsible research practice

3.1 All human research must be designed with an awareness of the ethical values and principles outlined by the Code, the National Statement, and where relevant the AIATSIS Code.

3.2 Researchers must regard the following as priorities in establishing the quality of their work and strive to:

- (a) safeguard the welfare, safety and interests of participants;
- (b) only conduct human research when they have the requisite skills, experience, resources and facilities to do so, including consideration of safeguarding the welfare, safety and interests of the researcher; and
- (c) base research designs on an inquiry process previously enacted/experienced, a sound methodology/method and a thorough review of the literature (where it exists and aligns with the research approach).

3.3 In accordance with section five of the National Statement, MIECAT has a responsibility to:

- (a) ensure that any human research conducted under the auspices of MIECAT is designed and conducted in accordance with the Code and ethically reviewed and monitored in accordance with the National Statement;
- (b) be satisfied that its human research meets scholarly standards relevant to the adopted research field or discipline,
- (c) that those conducting its human research are either adequately experienced and qualified or supervised, understand the need to assess risks to their own safety and that of participants, and that participants are free to withdraw from research at any time;
- (d) establish processes for ethical review of research;
- (e) be satisfied that processes are in place for managing conflicts of interest, monitoring research, handling complaints and ensuring accountability; and
- (f) use and promote clearly formulated, documented, accessible and current policies and procedures for research governance and ethical review.

### 3.4 Ethical review

- 3.4.1 All human research proposals must be submitted to the Human Research Ethics Committee (HREC) for review.
- 3.4.2 Research (specifically participant recruitment and data collection) must not commence until approval has been granted in writing.
- 3.4.3 All ethical review is to be timely, efficient and transparent. The review must be based upon the content of the National Statement, using the ethical principles outlined therein.
- 3.4.4 The conduct of the review should be collegiate, with the aim of facilitating research.
- 3.4.5 Where clarification, elaboration, modification, or a major change in approach is required, this should be in line with the National Statement and helpful guidance provided as to useful approaches.

### 3.5 Ethical conduct of research

- 3.5.1 The conduct of a human research project must comply with the protocols approved by the HREC ethical review process of MIECAT.
- 3.5.2 Human research activities will be monitored by reviewing progress reports for all approved projects, and by any other means deemed necessary or appropriate, such as random audits.

### 3.6 Data management

- 3.6.1 Research data, materials and related records must be stored in lockable/secure repositories approved by MIECAT HREC with appropriate data management plans in place. All such records must normally be kept for a period of 5 years following publication/completion of the project. Please refer to Public Records Office of Victoria Standard (PROS 16/07 VAR 1 3.3.5)
- 3.6.2 Researchers are required to complete a research data management plan as a part of their Ethics Application Form at the commencement of their project. Research students will need to complete this plan in conjunction with their supervisor. Plans should be updated throughout the lifecycle of the project to reflect changes to data storage and management.

3.6.3 For collaborative research projects, an agreement covering the arrangements of data storage must be established and included in the Ethics Application Form prior to the commencement of the research.

3.6.4 Researchers must keep clear, accurate, secure and complete records of all research, including research data and primary materials. Researchers must comply with any ethics or contractual confidentiality conditions relating to the research data and materials and related records and familiarise themselves with any legislative and regulatory requirements. (See as reference: Management of Data and Information in Research: A guide supporting the *Australian Code for the Responsible Conduct of Research (2019)*)

3.6.5 Research data generated by research involving Aboriginal and Torres Strait Islander peoples and communities must only be accessed by or be reused in consultation with its Indigenous owners. Researchers must consult the AIATSIS Code when working on research with Aboriginal and Torres Strait Islander Peoples and communities.

### 3.7 Reporting

3.7.1 HREC meeting minutes are provided to the Academic Board following each ethics committee meeting. The HREC Chairperson may report separately on other ethics matters as deemed necessary.

3.7.2 The HREC annual report is provided to the Academic Board as per the HREC Terms of Reference. The HREC Chairperson may be invited to attend the Academic Board to present the annual report.

## 4 Ownership and management of intellectual property

### 4.1 Copyright

In a photo of a person, the copyright is owned by the photographer - not the subject. However, people still have rights over how their image or photograph is used under other laws such as privacy.

Similarly, copyright in a film is owned by the person responsible for making the film, but people and performers who appear in the film may have rights over their performance.

It is MIECAT policy that as part of the required ethics applications for research projects, that written consent is gained from participating individuals if recordings of their voice or image, as well as art works of any creative modality, will be used in publications, presentations, or performances.

#### 4.2 Data

In MIECAT's arts-based approach to research inquiry, data generated may be diverse and multi-modal. Researchers' rights to hold records of research data arising from research are set out in the MIECAT Guidelines for Human Research Ethics. Research students may have unrestricted rights to use the data records and may retain them for their own use, during and after candidature (as described in signed consent forms returned by the research participants).

### 5 Research partnerships

#### 5.1 Research agreements

When entering a research partnership, a formal research agreement is a requirement of the Australian Code for the Responsible Conduct of Research (2018).

Organisations involved in a joint research project should ensure that an agreement is reached with the partners on the management of the research. Such an agreement should follow the general principles of this Code, including integrity, honesty and a commitment to high quality scholarship.

5.1.1 The agreement should be in writing. It must cover intellectual property and confidentiality; sharing commercial returns, responsibility for ethics and safety, and reporting to appropriate agencies. It should address the protocols to be followed by the partners when disseminating the research outcomes, and the management of research materials and research data.

5.1.2 The agreement may take various forms, such as a legal contract signed by the Director, an exchange of letters, or a research management plan signed by all parties, or management plans signed by appropriate representatives from all parties.

## 5.2 Research agreement template

When writing a research agreement, the MIECAT Research Agreement template is to be used.

The research agreement may need to be adapted according to:

- the type of research being conducting
- who, if anyone, is funding it, and
- the nature of the collaboration.

As the custodians of research, all agreements should list MIECAT as the contracting party (Institution) including

- Name of Institution
- Address
- ABN

A draft contract should be included with the initial ethics submission. There is no need to include a final contract in the first instance. The Director signs off on all Research Agreements.

## 5.3 Confidentiality agreements

If there is an intention to share MIECAT confidential information with an external organisation and/or receive an external organisation's confidential information, a confidentiality agreement (otherwise known as a confidential disclosure agreement (CDA) or non-disclosure agreement (NDA)) should be entered into.

## 6. Publication, presentation and authorship

### 6.1 Copyright

Copyright protection exists from the moment research is produced in a form that can be copied. By including a copyright statement, people are alerted to the fact that the work is subject to copyright and there may be restrictions in how they reuse it.

By providing an email address or contact details people will be more inclined to ask permission.

If a work is created as part of the researcher's employment role at MIECAT, for example as a teacher or supervisor, then the copyright will be owned by MIECAT,

except copyright in Scholarly Works (such as a Professional Doctorate thesis/creative work and exegesis).

According to the common law legal tradition, when an employee produces a work in the normal course of his or her employment, the employer is regarded as the initial owner of copyright, and hence considered the author, unless there has been an express agreement to the contrary, such as giving the employee a non-exclusive licence to use their work at another institution or as part of their portfolio of work. Works made for hire are any works produced in the course of employment, including leave and if created using any equipment belonging to the employer.

Where a staff member is also a student of MIECAT, they retain ownership of all Intellectual Property (IP) which they create in the process of undertaking their studies. Before publishing the onus is on researchers to ensure they have permission to use any third-party material within their work.

## 6.2 Scholarly works

### Ownership of intellectual property by MIECAT students

Unless it is MIECAT intellectual property, students own the intellectual property that they create in the course of their studies at the MIECAT, unless otherwise agreed in a specific instance.

## 6.3 Researcher employment at MIECAT

All Academic staff must conduct their Research in compliance with the Institute's Research obligations described in this policy.

Research active refers to Academic staff on Continuing or Fixed Term appointments with research defined as a key responsibility in their position description. Research output must be recorded annually on MIECAT's Scholarly Activity sheet and then transferred to our Scholarly Activity Register.

The minimum threshold for academic staff to be classified as Research Active is one research output per year.

## 7. Research misconduct

Institutions that conduct research, train and employ researchers have primary responsibility for the prevention, detection, investigation and resolution of complaints about the conduct of that research. Research misconduct involves a breach of the Australian Code for the Responsible Conduct of Research [the Code]. Research misconduct does not include honest differences in judgement. Unintentional errors do not constitute research misconduct unless they result from behaviour that is reckless or negligent. Repeated or persistent breaches will likely constitute a serious breach, and may be regarded as Research Misconduct.

### 7.1 Breaches of the Australian Code for the Responsible Conduct of Research

7.1.1 Breaches may range on a spectrum from minor to major. Minor breaches may be addressed at the preliminary assessment stage. There are also some minor breaches that may relate to research administration that can easily be rectified and resolved prior to a preliminary assessment. Unintentional administrative errors, clerical errors or oversights are some examples of minor breaches. Major breaches require a preliminary assessment and/or investigation.

7.1.2 Factors that must be considered when determining the seriousness of a breach include:

the extent of the departure from approved or accepted practice; the extent to which research participants, the wider community, animals and the environment are, or may have been, affected by the breach; the extent to which it affects the reputation of research; the level of experience of the researcher; whether there are repeated breaches by the researcher; whether institutional failures have contributed to the breach; and any other mitigating or aggravating circumstances.

7.1.3 Examples of breaches of the Code by a researcher include, but are not limited to, the following:

- Not meeting required research standards
  - Conducting research without ethics approval, as required by the *National Statement on Ethical Conduct in Human Research*;

- Failing to conduct research as approved by an appropriate ethics review body;
- Conducting research without the requisite approvals, permits or licences;
- Misuse of research funds;
- Concealment or facilitation of breaches (or potential breaches) of the Research Code by others.
- Fabrication, falsification, misrepresentation
  - Fabrication of research data or source material;
  - Falsification of research data or source material;
  - Misrepresentation of research data or source material;
  - Falsification and/or misrepresentation to obtain funding.
- Plagiarism
  - Plagiarism of someone else's work, including theories, concepts, research data and source material;
  - Duplicate publication (also known as redundant or multiple publication, or self-plagiarism) without acknowledgment.
- Research data management
  - Failure to appropriately maintain research records;
  - Inappropriate destruction of research records, research data and/or source material;
  - Inappropriate disclosure of, or access to, research records, research data and/or source material.
- Supervision
  - Failure to provide adequate guidance or mentorship on responsible research conduct to researchers or research trainees under supervision.
- Authorship
  - Failure to acknowledge the contributions of others fairly;

- Misleading ascription of authorship including failing to offer authorship to those who qualify or awarding authorship to those who do not meet the requirements.
- Conflicts of interest
  - Failure to disclose and manage conflicts of interest in accordance with MIECAT's processes.
- Peer review
  - Failure to conduct peer review responsibly.

## 7.2 Procedures for investigating possible breaches

The procedure outlined below is applicable to all persons who conduct, assist in conducting, or are involved in supervising, research on behalf of, or under the auspices of, MIECAT or as part of their role or studies with MIECAT. The principles of procedural fairness apply to managing and investigating potential breaches of the Code. These principles contain the hearing rule (an opportunity to be heard), the rule against bias (decision-makers do not have a personal interest in the outcome) and the evidence rule (decisions are based on evidence). MIECAT must provide details of the allegation of potential breaches of the Code in writing to the respondent. The person must be treated fairly and given the right to be heard through the opportunity to respond to any allegation in writing.

### 7.2.1 Making a complaint or raising a concern about a potential breach of the Code

A complaint will be considered if it concerns the allegation that a researcher or researchers have conducted research that does not comply with the principles and or responsibilities of the Code. If the complainant is a MIECAT staff member or a currently enrolled MIECAT student, the complainant is encouraged to seek advice from Professional Doctorate Co-ordinator before lodging a complaint.

Complaints may be lodged anonymously or by a third party, but this may limit MIECAT's ability to assess the complaint or confirm the details with the complainant. It may also impose limitations on the preliminary assessment or any investigation that may follow from the complaint.

Complaints should be in writing and addressed to the Director of MIECAT.

#### 7.2.2 Receipt of a concern, complaint or allegation

The Director may refer the concern, complaint or allegation to the Course Co-ordinators or other delegated member of MIECAT staff for initial assessment.

#### 7.2.3 Initial Assessment

- The Designated Officer will assess the complaint and will determine if it is an alleged breach of the Research Code.
- If the complaint does not concern a potential breach of the Research Code, the complaint will either be dismissed or referred to other MIECAT processes as appropriate.
- If the complaint is considered frivolous or vexatious, the designated officer may refer the matter to other MIECAT processes to address the conduct of the complainant.
- If the complaint does concern a potential breach of the Research Code, the designated officer may determine that the matter can be managed at the Course level without the need for a Preliminary Assessment.
- The Designated Officer may take interim action to mitigate risk such as risk of harm to humans, or animals or the environment, and security of material relevant to any subsequent Preliminary Assessment or suspend activities whilst the matter is assessed.
- The Designated Officer may also instruct other relevant MIECAT staff to assess any interim action to be taken in relation to research involving staff and students.
- Minor or less serious breaches of the Code, for example, relating to research administration, unintentional administrative errors, clerical errors or oversights may be easily rectified and resolved at the Course level.
- If the complaint relates to an activity that poses an immediate risk of harm to humans, or animals or the environment, it will be

referred to the relevant ethics committee or other appropriate MIECAT processes for action.

- If the complaint proceeds to a formal allegation, the Director must be notified in writing along with the Education Committee and the Academic Board.

#### 7.2.4 Preliminary Assessment

The purpose of the preliminary assessment is to gather and evaluate facts and information and assess whether the complaint, if proven, would constitute a breach of the Research Code. The Director, Education Committee and Academic Board appoint an Investigating Officer.

- The Investigating Officer may seek further information from the complainant, and information from other people, which may include internal or external experts. The consultation of other parties both internal and external will depend upon the nature of the allegation.
- The respondent must be given details of the allegation and a defined time-frame to respond in writing to the allegation. The respondent must be given the opportunity to meet with the Investigating Officer to discuss the matter, with the option to bring a support person to this meeting. (The support person cannot be a legal representative.)
- The Investigating Officer must assess the matter and determine a time-frame for the preliminary assessment. That is, the preliminary assessment should be conducted within a defined time-frame notified to the respondent. If it becomes apparent that the Preliminary Assessment will require more time, an amended time-frame will be negotiated with the Investigating Officer and the respondent notified.
- The Investigating Officer must ensure that documentation of the preliminary assessment is retained by MIECAT, including records and minutes of meetings.
- Upon completion of the preliminary assessment, written advice must be prepared for the Designated Officer, which includes:

- a summary of the process undertaken;
  - an inventory of the information that was gathered, including the written response received from the respondent;
  - an assessment of the facts and information;
  - a description of how the potential breach relates to the principles and responsibilities of the Code and/or other MIECAT processes; and
  - recommendation for further action.
- Upon review of the Preliminary Assessment Report, the Designated Officer will determine on the basis of information gathered by the preliminary assessment whether a breach of the Research Code exists and if so, the seriousness of the breach. The Designated Officer may determine that:
    - There is no breach of the Research Code and the matter be dismissed.
    - The breach is minor or less serious and should be referred to the relevant Course Co-ordinator to be resolved with or without corrective actions.
    - The breach is major and serious but may be resolved by the relevant Course Co-ordinator, with or without corrective actions.
    - The breach is major or serious and should be referred to the Education Committee for appropriate action, but does not require an Investigation Panel.
    - The breach may constitute Research Misconduct and must be referred to an Investigation Panel for investigation.
    - The complaint should be referred by the Director, Education Committee and Academic Board to another external authority, institution or other external process.
    - The Designated Officer must advise the respondent, the complainant and other relevant parties as appropriate of the outcome of the preliminary assessment. This may include advice to funding bodies including, as required by, the

Australian Research Council (ARC) Research Integrity Policy (within 2 weeks) and other organisations in accordance with obligations of funding agreements, other research agreements or requirements of regulatory bodies.

- The Designated Officer will also determine if it is appropriate for the Preliminary Assessment Report or a summary of the Report to be provided to the relevant parties.
- If the Designated Officer determines that there is no breach of the Research Code then reasonable efforts must be made to restore the reputation of any affected parties.
- If the Designated Officer considers the complaint to have been made in bad faith or is vexatious, efforts must be made to address that with the complainant through the appropriate MIECAT processes.
- If required, the Designated Officer may address any systemic issues that have been identified during the Preliminary Assessment and report on these to the Academic Board.

#### 7.2.5 Investigation

- The purpose of the investigation is to make findings of fact to assess the extent of the breach and whether it constitutes research misconduct and the recommended actions. The Designated Officer will prepare a statement of allegations; develop the terms of reference for the investigation; make recommendations to the Director and Education Committee regarding membership of the Investigation Panel and Chair (the Panel must consist of a Chair and at least two persons) and whether members are internal or external independent appointees; and seek legal advice on matters of process where appropriate.
- Panel members must be appropriately qualified members with the expertise, skills and relevant experience of research conduct or investigations and the Code. Panel members must be free from bias and conflicts of interest. The Panel should consist of a balance of gender and diversity in its membership and have the appropriate number of members to ensure a fair outcome. The

Panel can include members external to MIECAT. Once the Panel is selected, the respondent must be advised of the Panel's composition and be provided with the opportunity to raise any concerns.

- The principles of procedural fairness must be applied when undertaking an investigation but does not include the right to legal representation for any party.
- During the investigation, Panel members must ensure that relevant interests are disclosed and managed. If an interest cannot be managed, e.g., a perceived or actual conflict of interest might be viewed as influencing the impartiality of the Panel, then relevant Panel members must retire themselves from the Panel.
- All those required to attend the Panel should be given adequate notification.
- The respondent will be provided with the opportunity to respond to the allegations in writing and/or in person and to provide additional relevant evidence to the Panel. The respondent may choose to be accompanied by a support person, but this person cannot be a legal representative.
- If the respondent chooses not to respond or appear before the Panel, the investigation will continue in their absence.
- If the Panel finds during the investigation that the scope and/or the terms of reference are limiting, it will refer the matter to the Designated Officer. The Designated Officer may decide to amend the scope of the investigation and the terms of reference. Should this occur, the respondent and relevant others are to be advised, and the respondent given the opportunity to respond to any new material arising from the increased scope.

#### 7.2.6 Outcome of the Investigation

- Upon the completion of the Investigation, the Investigation Panel will prepare a draft investigation report for the Designated Officer, which includes findings of fact consistent with the terms of reference of the Investigation and any recommendations.

- The draft investigation report must be provided to the respondent for comment within 20 business days of the Designated Officer's receipt of the report. The respondent has 15 business days to respond from receipt of the draft investigation report.
- Following the consideration of the respondent's comments, the investigation report will be finalised and the respondent will be provided with a copy.
- The Designated Officer will consider the final report of the Investigation Panel and consider the findings of fact, evidence presented and the Panel recommendations.
- The Designated Officer will consider the extent of the breach, the appropriate corrective actions and if referral to disciplinary procedures is required and will provide the final report to the Director, Education Committee and Academic Board with recommendations for action.
- Where systemic issues are identified as a contributing factor, these need to be referred to the Academic Board to be addressed.

#### 7.2.7 Actions on Completion of the Investigation

- Upon receipt of the Investigation Panel Report and the Designated Officer's recommendations, the Director, Education Committee and Academic Board will determine, whether:
  - it constitutes research misconduct and the appropriate Institute response; or
  - no research misconduct has occurred and the allegation is dismissed.
- The Director, Education Committee and Academic Board must communicate the determination and actions taken by MIECAT, including but not limited to:
  - formal written advice to the Respondent;
  - formal written advice to the Complainant;
  - if required, advice to the relevant parties, which may *include* affected staff, research collaborators including those at other

institutions, funding organisations, journal editors, and professional registration bodies;

- if relevant, formal written advice (within 2 weeks) to ARC in compliance with the ARC Research Integrity Policy;
  - action to be taken to amend the public record including correcting publications if the major or serious breach or research misconduct has affected the research findings and their dissemination;
  - where the respondent is no longer a MIECAT employee, MIECAT is still obliged to address the findings and may seek legal advice regarding disclosure to other institutions.
- If allegations are shown to be unfounded, MIECAT will make every effort to reinstate the good reputation of the respondent/s. Persons making frivolous or vexatious complaints in regard to research conduct may be dealt with under a disciplinary process.

#### 7.2.8 Review of the Investigation

- The respondent may request an internal review of an Investigation:
- A request for review of an Investigation will only be considered on the grounds of procedural fairness.
- The request must be made in writing to the Director within 10 business days of receipt of notification of the outcome of the Investigation.
- The request must clearly outline the procedural fairness grounds relied upon, including any supporting material and documentation.
- The Academic Board will assess if the request is based on grounds of procedural fairness, and will notify the applicant of the decision.
- Respondents and complainants may also lodge a request for an external review of an investigation with the Australian Research Integrity Committee (ARIC) or the Australian Research Council if appropriate.

## RESPONSIBILITY FOR IMPLEMENTATION

Academic Board, MIECAT HREC, Research Subject Co-ordinators, teaching staff and supervisors, research active staff and students.

## KEY STAKEHOLDERS

Academic Board, all research active staff and students.

## SUPPORTING DOCUMENTS

MIECAT Academic Misconduct Policy

MIECAT Guidelines for Human Research Ethics

MIECAT Grievance Handling and Resolution Policy

MIECAT Intellectual Property Policy

MIECAT Ethics Application Form

MIECAT Research Agreement Template

Australian Code for the Responsible Conduct of Research (2018)

Management of Data and Information in Research: A guide supporting the *Australian Code for the Responsible Conduct of Research (2019)*

Public Records Office of Victoria Standard PROS 16/07 VAR 1 3.3.5

National Statement on Ethical Conduct in Human Research (2023)

AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research (2020)

## VERSION HISTORY

Date of Issue	Version	Author	Summary of changes
20 <sup>th</sup> March 2023	1.0	J. Mitchell	Draft for approval
28 <sup>th</sup> March 2023	1.0	J. Mitchell	Approved by Academic Board
14 <sup>th</sup> May 2024	1.1	J. Mitchell	Revisions made in response to academic governance review

21 <sup>st</sup> May 2024	1.1	J.Mitchell	Approved by Academic Board
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