

PROCEDURES FOR MANAGING RESPONSIBLE RESEARCH CONDUCT

Section	Research Management
Contact	Office of the Provost
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Purpose

These Procedures describe the way the University manages instances where research conduct may not have been compliant with the standards expected of Massey researchers. The Procedures seek to balance a primarily educative approach to correct behaviour that is inconsistent with responsible research conduct standards, with a disciplinary approach which is transparent, fair, and equitable. The Procedures support the Code of Responsible Research Conduct and the Academic Integrity Policy — it should be read alongside that Code and Policy.

Scope

These Procedures apply to all types and categories of suspected or alleged research conduct that may not have been compliant with the standards expected of Massey researchers and impose responsibilities on Massey University staff and researchers.

Definitions

Affected Parties means those parties, including both individuals and organisations, who may be affected by an allegation.

Allegation means a stated concern that a researcher has possibly acted in a way that is non-compliant with acceptable research practice.

Artificial intelligence: refers to the simulation of human intelligence processed by machines or computer systems. It includes the ability of a computer, or a robot or software controlled by a computer, to do tasks that are usually done by humans because they require human intelligence and discernment, such as the ability to reason, discover meaning, generalise, or learn from past experiences.

Balance of Probabilities: refers to the standard of proof used to determine whether an alleged breach of research integrity has occurred. It means that the decision-maker must be satisfied, on the evidence, that the alleged behaviour or event was more likely than not to have occurred.

Complainant means a person who has made an allegation of a Breach of Research Integrity or Research Misconduct against a researcher.

Conflict of Interest is defined as a situation in which the activities of a staff member outside their employment obligations to the University lead to material personal benefit to the staff member concerned, either directly or indirectly (e.g. through a family member, associated entity, or external agency), to the detriment of the University.

Data mean any information, including facts or numbers collected to be examined, considered, analysed, or used to help in decision-making.

Generative artificial intelligence: a non-human adaptive tool or mechanism that can autonomously generate text, images, audio, video, or anything else that resembles human created content.

Head of Unit means the Manager responsible for a School, Department, Institute, Section, or Research Centre within Massey University.

Investigation means the process of identification, collection, and analysis of relevant evidence to assess whether a deviation from the principles of research integrity may have occurred, and to inform next steps.

Minor Breach of Research Integrity means a minor, often unintentional, deviation from the principles of research integrity by a researcher.

Poor Research Practice involves inadvertent and minor deviations from appropriate research integrity practice or convention.

Postgraduate Coordinator is defined as the academic staff member with responsibilities for providing academic leadership and decision-making for postgraduate research students at school or College level. The role may have different nomenclature including but not limited to thesis course coordinator, postgraduate coordinator, programme coordinator, master's or doctoral coordinator, postgraduate lead, associate dean, and director, of higher degrees research.

Research Coordinator is defined as the academic staff member who has overall responsibility for the research course in which a student is enrolled. The coordinator may have different titles including but not limited to course/thesis course coordinator, postgraduate coordinator/lead, honours/master's/doctoral coordinator/lead.

Research and Development (R&D) is defined according to the OECD Frascati Manual (2002) as *"creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications."*

Research Misconduct means a wilful deviation from the principles of research integrity by a researcher.

Researcher means a staff member or student involved in conducting research.

Staff or Staff Member means a person who is engaged by Massey University as an employee or worker and/or who holds a University office or post, as well as any person to whom the University makes available any of the privileges or facilities normally afforded to its employees. This includes visiting researchers, emeritus professors and other classes of temporary, honorary and volunteer staff, and applies to graduate students, whether paid or unpaid, when researching or undertaking research-related duties at the University.

Student means a person who:

- a) is enrolled in a programme of study (including courses, specialisation, qualifications, short courses and micro-credentials) at the University.
- b) was a student at the time of any alleged breach of research integrity.
- c) is seeking admission or enrolment at the University.
- d) became a student after having allegedly done so by misleading or false means.
- e) has consented in writing to be subject to the statutes, regulations and policies of the University as a student.
- f) is on suspension or leave of absence from or who has deferred enrolment in a programme of study (including courses, specialisation, qualifications, short courses and micro-credentials) at the University.

Supervisor means a staff member who is responsible for the supervision of a student researcher undertaking a research project for a degree qualification.

Wilful means purposeful conduct: an intentional or deliberate act to achieve a purpose without regard to the consequences.

Non-Compliant Research Conduct

1. Criteria for determining the category of non-compliant research conduct

- 1.1 Non-compliant research conduct could fall under any of the following categories: Poor Research Practice, Minor Breach of Research Integrity, and Research Misconduct. Each category has a process to investigate allegations.

- 1.2 There are three criteria for determining the category of non-compliant research conduct, namely the experience of the researcher, the nature of the breach, and the extent of the breach. Categorisation often requires qualitative judgement which takes context and situational factors into account. Notwithstanding, the table in **Appendix 1** provides guidance for determining the applicable criteria and category in respect of each allegation.

a) Experience of the researcher

Experience refers to a researcher's qualification level, history, and length of time at Massey University (and/or at another university or research organisation in a research role), and any engagement, training or other exposure they may have had to academic research. A researcher's experience may reasonably be expected to inform their understanding of research conduct, integrity, and the required research integrity principles and conventions they are expected to comply with.

b) Nature of the breach

The nature of the breach refers to the type of research activity or behaviour that does not conform to acceptable research practices and integrity standards, and whether it involves mistake, carelessness, negligence, disregard or intent. Generally, efforts to deceive will be considered to indicate a higher level or more serious breach of research integrity, whereas unintentional or careless mistake(s) would, in many cases, be considered lower in level or seriousness.

c) Extent of the breach

The extent of the breach relates to the scale, degree or impact of the alleged breach of research integrity on the integrity of the work or the interests of someone else or the University. The extent of a breach may depend on the context, convention, or expectations that may apply in a particular situation. For that reason, professional judgement is often required to determine the extent of a breach.

2 Reporting possible non-compliant research conduct

- 2.1 Allegations of a breach of research integrity may originate from individuals or groups either inside or outside the University within 12 months of the alleged breach. Allegations made later than one year after the occurrence of the non-compliant research conduct may only be investigated with the consent of the applicable Pro Vice-Chancellor for the College where the researcher is employed or enrolled.

- 2.2 All allegations must be made in writing. Staff members receiving such allegations must pass them to the relevant:

- a) Research Coordinator (if the allegation relates to a student); or
- b) Head of Unit (if the allegation relates to a staff member).^{1; 2}

- 2.3 Written allegations must include at least:

- a) The name(s) and contact details of the person making the allegation.
- b) The name(s) of the person(s) against whom an allegation has been made.
- c) The nature and full details of the allegation.
- d) Documented evidence in support of the allegation, where possible.

2.4 Protection of Affected Parties

- a) When an allegation is made, it is important to assess and protect the interests of all affected parties. Affected parties may include:
 - The complainant.
 - The person(s) against whom an allegation has been made.

¹ When a Research Coordinator or Head of Unit are involved in the research, as a researcher or supervisor, this may create a conflict of interest which should be declared, and another member of staff should be appointed to investigate the allegation.

² Where a Massey University staff member is also a postgraduate student, it will be important to determine whether the allegation relates to their research thesis/creative practice/exegesis requirements or whether the research is being conducted in their role as a member of staff, independent of Research degree requirements.

- Researchers collaborating with the person(s) against whom an allegation has been made.
 - Publishers by whom manuscripts impacted by the allegation have been or are about to be published.
 - Funding bodies who have contributed to the research in question.
 - The University or any staff member of the University.
 - Members of the public.
- b) If the complainant discloses information about serious wrongdoing, the disclosure may be protected under Massey's Protected Disclosure Policy and Reporting Procedure (staff member) or the Protected Disclosures Act 2000 (non-staff member).
- c) The University should provide all necessary protection to the complainant(s) to ensure that they are not the subject of victimisation or undue pressure in relation to the allegation.
- d) If the person(s) against whom an allegation has been made is a staff member or student of the University, the Vice-Chancellor may suspend that person from duty (with pay, if applicable) or from enrolment and may exclude them from the University. This shall occur only in situations in which the Vice-Chancellor is satisfied that continued presence of that person(s) at the University may lead to criminal, unsafe, or inappropriate behaviour, or may be prejudicial to the well-being of other University staff or students, or provide risks that cannot be suitably managed while they are present, or to resolution of the problem.
- e) A researcher who is suspended or excluded from the University shall be permitted reasonable access to the University to prepare their response to the allegation and to collect books, papers and other personal property.
- f) If an allegation is dismissed, any person who has been suspended or excluded from the University under this paragraph shall be reinstated with an unblemished record.
- g) If an allegation is substantiated, the position of researchers supervised by or working with the person(s) against whom the allegation has been made must be clarified by the staff member undertaking the investigation. In some cases, it may be necessary to provide assistance or support to those affected by the misconduct or behaviour of others.
- h) If the research is supported by external funding sources, the funders should be notified by the Provost when an allegation of Research Misconduct is evidenced after an investigation.
- 2.5 When dealing with allegations of non-compliant research conduct, the Research Coordinator or the Head of Unit must determine whether the case may be considered Poor Research Practice, and if so, deal with the case as directed in these Procedures.
- 2.6 Where the Research Coordinator or the Head of Unit is of the opinion that the matter ought to be dealt with as either a Minor Breach of Research Integrity or Research Misconduct, the Head of Unit will in that case determine whether the matter should be dealt with as either Poor Research Practice, Minor Breach of Research Integrity, or Research Misconduct.
- 2.7 Where any report or allegation is under investigation at the time of approval of these Procedures, and in the absence of an agreement between the parties to follow these Procedures, the procedures as set out in the previously approved version of the Code of Responsible Research Conduct in effect at the time when the report or allegation was made, will be followed.

3. **Procedural fairness**

3.1 The principles of procedural fairness (also referred to as natural justice) apply to managing and investigating possible non-compliant research conduct. These principles encapsulate the hearing rule (providing an opportunity to be heard), the rule against bias (decision-makers are impartial, unbiased, and have not made any predetermination) and the evidence rule (decisions are based on evidence). It is expected that the Research Coordinator or Head of Unit consider, investigate, and deal with possible non-compliant research conduct in a timely, accessible, culturally safe, and competent manner, and in a way that is:

- a) **Proportional:** Investigations and subsequent actions, including the outcome imposed, need to be proportional to the alleged non-compliant research conduct. In determining that a Breach of Research Integrity or Research Misconduct occurred, the finding must be based on the evidence considered, and on a Balance of Probabilities.
- b) **Fair:** Investigations need to afford procedural fairness to researchers and, where appropriate, staff and others who may be adversely affected by any investigation. Researchers must be advised of their right to be represented and supported by a person or persons of their choice during the process.
- c) **Impartial:** Investigators and decision-makers must be impartial and must therefore not have any prior knowledge or any interests that do, may, or may be perceived to jeopardise their impartiality. They must also act in a way that upholds specific individual and cultural needs or circumstances of the parties.
- d) **Timely:** Investigations into possible breaches should be conducted in a timely manner to avoid undue delays, and to mitigate the impact on those involved.
- e) **Transparent:** Information about the complaint(s), evidence and process must be provided to researchers, staff, and any other persons impacted by an allegation, and they must be afforded a reasonable opportunity to respond to the allegation(s). Accurate records are to be maintained for all parts of the process, in accordance with the University's record keeping system (as defined in the *Information Records Management Policy*).
- f) **Confidential:** Information will be treated as confidential and will only be disclosed:
 - When required by law, regulation, or legal process.
 - To university staff who may have a legitimate need to know such information for the purpose of fulfilling their duties.
 - When the researcher consents to disclosure.
 - If the person(s) against whom an allegation has been made is in receipt of a grant from an external funding body which is related to the allegation and the matter is managed as possible Research Misconduct, the Provost shall advise the appropriate officer of that funding body, in confidence, that a case is being formally investigated on the understanding that the funding body will not terminate the grant until the outcome of the case is known. If the person(s) against whom an allegation has been made is subsequently exonerated, then the Provost shall advise the funding body accordingly.
 - There may, in some circumstances, be reason to inform the publishers of a manuscript that the authenticity of a manuscript or manuscripts may be affected by the outcome of the investigation of an allegation of a breach of research integrity.

4. Informal Resolution Process

- 4.1. Wherever possible, attempts should be made to resolve the issues pragmatically and educatively with the researcher involved. This may be most appropriate in cases classified as Poor Research Practice. The issues should be dealt with at the following levels (in escalating order) where possible, before a formal resolution process is followed:
- a) Between the complainant and the researcher involved.
 - b) By the Research Coordinator or Head of Unit (or delegate) if the issue cannot be resolved directly or is of a more serious nature.
 - c) Through mediation.
- 4.2. Cases involving Poor Research Practice or Minor Breach of Research Integrity should, wherever possible, be dealt with educatively, including through dialogue, mediation, agreed culturally appropriate process, through other policies and processes where personal or behavioural issues are involved, before being dealt with in terms of the formal process outlined below.

5. Formal Resolution Process in respect of STUDENT researchers

- 5.1. Where resolution through an informal process is not possible or appropriate, the allegation shall be dealt with as set out below, depending on whether it has been classified as either Poor Research Practice, Minor Breach of Research Integrity, or Research Misconduct. It is expected that the process will use agreed culturally appropriate and informed practices.
- 5.2 **Poor Research Practice**
- a) On receiving a report or allegation of suspected non-compliant research conduct, the Research Coordinator may, after consideration of all available evidence, determine whether the student researcher has engaged in Poor Research Practice.
 - b) Where a Research Coordinator determines that the student researcher has engaged in Poor Research Practice, they must:
 - provide the student researcher in writing with:
 - details of the alleged Poor Research Practice;
 - copies of all available evidence relating to the alleged Poor Research Practice;
 - educative feedback for learning and/or correction, in order that the researcher can correct their behaviour in future; and
 - an outcome determined in accordance with **Appendix 2**.
 - communicate the outcome to any additional relevant staff (e.g., supervisors) for action as required.
 - c) Copies of the notice of any meeting with the student researcher, all relevant evidence collected, all correspondence, and the letter informing the student researcher of the outcome must be kept in accordance with the requirements set out in the University's *Information Records Management Policy*.
 - d) There is no appeal against an outcome managed as Poor Research Practice in the case of student researchers. Any student researcher who wishes to challenge such an outcome may use the mechanisms for reconsideration of assessed grades, or the process for student complaints and grievances set out in the *Student Complaints and Grievance Procedures*.

5.3 Minor Breach of Research Integrity

- a) When the Head of Unit is notified of an alleged non-compliant research conduct which is in their view more serious than Poor Research Practice, and is provided with any evidence in relation to the alleged non-compliant research conduct, the Head of Unit considers the allegation, evidence, the nature and extent of the alleged non-compliant research conduct, and the experience of the researcher, and determines whether:
 - the case should be managed as Poor Research Practice, in which case it should be referred back to the Research Coordinator for management as such, with advice if required.
 - the case should be managed as a Minor Breach of Research Integrity by the Head of Unit (or delegate).
 - the case should be managed as Research Misconduct and referred to the Dean, Postgraduate Research.
- b) Where the Research Coordinator determines that the case ought to be managed as a Minor Breach of Research Integrity, the Head of Unit must complete any further investigation that may be required. Once the Head of Unit is satisfied that the evidence that has been collected supports a possible Minor Breach of Research Integrity, the Head of Unit must:
 - notify the researcher in writing;
 - provide the researcher with details of the allegation and copies of all evidence collected;
 - invite the researcher to a virtual or in-person meeting with the Head of Unit to discuss the breach which is alleged or suspected to have occurred; and
 - inform the researcher of the principles of procedural fairness that will apply, including their right to have a support person(s) of their choice at the meeting.
- c) The aim of the meeting is to discuss the allegation, evidence, process and possible outcomes with the researcher, and to allow the researcher to respond to it if they wish to do so. The Head of Unit may need to investigate further if the researcher has brought new evidence during this discussion. The Head of Unit should also use the meeting to help the researcher identify gaps in their skills or knowledge that may have led to the Minor Breach of Research Integrity, and to then impose (after considering all the evidence) an educative outcome that will facilitate learning, correction, and appropriate research integrity behaviour by the researcher in the future.
- d) The Head of Unit may only find that a Minor Breach of Research Integrity occurred where the evidence substantiates the allegation on a Balance of Probabilities.
- e) Where the researcher does not respond to the allegation, does not attend the meeting, or does not provide any representations or evidence, the Head of Unit must determine a finding and outcome on the available evidence.
- f) The Head of Unit may, only after they have made a finding that a Minor Breach of Research Integrity had occurred, verify from the Misconduct Register whether the researcher has been found to have committed Research Misconduct before, and this information may be taken into account when determining an appropriate outcome in that case.
- g) Where the Head of Unit finds that the evidence substantiates a Minor Breach of Research Integrity, the Head of Unit must inform the researcher in writing of the finding and outcome, as well as their right to appeal.

- h) If the Head of Unit finds that the evidence does not substantiate a Minor Breach of Research Integrity, the Head of Unit must inform the researcher accordingly in writing.
- i) Copies of the notice of any meeting with the researcher, all relevant evidence collected, and all correspondence including the letter informing the researcher of the outcome, must be kept in accordance with the requirements under the University's *Information Records Management Policy*.
- j) The Head of Unit must advise applicable staff of the outcome, in order for it to be actioned.
- k) A researcher who was found to have committed a Minor Breach of Research Integrity may appeal against the finding and/or outcome of that decision, in writing, and within ten (10) working days of the date of the decision.
 - The appeal against a decision by the Head of Unit must be made to the Pro Vice-Chancellor of the applicable College, or in the case of postgraduate research to the Dean Postgraduate Research.
 - An appeal may only be made on one or more of the following grounds, and is not intended to allow a mere reconsideration of the case by a different decision-making entity:
 - that the process for investigating the allegation and/or determining the outcome was procedurally unfair.
 - that the finding could not be reasonably sustained on the evidence, on a balance of probabilities.
 - that the outcome imposed is disproportionate to the Minor Breach.
 - that significant new evidence, which was not reasonably available before, has become available since the decision that is being appealed against, and which could reasonably be expected to have a material effect on the finding or outcome.
 - Decisions on appeals will be based exclusively on the consideration of written submissions and supporting evidence provided to the relevant Pro Vice-Chancellor or Dean Postgraduate Research by or on behalf of the researcher making the appeal, and the University. Oral submissions will not be permitted except in exceptional cases. To initiate an appeal, a researcher must submit a written appeal which includes an explanation of the grounds for appeal, along with any supporting evidence.
 - Where the Pro Vice-Chancellor or Dean Postgraduate Research has prior knowledge of the case, they shall not adjudicate the appeal, and the appeal shall in such a case be referred to an appropriate Pro Vice-Chancellor who does not have prior knowledge or interest in the case, to adjudicate.
 - The Pro Vice-Chancellor or Dean Postgraduate Research, adjudicating the appeal may:
 - determine that the grounds for appeal are not met, and dismiss the appeal, or
 - determine that the grounds for appeal are met, and:
 - uphold the appeal and set aside the decision of the Head of Unit;
 - dismiss the appeal and uphold the decision of the Head of Unit;
 - vary the decision of the Head of Unit; or
 - vary the outcome to any of the possible outcomes relating to a Minor Breach of Research Integrity outlined in **Appendix 2**.
 - The decision of the Pro Vice-Chancellor or Dean Postgraduate Research shall be the final decision, and shall be notified to the researcher in writing.

5.4 Research Misconduct

- a) If an allegation relates to an application for, or research funded by, an external research funding agency with its own Policy for dealing with and reporting possible misconduct in research, then section 8 below shall apply.
- b) In the case where an allegation is made against a researcher who is a student, the procedures outlined in the Student Disciplinary Regulations shall apply.

6. Formal Resolution Process in respect of STAFF researchers

6.1 Where resolution through an informal process is not possible or appropriate, the allegation shall be dealt with as set out below, depending on whether it has been classified as either Poor Research Practice, Minor Breach of Research Integrity, or Research Misconduct. It is expected that the process will use agreed culturally appropriate and informed practices.

6.2 Poor Research Practice

- a) The process outlined in 5.2 (a)-(c) above shall apply to researchers who are staff members.
- b) There is no appeal against an outcome managed as Poor Research Practice in the case of researchers who are staff. Any researcher who wishes to challenge such an outcome may follow the appropriate dispute resolution options available to Massey University staff³.

6.3 Minor Breach of Research Integrity

The process outlined in 5.3 above shall apply to researchers who are staff members.

6.4 Research Misconduct

In the case where an allegation is made against a researcher who is a staff member but who is not also a student, the matter shall be referred to the Provost who will direct and follow the process outlined below.

- i. The Provost shall instruct an appropriate person to complete an investigation for the purpose of identification, collection, and analysis of relevant evidence to assess whether Research Misconduct may have occurred, and to inform appropriate next steps. The investigation must be conducted in accordance with the principles of procedural fairness described above, and shall be completed within 30 calendar days unless, in the opinion of the Provost, circumstances clearly warrant a longer period.
- ii. The Provost shall immediately notify the person(s) against whom an allegation has been made, of the allegation, and of the process which will be followed to investigate the allegation.
- iii. Where the Provost is of the opinion, after completion of the investigation, that the evidence collected **does not** support the allegation, the matter must be closed without any further action being taken against the researcher concerned. Records of all relevant documentation collected must be kept in accordance with the University's *Information Records Management Policy*. If, after considering the investigation, the Provost finds that an allegation has been made in a frivolous, vexatious or malicious manner or was an abuse of process, this finding will be reported to the Vice-Chancellor, who will determine whether, and if so what, appropriate action should be taken in respect of the allegation.

³ <https://masseyuni.sharepoint.com/sites/WorkingAtMassey/SitePages/Dispute-resolution.aspx>

- iv. Where the Provost is of the opinion that the evidence collected **supports** the allegation, the Provost must inform the researcher accordingly, and must provide the researcher with:
 - sufficient details of the allegation to allow the researcher to reasonably respond to it.
 - copies of all evidence collected during the investigation.
 - details of the process which will be followed.
 - references to relevant University policies, procedures, regulations and codes.
 - references to support and advocacy services available to the researcher.

and the Provost must advise the researcher of:

 - their right to be represented and/or supported throughout the process.
 - their right to be heard, respond to the allegation and evidence, to make representations, and not to answer questions or make representations.
 - the possible consequences of not responding to the allegation or evidence.
 - the possible outcomes should the allegation be substantiated.
- v. If the researcher accepts responsibility for the alleged Research Misconduct, or does not respond or make representations to the allegation or evidence within 30 calendar days, the Provost must advise the Vice-Chancellor of the allegation, investigation, and status of the matter, after which the Vice-Chancellor will determine an outcome on the available evidence, in accordance with the options listed in **Appendix 2**, and must inform the researcher of the outcome in writing.
- vi. If the researcher does not accept responsibility for the alleged Research Misconduct, and responds to or makes representations regarding the allegation or evidence, the Provost must consider the available evidence including any responses and representations the researcher makes, and any evidence the researcher presents, and conclude any further investigation required, before advising the Vice-Chancellor of the allegation, investigation, any submissions and evidence provided by the person(s) against whom the allegation has been made, and status of the matter, after which the Vice-Chancellor will determine an outcome, in accordance with the options listed in **Appendix 2**, and must inform the researcher of the outcome in writing.
- vii. The researcher must be informed in writing of their right to appeal, and be referred to the applicable appeal process and grounds for appeal as set out below.
- viii. Records of all relevant documentation relating to the allegation, investigation, and outcome must be kept in accordance with the requirements of the *Information Records Management Policy*.
- ix. If the person(s) against whom the allegation has been made is no longer a staff member of the University, the Vice-Chancellor shall consider and may adopt such measures as are necessary and available within the law to protect the reputation of the University.
- x. If the allegation is related to research funded by a grant from an external funding body, the Provost shall advise the appropriate officer of that funding body, in confidence:
 - a. of the allegation which was investigated by the University and found to have been substantiated; and
 - b. whether the researcher can continue as a researcher in relation to that funded research, and if so under what conditions.
- xi. The Provost shall notify all affected publishers that an allegation of Research Misconduct against the researcher was investigated by the University and found to have been substantiated.

- xii. A researcher against whom an allegation of Research Misconduct has been upheld may appeal against that decision or outcome.
 - a. The appeal must be made within ten (10) working days of the date of that decision, and must be made in writing to the Misconduct Appeals Committee.
 - b. The Misconduct Appeals Committee may consider applications for appeals to be made later than the 10-day period in exceptional cases. When seeking to make an appeal later than the 10-day period, the researcher making the appeal must provide a reasonable explanation why the appeal could not have been made within the 10-day period.
 - c. The principles of procedural fairness outlined above apply to all appeals made under these Procedures, including that members of the Misconduct Appeals Committee may not be involved with matters in which they have, or may be perceived to have, an interest or prior knowledge.
 - d. An appeal may only be made on one or more of the following grounds, and is not intended to allow a mere reconsideration of the case by a different decision-making entity:
 - That the process for investigating and/or determining the outcome was procedurally unfair.
 - That the finding could not reasonably be sustained on the evidence, on a balance of probabilities.
 - That the outcome imposed is disproportionate to the Research Misconduct.
 - That significant new evidence, which was not reasonably available before, has become available since the decision that is being appealed against, and which could reasonably be expected to have a material effect on the finding or outcome.
 - e. Outcomes which have been reached by agreement with the researcher, whether through consultation, mediation, cultural process, or other agreed manner, may not be appealed against.
 - f. The Misconduct Appeals Committee is delegated with the authority to consider and adjudicate all appeals in relation to Research Misconduct. Where applicable, the standard of proof required for an appeal to succeed is on the Balance of Probabilities.
 - g. Decisions on appeals will be based exclusively on the consideration of written submissions and supporting evidence provided to the Misconduct Appeals Committee by or on behalf of the researcher making the appeal, and the University. Oral submissions will not be permitted unless in exceptional cases. To initiate an appeal, a researcher must submit a written appeal which includes an explanation of the grounds for appeal, along with any supporting evidence.
 - h. The Misconduct Appeals Committee is comprised of three members, being:
 - one staff member with appropriate experience appointed as Chairperson for a designated term by the Vice-Chancellor.
 - one staff member appointed by the Chairperson of the Misconduct Appeals Committee, from a pool of seven staff members nominated as below to serve on the Misconduct Appeals Committee for terms of up to three years each:

- One nominee by the Pro Vice-Chancellor of the College of Creative Arts.
 - One nominee by the Pro Vice-Chancellor of the College of Health.
 - One nominee by the Pro Vice-Chancellor of the College of Humanities and Social Sciences.
 - One nominee by the Pro Vice-Chancellor of the College of Sciences.
 - One nominee by the Pro Vice-Chancellor of the Massey Business School.
 - One nominee by the Deputy Vice-Chancellor Students and Global Engagement.
 - One nominee by the College Director of the Massey University College.
 - one staff member appointed by the Chairperson of the Misconduct Appeals Committee, from a pool of four staff members nominated to serve on the Misconduct Appeals Committee by the Deputy Vice-Chancellor Māori.
- i. The Chairperson of the Misconduct Appeals Committee may appoint an adviser or advisers to assist at a hearing in relation to particular aspects of an appeal, including procedure and any culturally appropriate processes agreed to. Such advisor or advisors will not have any voting powers on the outcome of the appeal.
- j. The Misconduct Appeals Committee may, by a majority decision:
- determine that the grounds for appeal are not met, and dismiss the appeal, or
 - determine that the grounds for appeal are met, and:
 - uphold the appeal and set aside the decision appealed against; or
 - dismiss the appeal and uphold the decision appealed against; or
 - vary the decision appealed against; or
 - vary the outcome appealed against to any of the possible outcomes listed in **Appendix 2**, irrespective whether the new outcome is regarded as more or less severe than what was originally imposed.
- k. Decisions of the Misconduct Appeals Committee shall be by simple majority of the members adjudicating an appeal. Decisions of the Misconduct Appeals Committee shall be the final decision, and must be notified in writing to the researcher who makes the appeal as soon as is reasonably possible.

7. **Record keeping**

- a) Records of all documents relating to cases managed as non-compliant research conduct must be kept securely and confidentially in accordance with the requirements set out in the University's *Information Records Management Policy*. This includes:
- copies of the notice of any allegation(s) and meetings with the researcher.
 - all relevant evidence collected, and correspondence.
 - any documents provided by the researcher in response to allegations and evidence.
 - the letter(s) informing the researcher of the finding and outcome.
 - all documents relating to an appeal.
- b) Those records will be disposed of in accordance with the *General Disposal Authority for New Zealand Universities*.
- c) The University will record information relating to all cases where researchers have been found to have committed Research Misconduct, in the Misconduct Register. The Misconduct Register will be centrally managed, and access to it will be restricted to authorised staff only.

- d) Details of every case where Research Misconduct has been substantiated must be provided to the staff member authorised to manage the Misconduct Register, at the time when the researcher is notified of the outcome, and must be recorded in the Misconduct Register.
- e) All processes and decisions under these Procedures must be treated as confidential to the parties involved and to relevant University staff, including for purposes of an appeal, and shall not be disclosed unless lawfully required or agreed to. The University shall be allowed to notify any external agency lawfully interested in the researcher's record, of any records appearing in the Misconduct Register in relation to the researcher.

8. 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 reporting possible misconduct in research

8.1 Process for dealing with Research Misconduct Allegations

- a) If the allegation relates to an application for, or research funded by, an external research funding agency with its own Policy for dealing with and reporting possible misconduct in research, Massey University may choose to adopt that Policy as a framework under which the allegation will be dealt with.
- b) If Massey University adopts the Policy for dealing with and reporting possible misconduct of the external funding body, then the processes described in the relevant sections of Schedule 1 will be superseded by those of the Policy involved.
- c) No investigation should begin until the specific requirements of the Policy of the external funding body have been considered and suitable procedures agreed on.
- d) An infringement of the standards where applicable in the PHS Final Rule⁴, or any other adopted Policy, will be a breach of this Policy and may result in disciplinary action.
- e) Individual funding contracts must state clearly where Massey University chooses to adopt the policies of the external funding body insofar as it relates to allegations of research misconduct.

8.2 Research Misconduct related to applications to and funding from the US Public Health Service

- a) In the event of conflict with any applicable general parts of any Massey University policies, the PHS Final Rule or adopted Policy processes and procedures are to be read into and applied to such parts so as to support the intention and objectives of the PHS Final Rule or adopted Policy.
- b) Specific requirements in the PHS's Final Rule are summarised below:
 - i. An obligation to start and finish investigations within set timeframes;
 - ii. Recording, transcribing, disclosing and correcting interviews;
 - iii. Reporting to the US Office of Research Integrity (ORI) Director, and notifying at various stages, and cooperating with, the ORI;
 - iv. Responsibility for maintenance and custody of research records and evidence;
 - v. Application of selection criteria for those conducting the enquiry or investigation;
 - vi. Appeals;
 - vii. Retention of records of proceedings;
 - viii. Interim protective actions including protective court orders, and suspension of the research, and notifying the ORI of the same;
 - ix. Cooperation and compliance with ORI/HHS administrative actions; and
 - x. Restoration of reputations of complainants/respondents.

⁴ The U. S. Public Health Service (PHS) regulation, Public Health Service Policies on Research Misconduct 42 C.F.R. Part 93.301 requires that all institutions renew their research misconduct assurance by submitting a report annually to the Office of Research Integrity (ORI).

Audience

All staff and students undertaking or supervising research.

Relevant legislation

The Education and Training Act 2020

Official Information Act 1982

Privacy Act 2020

Protected Disclosures (Protection of Whistleblowers) Act 2022

Public Records Act 2005

Related procedures / documents

Academic Integrity Policy

Academic Integrity: Procedures for Managing Student Breaches

Conflict of Commitment and Interest Policy

Code of Ethical Conduct for Research, Teaching and Evaluations Involving Human Participants

Code of Ethical Conduct for the Use of Animals for Research, Testing and Teaching

Code of Responsible Research Conduct

General Disposal Authority for New Zealand Universities

Health, Safety and Wellbeing Policy

Information Records Management Policy

Intellectual Property Policy

Kaupapa Here Aratohu/Code of Student Conduct

Kaupapa Here Tiriti O Waitangi - Tiriti O Waitangi Policy

Kia Mārama: Māori@Massey 2020 Strategy and Language Policy

Paerangi: Massey University Learning and Teaching Plan

Protected Disclosure Policy and Reporting Procedure

Research and Consultancy Contracts Policy

Student Disciplinary Regulations

Tā te Tauira Kirimana/Student Contract

Weaving Wisdom into a Resilient Future – Pacific Plan 2024-2027

Appendix 1: Guidance for determining the category of an alleged breach

The table below provides broad guidance for determining the category of an alleged non-compliant research conduct. Staff determining the appropriate category are required to exercise their own judgement based on the specific circumstances of the case under consideration and the guidance provided in this table.

	Poor Research Practice	Minor Breach	Research Misconduct
Experience of the Researcher	<i>New and Emerging</i>		<i>Experienced</i>
	- Postgraduate research students in early stages - Early career researchers - Researchers new to Massey - No or little prior instructions or guidance received - Lack of understanding of responsible research conduct	- Mid-career and senior Researchers - Master's and doctoral research students in late stages of research completion - Researcher could reasonably be expected to understand responsible research conduct (e.g. received instructions / guidance / support) - Researchers with a record of completed research	
Nature of the Breach	- Naïve or minor mistakes, unintentional errors - Poorly conceived research or research methods - Carelessness - Poor research data management	- Negligence or disregard in applying acceptable research practice or instructions, including referencing, copying, paraphrasing, crediting, or inappropriate use of artificial intelligence - Unauthorised collaboration - Failure to disclose a possible conflict of interest - Redundant publications - Incorrect attributions or citations - Research is not the researcher's own original work	- Intent to deceive, or deliberate dishonesty - Presenting data which was obtained improperly - Misrepresenting research or research data - Falsification or fabrication of data - Submitting work done by someone else, technology or software (contract cheating; artificial intelligence) - Non-compliance with Ethics Committee instructions - Deliberate concealment of conflict of interests - Improper destruction of research records or data
Extent of the Breach	- Little impact on integrity of the work - Minor portion of the work involved - No impact on interests of others - Minor deviation from research conventions or research instructions	- Moderate portion of the work involved - Moderate impact on integrity of the work - Minor impact on interests of others - Repeated instances of non-deliberate non-compliant research conduct	- Involves work that contributes significantly to a qualification (e.g. thesis, publication) - Major impact on the integrity of the work - Continuing non-compliant research conduct despite guidance - Legitimate interests of others may be impacted negatively - Reputation of the University, College or Unit may be impacted negatively - Conduct caused or may cause harm to humans, animals, or the environment

Appendix 2: Determining the Outcome

The possible outcomes available for each category of non-compliant research conduct are shown in the diagram below. The options increase in severity in line with the increase in category, extent and nature of breach. The outcome should seek to balance a primarily educative approach to correct behaviour that is inconsistent with responsible research conduct, with a disciplinary approach which is transparent, fair, and equitable.

Impose an outcome in terms of an employment agreement	Poor Research Practice Research Coordinator Minor Breach Head of Unit Research Misconduct (STUDENT) Academic Integrity Officer or University Proctor Research Misconduct (STAFF) Vice Chancellor	
Exclusion from the University (for students)		
Period of suspension of studies (students) from the University		
Fail (for students)		
Adjustment of marks/outcome awarded (for students)		
Repeat the research (in whole or in part) with or without a reduced maximum mark (for students)		
Recommendation to undertake an appropriate learning support activity		
Remedial/educative advice		
Warning		
Dismiss the allegation as not proved, or for being trivial or vexatious		