

# Research Data Management Procedures

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## 1. Governing Policy

[Research Integrity Policy](#)

[Records Management Policy](#)

## 2. Purpose

- a. To ensure that research data is generated, collected, accessed, used, analysed, disclosed, stored, retained, shared, re-used, and disposed of in accordance with the [Australian Code for the Responsible Conduct of Research](#) (the Code).
- b. To support the implementation of Principles 2, 3 and 7 and Responsibility 22 of the Code, as adopted by the Flinders University [Research Integrity Policy](#) and set out below:

**P2** Rigour in the development, undertaking and reporting of research.

**P3** Transparency in declaring interests and reporting research methodology, data and findings.

**P7** Accountability for the development, undertaking and reporting of research.

**R22** Retain clear, accurate, secure and complete records of all research including research data and primary materials. Where possible and appropriate, allow access and reference to these by interested parties.

- c. To support compliance with the [State Records Act 1997 \(SA\)](#).
- d. This procedure draws extensively on, and is consistent with the *Management of Data and Information in Research: A guide supporting the Australian Code for the Responsible Conduct of Research*.<sup>1</sup>

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<sup>1</sup> National Health and Medical Research Council, Australian Research Council and Universities Australia. (2019). *Management of Data and Information in Research: A guide supporting the Australian Code for the Responsible Conduct of Research*. Commonwealth of Australia, Canberra. <https://www.nhmrc.gov.au/sites/default/files/documents/attachments/Management-of-Data-and-Information-in-Research.pdf>. Licensed under a [CC BY 4.0](#) licence.

### 3. Scope

- a. Applies to all [research data](#) generated and/or collected in the conduct of research by Flinders University researchers, including staff, academic status holders, higher degree by research (HDR) students, and coursework students with a research component.
- b. For research projects where Flinders University is not the lead institution, the lead institution's policies and procedures relating to research data may take precedence if they enable the Flinders University researchers to meet their responsibilities under the Code.

### 4. Definitions

<b>Eminent researcher</b>	a well-known and respected person who has made a significant contribution to knowledge within a discipline.
<b>Metadata</b>	information that describes other data and helps users understand what the data is, where it can be found and how it can be used. Metadata can include grant IDs, funding source(s), Digital Object Identifiers (DOI), author(s), ORCID identifiers for authors, title, description, licence type, access and rights information, and other details such as experimental conditions or project descriptions <sup>2</sup> .
<b>Research data</b>	includes the primary materials and analysed data, records, results, files or other evidence that allows for the justification and verification of research outcomes, irrespective of the content or format of that evidence.

### 5. Procedures

#### 5.1. Research data management plan

- a. Every research project, including student-generated research, is required to have a research data management plan.
- b. Researchers are encouraged to use the [Data Management Planning Tool](#). An alternative template or tool may be used if the resulting data management plan is comparable. At a minimum it must identify:
  - i. project name and details, including project start and end dates,
  - ii. owner/s of the data,
  - iii. the data custodian,
  - iv. if any of the data will be sensitive or confidential (refer to the [Information Classification and Handling Procedures](#)),
  - v. where and how the data will be stored, including security and software/equipment requirements,
  - vi. if and how the data will be shared, including any restrictions or embargo periods,
  - vii. how long the data must be retained, and
  - viii. what data will be destroyed and when.
- c. The data management plan must be completed as early as possible in the research process.

<sup>2</sup> Definition adapted from the National Health and Medical Research Council's [Open Access Policy](#) under a CC BY 4.0 licence.

- d. The data management plan is a living document and must be updated to account for changes in the research project, and/or research data being collected and/or generated.
- e. The data management plan must be saved in one of the following locations:
  - i. [Data Management Planning Tool](#) in Service One, or
  - ii. [Content Manager](#)unless this is prevented by contractual and/or legal restrictions, such as classified defence research. In these cases, researchers are required to contact the [Information Management Strategy](#) team.

## 5.2. Data custodian

- a. All research data must be assigned a data custodian who will be responsible for its proper management in accordance with these procedures, including:
  - i. overseeing the initial completion and regular review of the data management plan, in consultation with the research project group,
  - ii. ensuring storage of and access to research data is managed according to the data management plan, including providing mediated access to authorised parties as appropriate,
  - iii. ensuring that any relevant conditions stipulated in an approved ethics application and/or contract, including confidentiality agreements or conditions of consent, are adhered to, and
  - iv. recommending the permanent retention, or disposal of the research data at the appropriate time, as set out at section [5.7. Retention and disposal](#).
- b. The data custodian will be the lead researcher / chief investigator, or in relation to student-generated research data the data custodian will be the student's principal supervisor. The lead researcher, chief investigator or principal supervisor may assign this responsibility to another position if it is documented in the research data management plan.
- c. In circumstances where the data custodian is unable to fulfil these responsibilities, the Dean (Research) of the relevant College must assign a new data custodian.

## 5.3. Ownership

- a. Research data which is generated or collected by Flinders University researchers is owned by Flinders University, unless otherwise specified in an agreement.
- b. This is separate to the ownership of any intellectual property rights that may exist in the research data which is subject to the Flinders University's [Intellectual Property Policy](#).
- c. Where research is conducted jointly with another institution/s, and/or Aboriginal and Torres Strait Islander community organisation/s, ownership must be specified in the agreement with the other institution/s / organisation/s and recorded in the data management plan.
- d. Where research data is not owned by Flinders University, the source, access arrangements, and any conditions must be documented in the research data management plan and/or agreement, and its use appropriately acknowledged in any presentation, publication or sharing of the research.

## 5.4. Indigenous research data and data sovereignty

- a. Research involving Aboriginal and Torres Strait Islander peoples and communities must be conducted in accordance with the [AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research](#), the [NHMRC Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities](#) and the [South Australian Aboriginal Health Research Accord](#). This includes but is not limited to:
  - i. respecting Indigenous cultural and intellectual property rights,

- ii. establishing an agreement regarding the ownership, management, access to and reuse of research data, and
- iii. applying the [CARE Principles for Indigenous Data Governance](#) of Collective Benefit, Authority to Control, Responsibility, and Ethics.

### 5.5. Storage and transfer

- a. All research data must be stored using an approved Flinders University data [storage solution](#) for digital data or in a secure Flinders University storage facility for physical data (e.g., artefacts, biological material, hard-copy survey responses), unless there is an agreement that provides otherwise.
- b. The appropriate data storage solution or facility will be determined by the level of security required, based on contractual requirements, ethics conditions and regulations, confidentiality, cultural and intellectual property requirements, and the information classification of the data (refer to the [Information Classification and Handling Procedures](#)).
- c. Where data is collected and/or generated offsite it must be stored as safely, securely, and confidentially as possible until such data can be transferred to a Flinders University data storage solution or facility.
- d. All research data must have accompanying [metadata](#) in English, which is of an acceptable standard that allows the data to comply with the [FAIR principles](#) of Findable, Accessible, Interoperable and Reusable. Additional documentation, such as data dictionaries, codebooks or protocols, should also be made available when it assists in the interpretation of data.
- e. Research data which is collected and/or held outside of Australia must be managed in compliance with the relevant laws and regulations of the relevant jurisdiction.
- f. The cross-border transfer of research data and primary materials must be carried out in compliance with any relevant legislative requirements, including export / import controls and privacy requirements.

### 5.6. Access

- a. Research data is encouraged to be made openly available under an appropriate open licence at the completion of the project or suitable project phase unless there is a justifiable reason to restrict access, as per the principles of Flinders University's [Open Access Policy](#).
- b. Research data may be made available via the Flinders University [Repository of Open Access Data Sets \(ROADS\)](#), or other institutional/subject-based repository, as per Flinders University's [Open Access Procedures](#).
- c. Where research data is unable to be made openly available, mediated access or access to a subset of data should be allowed when this can be achieved without breaching any ethical, legal, or cultural obligations.
- d. Where the sharing of research data has been requested and access refused, the reasons for not sharing the data must be transparent and justifiable.

### 5.7. Retention and disposal

- a. All research data must be retained for the minimum periods prescribed in the General Disposal Schedule No. 24, version 5<sup>3</sup> pursuant to the *State Records Act 1997* (SA), as set out below.

Type of Research Data	Minimum Retention Period
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<sup>3</sup> Government of South Australia. (2023). *General Disposal Schedule No. 24 Version 5*. Government of South Australia, Adelaide. [https://www.archives.sa.gov.au/\\_data/assets/pdf\\_file/0007/918133/GDS-24-v5-South-Australian-Universities-General-Disposal-Schedule.pdf](https://www.archives.sa.gov.au/_data/assets/pdf_file/0007/918133/GDS-24-v5-South-Australian-Universities-General-Disposal-Schedule.pdf). Licensed under [CC BY 3.0 AU](#).

Research data from projects involving gene therapy, e.g. patient records.	PERMANENT – Retain as State archives.
Research data created in the conduct of a research project, including clinical trials, which: <ul style="list-style-type: none"> <li>• are controversial</li> <li>• arouse widespread scientific or other interest</li> <li>• involve the use of major new or innovative techniques</li> <li>• involve <a href="#">eminent researchers</a> or have the potential to cause major impacts on the environment, society or human health.</li> </ul>	PERMANENT – Retain as State archives.
Research data from clinical trials.	TEMPORARY – Retain a minimum of 15 years after action completed, then destroy.
Research data created in the conduct of research projects that are not clinical trials, but the outcomes of which lead to a patent.	TEMPORARY – Retain a minimum of 7 years after expiry of patent, then destroy.
Other research data and results.	TEMPORARY – Retain a minimum of 5 years after date of publication or 5 years after conclusion or abandonment of project, then destroy.
Research data for short-term research projects that are for assessment purposes only, such as research projects completed by undergraduate or postgraduate coursework students.	TEMPORARY – Retain a minimum of 1 year after action completed, then destroy.

- b. Data custodians should consult with the Dean (Research) of the relevant College and/or Information Management Strategy team when they are unsure if research data meets any of the above criteria for permanent retention.
- c. Longer retention periods may be applied due to legislative or contractual requirements, discipline-specific practices and standards, or ethical and publication requirements. Where there is conflict, the longest retention period applies.
- d. If it is not practical to retain all primary material, durable records derived from them must be retained, e.g., samples may be destroyed when required for biosecurity reasons if any test results and laboratory notes are retained.
- e. Research data may be disposed when:
  - i. the retention period has expired, and
  - ii. the disposal has been recommended by the data custodian and approved by the Director of Library Services as per the [Records Management Policy](#), and
  - iii. metadata, including a description of the data, its retention period, and the method and date of destruction, is retained.

## 5.8. Researchers leaving Flinders University

- a. Researchers, in conjunction with their supervisor, must act prior to leaving Flinders University to ensure that:
  - i. all data management plans, including inactive ones, are up to date and accessible:

- plans in the Data Management Planning Tool must have a new owner of the plan appointed if required
- plans are stored as per the requirement under [5.1.e](#),
- ii. research data is stored according to the data management plan and is accessible to authorised individuals,
- iii. if the researcher is a data custodian, that a new data custodian is appointed:
  - where possible this will be from the project team or research section
  - or in the case of student-generated research data the new principal supervisor or Dean (Research) of the relevant College.
- b. A copy of research data may only be taken by the researcher for future use where this is agreed to by all members of the research team, subject to any legal, contractual, commercial, confidentiality, ethical or other requirements.
- c. Where the researcher moves to another research institution, research data may only be transferred if a formal written agreement is reached between Flinders University and the other institution regarding the ownership and storage of the data.

## 6. Support for research data management

- a. Flinders University will support researchers to comply with these procedures, through the provision of:
  - i. training and support materials,
  - ii. a data management planning tool,
  - iii. secure facilities and storage solutions for active and archived research data, and
  - iv. an open access repository to enable public access to data.
- b. More information about research data management is available and researchers are encouraged to contact the following areas within Flinders University for enquiries or assistance:
  - i. [Research Development and Support](#) – ethics and import/export controls related to biosafety and defence.
  - ii. [Information and Digital Services](#) – data storage.
  - iii. [Library, Research Engagement](#) – research data management plans and making data open access.
  - iv. [Library, Information Management](#) – retention periods and data disposal.

## 7. Breaches

- a. Any inappropriate use of, access to, or loss of research data containing personal information must be reported as per Flinders University's [Privacy Policy](#) and [Personal Information Protection Procedures](#).
- b. Failure to comply with this Procedure may constitute a breach under the Code and may be dealt with under the [Breach of Research Integrity Procedures](#) or [Student Academic Integrity Policy](#).

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<b>Responsible Officer</b>	Director of Library Services
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\* Unless otherwise indicated, this policy or procedures still apply beyond the review date.

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