

QAF223 HELI Research Data Management Policy

1. Overview

1.1. This policy outlines the duties of HELI and its researchers, including Higher Degree Research (HDR) Candidates and their supervisors, in managing research data. It encompasses the entire research data management process, from the initial research design to the project's completion.

2. Purpose

2.1 The purpose of this policy is to:

- (a) Preserve the value of research data and records for all researchers, HELI, and the wider community by defining expected standards for their management; and
- (b) Facilitate effective research practices which match national and organizational policies and procedures.

3. Scope

3.1. This policy applies to:

- (a) Research data and records generated during research undertaken by all researchers at HELI .
- (b) Research data and records in any form, including digital formats, paper formats and other physical materials.

4. Authority

4.1. This policy is made under the authority of the ECA-HE Academic Board and supports compliance with relevant legislation, national frameworks and guidelines, and research codes of practice:

(a) Legislation

- i. [Copyright Act 1968 \(Cth\)](#)

- ii. [Privacy Act 1988 \(Cth\)](#)
- iii. [Electronic Transactions Act 1999 \(Cth\)](#)
- iv. [National Health Security Act 2007 \(Cth\)](#)
- v. [Privacy and Data Protection Act 2014 \(Vic\)](#)
- vi. [Health Records Act 2001 \(Vic\)](#)
- vii. [Public Records Act 1973 \(Vic\)](#)
- viii. [Key NSW Data Legislations and Policies.](#)
- ix. [Queensland Government Data Governance Guidelines](#)
- x. [Queensland Health Data Management Standard](#)
- xi. [Queensland Government Open Data Policy Statement](#)

(b) Research codes of practice

- i. [Australian Code for the Responsible Conduct of Research 2018 \(NHMRC\)](#)
- ii. [The National Statement on Ethical Conduct in Human Research \(2023\)](#)
- iii. [Code of Ethics for Aboriginal and Torres Strait Islander Research 2020](#)

(c) Important national frameworks and guidelines

- i. Australian Research Council (ARC) - [Research Data Management](#)
- ii. The [Australian Research Data Commons \(ARDC\) website](#)
- iii. [National Health and Medical Research Council \(NHMRC\) - Management of Data and Information in Research: A guide supporting the Australian Code for the Responsible Conduct of Research](#)

5. Definitions

Item	Definition
<i>Accessible</i>	Access to research data and records is enabled through defined processes, including authentication and authorization steps to restrict or mediate access to appropriate parties.

<i>Authentic</i>	Research data and records are a true and accurate product or reflection of research processes with no attempts to falsify, mislead or obfuscate
<i>Curate</i>	Organize and present information in ways that support interpretation. Appropriate curation of research data and records is informed by accepted disciplinary practices and standards and will differ depending on the type of research data and records involved.
<i>Data custodian</i>	The individual or entity responsible for the management of a project's research data.
<i>Data description</i>	Descriptive metadata relating to research data.
<i>Data destruction</i>	Elimination or deletion of records, documents or information, beyond any possible reconstruction.
<i>Data management plan</i>	Document that outlines how research data and records will be managed through the course of a research project, including details such as project descriptions, software and systems being used, storage locations, security controls and retention arrangements.
<i>Facilities</i>	Physical or virtual locations are intended for a defined purpose. For the storage and management of research data and records, this may consist of a combination of physical space, equipment, hardware, software and the resources required to support these.
<i>Findable</i>	The research data or records are discoverable to interested and authorised parties for reuse. Characteristics of findable research data or records include assigning metadata that describes the content of the research data or records, attaching a persistent identifier such as a Digital Object Identifier (DOI) and

	indexing/making the data searchable through disciplinary portals.
<i>Interested parties</i>	Parties who are seeking access to research data. This may be for the purposes of academic review, ethical or compliance review, or data reuse for further research.
<i>Interoperable</i>	The research data or records can be effectively integrated with other data or be utilised by different applications or workflows (such as for analysis, storage or processing). To achieve this, community-agreed, published standards are used within and to describe the research data and records.
<i>Mediated access</i>	Access that is determined on a case-by-case basis by an individual responsible for the data, who is able to assess the value and risk associated with data sharing.
<i>Metadata</i>	Information that provides contextual details or defines characteristics about data. Meaningful metadata is dependent on the type of research data it is describing, allowing data to be interpreted accurately and appropriately. Metadata may describe, for example, where the data originated, how the data was generated and processed, when the data was collected and by whom.
<i>Open access</i>	Where anyone can access, use and share data with no cost or permissions applying.
<i>Ownership</i>	The legal or moral rights that give individuals, groups or organisations the authority to determine storage, retention, disposal, publication or licensing arrangements.
<i>Personal information</i>	Any information regarding an individual whose identity can be ascertained from that information.

<i>Preservation</i>	Data management to ensure continued access to materials or records about the materials for as long as necessary.
<i>Research data</i>	<p>Any information, facts or observations that have been collected, recorded or used during the research process for the purpose of substantiating research findings.</p> <p>Research data may exist in digital, analogue or combined forms and such data may be numerical, descriptive or visual, raw or processed, analysed or unanalysed, experimental, observational or machine generated.</p> <p>Examples of research data include: documents, spreadsheets, audio and video recordings, transcripts, databases, images, field notebooks, diaries, process journals, artworks, compositions, laboratory notebooks, algorithms, scripts, survey responses and questionnaires.</p>
<i>Research data</i>	All data that is created by researchers in the course of their work, and for which the ECA-HE has a curatorial responsibility for the required retention periods, and third-party data that may have originated within the ECA-HE or come from elsewhere. This excludes administrative and teaching data and research publications.
<i>Research record</i>	Documents containing information of any kind and in any form created or received by an organisation or person for use in the course of their research. Records often validate the provenance, authenticity and ethical collection of research data. Records associated with the research process include correspondence, grant applications, ethics applications, authorship agreements, technical reports, research reports, laboratory notebooks or

	research journals, master lists, signed consent forms, and information sheets for research participants.
<i>HDR Candidate</i>	Any student involved in conducting research under the auspices of the ECA-HE. This includes graduate researchers and coursework students enrolled at the ECA-HE, and visiting students enrolled with other institutions.
<i>Researcher</i>	Any individual involved in conducting research under the auspices of the ECA-HE who is not a research student. This includes staff, honorary staff and visiting researchers.
<i>Research Integrity Advisers</i>	Advisers who assist in the promotion and fostering of responsible research conduct and provide advice to those with concerns about potential breaches of the Code.
<i>Retention</i>	The long-term storage of research data and records after the completion of a research activity/project for the purposes of meeting legal obligations or other purposes.
<i>Reusable</i>	Being able to be utilised by others for replication of research findings or additional research applications, such as linkage with other data. This can be achieved by having standard data usage licenses, provenance information and the use of domain-relevant community standards used throughout the research data and records.
<i>Reuse of data</i>	Use of research data for a research activity or purpose other than that for which it was originally intended
<i>Transferred</i>	Physically moving data from one location to another.
<i>Transmitted</i>	Electronically moving data from one location to another.

6. Policy

6.1. All researchers at HELI are responsible for ensuring that research data and records are:

- (a) Accurate, complete and authentic.
- (b) Understandable, retrievable, and accessible, for as long as is required.

- (c) Safe and secure.
- (d) Compliant with ethical and legal obligations.

6.2. Failure to comply with this policy at any level may:

- (a) Lead to researchers or HELI being held legally responsible for breaches of legislation.
- (b) Be considered a breach under the Australian Code for the Responsible Conduct of Research and be investigated in line with the Guide to Managing and Investigating Potential Breaches of the Australian Code for the Responsible Conduct of Research.

7. Procedures

Research Data Management Plans

7.1. All researchers must understand their legal, contractual, and legislative obligations related to the use of research data. They must develop a research data management plan at the outset of their projects. The research data management plan must cover the generation of data, storage, ownership, responsibility for retention, access, use, analysis, publication, disposal, licensing, patenting, and sharing of data. Risks associated with these processes must be identified and safeguards must be created to minimize those risks.

7.2. The research data management plans for each research project conducted by researchers at HELI will be reviewed and approved by the Human Research Ethics Review Committee. Research data management plans need to accurately reflect any changes in the research process and must be continually updated and subsequently approved by the Human Research Ethics Review Committee from the proposal stage until the conclusion of the research project. Data management plans should be proportional to risks of the research project and the sensitivity of information.

Ownership, responsibility and control

7.1. All researchers at HELI must ensure that ownership of and responsibility for research data and records is identified and documented at the start of a research project, and reviewed and updated as appropriate, with consideration given to:

- (a) Authority to decide on storage, retention, access, use, analysis, publication, disposal, licensing, patenting, and sharing of data research data or records.
- (b) Research data ownership as outlined by the [Academic Freedom, Integrity and Free Intellectual Inquiry Policy](#)
- (c) Agreements with funders, data providers, research partners, and collaborators;
- (d) Arrangements for researchers changing institutions or withdrawing from collaborative projects; and
- (e) Any Indigenous intellectual and cultural property rights, for research involving Aboriginal and Torres Strait Islander peoples (in line with the Australian Institute of Aboriginal and Torres Strait Islander Studies [AIATSIS] Code of Ethics for Aboriginal and Torres Strait Islander Research.

7.2. All researchers must ensure that the HELI has a record of ownership and responsibility for any research data and records they have transferred into HELI's control (e.g., for storage on HELI facilities).

- (a) Where no ownership or responsibility has been recorded, or the recorded responsible party is no longer an ECA-HE researcher, the relevant Dean or delegate will hold authority to decide on storage, retention, disposal, publication or licensing arrangements in compliance with and regulatory obligations.

Storage, digitization, retention and disposal

7.3. Researchers must curate, classify, and store accurate, complete and authentic research data and records in formats that are understandable, retrievable and accessible to appropriate parties, and available for reuse and replication of research. Wherever possible, physical research data, research records, and primary materials should be digitized in an accepted format to minimize the risk of damage, or loss to data, and reduce requirements for physical storage.

- (a) Metadata should be stored with research data and records to support interpretation, authenticity and reproducibility.
- (b) Where it is not practical to store physical research data and records, durable records documenting or derived from them should be stored in digital formats.

7.4. HELI must provide facilities, advisory services and resources for the safe and secure storage and management of research data and records, to support all researchers in complying with their ethical and legal obligations.

7.5. When not using HELI provided facilities, researchers must ensure that processes and facilities used for the storage and management of research data and records comply with ethical and legal obligations. Where researchers are unsure of their ethical and legal obligations, they should consult with the Dean Research and Scholarship at HELI.

7.6. Researchers must ensure that research data and records are retained and disposed of in line with the [Records Management and Security Procedures](#) with minimum retention periods specified in the Data Retention Table below.

7.7. The retention period specified in the Data Retention Table commences (unless Exceptions* apply) when:

- a. The final research output has been published or findings disseminated, and there is no further intent to share the data via a mediated, or open access repository, or for secondary research purpose.
- b. Where it was not anticipated that data would be subject to future publication, sharing or secondary analysis in the past, but an opportunity to engage in one or more of those activities arises, the original data retention period will recommence from the point of publication, data sharing and/or secondary analysis.

Data type	Minimum retention period
ADMINISTRATIVE RESEARCH RECORDS AND RESULTS OF EXPERIMENTS Records relating to the management and administration of specific individual research projects. Includes the development of research methodologies and protocols, resourcing, development and reporting on ethics applications, results of experiments, progress	7 years

Data type	Minimum retention period
reporting to internal or external bodies and arrangements for informal collaborative research links with outside organisations.	
<p>RESEARCH DATA MANAGEMENT PLAN</p> <p>Summary record of data created as part of research activities within the institution. Includes information about the nature and type of data, principal researchers or investigators, how long the data is to be retained, location and format of data and any conditions around access or reuse of the data.</p>	Permanent
<p>DATA WITH THE FOLLOWING STIPULATED REGULATORY OR COMMUNITY SIGNIFICANCE</p> <p>Data and datasets created as part of research activities within the institution, which are of regulatory or community significance. Includes data created that is:</p> <ul style="list-style-type: none"> - part of genetic research, including gene therapy; - controversial or of high public interest; -has influence on the research domain; -results to the use of innovative technique for the first time; - costly or impossible to reproduce; - relates to the use of an innovative technique for the first time; - of significant community or heritage value to the state or nation; <p>or</p> <ul style="list-style-type: none"> - required by funding or other agreements to be retained permanently. 	Permanent

Data type	Minimum retention period
<p>DATA FROM CLINICAL TRIALS</p> <p>Data and datasets created from clinical trials as part of research activities within the institution. Excludes data and datasets with the regulatory or community significance stipulated above.</p>	<p>15 years</p>
<p>DATA FROM RESEARCH INVOLVING MINORS</p> <p>Data and datasets created as part of research activities within the institution that involve minors. Excludes data and datasets with the regulatory or community significance stipulated above.</p>	<p>7 years after child reaches the age of 18</p>
<p>ALL OTHER TYPES OF RESEARCH DATA</p> <p>Data and datasets created as part of research activities within the institution. Does NOT include data created for the specific research activities for which the additional regulatory requirements listed above apply.</p>	<p>5 years</p>
<p>SHORT TERM RESEARCH PROJECTS FOR ASSESSMENT PURPOSES ONLY</p> <p>Data and data sets created as part of research projects completed by students for assessment purposes only.</p>	<p>12 months after the completion of the project.</p>

***EXCEPTIONS TO DATA RETENTION TABLE:**

- a. Where research data obtained from a third party is subject to licencing or copyright arrangements, any applicable retention period specified in a related agreement should be adhered to.
- b. Where data was collected for a human research project, researchers must comply with the retention requirements outlined in their approved ethics applications, giving particular attention to the information provided to research participants at the time of consent. Where researchers intend to retain, share or reuse the data in

a way that differs from what was originally described in the approved ethics application, approval to do so should first be sought from the Human Research Ethics Review Committee.

c. Where research data are subject to other relevant laws, these must be adhered to.

7.8. Researchers are encouraged to deposit research data and records into suitable ECA-HE facilities at the conclusion of a research activity/project, to support the meeting of retention obligations. Where research data and records are already stored on ECA-HE facilities, researchers must ensure that the research activity's completion is recorded in appropriate registers/research management systems to allow for appropriate retention and disposal.

7.9. All researchers leaving HELI should ensure that a copy of their research data and records has been deposited into ECA-HE facilities to support research integrity and retention obligations, as consistent with ethical, contractual or legislative requirements.

7.10. HELI is responsible for the secure storage of research data in paper and digital form.

7.11. When disposal is justified, data should be disposed safely and securely in accordance with the [National Statement on Ethical Conduct in Human Research 2023](#).

Safety and security

7.12. All data must be stored securely, to prevent unauthorized access, alteration, removal, destruction, accidental or intentional damage. All researchers must ensure at all times the safe and secure management of research data and records to comply with ethical and legal obligations over the life of the research data and records, with consideration given to research data and records with sensitivities, including:

- (a) Personal information subject to privacy legislation, including information that may be considered personal information when linked with other information;
- (b) Sensitive information;
- (c) Sensitive cultural information, e.g., on sacred cultural practices;
- (d) Commercial-in-confidence information, including patents.

7.13. Researchers should document plans for the safe and secure management of research data and records and ensure all authorised individuals with access follow documented plans. All researchers must include information during the consent process about data management and storage of data collected from participants from the proposal stage to the conclusion of the research project.

7.14. Researchers must ensure that research data and records are transferred and stored with electronic or physical security controls to restrict access to authorised individuals. Controls must be appropriate to the level of sensitivity and risk.

7.15. The HELI must ensure that both digital and physical facilities provided for the storage and management of research data and records meet legal and technical requirements in line with a [Records Management and Security Procedures](#).

7.16. HELI must assess facilities to support researchers in determining which facilities are suitable for research data of different sensitivity levels. When utilising suitable facilities, the safe and secure management of research data is a joint responsibility between all researchers and HELI.

7.17. Researchers must manage personal information in line with the [QAF050 Privacy And Personal Information Procedures](#), and HELI research ethics processes.

Access by interested parties

7.18. HELI supports the adoption of both the [FAIR](#) and [CARE](#) data principles, to facilitate access to and reuse of research data.

- a) FAIR means findable, accessible, interoperable, reusable, collective benefit, authority to control, responsibility, ethics.
- b) The four cornerstones of the CARE Principles are: collective benefit, authority to control, responsibility, and ethics.

Open access principles to research data are communicated by the policies of the [Australian Research Council](#), and the [National Health and Medical Research Council](#).

7.19. When making research data or records available to interested parties, consideration should be given to:

- (a) Data ownership, e.g., intellectual property rights, Indigenous intellectual and cultural property rights and culturally sensitive information.
- (b) Agreements with funders, research partners, data providers or publishers;
- (c) Meeting ethical and legal obligations, e.g., preserving privacy, intended use and consent for use of data at the time of collection; and
- (d) Ensuring safety and security, e.g., through agreements with interested parties that define required controls;

7.20. Researchers must make available any research data and records substantiating research findings to enable academic discussion or evaluation of research outputs, unless prevented by ethical or legal obligations. Where research data or records have been requested and access refused, the reasons must be transparent and justifiable.

7.21. For research involving Aboriginal and Torres Strait Islander peoples, researchers must provide access to Indigenous data owners to uphold Indigenous intellectual and cultural property rights, in line with the [CARE data principles](#), and the [AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research](#).

7.22. Researchers are encouraged to publish research data and records to disciplinary, institutional or other established repositories, to allow reuse by other researchers and maximise the value of research, unless prevented by ethical or legal obligations.

- (a) Where ethical or legal limitations apply, researchers should consider if mediated access or sharing of a limited subset is possible.
- (b) Researchers should publish research data in formats that meet disciplinary standards, as well as being findable, accessible, interoperable and reusable.
- (c) Researchers should consider applying the least restrictive licensing option that is appropriate for governing the future use of their published research data.

HDR Candidates

7.23. The same procedural principles outlined above for researchers also apply to HDR Candidates, with the exception that all responsibilities are jointly held by HDR Candidates and their supervisors:


7.24. Research management Plans

- a) HDR candidates and supervisors must agree on a research data management plan, subject to approval by the Human Research Ethics Review Committee, and document arrangements for the management of research data and records at the start of a research project, including plans for how research data and records will be managed following thesis submission.
- b) These arrangements should take the form of a Data Management Plan which approved by the Human Research Ethics Review Committee is reviewed and updated from the proposal stage until the completion of the project.

7.25. HDR Candidates must:

- a) Seek advice from Principal Supervisors about all aspects of generating, classifying, analyzing, storing, sharing, and disposing any data;
- b) Identify any risks to the integrity, safety and security of data and create safeguards to minimize those risks;
- c) Report to their Principal Supervisors any activity or threat related to the non-compliance with relevant research data management plan and HELI's [QAF055 Records Management and Security Procedures](#).

7.26. Principal Supervisors must

- 
- a) Provide guidance and mentorship to HDR Candidates on appropriate management of research data and records for their field of research, in line with all necessary requirements and relevant policies.
 - b) Ensure that all changes in the research are reflected in the research data management plan and approved by the Human Research Ethics Review Committee.
 - c) That a collaborative research data management plan is in force for all research projects with external collaborators, funding bodies, and non-university partners.

8. Training and Education

HELI will provide ongoing support in research data management through various training, education, and advisory formats. These training programs will be regularly reviewed to

ensure they remain up to date. All researchers, staff, and research students are expected to participate in the available training, educational resources, and any mandatory training as required.

9. Related Policies

[QAF070 HELI Academic Integrity Policy and Procedure](#)

[QAF005 Academic Freedom, Integrity and Free Intellectual Inquiry Policy](#)

[QAF136 Higher Degree Research Policy and Procedure](#)

[QAF050 Privacy and Personal Information Procedures](#)

[QAF055 Records Management and Security Procedures](#)

10. Version Control

Document ID	HELI Research Data Management Policy
Category	Academic
Document Owner	Dean Research and Scholarship
Approved by	Academic Board

Version	Summary of changes	Approval date	Next review date
1.0	New Policy	Academic Board 04 April 2025	04 April 2027