

RESEARCH INTEGRITY		Standard Operating Procedure		
Title	Management of the Research Integrity Ap		opeals Process	
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1 COMPILATION AND AUTHORISATION

Action	Designated person	Date	Signature
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	Deputy Deans: Research and Innovation (FEDUC, FEMS, FHS, FHUM, FNAS). Executive Deans (FENG, FLAW, FTHEO).	March 2022	
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2 DISTRIBUTION

Department/Unit	Name	Date	Signature
Research and School Directors, academic staff, and postgraduate students in the		August 2022	
Faculty.	ED (FENG, FLAW, and FTHEO).		

3 DOCUMENT HISTORY

Date	Version no	Reason for revision
April 2022	1	SOP approved
November 2022	2	SOP updated

4 PURPOSE OF THE SOP

The Faculty must have a mechanism in place whereby a contested decision made by the Standing Research Integrity Committee (SRIC) or the Empanelled Research Integrity Committee (ERIC) during an *intra-faculty process* into an alleged breach/transgression in responsible conduct of research (RCR)/research integrity (RI) may be revisited. This SOP provides a guideline and procedure for the Deputy Dean: Research and Innovation (DD: R&I) (in the larger Faculties) and the Executive Dean (ED) of the Faculty, as well as for a person (staff member, undergraduate or postgraduate student) seeking to appeal a decision made during any of the Faculty's intra-faculty assessment processes for an alleged breach in research integrity (*research non-compliance and/or violation of good research practice, or continuous research non-compliance and/or violation of good research*.

Note: This appeals process does not apply to cases escalated to the office of the Registrar or the student judicial office as no finding has been made.

It is however, expected that the alleged should make full use of the opportunity given to him/her during the initial assessment process when his/her side of the story is being heard. The latter opportunity may prevent unnecessary misunderstandings. In the event of a failure to reach a resolution, the alleged may proceed in terms of the appeals process outlined below.

Appeals may arise because the person having been assessed for allegations of a breach in RCR/RI on *intra-faculty level* wishes to alter some of the content of the letter written to him/her, or to question some aspects of the process, or part of the decision made. The request is made to the DD: R&I (in larger Faculties) and the RIO in the office of the DVC: R&I or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I.

5 SCOPE

This SOP guides different parties on how to handle requests for an appeal.

The definitions provided under section 6 guide the specific interpretation and use of terminology used in this SOP.

The appeals process discussed in this SOP is only applicable to *intra-faculty research integrity processes* and not applicable to disciplinary actions against staff (See *NWU Behavioural Manual*) or students (See *NWU Policy on Student Discipline, 26 September 2019*) or a formal *investigation into research misconduct* conducted by the office of the Registrar of the University or the student judicial office (See the *NWU Policy on Academic Integrity of 27 September 2018, revised 2021*).

Abbreviation	Description
DD: R&I	Deputy Dean: Research and Innovation
ED	Executive Dean
RD	Research Director
SD	School Director
RIO	Research Integrity Officer in the office of the DVC: R&I
RI	Research Integrity
SRIC	Standing Research Integrity Committee
ERIC	Empanelled Research Integrity Committee
RCR	Responsible Conduct of Research
Concepts	Definitions
Research	Research includes the activities that are aimed at improving knowledge of any discipline through enquiry or systematic investigation. This applies to

6 ABBREVIATIONS AND/OR DEFINITIONS

	Research, whether in the public interest or not, or whether the Research is
	published or not.
	It refers to all academic Research conducted as part of any academic programme in any subject, including Agricultural Sciences, Earth Sciences, Economic Sciences, Education, Health/Medical Sciences, Humanities, Life Sciences, Mathematical Sciences, Physical Sciences, Social Sciences, Theology and Technological and Engineering Sciences.
	Scientific Research conducted by public or private bodies (regardless of whether the Research is privately or publicly funded).
	Commercial or industrial Research aimed at developing or improving products or services.
	Technological development and demonstration (e.g., prototype development, testing, user trials). (Adapted for the ASSAF Draft POPIA Code of Conduct for research, 2022).
Larger Faculties	Faculty of Education (EDUC)
5	Faculty of Economic and Management Sciences (FEMS)
	Faculty of Health Sciences (FHS)
	Faculty of Humanities (FHUM)
	Faculty of Natural and Agricultural Sciences (FNAS)
Smaller Faculties	Faculty of Engineering (FENG)
	Faculty of Law (FLAW)
	Faculty of Theology (FTHEO)
Responsible Conduct of Research (RCR)	The act of making research integrity visible; refers to the practice of scientific investigation with <i>responsibility and integrity</i> through an awareness and application of established <i>professional research norms/standards</i> and <i>ethical principles</i> in the performance of all activities related to the research.
Breach in Research Integrity	The finding of a <i>formal intra-faculty research integrity assessment</i> (research non-compliance, violation of good research practice, or plagiarism) or <i>preliminary intra-faculty research integrity investigation</i> (fabrication or falsification) that a researcher has transgressed/potentially transgressed in responsible conduct of research/research integrity based on the mentioned acts.
Non-compliance	Any violation of:
	• Any institutional and/or REC <i>policies, procedures</i> and <i>regulation</i> governing human, animal, or environmental research or other types of research practices that might impact society.
	• Any <i>deviation</i> from the REC-approved <i>proposal/protocol</i> .
	Non-compliance varies in <i>nature, severity,</i> and <i>frequency</i> (adapted from UCT, 2013).
Minor Non-compliance	A non-compliant incident that <i>does not</i> :
	• Affect the selectly of human participants, animals, or anyiranment
	Affect the safety of human participants, animals, or environment.
	Affect the safety of society due to other types of research practices.
	Affect the safety of society due to other types of research practices.Compromise data integrity.
	Affect the safety of society due to other types of research practices.

	 Inadvertent errors due to inattention to detail ("honest human error"). Misunderstanding or oversight.
	 Missed deadline for a continuing review (adapted from UCT, 2013).
Serious Non-compliance	An activity that jeopardises:
	The safety, rights or welfare of human participants or animals.
	The environment.
	The integrity of the data during research.
	Examples include but are not limited to:
	Conducting research without Scientific Committee approval.
	 Conducting research with humans, animals, or the environment without REC approval.
	 Conducting any other type of research with an indicated risk factor without REC approval.
	Not using approved REC documentation.
	• Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper).
	 Inadequate training and supervision of researchers (academics and students).
	 Current REC-approved informed consent form describing all potential risks and alternatives to participants is not used.
	Failure to obtain voluntary informed consent.
	 Enrolling human participants that do not meet the inclusion criteria or including those that meet the exclusion criteria.
	 Failure to follow accepted procedures to exercise due care in avoiding harm or discomfort to participants or research staff.
	 Deviation from or failure to adhere to the approved proposal/protocol without prior approval by the REC.
	 Implementing substantive modifications to REC-approved proposals/protocols without prior REC approval.
	• Activities that compromise the participants' privacy and confidentiality.
	 Continuing with research when REC approval has lapsed.
	Copyright infringement.
	 Negligent management of data security (adapted from the European Code of Conduct for Research Integrity (ECCRI), 2017 and UCT, 2013 and 2014).
	Note:
	Should a researcher conduct research with humans or animals without REC approval, the process will be escalated for disciplinary <i>action</i> .
	The right to escalate is retained even if it falls within the defined acts of non- compliance or violation of good research practice covered in the related SOP.
Continuous Non-com- pliance	A series of <i>more than one non-compliant or violating behaviour</i> in reasonably proximity (one year) that, if unaddressed, may compromise the research integrity. This can be due to lack of <i>knowledge</i> or <i>commitment</i> on the part of the researcher(s).

	The <i>conduct continues</i> after the researcher has explicitly been made aware of the first instance of non-compliant or violating behaviour and that despite an attempt to assist the researcher in this regard, the conduct continues.
	Examples include but are not limited to:
	 Repeated failure to follow institutional and REC policies and procedures particularly after the researcher has been informed of the problem(s) and that corrective action needs to be taken. A researcher has a record of non-compliance, violations, or misconduct over a long period or in several existing or previously approved studies (adapted from UCT, 2013).
Violation of Good Research Practice	Violations of good research practice that damage the integrity of the research process or researchers and that lead to " <i>questionable research practices</i> ".
	Examples include but are not limited to:
	• Direct violation of good research practices set out in the <i>NWU Code of Conduct for Researchers</i> or other national codes of conduct for researchers and members of RECs and other regulatory requirements.
	• Manipulating authorship or denigrating the role of other researchers in publications.
	• Citing selectively to enhance own findings or to please editors, reviewers, or colleagues.
	Self-citing to enhance own research index.
	Deliberate misrepresentations in publications.
	• Expanding unnecessarily the bibliography of a study.
	• Establishing or intentionally supporting journals that undermine the quality control of research (predatory journals).
	Using ghost writers to produce articles.
	• Incorrectly using university affiliation to gain access to subsidized funding.
	Not following "good practice" guidelines in collaborative research.
	Withholding research results.
	• Exaggerating the importance and practical applicability of findings.
	Misrepresenting research achievements.
	• Inflating own research image during research assessment within the university or with external bodies or inflating own research profile.
	Improper conduct in peer review.
	• Delaying or inappropriately hampering the work of other researchers (academics or students).
	• Allowing funders/sponsors to jeopardise independence in the research process or reporting of results to introduce or promulgate bias.
	• Accusing a researcher of misconduct or other violations in a retaliating, intimidating and malicious way.
	• Ignoring putative violations of research integrity by others or covering up inappropriate responses to misconduct or other violations by institutions.
	 Misusing seniority to encourage violations of research integrity (adapted from ECCRI, 2017 and UCT, 2014).
	Note : The right to escalate is retained even if it falls within the defined acts of non-compliance or violation of good research practice covered in this SOP.

Research Misconduct	 Refers to the FFP categorisation: Fabrication Falsification Plagiarism In Proposing Performing Reviewing research Reporting results
Fabrication	Making up of results and recording them as if they were real.
Falsification	Manipulating research materials, equipment, processes, or findings, or changing, omitting, or suppressing data or results without justification.
• Plagiarism	 Using other people's work and ideas in research without giving proper credit to the original source, thus violating the rights of the original author(s) to their intellectual outputs. Or Re-publishing substantive parts of one's own earlier publications, including translations, without duly acknowledging or citing the original (self-plagiarism), as well as copying text in various sections of a research report without referencing the earlier use.
	Also see definition in the NWU Policy on Academic Integrity: Annexure 1.
Copyright infringement	 The use of work protected by <i>copyright</i> law without permission. <i>Infringing</i> certain exclusive rights granted to the copyright holder, such as the right to: Reproduce the protected work. Distribute the protected work. Display the protected work. Perform the protected work. Make derivative work. Also see definition in the NWU Policy on Academic Integrity: Annexure 1.
Allegation	A report that represents an <i>unproven assertion</i> .
Alleger	The person (a researcher, any other member of a research team, a REC member, research participants or a community member) who raises awareness of possible research non-compliance and/or violation of good research practice, continuous research non-compliance and/or violation of good research practice or research misconduct by a researcher (academic or student) as the alleged.
Alleged	The researcher (academic or student) accused of research non-compliance and/or violation of good research practice, continuous research non- compliance and/or violation of good research practice or research misconduct.
Informal Research Integrity Assessment	An initial informal intra-faculty research integrity assessment process conducted by the DD: R&I of the Faculty (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I, into the <i>merits and formal grounds of the allegation</i> of potential research misconduct, before proceeding to the more formal intra-faculty research integrity assessment (for plagiarism) or preliminary intra-faculty research integrity investigation (for fabrication and/or falsification). The type of misconduct will guide the process that follows and which RI SOP to follow.
Formal Intra-faculty Research Integrity	A formal intra-faculty research integrity assessment into the allegations of research misconduct through an act of <i>plagiarism</i> . This process is conducted

Assessment (Acts of <i>Plagiarism</i>)	by the DD: R&I of the Faculty (in the larger Faculties) or the ED (in the smaller Faculties), as chairperson, the RIO in the office of the DVC: R&I, the appointed Standing Research Integrity Committee (SRIC), and the appointed independent consulting attorney in the legal office when deemed necessary, should the allegation seem to have merit and formal grounds and if it justifies a formal investigation by the office of the Registrar or the student judicial office.
Preliminary Research Integrity Investigation (Acts of Fabrication of Falsification)	A preliminary intra-faculty research integrity investigation into allegations of research misconduct through an act of <i>fabrication or falsification</i> . This process is conducted by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) as chairperson, the RIO in the office of the DVC: R&I, the appointed Standing Research Integrity Committee (SRIC), as well as specified independent ad hoc members (attorney in the legal office and two experts) should the allegation seem to indicate a breach in research integrity through acts of fabrication and/or falsification.
Disciplinary action	The formal departmental or university process of a disciplinary procedure taken against a staff member (involving People and Culture) or student (involving the student judicial office).
Escalation	 The process of referring a "defensible" finding of <i>continuous</i> research non-compliance and/or violation of good research practice to: a) A disciplinary process for a staff member (See NWU Behavioural Manual). b) A disciplinary process for an undergraduate or postgraduate student (See NWU Policy on Student Discipline, 26 September 2019). c) A formal <i>investigation into academic misconduct</i> by the office of the Registrar of the University or the student judicial office (See the NWU Policy on Academic Integrity of 27 September 2018 revised 2021). Or The process of referring a "defensible" finding of <i>potential research misconduct</i> for a <i>formal investigation into academic misconduct</i> by the office of the Registrar of the University or the student judicial office (See the <i>NWU Policy on Academic Integrity, 27 September 2018, revised 2021</i>). Always with cases of research misconduct (fabrication, falsification, plagiarism) and ccopyright infringement. However, other cases of serious breaches must also be referred to the office of the Registrar of the student judicial office. Examples: Not obtaining Scientific Committee or Research Ethics Committee approval for any research (academics or students) at the NWU. Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper). Inflating own research image during research assessment within the university or with external bodies. Acts described in the Staff behavioural manual i.e.: Any conduct that negatively affects the integrity, good name and/or public image of the University affects the integrity, good name and/or public image of the University. Any violation of any regulation governing human, animal or environmental research or any deviation from the REC approved

	 Insubordination and defying the authority. Any act that caused reputational damage to the Faculty and/or the NWU.
Formal Investigation	A formal intra-faculty research integrity assessment process into the allegations of 1) research non-compliance, 2) violation of good research practice, or 3) research misconduct (plagiarism). This process is conducted by the DD: R&I (larger Faculties) or ED (smaller Faculties) of the Faculty, as chairperson, the RIO in the office of the DVC: R&I and an Empanelled Research Integrity Committee (ERIC) consisting of the appointed Standing Research Integrity Committee (SRIC) and specified ad hoc members should the allegation seem to have merit and formal grounds.
Finding of a Breach in Research Integrity	A result concluding that an allegation of research non-compliance and/or violation of good research practice, continuous research non-compliance and/or violation of good research practice or research misconduct is true based on the preponderance of the evidence.
	Note: In the case of a breach through the acts of research misconduct, escalated to the Registrar or the student judicial office no finding is made by the Faculty and thus no appeals process possible.
Research Integrity Officer (RIO)	A person appointed in the office of the DVC: R&I to facilitate research integrity (RI) within the Faculty through various functions, i.e. expanding the development of IRIMS, supporting the development and maintenance of processes, procedure and SOPs related to research integrity on Faculty level, as well as managing RCR/RI within the Faculties through guidance of how to foster a climate of Responsible Conduct of Research (RCR), as well as handling reported breaches/transgressions in RI/RCR. Also acts in an advising capacity to the DVC: R&I, ED, and DD: R&I. The person is not appointed in a research management position to ensure no potential conflict of interest.
Standing Research Integrity Committee	A Standing Research Integrity Committee (SRIC) appointed in the Faculty and consisting of specific members.
(SRIC)	In the five larger Faculties:
	Chairperson: DD: R&I.
	Research Integrity Officer in the office of the DVC: R&I.
	 Chairperson of the Faculty Research Ethics Committee (Faculty REC) or if such a person exists within the Faculty, the Head of the Ethics Office.
	• An elected Research Director in the Faculty (<i>appointed for three years</i>).
	 Secretariat provided by the Faculty (to sign a confidentiality agreement).
	In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.
	In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:
	Consulting attorney in the legal office.Two subject experts appropriate to the case at hand.
	In the four smaller Faculties:
	Faculty of Engineering:
	 Chairperson: ED: R&I. Research Integrity Officer in the office of the DVC: R&I. Chairperson of the Faculty Research Ethics Committee (Faculty REC). An elected Research Director in the Faculty (<i>appointed for three years</i>). Secretariat provided by the Faculty (to sign confidentiality agreement).

	Faculty of Law:
	 Chairperson: ED. Research Integrity Officer (in the office of the DVC: R&I). Chairperson of the Faculty Research Ethics Committee (Faculty REC). The Research Director in the Faculty. The Postgraduate Director. Secretariat: Provided by the Faculty (to sign confidentiality agreement).
	Faculty of Theology:
	 Chairperson: ED. Research Integrity Officer in the office of the DVC: R&I. Research Directors of the research entities in the Faculty. Secretariat provided by the Faculty (to sign a confidentiality agreement).
	In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.
	In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:
	Consulting attorney in the legal office.Two subject experts appropriate to the case at hand.
Empanelled Research Integrity Committee (ERIC)	A research integrity committee specifically empanelled and chaired by the DD: R&I (larger Faculties) or ED (smaller Faculties) for a specific formal intra-faculty research integrity assessment of an alleged research integrity breach. The composition varies in each case and is made up of the appointed Standing Research Integrity Committee (SRIC) and specific ad hoc members that will differ according to each new case at hand.
	Members:
	Standing Research Integrity Committee (SRIC).
	And
	Ad Hoc Members:
	• Research Director (RD) (unit in which the alleged resides).
	School Director (SD) (school in which the alleged resides).
	 An independent person (expert on the required research integrity issue at hand).
Appeal	A request lodged by an alleged after an assessment finding of a potential breach in research integrity on an <i>intra-faculty level</i> . The request is made to the DD: R&I (FEDUC, FEMS, FHS, FHUM, and FNAS) and the RIO in the office of the DVC: R&I or the ED (FENG, FLAW, and FTHEO) and the RIO in the office of the DVC: R&I to alter some of the content of the letter written to him/her, or to question some aspects of the process, or part of the decision made.
	Note: This does not apply to cases escalated to the Registrar or the student judicial office.
Appeals panel	A group of people empanelled by the ED with the support of the RIO in the office of the DVC: R&I for the purpose of handling a research integrity appeals request.
	The appeals panel consists of:
	 Chairperson: ED (for FEDUC, FEMS, FHS, FHUM, and FNAS) or an appointed ED from another Faculty (for FENG, FLAW, and FTHEO). Research Integrity Officer in the office of the DVC: R&I. The RD of the research entity in which the alleged resides. Two independent expert panellists knowledgeable about the specific RI issue at hand.

	Secretariat provided by the Faculty.
Integrated Research Integrity Management	The integrated system used by the Faculty to manage research integrity in such a way that it:
System	1) Fosters a climate of Responsible Conduct of Research (RCR).
	2) Effectively manages potential breaches in RCR/RI through acts of:
	i) Research non-compliance.
	ii) Violation of good research practice.
	iii) Research misconduct.
	3) Effectively manages possible appeals stemming from research integrity assessments or investigations on an intra-faculty level.

7 **RESPONSIBILITIES**

It is the primary responsibility of the Faculty within the bigger NWU to establish a climate of research integrity and to manage all aspects related to responsible research conducted by the researchers (academics, undergraduate and postgraduate students) of the Faculty, as the value and benefits of this research are vitally dependent on the integrity of the research.

Should a researcher be assessed for potential breaches in research integrity on an *intra-faculty level*, an appeals process must also be available. The Faculty must follow a process that will ensure that the appeals process is handled in a *transparent* and *accountable* way in accordance with the highest standard of *integrity, fairness, due process,* and *reasonableness*. Persons who are tasked with the management of this appeals process must act with the utmost *integrity* and *sensitivity*. Conflict of interest must be avoided, while the achievement of it is to be promoted.

7.1 Various role players have different responsibilities in this process:

The specific responsibilities of the various role players are set out with a more detailed step by step process under the *process discussed* in section 8.3.

7.1.1 The alleger

The person(s) (a researcher, any other member of a research team, a Research Ethics Committee (REC) or REC member, academic, research participants, community member, or dissertation/thesis examination committee) with allegations, observations, or evidence of potential research non-compliance and/or violation of good research practice who follow(s) any one of several processes to bring this to the attention of the DD: R&I (in the larger Faculties) and the ED (in the smaller Faculties) of the Faculty and the RIO in the office of the DVC: R&I.

Must be prepared to clarify any uncertainties the appeals panel may require.

7.1.2 The alleged

The researcher against whom the allegations of a possible breach in responsible conduct of research (RCR)/research integrity (RI) have been lodged and a process of assessment has been followed on an intra-faculty level, appeals in *writing* to the DD: R& I (larger Faculties) or the ED (smaller Faculties) and RIO in the office of the DVC: R&I, to alter some of the content of the letter written to him/her, or to question some aspects of the process, or part of the decision made by the SRIC/ERIC.

The alleged should be willing to present his/her case to the appeals panel although this is not the usual process.

Note: It should be clear to the researcher that he/she is protected until the allegations are determined to be defensible.

7.1.3 The Deputy Dean: Research and Innovation

Note: If it is a smaller Faculty the ED fulfils all the functions mentioned below.

The DD: R&I of the Faculty and RIO in the office of the DVC: R&I receive the request for the appeal.

The DD: R&I with the support of the RIO in the office of the DVC: R&I notifies the ED of the appeal and forwards the letter to the ED.

The DD: R&I with the support of the secretariat sets up and manages an effective data record system and registry with a track record of cases (allegations, processes, letters, and reports).

The DD: R&I and the RIO closes the case.

7.1.4 The Research Integrity Officer

The RIO situated in the office of the DVC: R&I, acts as advisor and support to the DD: R&I and ED throughout the appeals process:

- Receives the appeal with the DD: R&I (larger Faculties) or ED (smaller Faculties).
- Supports the DD: R&I (larger Faculties) in forwarding the written appeal to the ED.
- Supports the ED (in larger Faculties) to set up the appeals panel. In the smaller Faculties the ED appoints an ED from another Faculty to prevent conflict of interest.
- Oversees the secretariat during meetings and minute keeping.
- Joins the ED and RD in the feedback meeting with the alleged.
- Writes the final summative report.

Support from the secretary allocated for this purpose by the Faculty:

• Gives monthly status reports of appeal cases to the DD: R&I and ED.

7.1.5 The Executive Dean

The ED receives the appeal from the DD: R&I (in the larger Faculties) and RIO in the office of the DVC: R&I.

Sets up the appeals panel with the support of the RIO. In the smaller Faculties the ED appoints an ED from another Faculty to prevent conflict of interest.

Acts as chairperson of the appeals panel (in the larger Faculties). In the smaller Faculties the ED appointed from another Faculty acts as the chairperson.

Meets with the alleged in the presence of the RD and RIO to give feedback of the outcome of the appeals process.

Reports back to the DD: R&I (in the larger Faculties) on the outcome of the appeal.

Keeps up to date with all active appeal cases.

7.1.6 The Research Directors

The RD of the research entity in which the alleged resides forms part of the appeals panel.

The RD sits in on the appeals panel.

The RD sits in on the feedback meeting with the alleged.

8 **PROCEDURE(S)**

The principles underpinning the process, the questions to guide the procedural framework and the appeals process are discussed in detail.

8.1 The principles underpinning the process of handling the appeals process

- Procedural fairness.
- Natural justice.

- Due process.
- Integrity.
- Confidentiality ("need-to-know rule").

8.2 Questions that guide the procedural framework

- Who receives the appeal?
- Who takes the first step?
- Who appoints the appeals panel?
- Who handles the intra-faculty appeals panel?
- How are the outcomes managed?

Note: The details of this procedural framework are explained in the rest of the document.

8.3 The process

The steps in the appeals process follow.

8.3.1 Lodging the appeal

The alleged, lodges a *formal written appeal* to the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO in the office of the DVC: R&I if he/she is not satisfied with:

- Some of the content of the letter written to him/her.
- Some aspects followed in the assessment or investigation process.
- The decision made by the SRIC/ERIC.

The *basis of the appeal* must be submitted in writing to the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO, as well as the *relevant documentation*.

The alleged could be asked to verbally present his/her appeal to the ED and the appeals panel.

8.3.2 Receiving the appeal

The DD: R&I (in larger Faculties) or the ED (in smaller Faculties) and the RIO in the office of the DVC: R&I receive the written appeal.

The DD: R&I (larger Faculties) or the ED (smaller Faculties) and RIO on receiving the written appeal, notifies the ED (only in larger Faculties) of the receipt and hands over the written request and documentation *no later than 10 working days* after receiving the appeal.

8.3.3 Setting up the appeals panel

The ED with the support of the RIO will as soon *as possible, but no later than 10 working days* after receiving the appeal, set up the appeals panel and call for a meeting with them. In the case of a smaller Faculty the ED will appoint an ED from another Faculty to chair the panel to avoid any possible conflict of interest.

The appeals panel consists of the members as described below:

- Chairperson: ED (larger Faculties) or ED of another Faculty (smaller Faculties).
- Research Integrity Officer in the office of the DVC: R&I.
- The RD of the research entity in which the alleged resides.
- Two independent expert panellists knowledgeable about the specific RI issue at hand.
- Secretariat provided by the Faculty.

The ED and RIO in the office of the DVC: R&I must rule out any possible *conflict of interest, bias* and *unfairness* and *prevent strained collegiality and power relationship*, especially when an alleged has positional power.

The secretariat notifies the panel of the venue and time.

The ED that chairs the meeting with the support of the RIO decides whether he/she will make any material available to the panel before the meeting. The ED and RIO decide on the material to be made

available and the secretariat ensures that the panel receives it in time. The panel reviews materials available to them, draws from knowledgeable sources and collects relevant documentation, if necessary, to empower them for the assessment.

8.3.4 Managing the appeals meeting

The ED (larger Faculty) or appointed ED from another Faculty (smaller Faculties) acts as chairperson.

Confidentiality and due process shall be maintained throughout the process.

Transparency and procedural fairness are important.

The meeting begins with the ED welcoming all and allowing time for introductions. The confidentiality of the matter is emphasised, and each member's role explained to them.

The ED with the support of the RIO in the office of the DVC: R&I, presents the case and appeal in detail to the panel with the necessary evidence and documentation at hand.

The appeal is usually heard based on the written submission only, that is, no oral evidence is led.

Should the ED and panel, however, deem it necessary, the alleged is called to present his/her appeal and evidence and provide clarity.

The input of the independent expert members as part of the panel is requested.

Time is allowed for discussions, reflections, questions, and answers.

The panel comes to a decision based on their power:

- To request further information if needed.
- To interview the alleged if it seems necessary.
- To uphold the appeal.
- To dismiss the appeal.

The decision process should be prompt, discreet and effective.

8.3.5 Verbal feedback of the outcome

A meeting is called by the ED with the alleged in the presence of the RIO and appropriate RD.

The ED gives verbal feedback on the outcome of the appeal and the way forward.

8.3.6 Feedback to the DD: R&I

The ED with the support of the RIO gives feedback to the DD: R&I (larger Faculties) of the outcome of the appeal and the way forward.

The DD: R&I (larger Faculties) or the ED (smaller Faculties) and RIO close the case.

8.3.7 Reporting and recordkeeping

A factual and objective mandatory report must be written after the appeals process. The RIO will be responsible for the report and approved by the ED.

The following should be included in the initial report:

- Name of the institution.
- Name of the Faculty.
- The research entity in which the researcher resides.
- Name of the RD.
- Full names and surname of the researcher.
- Personnel/student number.
- The RI register number that led to the appeal.
- Date of the appeal.
- A detailed description of the appeal.

- The process followed.
- Decision made by the panel.
- Date of concluding the appeal.
- A final copy of the report must be stored in the office of the DD: R&I (larger Faculties) or the ED (smaller Faculties).

9 SUMMARIZED PROCESS

Diagram 1: Processes and procedures for the management of the appeals process



10 REFERENCE DOCUMENTS

SOP for the management of research non-compliance and/or violation of good research practice (SOP_NWU Research Integrity_1, NWU, 2020).

SOP for the management of continuous research non-compliance and/or violation of good research practice (SOP_NWU Research Integrity_2, NWU, 2020).

SOP for the management of research misconduct (SOP_NWU Research Integrity_3, NWU, 2020).

SOP for the management of a referral received from the Registrar as a breach in research in research integrity (SOP_NWU Research Integrity_6, NWU, 2022).

Singapore Statement on Research Integrity, 2010.

The European Code of Conduct for Research Integrity (revised edition), 2017.

UCT policy and procedures for the breach of research ethics codes and allegations of misconduct in research, 2014.

NWU Behavioural Manual.

NWU Policy on Student Discipline, 26 September 2019.

NWU Policy on Academic Integrity of 27 September 2018 revised 2021.

11 ADDENDA

No	Document name
None	

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