

<b>RESEARCH INTEGRITY</b>		<b>Standard Operating Procedure</b>	
<b>Title</b>	Management of a Referral Received from the Registrar as a Breach in Research Integrity		
<b>SOP no</b>	SOP_NWU Research Integrity _6	<b>Version No.</b>	2
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<b>Web address</b>	<a href="https://www.nwu.ac.za/irims">https://www.nwu.ac.za/irims</a>	<b>Page No.</b>	Page 1 to 19

## 1 COMPILATION AND AUTHORISATION

<b>Action</b>	<b>Designated person</b>	<b>Date</b>	<b>Signature</b>
Compiled by:	Prof Minrie Greeff	Febr 2022	
Checked and authorised by:	Deputy Vice-Chancellor: Research and Innovation (Prof Jeffrey Mphahlele)	Febr 2022	
	Deputy Deans: Research and Innovation (FEDUC, FEMS, FHS, FHUM, FNAS). Executive Deans (FENG, FLAW, FTHEO).	March 2022	
Reviewed and approved by:	Registrar (Prof Marlene Verhoef) Legal Office (Mr Kobus Joubert)		November 2021
Approved by:	Faculty Board		August 2022

## 2 DISTRIBUTION

<b>Department/Unit</b>	<b>Name</b>	<b>Date</b>	<b>Signature</b>
Research and School Directors, academic staff, and postgraduate students in the Faculty.	Deputy Deans: Research and Innovation (FEDUC, FEMS, FHS, FHUM, FNAS). Executive Deans (FENG, FLAW, FTHEO).	August 2022	

## 3 DOCUMENT HISTORY

<b>Date</b>	<b>Version No.</b>	<b>Reason for revision</b>
April 2022	1	SOP approved
November 2022	2	SOP updated

## 4 PURPOSE OF THE SOP

It is in the interest of society and the research community that allegations of breaches in responsible conduct of research (RCR)/research integrity (RI) be handled *consistently* and *transparently*, with clear processes and procedures for dealing with these allegations. If such allegations are proven to be true, this can have negative implications (e.g., reputational damage) for the researcher, the research entity, the Faculty, the University, as well as colleagues, students, human research participants or animals used in research, funding bodies and journal publishers (adapted from UCT, 2014).

The purpose of this SOP is to provide procedures and processes for the Deputy Dean: Research and Innovation (DD: R&I) (in larger Faculties) or the Executive Dean (ED) (in smaller Faculties) and the Research Integrity Officer (RIO) in the office of the Deputy Vice-Chancellor: Research and Innovation (DVC: R&I), to manage *a referral received from the Registrar of a breach in research integrity*.

### **A referral from the Registrar can either stem from:**

- 1) An allegation of a breach in RCR/RI against a NWU Researcher (academic or student) received from an external source.
- 2) A back referral of an escalated research misconduct case of the Faculty that the Registrar has decided not to handle in a disciplinary or legal manner but rather to refer back to the Faculty to be handled in the IRIMS due to acceptable mitigating factors found during a formal investigation into research misconduct by the office of the Registrar or the student judicial office.

The manner of management within the IRIMS of the Faculty, will differ depending on whether it is an allegation of a potential breach received from 1) *an external source and referred by the Registrar*, or 2) *a back referral from the Registrar of an escalated case not being handled as research misconduct* by him/her or the student judicial office due to mitigating factors found during the formal research investigation. This SOP will make the differences in management clear and link this SOP to existing IRIMS SOPs, as well as seek to find a balance between:

- i) Providing safeguards for those who raise genuine concerns about allegations of breaches in RCR/RI, and
- ii) Providing protection against uninformed, inaccurate, and malicious allegations that can cause serious harm to innocent persons as well as to the University (adapted from UCT, 2014).

### **4.1 An allegation of a breach in research integrity against an NWU Researcher received from an external source**

For an allegation of a breach in RCR/RI against a NWU Researcher (academic or student) received by the Registrar from an external source and referred to the DD: R&I (in larger Faculty) and the ED (in smaller Faculties) and the RIO in the office of the DVC: R&I, the purpose is for the DD: R&I (in a larger Faculty) or the ED (in a smaller Faculty) and the RIO in the office of the DVC: R&I to first determine:

- 1) Whether the allegation has *merits and grounds*.
- 2) The nature of the breach:
  - i) Research non-compliance and/or violation of good research practice to be handled on an *intra-faculty level*.
  - Or
  - ii) Research misconduct (fabrication, falsification, or plagiarism) to be *referred back* to the Registrar or the student judicial office with the necessary proof. If sent to the student judicial office the Registrar must be notified of the back referral to the student judicial office.
- 3) The way forward.

#### **4.1.1 Informal intra-faculty research integrity assessment**

The purpose of the initial *informal intra-faculty research integrity process of assessment* by only the DD: R&I (in a larger Faculty) or the ED (in a smaller Faculty) and the RIO in the office of the DVC: R&I, is

the following – without the involvement of the person making the allegations (allegor) or the person against whom the allegations are being made (alleged):

- 1) Assess the *merits* of the allegation or *formal grounds*.
- 2) Determine the *nature* of the breach in research integrity:
  - Research non-compliance and/or violation of good research practice.
  - Research misconduct (fabrication, falsification, or plagiarism).
- 3) Determine which of the two IRIMS SOPs to follow (SOP\_NWU RI\_1 or SOP\_NWU RI\_3).

#### **4.1.1.1 For potential breaches through the act of non-compliance and/or violation of good research practice**

Deciding that the act is a *potential breach in non-compliance and/or violation of good research practice* allows the process to continue as an *intra-faculty process* managed by the DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I, without escalating it to the Registrar as a case of research misconduct with a formal investigation into research misconduct by the Registrar's Office or the student judicial office. If the breaches are through acts of minor or serious non-compliance or violation of good research practice the goal would be to find *amicable, supportive, educative, and restorative solutions* within the Faculty's IRIMS.

*Notifying the Registrar* of the outcome and the way forward within the IRIMS will be essential.

#### **4.1.1.2 For potential breaches through the act of research misconduct (fabrication, falsification, or plagiarism)**

Deciding that the act is a *potential breach in research misconduct (fabrication, falsification, or plagiarism)* allows the DD: R&I (larger Faculties) or ED (smaller Faculties), and the RIO in the office of the DVC: R&I to manage the initial processes within the IRIMS with the purpose of ensuring *merits and grounds*, as well as obtaining the necessary supporting documents. The case is then escalated back to the Registrar (for an academic) or the student judicial office (for a student) as a case of research misconduct where a *formal investigation into research misconduct* by the office of the Registrar or student judicial office is required.

*Notifying the Registrar* of the way forward if referred to the student judicial office is essential.

## **4.2 A back referral from the Registrar of an escalated case of research misconduct**

The Registrar may on the grounds of mitigating factors found during a formal investigation into research misconduct by his/her office or the student judicial office decide not to take a case further (by means of disciplinary or legal action) that was escalated to him/her or the student judicial office by the Faculty based on research misconduct, but to refer it back to the Faculty to be handled within the IRIMS. The purpose would then be to find the best route within the IRIMS to process this case.

### **4.2.1 Informal intra-faculty research integrity assessment**

The purpose of the initial *informal intra-faculty research integrity process of assessment* by only the DD: R&I (in larger Faculties) or the ED (in smaller Faculties) and the RIO in the office of the DVC: R&I is to decide on the best way forward for the academic or the student within the existing IRIMS of the Faculty.

### **4.2.2 Determining the route**

What was assessed as a potential breach through an act of *research misconduct (fabrication, falsification, or plagiarism)* by the Faculty, now has to be handled as a case of *research non-compliance and/or violation of good research practice*, due to mitigating factors found during the formal investigation into research misconduct by the office of the Registrar or the student judicial office. The goal would be to find *amicable, supportive, educative, and restorative solutions* within the Faculty's IRIMS (SOP\_NWU RI\_1).

*Notifying the Registrar, the Faculty Board and Senate* of the outcome within the IRIMS will be essential.

## **5 SCOPE**

This SOP guides different parties on how to handle referral of allegations from the Registrar of either:

- 1) An allegation of a breach in RCR/RI against an NWU researcher (academic or student) received from an external source.
- 2) A back referral of an escalated case of research misconduct due to mitigating factors found during the formal investigation into academic misconduct by the office of the Registrar or the student judicial office.

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

## 6 ABBREVIATIONS AND/OR DEFINITIONS

<b>Abbreviation</b>	<b>Description</b>
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
DVC: R&I	Deputy Vice-Chancellor: Research and Innovation
REC	Research Ethics Committee
RCR	Responsible Conduct of Research
<b>Concepts</b>	<b>Definitions</b>
Research	<p>Research includes the activities that are aimed at improving knowledge of any discipline through enquiry or systematic investigation. This applies to Research, whether in the public interest or not, or whether the Research is published or not.</p> <p>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.</p> <p>Scientific Research conducted by public or private bodies (regardless of whether the Research is privately or publicly funded).</p> <p>Commercial or industrial Research aimed at developing or improving products or services.</p> <p>Technological development and demonstration (e.g., prototype development, testing, user trials). (Adapted for the ASSAF Draft POPIA Code of Conduct for research, 2022).</p>
Larger Faculties	<p>Faculty of Education (EDUC)</p> <p>Faculty of Economic and Management Sciences (FEMS)</p> <p>Faculty of Health Sciences (FHS)</p> <p>Faculty of Humanities (FHUM)</p> <p>Faculty of Natural and Agricultural Sciences (FNAS)</p>
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.
Academic misconduct	Conducting an act of fraud with intentional deception by a student or an academic.
Non-compliance	Any violation of: <ul style="list-style-type: none"> <li>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.</li> <li>Any <i>deviation</i> from the REC-approved <i>proposal/protocol</i>.</li> </ul> Non-compliance varies in <i>nature, severity, and frequency</i> (adapted from UCT, 2013).
Minor Non-compliance	A non-compliant incident that <i>does not</i> : <ul style="list-style-type: none"> <li>Affect the safety of human participants, animals, or environment.</li> <li>Affect the safety of society due to other types of research practices.</li> <li>Compromise data integrity.</li> <li>Violate participants' rights or welfare.</li> <li>Affect participants' willingness to participate in research.</li> </ul> Examples include but are not limited to: <ul style="list-style-type: none"> <li>Inadvertent errors due to inattention to detail ("honest human error").</li> <li>Misunderstanding or oversight.</li> <li>Missed deadline for a continuing review (adapted from UCT, 2013).</li> </ul>
Serious Non-compliance	An activity that jeopardises: <ul style="list-style-type: none"> <li>The safety, rights or welfare of human participants or animals.</li> <li>The environment.</li> <li>The integrity of the data during research.</li> </ul> Examples include but are not limited to: <ul style="list-style-type: none"> <li>Conducting research without Scientific Committee approval.</li> <li>Conducting research with humans, animals, or the environment without REC approval.</li> <li>Conducting any other type of research with an indicated risk factor without REC approval.</li> <li>Not using approved REC documentation.</li> <li>Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper).</li> <li>Inadequate training and supervision of researchers (academics and students).</li> </ul>

	<ul style="list-style-type: none"> <li>• Current REC-approved informed consent form describing all potential risks and alternatives to participants is not used.</li> <li>• Failure to obtain voluntary informed consent.</li> <li>• Enrolling human participants that do not meet the inclusion criteria or including those that meet the exclusion criteria.</li> <li>• Failure to follow accepted procedures to exercise due care in avoiding harm or discomfort to participants or research staff.</li> <li>• Deviation from or failure to adhere to the approved proposal/protocol without prior approval by the REC.</li> <li>• Implementing substantive modifications to REC-approved proposals/protocols without prior REC approval.</li> <li>• Activities that compromise the participants' privacy and confidentiality.</li> <li>• Continuing with research when REC approval has lapsed.</li> <li>• Copyright infringement.</li> <li>• Negligent management of data security (adapted from the European Code of Conduct for Research Integrity (ECCRI), 2017 and UCT, 2013 and 2014).</li> </ul> <p><b>Note:</b></p> <p>Should a researcher conduct research with humans or animals without REC approval, the process will be escalated for disciplinary <i>action</i>.</p> <p>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.</p>
Violation of good Research Practice	<p>Violations of good research practice that damage the integrity of the research process or researchers and that lead to “<i>questionable research practices</i>”.</p> <p>Examples include but are not limited to:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Manipulating authorship or denigrating the role of other researchers in publications.</li> <li>• Citing selectively to enhance own findings or to please editors, reviewers, or colleagues.</li> <li>• Self-citing to enhance own research index.</li> <li>• Deliberate misrepresentations in publications.</li> <li>• Expanding unnecessarily the bibliography of a study.</li> <li>• Establishing or intentionally supporting journals that undermine the quality control of research (predatory journals).</li> <li>• Using ghost writers to produce articles.</li> <li>• Incorrectly using university affiliation to gain access to subsidized funding.</li> <li>• Not following “good practice” guidelines in collaborative research.</li> <li>• Withholding research results.</li> <li>• Exaggerating the importance and practical applicability of findings.</li> <li>• Misrepresenting research achievements.</li> <li>• Inflating own research image during research assessment within the university or with external bodies or inflating own research profile.</li> </ul>

	<ul style="list-style-type: none"> <li>• Improper conduct in peer review.</li> <li>• Delaying or inappropriately hampering the work of other researchers (academics or students).</li> <li>• Allowing funders/sponsors to jeopardise independence in the research process or reporting of results to introduce or promulgate bias.</li> <li>• Accusing a researcher of misconduct or other violations in a retaliating, intimidating and malicious way.</li> <li>• Ignoring putative violations of research integrity by others or covering up inappropriate responses to misconduct or other violations by institutions.</li> <li>• Misusing seniority to encourage violations of research integrity (adapted from ECCRI, 2017 and UCT, 2014).</li> </ul> <p><b>Note:</b> 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.</p>
Research Misconduct	<p>Refers to the FFP categorisation:</p> <ul style="list-style-type: none"> <li>• Fabrication</li> <li>• Falsification</li> <li>• Plagiarism</li> <li>• In</li> <li>• Proposing</li> <li>• Performing</li> <li>• Reviewing research</li> <li>• Reporting results</li> </ul>
• Fabrication	Making up 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	<ul style="list-style-type: none"> <li>• 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.</li> <li>Or</li> <li>• 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.</li> </ul> <p><i>Also see definition in the NWU Policy on Academic Integrity: Annexure 1.</i></p>
Copyright Infringement	<ul style="list-style-type: none"> <li>• The use of work protected by <i>copyright</i> law without permission.</li> <li>• <i>Infringing</i> certain exclusive rights granted to the copyright holder, such as the right to: <ul style="list-style-type: none"> <li>○ Reproduce the protected work.</li> <li>○ Distribute the protected work.</li> <li>○ Display the protected work.</li> <li>○ Perform the protected work.</li> <li>○ Make derivative work.</li> </ul> </li> </ul> <p><i>Also see definition in the NWU Policy on Academic Integrity: Annexure 1.</i></p>
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 or research misconduct by an NWU 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 or research misconduct.
Informal Research Assessment Intra-faculty Integrity	An initial informal intra-faculty research integrity assessment process conducted by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) of the Faculty and the RIO linked to the office of the Deputy Vice-Chancellor: Research and Innovation (DVC: R&I) , into the <i>merits of the allegation</i> or <i>formal grounds</i> of potential 1) research non-compliance, 2) violation of good research practice, or 3) research misconduct before proceeding to the more formal intra-faculty research integrity assessment or preliminary intra-faculty research integrity investigation. The type of conduct will guide the process that follows and which RI SOP to follow.
Formal Research Assessment Intra-faculty Integrity	A formal intra-faculty research integrity assessment process into the allegations of 1) research non-compliance and/or 2) violation of good research practice. 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, 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.
Formal Research Assessment Intra-faculty Integrity (Acts of Plagiarism)	A formal intra-faculty research integrity assessment into the allegations of research misconduct through an act of <i>plagiarism</i> . This process is conducted 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, Falsification or Plagiarism)	A preliminary intra-faculty research integrity investigation into allegations of research misconduct through an act of fabrication, falsification, or plagiarism. 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, falsification, or plagiarism.
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, 27 September 2018, revised October 2020). 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



	<p>research misconduct (fabrication, falsification, plagiarism) and copyright infringement.</p> <p>However, other cases of serious breaches must also be referred to the office of the Registrar of the student judicial office.</p> <p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>• Not obtaining Scientific Committee or Research Ethics Committee approval for any research (academics or students) at the NWU.</li> <li>• Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper).</li> <li>• Inflating own research image during research assessment within the university or with external bodies.</li> <li>• Intentional publication in predatory journals.</li> <li>• Acts described in the Staff behavioural manual i.e.: <ul style="list-style-type: none"> <li>○ Any act or behaviour which has an element of dishonesty and/or misappropriation which could cause/causes detriment to the University and/or other person.</li> <li>○ Any conduct that negatively affects the integrity, good name and/or public image of the University.</li> <li>○ Any violation of any regulation governing human, animal or environmental research or any deviation from the REC approved proposal/protocol.</li> <li>○ Insubordination and defying the authority.</li> </ul> </li> <li>• Any act that caused reputational damage to the Faculty and/or the NWU.</li> </ul>
Formal Investigation	<p>The process of an investigation into research misconduct (fabrication, falsification, plagiarism) by the Registrar and people appointed by him/her to conduct the various phases of the investigation or the student judicial office (See the <i>NWU Policy on Academic Integrity, 27 September 2018, revised 2021</i>).</p>
Finding of a Breach in Research Integrity	<p>A result concluding that an allegation of 1) research non-compliance and/or violation of good research practice, 2) continuous research non-compliance and/or violation of good research practice or 3) research misconduct is true based on the preponderance of the evidence.</p>
Finding of a Breach in Research Misconduct	<p>A result concluding that an allegation of research misconduct (fabrication, falsification and/or plagiarism) is true based on the preponderance of the evidence.</p>
Research Integrity Officer (RIO)	<p>A person appointed in the office of the DVC: R&amp;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&amp;I, ED, and DD: R&amp;I. The person is not appointed in a research management position to ensure no potential conflict of interest.</p>
Standing Research Integrity Committee (SRIC)	<p>A Standing Research Integrity Committee (SRIC) appointed in the Faculty and consisting of specific members.</p> <p><b>In the five larger Faculties:</b></p> <ul style="list-style-type: none"> <li>• Chairperson: DD: R&amp;I.</li> <li>• Research Integrity Officer in the office of the DVC: R&amp;I.</li> </ul>

	<ul style="list-style-type: none"> <li>• Chairperson of the Faculty Research Ethics Committee (Faculty REC) or if such a person exists within the Faculty, the Head of the Ethics Office.</li> <li>• An elected Research Director in the Faculty (<i>appointed for three years</i>).</li> <li>• Secretariat provided by the Faculty (to sign a confidentiality agreement).</li> </ul> <p>In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.</p> <p>In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:</p> <ul style="list-style-type: none"> <li>• Consulting attorney in the legal office.</li> <li>• Two subject experts appropriate to the case at hand.</li> </ul> <p><b>In the four smaller Faculties:</b></p> <p><b>Faculty of Engineering:</b></p> <ul style="list-style-type: none"> <li>• Chairperson: ED: R&amp;I.</li> <li>• Research Integrity Officer in the office of the DVC: R&amp;I.</li> <li>• Chairperson of the Faculty Research Ethics Committee (Faculty REC).</li> <li>• An elected Research Director in the Faculty (<i>appointed for three years</i>).</li> <li>• Secretariat provided by the Faculty (to sign confidentiality agreement).</li> </ul> <p><b>Faculty of Law:</b></p> <ul style="list-style-type: none"> <li>• Chairperson: ED.</li> <li>• Research Integrity Officer (in the office of the DVC: R&amp;I).</li> <li>• Chairperson of the Faculty Research Ethics Committee (Faculty REC).</li> <li>• The Research Director in the Faculty.</li> <li>• The Postgraduate Director.</li> <li>• Secretariat: Provided by the Faculty (to sign confidentiality agreement).</li> </ul> <p><b>Faculty of Theology:</b></p> <ul style="list-style-type: none"> <li>• Chairperson: ED.</li> <li>• Research Integrity Officer in the office of the DVC: R&amp;I.</li> <li>• Research Directors of the research entities in the Faculty.</li> <li>• Secretariat provided by the Faculty (to sign a confidentiality agreement).</li> </ul> <p>In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.</p> <p>In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:</p> <ul style="list-style-type: none"> <li>• Consulting attorney in the legal office.</li> <li>• Two subject experts appropriate to the case at hand.</li> </ul>
Empanelled Research Integrity Committee (ERIC)	<p>A research integrity committee specifically empanelled and chaired by the DD: R&amp;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.</p> <p><b>Members:</b></p> <p>Standing Research Integrity Committee (SRIC).</p> <p>And</p> <p>Ad Hoc Members:</p> <ul style="list-style-type: none"> <li>• Research Director (RD) (unit in which the alleged resides).</li> </ul>

	<ul style="list-style-type: none"> <li>• School Director (SD) (school in which the alleged resides).</li> <li>• An independent person (expert on the required research integrity issue at hand).</li> </ul>
Restorative Actions	<p>Specific corrective measures under an appointed mentor and time frames prescribed by the DD: R&amp; I (in larger Faculties) or the ED (in smaller Faculties) and the RIO in the office of the DVC: R&amp;I to correct the consequences of a breach in research integrity by the researcher and to prevent future reoccurrences and ensure responsible conduct of research by him/her. The actions expected from the researcher falls within a specific time frame and are aimed at specific research knowledge, skills, and capacity development under the mentorship of an appointed mentor.</p> <p>The approach by the DD: R&amp; I (in larger Faculties) or the ED (in smaller Faculties) and the RIO in the office of the DVC: R&amp;I is supportive, educative, and restorative, with a growth experience as the result.</p> <p><b>Note:</b> Under no circumstances does this include any disciplinary measures.</p>
Mentor	<p>An appropriately knowledgeable and skilled senior person appointed by the DD: R&amp;I (in larger Faculties) or the ED (in smaller Faculties) and the RIO in the office of the DVC: R&amp;I to mentor a researcher found in breach of RCR. Mentorship will be for a specific identified period with specific responsibilities expected of the person and regular reporting to the RD.</p>
Appeal	<p>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&amp;I (FEDUC, FEMS, FHS, FHUM, and FNAS) and the RIO in the office of the DVC: R&amp;I or the ED (FENG, FLAW, and FTHEO) and the RIO in the office of the DVC: R&amp;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.</p> <p><b>Note:</b> This does not apply to cases escalated to the Registrar or the student judicial office.</p>
Appeals panel	<p>A group of people empanelled by the ED with the support of the RIO in the office of the DVC: R&amp;I for the purpose of handling a research integrity appeals request.</p> <p>The appeals panel consists of:</p> <ul style="list-style-type: none"> <li>• Chairperson: ED (for FEDUC, FEMS, FHS, FHUM, and FNAS) or an appointed ED from another Faculty (for FENG, FLAW, and FTHEO).</li> <li>• Research Integrity Officer in the office of the DVC: R&amp;I.</li> <li>• The RD of the research entity in which the alleged resides.</li> <li>• Two independent expert panellists knowledgeable about the specific RI issue at hand.</li> </ul> <p>Secretariat provided by the Faculty.</p>
Integrated Research Integrity Management System	<p>The integrated system used by the Faculty to manage research integrity in such a way that it:</p> <ol style="list-style-type: none"> <li>1) Fosters a climate of <i>Responsible Conduct of Research</i> (RCR).</li> <li>2) Effectively manages potential breaches in RCR/RI through acts of: <ol style="list-style-type: none"> <li>i) Research non-compliance.</li> <li>ii) Violation of good research practice.</li> <li>iii) Research misconduct.</li> </ol> </li> <li>3) Effectively manages possible appeals stemming from research integrity assessments or investigations on an intra-faculty level.</li> </ol>

## 7 VALUES UNDERPINNING THE NORTH-WEST UNIVERSITY'S ATTITUDE TOWARDS ALLEGATIONS OF RESEARCH BREACHES IN RESEARCH INTEGRITY

The North-West University believes:

- in the importance of impeccable research ethical standards and research integrity;
- that reporting of suspected research non-compliance and/or violation of good research practice or research misconduct is a shared and serious responsibility of all members of the Faculty;
- that allegations must be dealt with equitably, confidentially and as expeditiously as possible, taking care that all interested persons have the opportunity to be heard;
- that the procedure for dealing with allegations must be accessible, understandable, fair, transparent and expeditious;
- that the Faculty has a responsibility to protect the rights and reputations of all individuals, including the person against whom an allegation is made and the person who makes the allegation;
- that a formal assessment is dealt with in terms of existing faculty and university procedures (adapted from UCT, 2014).

## 8 RESPONSIBILITIES

It is the primary responsibility of the Faculty within the bigger NWU to protect the integrity of all 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 there be any possibility of a breach in responsible conduct of research (RCR)/research integrity (RI) through 1) research non-compliance, and/or 2) violation of good research practice, or 3) research misconduct, the Faculty must follow a process that will ensure that these allegations are assessed and 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 assessment process into allegations must act with the utmost *integrity* and *sensitivity*. Conflict of interest must be avoided (adapted from UCT, 2014).

### 8.1 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 9.3* or in the specific *applicable SOP* stated as the preferred route to manage the breach.

#### 8.1.1 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, or research misconduct (fabrication, falsification or plagiarism) who follow(s) any one of several processes to bring this to the attention of the DD: R&I (larger Faculties) or ED (smaller Faculties) of the Faculty and RIO in the office of the DVC: R&I or the Registrar.

Must share requested experiences or provide requested documentation and/or data.

Clarifies any uncertainties the SRIC and ad hoc members or ERIC may require.

If required, acts as a witness during the research integrity assessment or investigation process.

#### 8.1.2 The alleged

The NWU researcher (academic or student) against whom the allegations of a possible breach in research integrity through acts of 1) research non-compliance and/or 2) violation of good research practice or 3) research misconduct is being made must offer his/her full cooperation in the assessment or investigation of the allegation(s) by sharing requested experiences or by providing requested documentation.

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

Should be willing to present his/her case to the SRIC and hoc members or ERIC.

### 8.1.3 The Registrar

The Registrar of the NWU receiving the allegation of a breach in research integrity against an NWU Researcher (academic or student) from an external source, or to whom a case of research misconduct has been escalated by the Faculty within the IRIMS.

### 8.1.4 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 (larger Faculties) of the Faculty and the RIO in the office of the DVC: R&I on receipt of a referral of an alleged breach in research integrity from the Registrar, must launch an initial *informal intra-faculty assessment* into 1) the merit of or grounds for the allegation, 2) the nature of i) research non-compliance, and/or ii) violation of good research practice, or iii) research misconduct, and 3) the way forward, before proceeding to the more *formal intra-faculty research integrity assessment* or *preliminary research integrity investigation*.

If the allegation(s) seem(s) to have formal grounds, the DD: R&I (larger Faculties) or ED (smaller Faculties) as chairperson of the SRIC or the ERIC and the RIO in the office of the DVC: R&I initiates a *formal intra-faculty research integrity assessment* (for research non-compliance and or violation of good research practice) or a *preliminary research integrity investigation* (for research misconduct – fabrication, falsification or plagiarism). The DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I empanel the appointed SRIC, as well as specified ad hoc members in special circumstances. The DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO can also choose to rather empanel an ERIC.

**If the alleged breach against the NWU Researcher by the external source seems to be through an act of:**

- Non-compliance and/or violation of good research practice, the process as described under **section 9.3.1.4** is followed.  
Or
- Research misconduct (fabrication, falsification, or plagiarism), the process as described under **section 9.3.1.5** is followed.

**If the case is a back referral after an escalation to the Registrar or the student judicial office:**

- The process as described under **section 9.3.2** is followed.

The DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO, sends a report to the Registrar, Faculty Board and Senate.

### 8.1.5 The Research Integrity Officer

The RIO in the office of the DVC: R&I acts as advisor and support to the DD: R&I (larger Faculties) and ED (smaller Faculties) throughout all processes of alleged research integrity breaches and the assessment or investigation thereof.

Specific roles will vary as specified in the applicable SOP.

**Support from the secretary allocated for this purpose by the faculty:**

Ensures report back to the Registrar, Faculty Board and Senate.

### 8.1.6 The Executive Dean in Larger Faculties

The ED (in larger Faculties) listens to the report on the outcomes of the assessment or preliminary investigation of either the SRIC and ad hoc members or the ERIC presented to him/her by the DD: R&I (if in a larger Faculty) and the RIO in the office of the DVC: R&I, gives his/her stamp of approval to the way forward and co-signs the letter to the researcher or the Registrar set up by the DD: R&I (in larger Faculties) with the support of the RIO.

Ensure that the report set up by the DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO is sent to the Registrar, Faculty Board and Senate.

### **8.1.7 The Research Directors**

The RD of the research entity in which the alleged resides forms part of the ERIC or the SRIC and ad hoc members in special circumstances.

The RD is active in the identification of the mentor.

### **8.1.8 The Chairperson of the Faculty REC or the Head of the Ethics Office**

The Chairperson/Head forms part of the SRIC or ERIC.

### **8.1.9 The School Directors**

The SD of the school in which the alleged resides forms part of the ERIC or the SRIC and ad hoc members in special circumstances.

### **8.1.10 Mentor**

The mentor is appointed by the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO based on advice by the RD due to his/her appropriate knowledge and skills linked to the RI case at hand.

The mentor will be responsible for:

- Overseeing all the restorative actions required by the researcher and prescribed by the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO for the stipulated period.
- Meeting at least monthly with the researcher to have an in-depth discussion of RCR related to the breach/transgression.
- Submitting a written mentor report each month to the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO on the progress made by the researcher and the progress made with the restorative actions.
- Ensures that the researcher submits monthly reflective notes about the mentoring process to the DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO.
- Submitting a final written mentor report to the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO at the end of the period stipulated to the researcher of the completion of specific restorative actions required as well as the growth experienced by the researcher in RCR. In the report a recommendation should be made whether the mentor sees the mentoring process as 1) concluded or 2) whether there is a need for further mentoring.
- Also ensures that the final reflective notes of the researcher is submitted to the DD: R&I (larger Faculties) or the ED (smaller Faculties) and the RIO.

## **9 PROCEDURE(S)**

### **9.1 The principles underpinning the process of handling allegations of research non-compliance and/or violations of good research practice or research misconduct**

- Procedural fairness.
- Natural justice.
- Due process.
- Integrity.
- Confidentiality (“need-to-know rule”).
- One assessment where possible.

### **9.2 Questions that guide the procedural framework**

- Who receives the allegation(s)?
- Who takes the first step(s)?
- Who appoints the SRIC and ad hoc members or the ERIC?
- Who does the formal intra-faculty research integrity assessment or preliminary research integrity investigation?
- How are the outcomes managed?

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

## 9.3 The process

### 9.3.1 Referral from the Registrar of an allegation of a breach in research integrity by an NWU Researcher received from an external source

#### 9.3.1.1 Reporting of an allegation of a breach in research integrity by an NWU Researcher by an external source

The allegor(s) (external source), with allegations based on observations or evidence of research non-compliance and/or violation of good research practice or research misconduct about a researcher (academic or student), may choose to follow any one of several processes to bring this to the attention of specifically the Registrar.

An allegation comes to the attention of the Registrar through a direct notification to the office of the Registrar by an allegor.

A process of Whistleblowing using SOP\_NWU\_Research Integrity\_7. Management of Whistleblowing pertaining to Research Ethics and Research Integrity. This process is used should the allegor wish to remain anonymous.

No matter the route followed by the allegor of reporting the alleged, the *identity* of the allegor should always be protected and kept confidential and only be made known to the Registrar, DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO in the office of the DVC: R&I. Should the allegation, however, prove to have substance and defensibility, *the allegor could be asked to verbally present his/her allegations to the SRIC and ad hoc members or the ERIC* should it move to a formal intra-faculty assessment or preliminary research integrity investigation. However, this may not always be necessary if the evidence is clear.

#### 9.3.1.2 Referral of the alleged case received by the Registrar to the DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO

The Registrar, on receipt of the allegation of a breach in research integrity, refers the case to the DD: R&I (in larger Faculties) or ED (smaller Faculties) and RIO in the office of the DVC: R&I to assess the merits and grounds, the nature of the breach (research non-compliance and/or violation of good research practice or research misconduct), and the way forward.

#### 9.3.1.3 Informal intra-faculty assessment by the DD: R&I (larger Faculties) or ED (smaller Faculties) and RIO

The DD: R&I (larger Faculties) or ED (smaller Faculties) and the RIO in the office of the DVC: R&I, **within five working days** after receiving the allegation(s) from the Registrar, activate the process within the IRIMS of the Faculty.

On receiving a written allegation of a possible breach in RI/RCR from the Registrar, the DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO launches an initial *informal intra-faculty assessment* into 1) the merit and formal grounds of the allegation, 2) the nature of the breach of i) research non-compliance and/or ii) violation of good research practice, or iii) research misconduct, and 3) the way forward as either a) a formal intra-faculty research integrity assessment or b) a preliminary research integrity investigation.

This informal intra-faculty assessment is done with the hard evidence provided by the allegor and handled at face value.

The focus of the initial informal intra-faculty assessment is to determine *whether an answerable case* can be made out:

- Is it a valid complaint (research non-compliance and/or violation of good research practice or research misconduct)?
- Is it in good faith and not malicious?
- Even if an anonymous reporting (no identifiable allegor) or “bad faith” complaint was received it should not be disregarded and “due process” followed.

A final decision is taken about whether the case has merit and formal grounds, the nature of the breach and the way forward.

If the allegation(s) seem(s) to have merit and formal grounds of a potential breach of RCR/RI through acts of:

- 1) Research non-compliance and/or violation of good research practice the DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I, continues with the next step in the process and launches a *formal intra-faculty research integrity assessment* (See 9.3.1.4).  
Or
- 2) Research misconduct, the DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I, continues with the next step in the process and launches a *preliminary research integrity investigation* (See 9.3.1.5).

#### **9.3.1.4 Management if research non-compliance and/or violation of good research practice**

The DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I handles the process by following **SOP\_NWU RI\_1 Management of Research Non-compliance and/or Violation of Good Research Practice** from **section 9.3.2.2 to 9.3.2.5**.

On completion of the process a report is submitted to the Registrar, Faculty Board and Senate on the outcome.

#### **9.3.1.5 Management if research misconduct (fabrication, falsification, or plagiarism)**

The DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I handles the process by following **SOP\_NWU RI\_3 Management of Research Misconduct** from **section 9.3.2.2.1 to 9.3.2.5**.

In the case of merits and grounds found with the necessary supporting documentation, the case is *escalated* to the Registrar or the student judicial office and thus referred back as a case of potential research misconduct for a formal investigation into research misconduct by the office of the Registrar or the student judicial office.

The registrar must be notified if the case is escalated to the student judicial office.

On completion of the process a report is submitted to the Faculty Board and Senate on the outcome.

#### **9.3.2 Back referral of an escalated case of academic or research misconduct**

The fact that the formal investigation by the office of the Registrar or the student judicial office found mitigating factors to not process it further as research misconduct in a disciplinary or legal manner but to refer it back to the IRIMS of the Faculty changes the act to that of *violation of good research practice*.

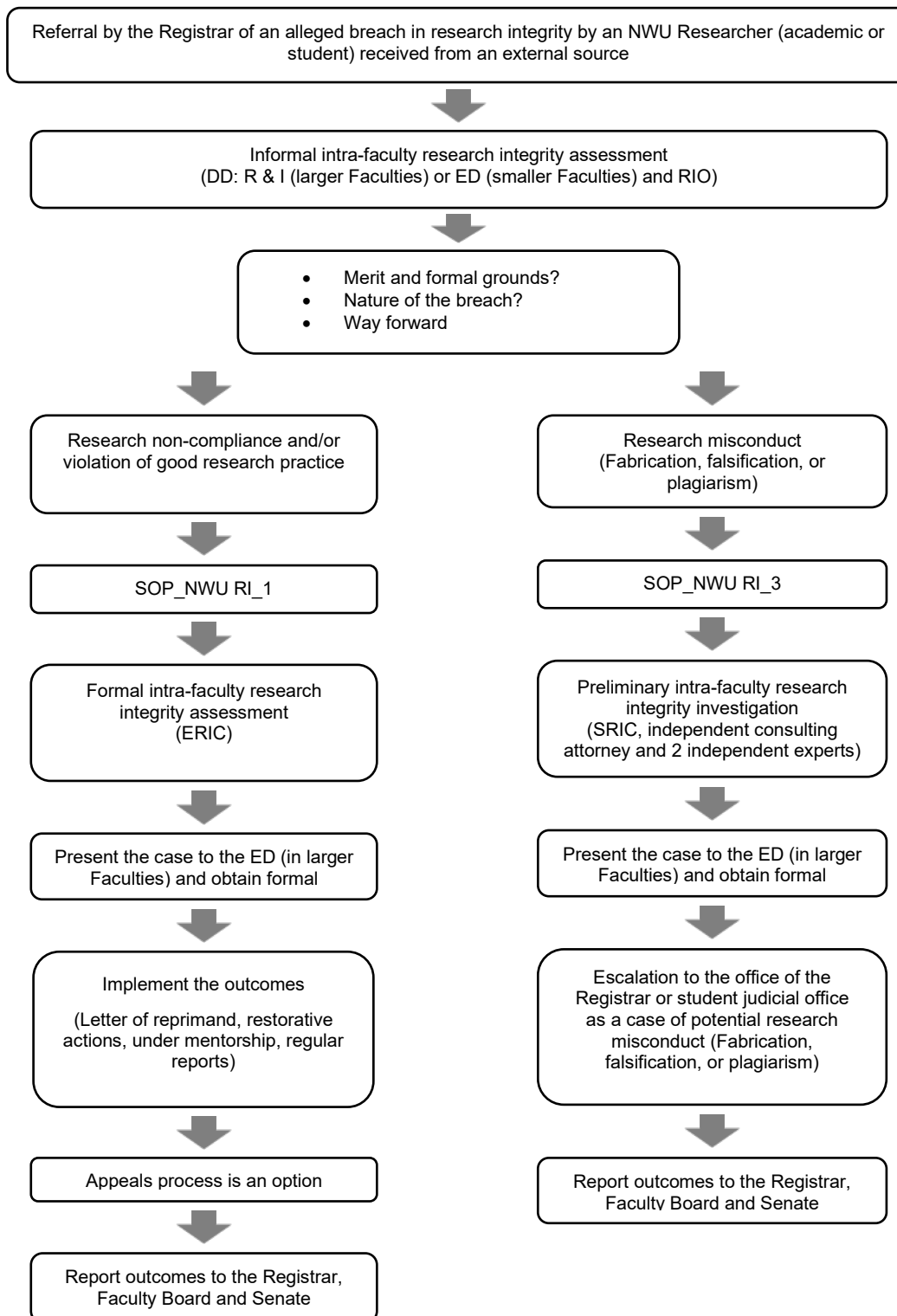
The DD: R&I (larger Faculties) or ED (smaller Faculties) with the support of the RIO in the office of the DVC: R&I, handles the process by appointing a specific panel consisting of the SRIC and the SD and RD as ad hoc members and not an ERIC. For the rest of the process however, the process described in **SOP\_NWU RI\_1 Management of Research Non-compliance and/or Violation of Good Research Practice** from **section 9.3.2.2 to 9.3.2.5** is followed.

On completion of the process, a report is submitted to the Registrar, Faculty Board and Senate on the outcome.

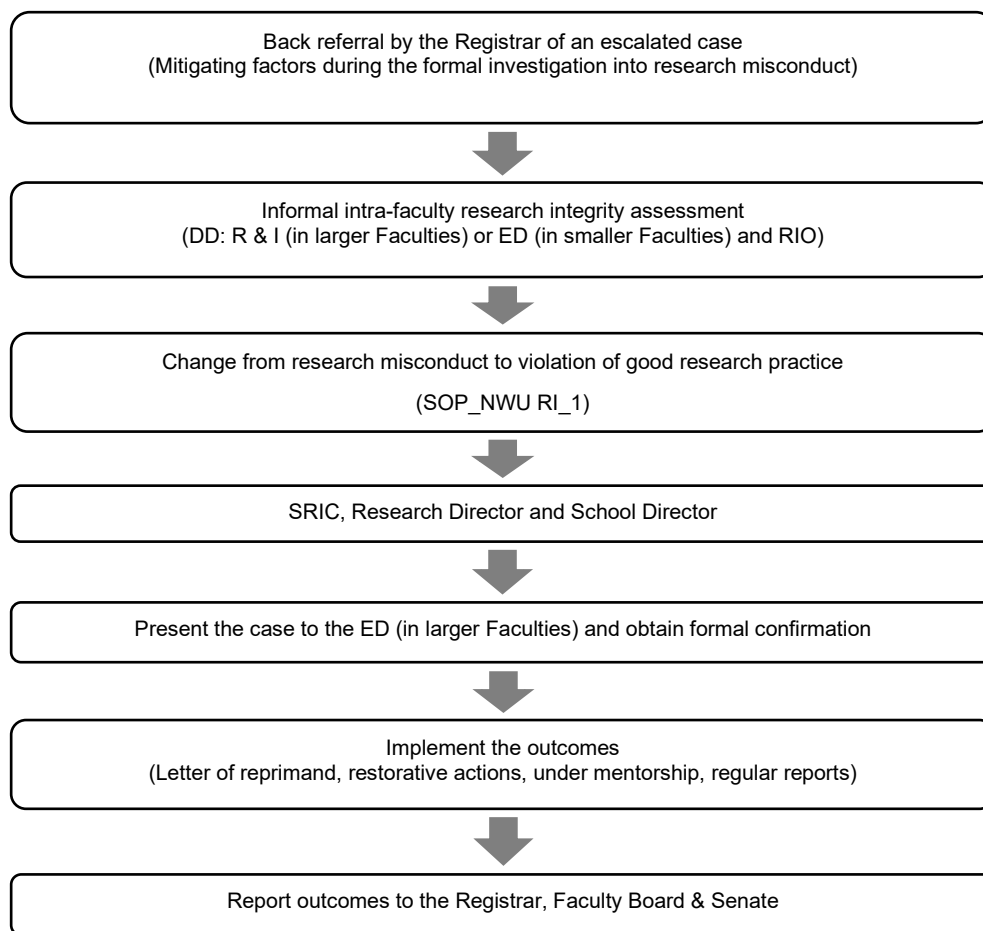


## 10 SUMMARISED PROCESS

**Diagram 1: Processes and procedures for managing referrals from the Registrar of an alleged breach in research integrity against an NWU Researcher by an external source**



**Diagram 2: Processes and procedures for managing a back referral from the Registrar of an escalated research misconduct case**



## 11 REFERENCE DOCUMENTS

SOP for non-compliance of the University of Cape Town, 2013.

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).

SOP for the management of research integrity appeals process (SOP\_NWU Research Integrity\_4).

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, 27 September 2018, revised 2021.

## 12 ADDENDA

No	Document name
None	

Original details: SOP\_NWU Research Integrity\_6 Management of a Referral Received from the Registrar a Breach in Research Integrity, April 2022, revised November 2022.

File reference: