

Faculty of Health Sciences

RESEARCH INTEGRITY		Standard Operating Procedure	
Title	Management of Research Misconduct		
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1 COMPILATION AND AUTHORISATION

Action	Designated person	Date	Signature
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2 DISTRIBUTION

Department/Unit	Name	Date	Signature
Research and School Directors, academic staff, and postgraduate students in the FHS	Prof Jeanetta du Plessis	Sept 2021	

3 DOCUMENT HISTORY

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4 PURPOSE OF THE SOP

To provide guidelines and procedures for the Deputy Dean: Research and Innovation (DD: R&I) and the Executive Dean (ED) of the Faculty of Health Sciences (FHS), as well as persons seeking to *report allegations of research misconduct by a researcher* (staff member, undergraduate or postgraduate student), on **a) reporting and b) conducting an informal initial intra-faculty research integrity assessment, followed by either 1) a formal intra-faculty research integrity assessment for cases of plagiarism** (note not “investigation”), **or 2) a preliminary intra-faculty research integrity investigation for cases of fabrication or falsification**, into the said allegations. The reason for the difference in 1) and 2) is that the Policy on Academic Integrity, 27 September 2018 revised 2021, allows for an internal investigation into *plagiarism* by the office of the Registrar, but in cases of *fabrication and/or falsification* the internal investigation should be conducted by the Faculty before escalating the case to the office of the Registrar.

It is in the interest of society and the research community that allegations of research misconduct 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).

This *SOP for management of research misconduct* seeks to find a balance between:

- i) Providing safeguards for those who raise genuine concerns about allegations of research misconduct, 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).

The balance is found in:

- An **initial informal intra-faculty research integrity assessment** by only the DD: R&I and the Research Integrity Officer (RIO) linked to the office of the DD: R&I, without the involvement of the person making the allegations (allegor) or the person against whom the allegations are being made (alleged). The merit and formal grounds of the allegation are assessed.

The mentioned initial informal intra-faculty research integrity assessment is followed by one of the following **two processes**:

- **For plagiarism:**
A follow-up **formal intra-faculty research integrity assessment** by the DD: R&I as chairperson and the appointed Standing Research Integrity Committee (SRIC) with an additionally appointed independent consulting attorney to see whether the allegation of **plagiarism in research** has merit and formal grounds to justify an escalation to the office of the Registrar as a *formal investigation into academic misconduct*. In the case of plagiarism in research the office of the Registrar is responsible for the *internal process of evaluation* of the suspected plagiarism by a plagiarism expert (See the NWU Policy on Academic Integrity sections 1.2, 2.4, or 3.2).
- **For fabrication or falsification:**
A follow up **preliminary intra-faculty research integrity investigation** by the DD: R&I as chairperson and the Standing Research Integrity Committee (SRIC) as well as appointed

independent ad hoc members in cases of suspected **fabrication and/or falsification**, to see whether the allegations have merit and formal grounds. In the case of fabrication and/or falsification the *preliminary intra-faculty investigation* is conducted in the FHS by the SRIC, involving a **consulting independent attorney and two independent knowledgeable experts as ad hoc members**. If a “defensible” finding is made by the SRIC and independent ad hoc members, the case is referred to the office of the Registrar as a *formal investigation into academic misconduct* with the necessary evidence and expert reports at hand to continue with the *disciplinary process for students* or the *external process for staff* (See the NWU Policy on Academic Integrity sections 1.3, 2.5 and 3.3 of the).

5 SCOPE

This SOP guides different parties on how to handle allegations of:

- 1) Research misconduct through an act of *plagiarism in research* for a staff member or student.
- 2) Research misconduct through an act of *fabrication and/or falsification* for a staff member or student.

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

A detailed process description is provided of the initial informal and more formal intra-faculty research integrity processes for both plagiarism and fabrication and/or falsification, leading to an escalation to the office of the Registrar for a *formal investigation into academic misconduct* if a “defensible” finding of research misconduct is made during the intra-faculty processes (See the *NWU Policy on Academic Integrity of 27 September 2018 revised 2021*).

Note: The DD: R&I, ED, the SRIC and independent ad hoc members always retain the right to rather refer any case of reported research misconduct to be handled as an intra-faculty assessment process of *research non-compliance and/or violation of good research practice*, if a “non-defensible” finding of research misconduct is made but the case does fall within the ambit of research non-compliance and/or violation of good research practice (See *SOP_Research Integrity_1 for the management of non-compliance and/or violation of good research practice*). A choice could also be made to follow the route of disciplinary action (See *NWU Behavioural Manual* for a staff member or the *NWU Policy on Student Discipline, 26 September 2019* for an undergraduate or postgraduate student) for the same reason.

6 ABBREVIATIONS AND/OR DEFINITIONS

Abbreviation	Description
DD: R&I	Deputy Dean: Research and Innovation
ED	Executive Dean
RD	Research Director
SD	School Director
FHS	Faculty of Health Sciences
RIO	Research Integrity Officer
RI	Research Integrity
SRIC	Standing Research Integrity Committee
DVC: R&I	Deputy Vice-Chancellor: Research and Innovation
REC	Research Ethics Committee
NWU-HREC	North-West University Health Research Ethics Committee
NWU-AnimCareREC	North-West University Animal Care, Health and Safety in Research Ethics Committee
RCR	Responsible Conduct of Research

Concepts	Definitions
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.
Potential Breach in Research Integrity	The finding of a <i>formal intra-faculty research integrity assessment</i> (plagiarism) or a <i>preliminary intra-faculty research integrity investigation</i> (fabrication and/or falsification) that a researcher has potentially transgressed in responsible conduct of research based on the mentioned acts of research misconduct.
Non-compliance	<p>Any violation of:</p> <ul style="list-style-type: none"> • Any institutional and/or REC <i>policies, procedures</i> and <i>regulation</i> governing human or animal research. • Any <i>deviation</i> from the REC-approved <i>proposal/protocol</i>. <p>Non-compliance varies in <i>nature, severity, and frequency</i> (adapted from UCT, 2013).</p>
Minor Non-compliance	<p>A non-compliant incident that <i>does not</i>:</p> <ul style="list-style-type: none"> • Affect the safety of human participants or animals. • Compromise data integrity. • Violate participants' rights or welfare. • Affect participants' willingness to participate in research. <p>Examples include but are not limited to:</p> <ul style="list-style-type: none"> • Inadvertent errors due to inattention to detail. • Misunderstanding or oversight. • Missed deadline for a continuing review (adapted from UCT, 2013).
Serious Non-compliance	<p>An activity that jeopardises:</p> <ul style="list-style-type: none"> • The safety, rights or welfare of human participants or animals. • The integrity of the data during research. <p>Examples include but are not limited to:</p> <ul style="list-style-type: none"> • Conducting research with humans or animals without REC approval. • Not using approved REC documentation. • Inadequate training and supervision of research staff. • 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 participant's 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).

	<p>Note: Should a researcher conduct research with humans or animals without REC approval, the process will immediately be escalated to a disciplinary action.</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"> • Direct violation of good research practices set out in the <i>NWU Code of Conduct for Researchers</i> or other codes of conduct for 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. • Deliberate misrepresentations in publications. • Expanding unnecessarily the bibliography of a study. • Establishing or supporting journals that undermine the quality control of research (predatory journals) • Withholding research results. • Exaggerating the importance and practical applicability of findings. • Misrepresenting research achievements. • Improper conduct in peer review. • Delaying or inappropriately hampering the work of other researchers. • 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). <p>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. Should a researcher support <i>predatory journals</i>, the process will immediately be escalated to a <i>disciplinary action</i>.</p>
Research Misconduct	<p>Refers to the FFP categorisation:</p> <ul style="list-style-type: none"> • Fabrication • Falsification • Plagiarism in • Proposing • Performing • Reviewing research • Reporting results
<ul style="list-style-type: none"> • Fabrication 	Making up of results and recording them as if they were real.
<ul style="list-style-type: none"> • Falsification 	Manipulating research materials, equipment, or processes, or changing, omitting, or suppressing data or results without justification.
<ul style="list-style-type: none"> • Plagiarism 	<ul style="list-style-type: none"> • 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.

	<p>Or</p> <ul style="list-style-type: none"> • Re-publishing substantive parts of one’s own earlier publications, including translations, without duly acknowledging or citing the original (self-plagiarism). <p><i>Also see definition of plagiarism in the NWU Policy on Academic Integrity: Annexure 1.</i></p>
Copyright infringement	<ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ○ Reproduce the protected work. ○ Distribute the protected work. ○ Display the protected work. ○ Perform the protected work. ○ Make derivative work. <p><i>Also see definition of copy right infringement 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 misconduct.
Alleged	The researcher accused of research misconduct.
Initial Informal Intra-faculty Research Integrity Assessment	An initial informal intra-faculty research integrity assessment process conducted by the DD: R&I, FHS and the RIO linked to this office, into the <i>merits and formal grounds of the allegation</i> of 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. In the case of potential research misconduct an independent consulting attorney is included.
Formal Intra-faculty Research Integrity Assessment (Acts of Plagiarism)	A formal intra-faculty research integrity assessment into the allegations of research misconduct through an act of plagiarism. This process is conducted by the DD: R&I, FHS as chairperson, the appointed Standing Research Integrity Committee (SRIC), and the appointed independent consulting attorney should the allegation seem to have merit and formal grounds and if it justifies a formal investigation by the office of the Registrar.
Preliminary Research Integrity Investigation (Acts of Fabrication or Falsification)	A preliminary intra-faculty research integrity investigation into allegations of research misconduct through an act of fabrication or falsification. This process is conducted by the DD: R&I, FHS as chairperson, the appointed Standing Research Integrity Committee (SRIC), as well as specified independent ad hoc members (attorney 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 faculty or university process of a disciplinary procedure taken against a staff member or student.
Escalation	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 (See the <i>NWU Policy on Academic Integrity, 27 September 2018 revised 2021</i>).
Formal Investigation	The process of an investigation into academic misconduct (fabrication, falsification, plagiarism) by the Registrar and people appointed by him/her to

		conduct the various phases of the investigation (See the <i>NWU Policy on Academic Integrity, 27 September 2018 revised 2021</i>).
Finding of Misconduct		A result concluding that an allegation of research misconduct (fabrication, falsification and/or plagiarism) is true based on the preponderance of the evidence.
Research Integrity Officer (RIO)		A person appointed in the office of the DD: R&I to facilitate research integrity (RI) within the FHS through various functions, i.e. developing and maintaining processes, procedure and SOPs related to research integrity, as well as managing RI within the FHS.
Standing Integrity Committee (SRIC)	Research Committee	<p>A Standing Research Integrity Committee (SRIC) appointed in the FHS and consisting of the following members:</p> <ul style="list-style-type: none"> • Chairperson: DD: R&I. • Research Integrity Officer. • Head of the Ethics Office for Research, Training and Support. • A Research Director in the FHS knowledgeable in the management of RI (<i>appointed for three years</i>). • Secretariat. <p>In cases of fabrication and falsification the following independent ad hoc members are included:</p> <ul style="list-style-type: none"> • Consulting attorney. • Two subject experts appropriate to the case at hand.

7 VALUES UNDERPINNING THE FACULTY OF HEALTH SCIENCES' ATTITUDE TOWARDS ALLEGATIONS OF RESEARCH MISCONDUCT

The FHS believes:

- in the importance of impeccable research ethical standards and research integrity;
- that reporting of suspected 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 FHS within the bigger NWU, to protect the integrity of all research conducted by the researchers (academics, undergraduate and postgraduate students) of the FHS, 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 research integrity through research misconduct the FHS has to 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 of research misconduct must act with the utmost *integrity* and *sensitivity*. Conflict of interest must be avoided, while the achievement of it is to be promoted (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.

8.1.1 The researchers

Researchers (academics, undergraduate and postgraduate students) must master the research knowledge, methodologies and ethical practices associated with their field and follow good research practices that will ensure “*responsible conduct of research (RCR)*”. The researchers are expected to comply with all ethical standards, regulations, laws, and conditions placed on the conduct of the study.

8.1.2 The allegor

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 misconduct who follow(s) any one of several processes to bring this to the attention of the DD: R&I, FHS.

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

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

If required, acts as a witness during the formal investigation conducted by the Registrar.

8.1.3 The alleged

The researcher against whom the allegations of a possible breach in research integrity (RI)/responsible conduct of research (RCR) through research misconduct are 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 and/or data.

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 ad hoc members.

8.1.4 The Deputy Dean: Research and Innovation

The DD: R&I, FHS has to launch an initial informal intra-faculty assessment with the support of the RIO linked to the office into the *merit or formal grounds for the allegation(s)* of research misconduct (fabrication, falsification, plagiarism), before proceeding to the next more formal process.

If the allegation(s) seem(s) to have merit and formal grounds, the DD: R&I, FHS as chairperson of the SRIC, initiates either a *formal intra-faculty research integrity assessment* (plagiarism) or a *preliminary intra-faculty research integrity investigation* (fabrication and/or falsification) with the support of the RIO.

For the formal intra-faculty research integrity assessment of cases of potential plagiarism:

The DD: R&I as chairperson, the SRIC and consulting attorney first meet with the allegor, to come to findings on the merit and formal grounds for the allegation of plagiarism.

The DD: R&I as chairperson, the SRIC and consulting attorney meet with the alleged to hear his/her side of the story.

The DD: R&I, FHS with the support of the RIO finalises the letter to escalate the case to the Registrar.

The DD: R&I, FHS with the support of the RIO finalises the letter to the alleged indicating the process of escalation and the future process.

The DD: R&I, FHS and the RIO set up a meeting and discuss the way forward with the ED of the FHS to finalise the planned actions and for him/her to co-sign the necessary letters.

The DD: R&I calls for a meeting with the DD: R&I, RIO, the two Directors (Research and School) in which the researcher resides, as well as the researcher to discuss the findings and future actions. The DD: R&I leads the discussion.

The DD: R&I hands the letter to the alleged and has it signed by him/her.

The DD: R&I with the support of the RIO verbally notifies the alleged of the outcome.

The DD: R&I with the support of the RIO sets up a meeting with the Registrar to hand over the letter and supporting documents and explain the case. The ED is also present.

The DD: R&I, FHS evaluates the progress of the process with the Registrar's office and signs off on the finalisation of the process when the outcome is known.

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

For the preliminary intra-faculty research integrity investigation into cases of potential fabrication and/or falsification:

The DD: R&I and the RIO concur on the appointment of the independent attorney and two independent experts as ad hoc members.

The DD: R&I with the support of the RIO provides the two experts with the allegation(s) and the necessary documentation and/or data to launch an independent investigation based on the documentation and/or data.

The DD: R&I with the support of the RIO calls for a meeting with the SRIC and ad hoc members.

The DD: R&I presents the case, documents, and reports to the SRIC and ad hoc members.

The DD: R&I as chairperson, the SRIC and independent ad hoc members first meet with the alleged, to evaluate the merit and formal grounds of the allegation(s) of fabrication and/or falsification.

The DD: R&I as chairperson, the SRIC, and independent ad hoc members meet with the alleged to hear his/her side of the story.

The DD: R&I, FHS with the support of the RIO finalises the letter to escalate the case to the Registrar. Note: It should be clear that the experts confirm the allegation made by the alleged.

The DD: R&I, FHS with the support of the RIO finalises the letter to the alleged indicating the escalation and future processes.

The DD: R&I, FHS and the RIO set up a meeting and discuss the way forward with the ED of the FHS to finalise the planned actions and for him/her to co-sign the two letters.

The DD: R&I with the support of the RIO calls for a meeting with the two Directors (Research and School) in which the researcher resides and the researcher to discuss the findings and future actions. The DD: R&I leads the discussion.

The DD: R&I hands the letter to the alleged and has it signed by him/her.

The DD: R&I with the support of the RIO verbally notifies the alleged of the outcome.

The DD: R&I with the support of the RIO sets up a meeting with the Registrar to hand over the letter and supporting documents and explain the case. The ED is also present.

The DD: R&I, FHS evaluates the progress of the process with the Registrar's office and sign off on the finalisation of the process when the outcome is known.

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

8.1.5 The Research Integrity Officer

The RIO acts as advisor and support to the DD: R&I and ED throughout all processes of alleged potential research integrity breaches and the assessment thereof.

- Receives the allegation(s) on behalf of the DD: R&I.
- Supports the DD: R&I in deciding on the merit and formal grounds.
- Allocates a case number from the Research Integrity Register.

- Sets up meetings with the SRIC and independent ad hoc members if deemed necessary.
- Oversees the secretariat in setting up meetings and taking minutes during meetings.
- Keeps records of all evidence.
- Supports the DD: R&I in writing the letters to the Registrar and the alleged.
- Write a letter to the Head of the FHS Ethics Office to notify him/her should a study be affected.
- Joins the DD: R&I in feedback meetings with the ED.
- Writes the final summative report.
- Ensures that progress reports reach the office as indicated and closes cases.
- Gives monthly status reports of RI cases to the DD: R&I and ED.
- Where a case needs to be escalated to the office of the Registrar, helps with organising supporting documentation and/or data and set up the handover meeting.
- Joins the DD: R&I and ED in the handover meeting with the Registrar.

8.1.6 The Executive Dean

The ED listens to the report on the outcomes of the assessment or preliminary investigation of the SRIC and ad hoc members presented to him/her by the DD: R&I and the RIO, gives his/her stamp of approval to the way forward and co-signs the necessary letters to the Registrar.

Keeps up to date with all active RI cases.

8.1.7 The Research Directors

The RDs report any possible allegations of a potential breach in RI/RCR reported to them to the DD: R&I.

8.1.8 The Head of the Ethics Office for Research, Training and Support

The Head of the Ethics Office for Research, Training and Support reports any allegations of a potential breach in research integrity reported to him/her via the complaints or whistleblowing processes to the DD: R&I.

The Head forms part of the SRIC.

8.1.9 The School Directors

The SDs report any allegations of a breach in research integrity reported to them to the DD: R&I.

8.1.10 The independent attorney

Offers legal advice during the progress of the case.

Attends the SRIC meeting(s).

8.1.11 The independent experts

Review the documents and/or data provided by the DD: R&I and RIO for proof of the allegation of fabrication and/or falsification.

Write a report within **10 working days** after receiving the documentation and/or data and provide it to DD: R&I.

Attend the SRIC meeting(s) and present the report to the SRIC.

Should be prepared to act as witness during the formal investigation by the office of the Registrar.

9 PROCEDURE(S)

9.1 The principles underpinning the process of handling allegations of 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?
- Who appoints the independent consulting attorney?
- Who appoints the two independent experts?
- Who does the formal intra-faculty research integrity assessment into cases of plagiarism?
- Who does the preliminary intra-faculty research integrity investigation into cases of fabrication and/or falsification?
- How are these processes managed?
- How are the outcomes managed?

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

9.3 The process

The process focuses on the reporting of possible research misconduct and the steps in handling these allegations.

9.3.1 Reporting of possible research misconduct

The alleged(s), with allegations based on observations or evidence of research misconduct (plagiarism, fabrication, falsification), may choose to follow any one of several processes to bring this to the attention of the DD: R&I, FHS.

Another form of reporting will originate from dissertation/thesis examination committees. Possible acts of a breach in RI/RCR mentioned by an examiner in an examiners report should be deliberated on during an examination committee to see whether these have merit and formal grounds to be *classified* as research misconduct. It is, however, not the responsibility of the examination committee to stipulate possible actions. The examination committee should follow the route of reporting the potential breach to the DD: R&I as a case of potential research misconduct through an act of *plagiarism, fabrication, or falsification*.

In all cases of reporting it must be very clear from the start whether it is:

- Just a process of seeking advice.
Or
- A process of making a formal allegation.

An allegation can come to the attention of the DD: R&I through:

- Direct notification to the office of the DD: R&I by any mentioned alleged.
- A report to or by the Head of the FHS Ethics Office for Research, Training and Support (referred to as Ethics Office).
- A report to or by a chairperson of one of the Faculty RECs.
- A report to or by one of the Research or School Directors in the FHS.
- A report by a dissertation/thesis examination committee.
- The alleged could also have decided to use one of the existing research ethics routes i.e. *SOP for complaints management (2.2.4_SOP_Ethics_1.5)* or *SOP for whistleblowing pertaining to research (2.2.4_SOP_Ethics_1.8)*.

Important note: *Under no circumstances should an initial assessment be conducted by any party other than the DD: R&I and the RIO linked to the office.*

No matter where the reporting originated from, should the person decide to proceed with the allegation(s), the case is reported to the DD: R&I via the RIO by the person receiving the allegation(s) **within two working days** after receiving the allegation(s).

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

9.3.2 The steps in handling allegations

- 1) Initial informal intra-faculty research integrity assessment into the *merit and formal grounds* of the allegation(s) by the DD: R&I and RIO only and the decision whether the process should continue.
- 2) Two possible processes based on the nature of the case:
 - 2.1) For *plagiarism*: A formal intra-faculty research integrity assessment by the SRIC and consulting attorney.
 - 2.2) For *fabrication of falsification*: A preliminary intra-faculty research integrity investigation by the SRIC, independent consulting attorney and two independent experts.
- 3) Implementing the outcomes of the formal intra-faculty research integrity assessment (for plagiarism) or preliminary intra-faculty research integrity investigation (for fabrication or falsification).
- 4) Appeal could be requested by the alleged.
- 5) Reporting and recording.

9.3.2.1 Informal Intra-faculty Research Integrity Assessment

On receiving a written allegation of a possible breach in RI/RCR, the DD: R&I, FHS with the support of the RIO launches an *initial informal intra-faculty research integrity assessment* into the *merit and formal grounds of the allegation* of potential research misconduct, before deciding to proceed to a more *formal intra-faculty research integrity assessment* (for plagiarism) or a *preliminary intra-faculty research integrity investigation* (for fabrication and/or falsification).

This assessment is done with the hard evidence provided by the alleged and handled at face value.

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

- Is it a valid complaint (research misconduct through acts of fabrication, falsification and/or plagiarism)?
- Is it in good faith and not malicious?
- Even if an anonymous reporting (no identifiable alleged) or “bad faith” complaint(s) was received it should not be disregarded and “due process” followed.

A final decision is taken whether the case has merit and formal grounds.

If the allegation(s) seem(s) to have merit and formal grounds of a *potential breach of RI/RCR through acts of research misconduct*, the DD: R&I, FHS continues with the next step in the process and launches either a *formal intra-faculty research integrity assessment (for plagiarism)* or a *preliminary intra-faculty research integrity investigation (for fabrication and/or falsification)* with the support of the RIO.

9.3.2.2 Two possible processes based on the nature of the case

Two possible processes are followed based on the nature of the research misconduct at hand, i.e.:

- 1) for plagiarism a formal intra-faculty research integrity assessment by the SRIC and a consulting attorney or
- 2) for fabrication and falsification, a preliminary intra-faculty research integrity investigation by the SRIC and appointed ad hoc members.

9.3.2.2.1 Formal intra-faculty research integrity assessment of possible plagiarism

A case number is allocated from the Research Integrity Register for a case of suggested *plagiarism*.

A risk management-based approach will be used.

The formal intra-faculty research integrity assessment is handled by the DD: R&I as chairperson of the SRIC with an additional appointed independent consulting attorney knowledgeable on research integrity. In *calling a meeting with the SRIC*, the DD: R&I with the support of the RIO, 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. *Confidentiality* and *due process* will be maintained throughout the process. All attempts should be made to mitigate any adverse effects on participants.

The Standing Research Integrity Committee (SRIC) consists of:

- Chairperson: DD: R&I.
- Research Integrity Officer.
- Head of the Ethics Office for Research, Training and Support.
- An elected Research Director knowledgeable in the management of RI for a term of three years.
- Secretariat.

Ad hoc members:

- Appointed independent consulting attorney knowledgeable about research integrity matters.

The DD: R&I notifies the alleged researcher in writing that an allegation has been made against him/her. A brief description of the allegation is provided, and a time and place provided to appear before the SRIC (**Note:** *From here on under 9.3.2.2.1 mention of SRIC includes the independent consulting attorney*).

The DD: R&I with the support of the RIO will as soon **as possible, but no later than a week** after receiving the allegation, call a meeting with the SRIC.

The formal intra-faculty research integrity assessment process should be prompt, discreet and effective, and should decide **within 10 working days**.

The DD: R&I decides whether he/she will make any material available to the SRIC before the meeting. The DD: R&I and RIO decide on the material to be made available and the secretariat ensures that the SRIC receives it in time. The SRIC and attorney review materials available to them, draw from knowledgeable sources and collect relevant documentation if necessary, to empower them for the assessment.

The DD: R&I decides whether the alleged will address the SRIC or whether the evidence and documentation are adequate. The alleged is notified of the time and place of the meeting and should avail him/herself should the SRIC deem it necessary. If a decision is made that the alleged should address the SRIC, he/she is called to the meeting.

The meeting begins with the DD: R&I welcoming all and allowing time for introductions if necessary. The confidentiality of the matter is emphasised and each member's role during the assessment explained to them.

It is explained that the anonymity of the alleged will be respected, and he/she will not be called to present his/her case if the evidence is clear. If the SRIC deems it necessary to call the alleged to clarify facts it could be allowed, but anonymity must be respected. Note: *SOP for whistleblowing pertaining to research* (SOP_Ethics_1.8, NWU, 2016) should be followed to protect the anonymity if it is a case of whistleblowing.

The DD: R&I with the support of the RIO presents the case in detail to the SRIC with the necessary evidence and documentation at hand.

An important initial responsibility of the SRIC is to make sure that the allegation(s) was/were made in good faith.

Should the SRIC deem it necessary, the alleged is called to present his/her allegation and evidence and provide clarity.

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

The alleged is called to respond to the allegation made against him/her. The researcher is to cooperate with fact-finding during the assessment.

- The DD: R&I makes it clear that this is a formal intra-faculty research integrity assessment and that the researcher is not seen as guilty unless evidence proves otherwise.
- The DD: R&I presents the allegation to the researcher with a description of the evidence.
- The researcher is allowed time to respond to the allegation(s) and presents his/her side of the case.
- The researcher is excused from the meeting.

The SRIC continues with their discussion with all evidence at hand, having heard the alleged side of the story and comes to some form of a summarised version of the allegation of plagiarism and decides on a finding of *possible plagiarism*. They must come to a decision that there is sufficient evidence to justify a formal investigation by the office of the Registrar.

If a finding of a possible breach in RI/RCR through an act of plagiarism is made, the SRIC decides to escalate the case to the office of the Registrar for a *formal investigation* into plagiarism.

Important note: If one of the actions directly affects a study, the REC should immediately be notified in writing by the RIO that the study needs to be suspended or terminated, etc.

The DD: R&I with the help of the RIO formulates a letter to the alleged explaining the allegation, the escalation process as well as the future process. In the letter the person is referred to the NWU Policy on *Academic Integrity* for further information.

The DD: R&I with the support of the RIO formulates a second letter addressed to the office of the Registrar to escalate the case to him/her.

An appointment is made with the ED where the DD: R&I with the support of the RIO presents the case and the two letters to the ED. If the ED concurs with the findings and future actions suggested by the SRIC, he/she co-signs the necessary letters with the DD: R&I.

A meeting is called by the DD: R&I with the researcher in the presence of the appropriate RD and SD in which the researcher resides, as well as the RIO. The DD: R&I discusses the letter with the researcher.

Points of discussion for the meeting:

- Findings of a potential breach in RI/RCR through the act of plagiarism.
- The process of escalation to the office of the Registrar.
- The future process.

The alleged signs the letter.

The DD: R&I with the support of the RIO verbally informs the person that made the allegations of the findings and outcome of the formal intra-faculty research integrity assessment.

The DD: R&I sets up a meeting with the Registrar to formally hand over the letter of escalation and supporting documents of proof of potential plagiarism and explain the case. The ED and RIO join the meeting.

The DD: R&I with the support of the RIO keeps track of the progress made with the case by the Registrar's office.

Once the case has been finalised the DD: R&I sign the case off.

The RIO closes the record.

9.3.2.2.2 Preliminary intra-faculty research integrity investigation into possible cases of fabrication and/or falsification

A case number is allocated from the Research Integrity Register for a case of fabrication and/or falsification.

A risk management-based approach will be used.

The preliminary intra-faculty research integrity investigation is handled by the DD: R&I as chairperson, the SRIC and specific ad hoc members (independent consulting attorney and two independent experts). The ad hoc members are identified by the DD: R&I and the RIO. The DD: R&I and RIO 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. *Confidentiality* and *due process* will be maintained throughout the process. All attempts should be made to mitigate any adverse effects on participants.

The Standing Research Integrity Committee (SRIC) consists of:

- Chairperson: DD: R&I.
- Research Integrity Officer.
- Head of the Ethics Office for Research, Training and Support.
- An elected Research Director knowledgeable in the management of RI for a term of three years.
- Secretariat.

Ad hoc members are:

- An independent consulting attorney knowledgeable about research integrity matters.
- Two independent experts (Experts in the required issue at hand).

The DD: R&I notifies the alleged researcher in writing that an allegation has been made against him/her. A brief description of the allegation is provided, and a time and place provided to appear before the SRIC (**Note: From here on under 9.3.2.2.2 mention of SRIC includes the ad hoc members**).

The DD: R&I with the support of the RIO will as soon **as possible but not later than 15 working days** after receiving the allegation, call a meeting with the SRIC and appointed ad hoc members.

The DD: R&I with the support of the RIO provides the two independent experts with the allegation and the necessary documentation and/or data to launch an independent investigation based on the documentation and/or data and each submit a written report **within 10 working days** and ready for the first meeting with the SRIC and the ad hoc members.

The DD: R&I and RIO decide on what material will be made available to the SRIC before the meeting. The secretariat ensures that the SRIC receives the material and two independent expert reports on time. The SRIC reviews materials and reports available to them, draws from knowledgeable sources, and collects relevant documentation if necessary, to empower them for the investigation.

The DD: R&I decides whether the alleged will address the SRIC or whether the evidence, documentation and expert reports are adequate. The alleged is notified of the time and place of the meeting and should avail him/herself should the SRIC deem it necessary. If a decision is made that the alleged should address the SRIC, he/she is called to the meeting.

The meeting begins with the DD: R&I welcoming all and allowing time for introductions. The confidentiality of the matter is emphasised and each member's role during the assessment explained to them.

It is explained that the anonymity of the alleged will be respected, and he/she will not be called to present his/her case if the evidence is clear. However, if the SRIC deems it necessary to call the alleged to clarify facts it could be allowed but anonymity must be respected. Note: *SOP for*

whistleblowing pertaining to research (SOP_Ethics_1.8, NWU, 2016) should be followed to protect the anonymity if it is a case of whistleblowing.

The DD: R&I with the support of the RIO, presents the case in detail to the SRIC and ad hoc members with the necessary evidence, documentation and/or data and reports at hand.

An important initial responsibility of the SRIC is to make sure that the allegation(s) that are made, is made in good faith.

Should the SRIC deem it necessary the alleged is called to present his/her allegation and evidence and provide clarity.

The independent consulting attorney and two independent expert members provide their input.

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

The alleged is called to respond to the allegation made against him/her. The researcher is to cooperate with fact-finding during the assessment.

- The DD: R&I makes it clear that this is a preliminary intra-faculty research integrity investigation into potential fabrication and/or falsification and that the researcher is not seen as guilty unless proof of evidence shows the opposite.
- The DD: R&I presents the allegation to the researcher with a description of the evidence and reports.
- The researcher is allowed time to respond to the allegation(s) and presents his/her side of the case.
- The researcher is excused from the meeting.

The SRIC continues with their discussion with all evidence and reports at hand, having heard the alleged side of the story and comes to some form of the summarised version of the allegation and decide on a finding of possible fabrication and/or falsification. They must come to a decision that the allegation proves to have *substance* and *defensibility* and a finding of a *breach or no breach in RI/RCR through an act(s) of fabrication and/or falsification*. The SRIC should be prompt, discreet and effective, and should decide on the way forward.

If a *finding of a breach in RI/RCR through an act of fabrication and/or falsification* is made, the SRIC decides to escalate the case to the office of the Registrar for the second phase of a formal investigation into fabrication and/or falsification.

Important note: If one of the actions directly affect a study, the REC should immediately be notified in writing by the RIO that the study needs to be suspended or terminated etc.

The DD: R&I with the help of the RIO formulates a letter to the alleged explaining the allegation, the escalation process as well as the future process. In the letter the person is referred to the *NWU Policy on Academic Integrity* for further information.

The DD: R&I with the support of the RIO formulates a second letter addressed to the office of the Registrar to escalate the case to him/her and indicate the proved breach in RI/RCR through an act of fabrication and/or falsification. Note: It should be clear that the experts confirm the allegation made by the alleged.

An appointment is made with the ED where the DD: R&I with the support of the RIO presents the case and the two letters the ED. If the ED concurs with the findings and future actions suggested by the SRIC, he/she co-signs the letter with the DD: R&I.

A meeting is called by the DD: R&I with the researcher in the presence of the appropriate RD and SD, as well as the RIO. The DD: R&I discusses the letter with the researcher.

Points of discussion for the meeting:

- Findings of a potential breach in RI/RCR through the act(s) of fabrication and/or falsification.
- The process of escalation to the office of the Registrar.
- The future process.

The alleged signs the letter.

The DD: R&I with the support of the RIO verbally informs the person that made the allegations of the findings and outcome of the preliminary intra-faculty investigation.

The DD: R&I sets up a meeting with the Registrar to formally hand over the letter of escalation and supporting documents of proof of fabrication and/or falsification and the reports of the independent experts and explain the case. The ED and RIO join the meeting.

The DD: R&I with the support of the RIO keeps track of the progress made with the case by the Registrar's office.

Once the case has been finalised the DD: R&I signs the case off.

The RIO closes the record.

9.3.2.3 Implementing the outcomes

The system set in place is to ensure the execution of all the actions according to the described process and set timelines with an effective feedback cycle through the required reporting system.

Transparency and procedural fairness are important.

The DD: R&I and RIO close the case and send a final notice to the ED.

9.3.2.4 Appeals process

A researcher could activate an appeals process.

The researcher submits a written request to the DD: R&I asking the SRIC and the ED to reconsider its decision.

The appeal must fulfil the requirements stipulated in the Research Integrity SOP_Research Integrity_4 for the management of the research integrity appeals process.

The appeal is handled according to the Research Integrity SOP_Research Integrity_4 for the management of the research integrity appeals process.

9.3.2.5 Reporting and record-keeping

A register for research integrity cases is kept in the FHS.

A number is allocated to each registered case.

A factual and objective mandatory report must be written after either the *formal intra-faculty research integrity assessment (plagiarism)* or the *preliminary intra-faculty research integrity investigation (fabrication and/or falsification)* and updated with a closing report at the end of the process. The RIO will be responsible for the report and approved by the DD: R&I.

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.
- Full names and surname of the researcher.
- Title of the research study (if applicable).
- Ethics number of the research study (if applicable).
- Personnel/student number.
- Date of the transgression(s).
- A detailed description of the misconduct.
- The evidence summarised (what available evidence and record(s)).
- The process followed.

- Finding(s) that indicate(s) the potential breach/no breach.
- Actions the FHS is taking to address the potential breach in research integrity.
- Name of the RD.
- A final copy of the report must be stored in the office of the DD: R&I.

The following should be included in the closing report:

- Name of the institution.
- Name of the faculty.
- The research entity in which the researcher resides.
- Full names and surname of the researcher.
- Name of the RD.
- Final actions taken by the Registrar.
- Date of conclusion of the case.
- Summary of the conclusion process and comments from the RD and mentor.

Note: The SRIC and ad hoc members will be allowed to respond to the draft report before finalisation and stored for record purposes.

10 SUMMARIZED PROCESSES

Diagram 1: Structure for the management of research misconduct

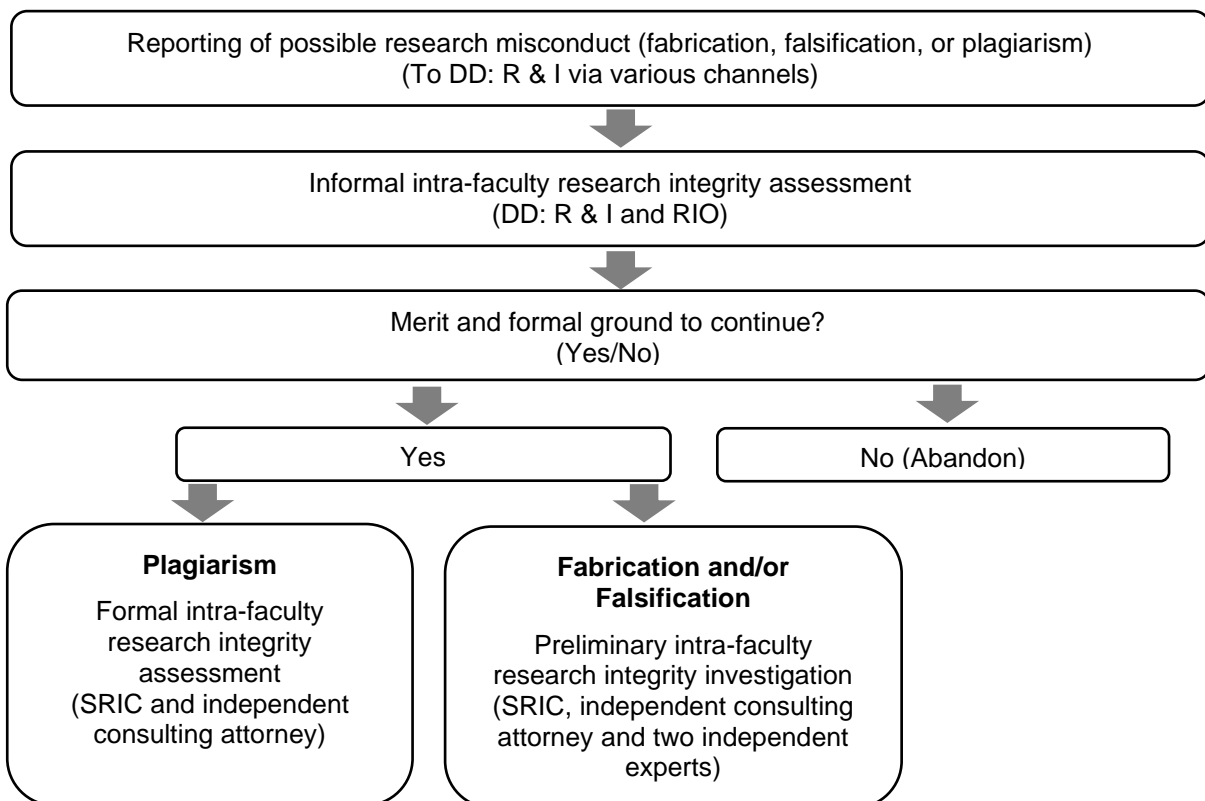


Diagram 2: Processes and procedures for the management of research misconduct (plagiarism)

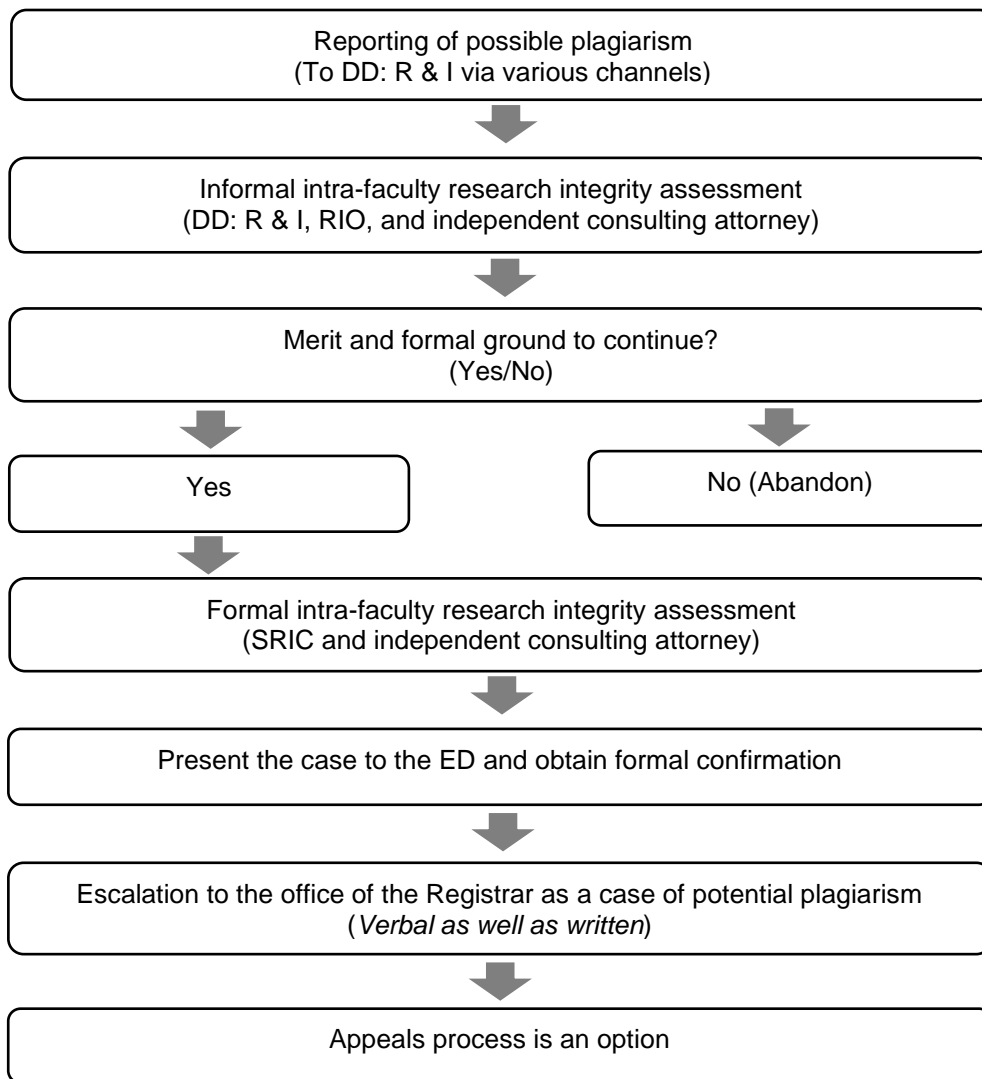
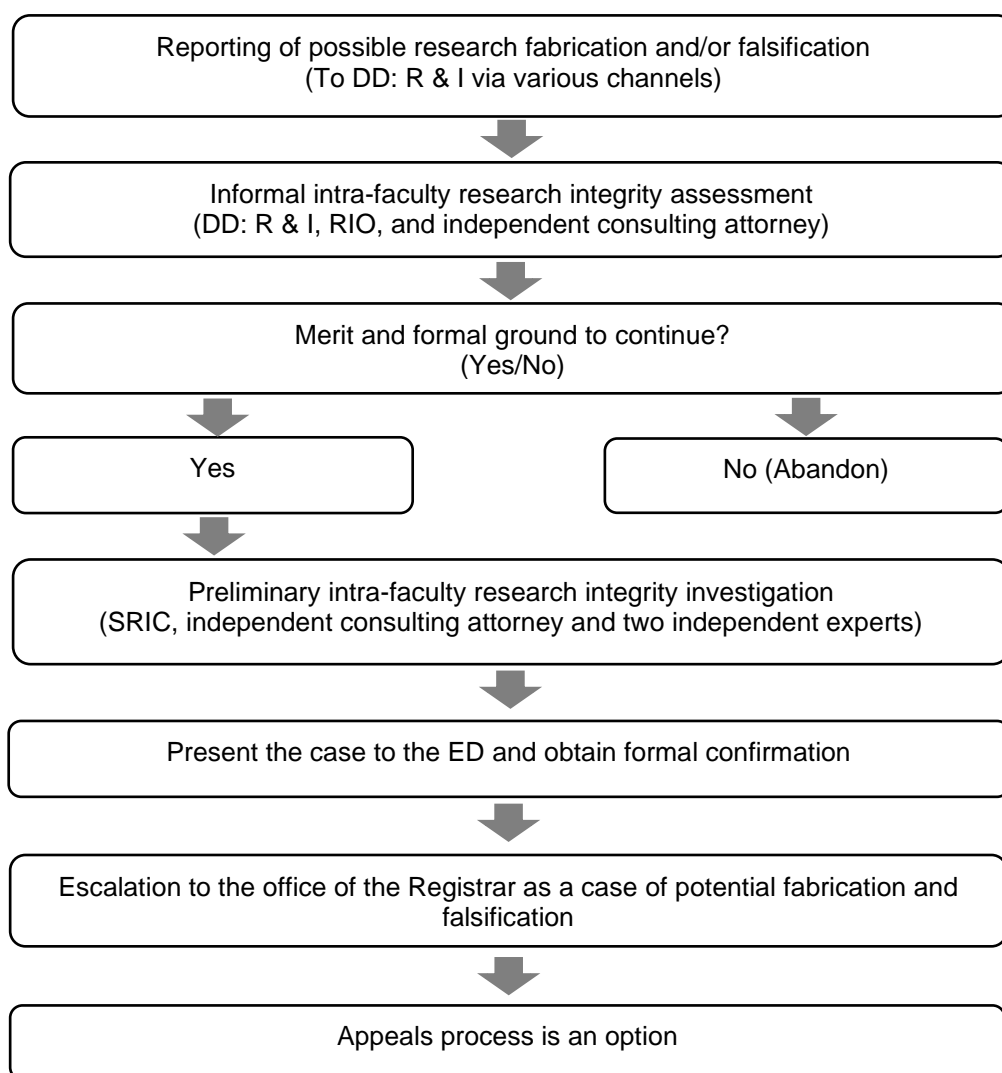


Diagram 3: Processes and procedures for the management of research misconduct (fabrication and falsification)



11 REFERENCE DOCUMENTS

SOP for complaint management (SOP_Ethics_1.5, NWU, 2018).

SOP for whistleblowing pertaining to research (SOP_Ethics_1.8, NWU, 2018).

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_Research Integrity_2, NWU, 2020)

SOP for the management of the research integrity appeals process (SOP_Research Integrity_4).

SOP for ethics committees of the University of the Western Cape.

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_Research Integrity_3 Management of Research Misconduct, 16 February 2021.

File reference: