

**LIMPOPO PROVINCIAL RESEARCH ETHICS COMMITTEE (LPREC)**

**Standard Operating Procedure for Whistleblowing pertaining to Research**

**1. Purpose**

1.1 The purpose of the SOP is to define Whistle-blower and describe the procedures for

 the consideration of “whistle-blowing” regarding research or a researcher, as

 accepted by resolution of the Limpopo Provincial Research Ethics Committee.

**2. Scope of this SOP**

* 1. The SOP is intended to inform and guide complainants and members of the Limpopo Provincial Research Ethics Committee (LPREC) in its deliberations. It gives effect to the Ethics Guidelines of the Department of Health (2015), especially section 4.5.1.12.
	2. This SOP should be interpreted within the Terms of Reference of the LPREC and other SOPs that may be relevant.
	3. The SOP deals primarily with, but is not limited to, misconduct, fraud, maladministration and non-adherence to approved research procedures, guidelines or policies.
	4. It is not the objective of this SOP to replace any other policies or procedures of the Limpopo Provincial Government. This SOP should be read in conjunction with the general LPREC SOP and other relevant government policies.

**3. Definitions**

3.1. Whistle-blower: Any person or organisation that formally raises a complaint regarding

 research or researcher within the mandate of the LPREC. A Whistle-blower may be

 but is not restricted to an employee of the government, its affiliated institutions,

 professional societies, affected organisations, and members of the public.

3.2 Research: Any research that the LPREC considered, approved, rejected, or that is

 within the remits of the LPREC as captured in its Terms of Reference.

3.3 Researcher: Any person who does research that is within the remits of the LPREC

 as captured in its Terms of Reference.

3.4 Research or researcher misconduct: That research activity or conduct that the

 LPREC considers to be misconduct, which include but is not restricted to the

 following:

3.4.1 Failure to obtain ethics approval prior to commencing with research

3.4.2 Failure to obtain ethics approval for amendments to research

3.4.3 Conducting research without a valid ethics approval certificate

3.4.4 Conducting research outside the terms and stipulations of the documents considered by the ethics committees in its approval of the study

3.4.5 Failure to suspend research activities when so instructed by the ethics committee

3.4.6 Fabrication, falsification, plagiarism in proposing, performing, reviewing or reporting of research

3.4.7 Substantive deviation from or failure to adhere to the approved study protocol without prior formal approval from the ethics committee

3.4.8 Any misrepresentation of data and/or interests and/or involvement

3.4.9 Any falsification of credentials

3.4.10 Any deception in documentation or in publication

3.4.11 A false claim that ethics approval would have been granted

3.4.12 Piracy of materials

3.4.13 Failure to follow accepted procedures to exercise due care in avoiding unreasonable harm or discomfort to participants or research personnel

3.4.14 Failure to obtain voluntary and informed consent in writing and verbal unless this requirement has been waived by the ethics committee.

3.4.15 A breach of confidentiality

3.4.16 Negligent management of data security.

3.4.17 Conducting research in a way that is malicious or harmful to research participants

3.4.18 Conducting research that is negligent as researcher and/or professional

3.4.19 Conducting research that is in violation of standard codes and regulations pertaining to the researcher’s profession

3.4.20 Any research activity that is in violation of the South African Constitution or in violation of a South African law.

**4. Responsibilities**

The LPREC has the responsibility to process complaints, establish prima facie evidence of misconduct, and formulate an opinion on the nature of the ethical misconduct, as well as identify potential mitigating or aggravating factors, and corrective actions. When there is prima facie evidence of a serious transgression, the matter must be referred to the DG for the issue of a warning, and/or instituting disciplinary and/or corrective procedures.

**5. Procedures**

5.1. Complaints should be communicated in writing to the secretariat of the LPREC who shall inform chairperson.

5.2. The secretariat may obtain further information from the complainant, researcher, or other person after receiving the complaint.

5.3. The chairperson and the secretariat may consult confidentially with experts in the field.

5.4. The LPREC will consider the complaint and obtain further information as it may see fit.

5.5. The LPREC will take all reasonable steps to prevent the disclosure of the complainant’s identity, unless there is compelling reason for its disclosure.

5.6. The LPREC may invite the researcher to respond to the complaint in writing and/or at a meeting.

5.7. The LPREC will formulate an opinion on the nature of the alleged ethical misconduct.

5.8. Once sufficient information has been obtained, the LPREC will vote on whether there is prima facie evidence of a transgression;

5.9. If a simple majority vote supports prima facie evidence of a transgression, the LPREC will identify potential mitigating or aggravating factors, as well corrective actions.

5.10. If a simple majority vote supports prima facie evidence of a transgression, a letter will be written to Director General (DG). The letter will describe the nature of the transgression, potential mitigating and aggravating factors, and suggested corrective actions. The letter may also contain suggestions regarding disciplinary action.

5.11. The LPREC will inform the researcher that a letter as described in 5.9 has been sent.

5.12. The LPREC will not participate in disciplinary processes other than providing the available documentation in the matter, or expressing an opinion or explanation on whether a specific action is unethical.

5.13. The chairperson may meet the DG for purposes of clarification and procedural guidance.

5.14. All members of the LPREC must keep information regarding the complaint and its processing confidential.