

Title	Research Ethics: Standard Operating Procedures
Date of Approval	17 October 2022
Version no	1
Web address	https://www.cut.ac.za/research-ethics-and-integrity
Compiled by	Mr Malesela Matlawe
Reviewed and approved by	Research Ethics and Integrity Committee
Distributed to	Research Ethics and Integrity Committee members, Assistant Deans, Faculty Research Ethics Reviewers, Faculty Boards, Faculty Researcher and Innovation Committees and Researchers
Document History:	
1- 31 March 2022	Compilation of Document
17 October 2022	Document approved by Research Ethics and Integrity Committee
28 September 2023	Submission to URIC for final approval

Standard Operating Procedures: Human Research Ethics Committee	1
1 Background	1
2 Framework for Governance of Ethical Research Conduct at The Central University of Technology (CUT)	1
2.1 Policies and Guidelines of the Human Research Ethics Committee	1
3. Purpose of The Human Research Ethics Committee Standard Operating Procedures	2
4. Scope of the Research Ethics Committee	3
5. Membership	3
5.2 Membership Composition.....	4
5.3 Member Participation	5
5.3.1 Chairperson and Deputy Chairperson	5
5.4 Appointment and Re-appointment of Members	5
5.5 Roles and Responsibilities.....	6
6 Structural Procedures of CUT-HREC and the FRIC's	6
7. Submission and Processing Applications.....	7
8 Complaints Brought Against CUT-HREC and FRIC By Complainants.....	8
8.1 URIC procedure on how to deal with a formal complaint:	8
8.2 Procedures for the Investigation of Complaints in The Respect of The Conduct of an Initially approved Research Project.....	8
8.3 Suspension of a Research Study	9
8.4 Procedures Pertaining to The Handling of Complaints and Allegations of Serious Research Misconduct	10
8.5 Procedure to lodge an appeal:.....	12
9. Conflict of Interest.....	13
9.1 Procedures for dealing with conflict of interest.....	13
10. Confidentiality	13
11. Meeting Procedures and Decision-Making	13
12. Conducting Research on Campus.....	14
12.1 Institutional Permission	14
12.2 External Reviews of Applications Not Affiliated to CUT	15
13. Adoption of Amendments to Standard Operating Procedures	15
14. Accreditation and Auditing of the CUT-HREC.....	15
15. Data Management.....	15
16. Whistleblowing.....	15
References	16

Standard Operating Procedures: Human Research Ethics Committee

1 Background

The establishment and operation of the Central University of Technology Human Research Ethics Committee (CUT-HREC) is guided by various framework documents that have been approved by the Central University of Technology's (CUT) University Research Innovation Committee (URIC). CUT-HREC reports to the URIC and is mandated to provide broad leadership on research ethics and oversight functioning of the four Faculty Research Integrity Committee's (FRIC's).

2 Framework for Governance of Ethical Research Conduct at The Central University of Technology (CUT)

The (URIC) serves as the governing body for all ethics committees as stipulated in the Terms of References (ToR). As the governing body responsible for oversight, URIC does not review research proposals and therefore has no authority to issue ethical clearance. The CUT-HREC has the mandate to review all research proposals, and, if the standards are met, CUT-HREC may approve proposals with or without additional conditions.

The CUT-HREC is also committed to the broad ethical principles and key norms and standard as set by the Department of Health (DoH) for the ethics review in all disciplines of research proposals involving human participants discussed in chapter 2 and 3 of the DoH 2015 guidelines. It is the responsibility of the reviewers to familiarize themselves with these principles.

2.1 Policies and Guidelines of the Human Research Ethics Committee

All Research to be conducted at CUT must be reviewed by an approved Research Ethics Committee that is registered with National Health Research Ethics Council (NHREC). The framework documents include, but are not limited to the following, and should be read in conjunction with one another if the context requires:

- Department of Health (DoH), 2015: Ethics in Health Research – Principles, Processes and Structures.
- National Health Act, Act 61 of 2003
- The Constitution of South Africa, Act 108 of 1996
- The Children's Act, Act 38 of 2005
- Protection of Personal Information Act, 2021

- Singapore Statement on Research Integrity
- CUT Research and Integrity Framework
- The Norwegian National Research Ethics Committees, General Guidelines for Research Ethics (2014)
- Guidelines for Research Ethics in the Social Sciences, Humanities, Law and Theology (2015)
- Terms of Reference: Publications and Integrity
- ARIN Newsletter
- ASSAf- Code of Conduct for Researchers
- The Belmont Report 1979
- Terms of Reference for the CUT-HREC
- Policy Pertaining to the responsible conduct of research at CUT
- Publications and Integrity: Terms of Reference
- Research Ethics and Integrity Policy Framework
- National Health Act 61 of 2003

As well as other relevant declarations and statements in the area of Research Ethics, but not limited to the following documents and guidelines, to ensure compliance with national and international practices, including POPIA, through the Terms of Reference, relevant Standard Operating Procedures (SOPs), the Code of Conduct for Researchers and the Research Ethics Policy functions which can be accessed at <https://www.cut.ac.za/research-ethics-and-integrity>.

3. Purpose of The Human Research Ethics Committee Standard Operating Procedures

- 3.1 To guide the activities of the CUT-HREC in a systematic and consistent manner.
- 3.2 To govern and coordinate ethics-related activities and principles in research and related structures to ensure compliance with applicable national and international standards.
- 3.3 To contribute to the safeguarding of the rights, dignity, safety, and well-being of the participants in research conducted by CUT researchers.
- 3.4 To provide independent, competent, and timely reviews of the ethical risks related to research proposals and can recommend measures aimed at avoiding or minimizing these risks.

- 3.5 To act in the interest of potential research participants and affected communities, whilst considering the interest and needs of the researchers.
- 3.6 To maintain the records of all research proposals, protocols, reviewer reports, emails and correspondence that have been considered in ethical terms, including the approved Research Ethics Committees (RECs) of other universities submitted to the CUT-HREC for ratification, endorsement, or commentary.
- 4. Scope of the Research Ethics Committee**
- 4.1 All research undertaken by students or staff of CUT involving but not limited to human participants excluding animals, must be submitted for review by the CUT-HREC. This is irrespective of the level of ethical risk and vulnerability of the participants.
- 4.1 When reviewing applications, special attention must be given to vulnerable groups. This includes, but is not limited to the following, poor and marginalised, below the age of 18, people with disabilities, detained in prison, refugee camps or in hospital, people attending a clinic or vulnerable due to occupation (sex workers).
- 5. Membership**
- 5.1 As per National Health Research Ethics Council (NHREC) National Guidelines 2015; members of CUT-HREC are appointed for a period of three (3) years.
- 5.2 Members may be re-appointed for a second and subsequent third (3rd) three (3) year term in succession.
- 5.3 The CUT-HREC must represent the research communities it serves within the university and increasingly reflect the demographic profile of the population of the Republic of South Africa as best as it can.
- 5.4 The CUT-HREC must be inclusive of both genders, male and female, however, no gender should occupy more than 70% (seventy percent) of the positions.
- 5.5 The CUT-HREC must have at least nine (9) members to be constituted, including the Chairperson of CUT-HREC.
- 5.6 The CUT-HREC must have nine (9) members present to form a quorum.
- 5.7 The Director of Research Development (RD) appoints members of the broader community.

5.2 Membership Composition

Members should have the appropriate qualifications and experience to evaluate the ethical aspects of research. The CUT-HREC membership should be independent, interfaculty-oriented, and multidisciplinary. The CUT-HREC should consist of the following members:

5.2.1 *Chairperson*

5.2.2 *Deputy Chairperson*

5.2.3 *Administrator/Coordinator to administrate the ethics processes.*

5.2.4 *Healthcare (such as medical practitioner, psychologist, social worker, or nurse)*

5.2.5 *Experience in qualitative research methodologies*

5.2.6 *Experience in quantitative research methodologies*

5.2.7 *Expertise in statistics*

5.2.8 *Expertise in research ethics*

5.2.9 *Legally qualified member*

5.2.10 **The Senior Director:** Research Development is an *ex officio* member of the committee.

5.2.12 Where appropriate, CUT-HREC may enquire assistance from experts provided they do not have any conflict of interest.

5.2.13 URIC approves of all CUT-HREC members. Members must sign a nondisclosure agreement to ensure that knowledge and information obtained by CUT-HREC members remains confidential.

5.2.14 All new members will receive formal induction and introduction into the CUT-HREC. All new members will receive training, with the experienced members of the CUT-HREC providing guidance which may be required.

5.2.15 The CUT-HREC members must complete ethics training sessions to keep track with the latest developments in the field of Research Ethics. All members must complete an accredited ethics content course and provide proof of completion to the Secretariat of CUT-HREC. This is to be renewed every 3 years.

5.2.16 All new members will receive a copy of the following documents once they have been formally inducted into the CUT-HREC committee: Letter of Appointment, The

University Ethics Code of Conduct, CUT-HREC Terms of Reference, CUT-HREC Standard Operating Procedures, CUT Code of Conduct, A Confidentiality Agreement (A signed copy must be returned to the Secretariat), National Guidelines 2015 and all other relevant documents.

- 5.2.17 The proposed membership for the following year will be forwarded to the URIC for notification.

5.3 Member Participation

5.3.1 Chairperson and Deputy Chairperson

- 5.3.1.1 The CUT-HREC chairperson will be elected at the first meeting of the year by members of the CUT-HREC. The Chairperson will serve a term of 1 (one) calendar year and may be re-elected annually for a maximum period of 5 (five) years in succession.

- 5.3.1.2 The Deputy Chairperson will be elected by the members and is expected to assist the Chairperson with responsibilities and inter-meeting matters as well as to step into the Chairperson role when necessary.

- 5.3.1.3 Once the Chairperson and Deputy Chairperson are elected, their respective identities must be reported to the URIC for notification.

5.4 Appointment and Re-appointment of Members

- 5.4.1 The appointment and reappointment of CUT-HREC members are subject to approval by the Chairperson.

- 5.4.2 If a member (including the Chairperson or Deputy Chairperson) is absent for four (4) consecutive meetings without apology, his/her absence must be addressed by the Chairperson or Deputy Chairperson in writing to the specific member.

- 5.4.2 The Chairperson has the authority to make a recommendation, in this context, has authority to remove the member under non-attendance.

- 5.4.3 The Chairperson may propose another representative for the remainder of the disqualified member's term. This appointment must be approved by URIC.

- 5.4.4 Members who wish to resign from the CUT-HREC must do so in a written submission to the Secretariat and the Chairperson.

- 5.4.5 All new members must sign a non-disclosure agreement and any other relevant documentation.

5.5 Roles and Responsibilities

- 5.5.1 The CUT-HREC will function according to this set of Standard Operating Procedures (SOP) formulated in this document and under CUT-HREC.
- 5.5.2 The CUT-HREC must be informed on all aspects of a research protocol that are relevant to the deciding whether the protocol is accepted or not.
- 5.5.3 The CUT-HREC must ensure that research conducted in the social, educational and management sciences by the university is in accordance with the local and international legislature.
- 5.5.4 The CUT-HREC may review all protocols for projects of other organisations that collaborate with the university and any affiliated applicants/ external applications subject to a fee to be decided upon by the CUT-HREC.
- 5.5.5 The CUT-HREC will view amendments following the same process of the original review.
- 5.5.6 The CUT-HREC must notify applicants in writing regarding their decisions within twenty (20) working days after the monthly meeting.
- 5.5.7 CUT-HREC will review applicant's annual progress reports annually. All progress reports must be submitted yearly on the Clarivate Converis Ethics system before 31 December for each year.
- 5.5.8 Amendments to approved applications from reviewers should be reported and ratified at CUT- HREC. Such amendments will need to be at the faculty level before the CUT-HREC sees the amended approved application.

6 Structural Procedures of CUT-HREC and the FRIC's

Research Ethics is managed by the CUT-HREC. FRICs, as a sub-committees assist CUT-HREC to manage research ethics at a faculty level.

a) FRIC reports directly to CUT-HREC

b) CUT-HREC reports to URIC

- 6.1 All FRIC's are to fully comply with the CUT-HREC SOP as they will be held responsible as they are part of the CUT-HREC.
- 6.2 FRIC must keep a good record of their meetings, decisions for auditing purposes in terms of this SOP.

- 6.3 All research proposals/protocols must first be evaluated and approved for scientific validity by the relevant FRIC prior to applying for ethics approval.
- 6.4 The reviewers of the FRIC make provisional recommendations that will be discussed and ratified at the CUT-HREC.
- 6.5 The CUT-HREC secretariat will send a monthly spreadsheet to the FRICs for notification of approved protocols.
- 6.6 FRIC will review all Honours and Postgraduate Diploma applications and is allowed to grant ethical clearance in line with the CUT-HREC SOP and TOR
- 6.7 FRIC must send the CUT-HREC a spreadsheet of all the approved Honours and Postgraduate Diploma applications for ratification by CUT-HREC.
- 7. Submission and Processing Applications**
- 7.1 An application for ethical review must be captured by an applicant or researcher on the online Converis Ethics System. Applicants can access the system by clicking on the following link:
<https://satn.converis.clarivate.com/converis/mypages/overview>
- 7.2 The Supervisor must approve of the application on the system before submitting it to the FRIC. Should there be any outstanding documentation, the FRIC will return the application to the Supervisor, who will *laisse* with the student.
- 7.3 The applicant must attach information, consent, and any other relevant documents onto the system.
- 7.4 The submission deadlines and meeting dates of the CUT-HREC will be published on the CUT-HREC website and the Converis Ethics System.
- 7.5 Applicants must track the status of their application on the Converis Ethics System.
- 7.6 The CUT-HREC Secretariat will inform applicants in writing about the outcome of their application within 20 working days after the CUT-HREC meeting has taken place. The applicant will be informed should there be any delays.
- 7.7 For Honours and Postgraduate Diplomas, students must submit their application to their respective FRIC and follow FRIC process and procedures.

8 Complaints Brought Against CUT-HREC and FRIC By Complainants

Should URIC receive a complaint about the review processes of the CUT-HREC or FRICs (concerning the way researchers and their research projects have been considered and dealt with, the rejection or delayed consideration of a research proposal, or any other relevant matter), URIC will attempt to facilitate communication between the relevant parties to settle the complaint without a formal investigation, if possible. Should this fail, then a formal complaint may be lodged with URIC.

8.1 URIC procedure on how to deal with a formal complaint:

Should URIC receive a complaint about the review processes of the CUT-HREC or FRIC's (concerning the way researchers and their research projects have been considered and dealt with, the rejection or delayed consideration of a research proposal, or any other relevant matter), URIC will attempt to facilitate communication between the relevant parties to settle the complaint without a formal investigation, if possible. Should this fail, then a formal complaint may be lodged with URIC.

8.1.1 URIC will determine whether there has been adequate communication between the complainant and the CUT-HREC.

8.1.2 The chairperson of the URIC may convene a meeting between the complainant and the Chair of the CUT-HREC /FRIC if the complainant is not *anonymous*. The Chair may invite members of the URIC and/or an expert in the subject under discussion to the meeting.

8.1.3 If necessary, URIC may consult with relevant academic structures such as, heads of departments, deans, etc if necessary.

8.1.4 URIC will inform the complainant about the outcome of the deliberations and possible recommendations. The complainant will also be informed of the possibility of escalating the complaints to the NHREC should he/she find the outcome of deliberations by URIC unsatisfactory.

8.2 Procedures for the Investigation of Complaints in The Respect of The Conduct of an Initially approved Research Project

In instances where a study is conducted after CUT-HREC grants ethical clearance, but a complainant reveals that further investigation and review will be required, the following procedure is recommended:

- 8.2.1 URIC will invite the researcher and other relevant parties or colleagues of the researcher, if applicable, to a meeting with the URIC and provide them with an opportunity to tender reasons as to why the research project should not be discontinued or why ethical clearance should not be withdrawn.
- 8.2.2 Reconsider the initial research proposal and offer the principal researcher the opportunity to provide further information about the research that is being conducted.
- URIC will, upon conclusion of the investigation as indicated above, arrive at a final decision, which may either revise or re-confirm the ethical clearance that was initially granted for the research project. This decision may include any of the following:
- 8.2.3 The withdrawal of approval, resulting in the suspension of the research project.
- 8.2.4 Setting out amendments to be made to the original research proposal or the conduct of the research.
- 8.2.5 Allow the research project to continue without any amendments. The ethical clearance remains unchanged.
- 8.2.6 URIC will inform the researcher in writing of the decision and explain the reasons for any recommendations.
- 8.2.7 In some instances, it may be necessary to inform researchers that the research they have been participating in has been modified or discontinued.
- 8.2.8 It is the responsibility of the researcher to send a notification to inform the participants of any new developments. And send proof of such notification to CUT-HREC.
- 8.3 Suspension of a Research Study**
- 8.3.1 CUT-HREC, under the guidance of its chairperson, will issue an urgent response if there is the possibility of harm to researchers, participants, or any other person.
- 8.3.2 An immediate demand to suspend a study may be necessary while concerns are being adequately investigated. In other cases, prompt action may be required to rectify or remove the cause of concern. As prescribed in the (DOH 2015). CUT-HREC will oversee the process to ensure that steps are taken in accordance with the procedures.

- 8.3.3 Having determined the **urgency of the need for action**, the Chairperson, in consultation with members of CUT-HREC, should take any, and possibly all, of the following steps in accordance with the circumstances present in respect of each complaint.
- 8.3.3.1 Compile a clear record, with fully sets out the origin and nature of the complaint.
- 8.3.3.2 Lodge an enquiry to collect further information from all parties involved.
- 8.5.3.3 Convene an urgent CUT-HREC meeting if necessary.
- 8.3.3.4 Confer with the highest level of management and authority at CUT, if necessary.
- 8.4 Procedures Pertaining to The Handling of Complaints and Allegations of Serious Research Misconduct**
- 8.4.1 The following may be reported to CUT-HREC:**
- 8.4.1.1 Complaints and concerns about the manner researchers conduct research or fulfil their responsibilities.
- 8.4.1.2 Questions about culpability for misconduct
- 8.4.1.3 Misleading reports published by researchers.
- 8.4.1.4 Allegations of misconduct or fraud
- 8.4.2 The Following actions constitute serious research misconduct:**
- 8.4.2.1 The fabrication, falsification, and plagiarism of any research, or any kind of deception in proposing, carrying out, or reporting the results of any research.
- 8.4.2.2 Deliberate, dangerous, or negligent deviations from accepted practice in carrying out research. This includes: the failure to follow approved protocols, resulting in unreasonable risk or harm to participants, animals, or the environment, and the facilitating of misconduct through collusion in or concealment of such actions by others.
- 8.4.2.3 Failure to obtain informed consent from all research participants.
- 8.4.2.4 Any breach of confidentiality as the context may require
Participating in deceptive research processes.
- 8.4.2.5 Misrepresentation or falsification of credentials. It is specifically recorded that misconduct does not include honest error or honest differences in the design,

execution, interpretation, judgment and/or evaluation of research methods, or misconduct (including gross misconduct) unrelated to the research process.

8.4.3 If the CUT-HREC receives a complaint or an allegation amounting to serious misconduct as indicated in the CUT Research Ethics and Integrity Policy Framework, the CUT-HREC and, therefore, the CUT should ensure the following:

8.4.3.1 That all research participants receive extensive protection.

8.4.3.2 That the particulars linked to a complaint, or an allegation shall be kept confidential should it prove to be without any grounds.

8.4.3.3 That whistle-blowers receive appropriate protection and anonymity, if so required, according to the whistleblowing policy of the CUT.

8.4.3.4 That appropriate action is taken in respect of those who are the subject of any complaints or allegations.

8.4.3.5 That the confidentiality and protection of complainants and justice for the person being accused of serious misconduct will be ensured by applying the following review process:

8.4.3.5.1 Determine whether the allegation falls within the ambit of scientific misconduct.

8.4.3.5.2 Determine whether there is prima facie evidence of scientific misconduct.

8.4.3.5.2 Institute a formal investigation to evaluate all relevant facts to determine whether scientific misconduct has been committed and, if so, by whom, as well as the degree of the misconduct. The integrity of the research data must be evaluated, and all appropriate groups advised if inaccurate, misleading, or invalid data has been published or submitted to funding bodies or other agencies such as the NRF.

8.4.5 Any party, such as researchers, CUT staff, or other third parties, may address a complaint to the CUT-HREC. Complaints will be handled promptly and sensitively, with due regard to the specific nature of such complaints. These complaints may concern technical deviations from approved protocols or allegations of scientific misconduct or fraud, among other things.

8.4.5.1 Complaints should be submitted directly to the chairperson of the URIC if not resolved at CUT-HREC level.

- 8.4.5.2 The CUT-HREC, under the guidance of its chairperson, will attend to the complaint. This may include consideration of the original protocol, contact with researchers, and contact with the complainant.
- 8.4.5.3 Depending on the nature and complexity of the complaint, the chairperson may table the complaint at the next CUT-HREC meeting, or proactively act.
- 8.4.5.4 If complaints are actionable, steps may be taken. This could include the implementation of a full-scale investigation, if so warranted. The chairperson may delegate to a member of the CUT-HREC or external body/persons the responsibility to further investigate the complaint.
- 8.4.5.5 If consideration of complaints requires independent assistance, CUT-HREC may approach or appoint applicable persons to assist.
- 8.4.5.6 The chairperson will consider the recommendations of the investigating person/committee and inform the complainant about the outcome of the investigation.
- 8.4.5.7 A report will be issued at the next committee meeting of the CUT-HREC, and complaints as well as outcomes will be discussed and recorded in the committee meeting minutes of CUT-HREC.

8.5 Procedure to lodge an appeal:

- 8.5.1 Researchers will be entitled to appeal decisions made by the CUT-HREC or voice any concerns about the administrative processes of the relevant FRIC or CUT-HREC.
- 8.5.2 The principal investigator must submit the appeal to the chairperson of the CUT-HREC. The chairperson requests nominations for two (2) qualified independent and/or external reviewers from the CUT-HREC and asks the administrator to start the online appeal process. Two independent reviewers review and make recommendations online.
- 8.5.3 After taking into consideration the reviewers' recommendations, CUT-HREC will make the final decision.
- 8.5.4 A Final decision can be made by means of a CUT-HREC vote.
- 8.5.5 After the final decision, no further decisions or discussions will be allowed. The chairperson of the CUT-HREC communicates the outcome of the appeal to the complainant in writing.

9. Conflict of Interest

A conflict of interest may arise when committee members' private or personal interests and professional obligations diverge to such an extent that an independent observer may regard it as possible that personal, financial, or other considerations could influence professional actions.

Any conflict of interest should be avoided, and any potential conflict of interests must be disclosed.

9.1 Procedures for dealing with conflict of interest.

9.1.1 Members of the CUT-HREC should declare if they are conflicted to any protocols.

9.1.2 Members who have a conflict of interest related to any research protocols or issues to be considered should refrain from participating in the discussion. This recusal will be noted in the minutes.

9.1.3 If the conflict of interest involves the chairperson, the vice-chairperson will act as the chairperson for the remainder of the discussion of the item/issue in question. This will be noted in the minutes.

10. Confidentiality

CUT-HREC members and support staff sign a standard confidentiality and nondisclosure agreement upon appointment.

11. Meeting Procedures and Decision-Making

11.1 Standard meeting procedures will apply.

11.2 The committee shall meet on a quarterly basis.

11.3 The Research Officer: Ethics and Integrity administers the meeting.

11.4 Members of the committee shall be reminded about the next meeting at least two weeks before the meeting date, and they will be advised to submit items for the agenda.

11.5 The meeting agenda and other applicable documents shall be circulated to members at least one week in advance of a scheduled meeting.

11.6 The meeting is quorate if at least 50% plus one of the members are present.

11.7 The committee may appoint individuals or task teams to attend to special assignments.

- 11.8 The chairperson of the CUT-HREC may call an extraordinary or emergency meeting, if necessary.
- 11.9 The chairperson may invite field experts who are not committee members in an advisory capacity to attend meetings. These individuals may participate in discussions, but they may not vote.
- 11.10 A quarterly report is submitted to URIC for noting, ratification or consideration of matters.
- 11.11 All members have one vote, except the chairperson, who has a casting vote.
- 11.12 Decision-making is primarily based on the principle of consensus and/or sufficient consensus.
- 11.13 If consensus cannot be reached, a motion is put to the vote, and it is carried if a simple majority vote of those present at the meeting has been obtained.
- 11.14 The chairperson has on any matter, a deliberative vote and, in the event of inequality of votes a casting vote.
- 11.15 A yearly report is submitted to the URIC for noting, ratification or consideration of matters of the different REC's.
- 12. Conducting Research on Campus**
- 12.1 Institutional Permission**
- If a central authority/ies are involved, copies of the institutional permission that was obtained, or, if such institutional permission is still pending at the time of submitting the application, proof that institutional permission was requested.
- 12.1.1 Permission letters must be obtained by the researcher before undertaking their research.
- 12.1.2 All permission letters must have an official letterhead, signed, and dated, specifically mentioning the applicant, title of the project by name. Email correspondence will not be accepted.
- 12.1.3 The CUT-HREC must also confirm in official writing if they do not require permission from the applicant.

12.2 External Reviews of Applications Not Affiliated to CUT

12.2.1 The CUT-HREC may charge an application fee for external research proposals/protocols/applications that are externally affiliated.

12.2.2 The Fee may be waived or discounted subject to the CUT-HREC members discretion on a case-by-case basis.

12.2.3 Researchers not affiliated to the university who wish to conduct research on students, staff or alumni of CUT must obtain gatekeepers permission from the Institutional Planning and Quality Enhancement (IQPE) office. This can be applied for on the Converis Ethics System. Applicants must contact the Research Officer for Ethics and Integrity ([CUT-HREC @cut.ac.za](mailto:CUT-HREC@cut.ac.za)) who will guide them on this process.

13. Adoption of Amendments to Standard Operating Procedures

10.1 Amendments to the SOP may be made at any ordinary meeting of the CUT-HREC.

10.2 The CUT-HREC must assess the SOP at least once a year and minute the results of this assessment at one (1) of its ordinary meetings.

14. Accreditation and Auditing of the CUT-HREC

The CUT-HREC will be registered with NHREC. It will be audited on a 5-year basis by NHREC. URIC or the Research Office may be entitled to carry out checklist audits at any point in time without prior notification.

15. Data Management

Data should be stored for a minimum of THREE (3) years. All applicants must complete and attach a Research Data Management Template to their ethical clearance applications. Applicant can access the template from the Research Ethics and Integrity website: <https://www.cut.ac.za/research-ethics-and-integrity>.

16. Whistleblowing

16.1 Any person, whether internal or external is allowed to report any infringements or offence in relation to research be a CUT-HREC or a FRIC member, including the secretariat or the reviewers.

16.2 Reporting must be sent in writing to the Chief Risk Officer (CRO) who will deal with the matter with confidentiality as per CUT Code of Ethics. The report will remain anonymous as far as possible in law. The Deputy Vice-Chancellor (DVC) and URIC will

consult with the CUT Code of Ethics and the relevant representatives to find a way forward to process such a report and to resolve such a report.

16.3 Members can report any infringements or offence to the following:

T (toll free): 0800 222 225

F: 086 52 22 816

E: cut@whistleblowing.co.za www.whistleblowing.co.za

Central University of Technology, 2021. *Ethical Governance Policy*, Bloemfontein: Central University of Technology.

Department of Health, 2015. *Ethics in Health Research, Principles, Processes and Structures*, Pretoria: Department of Health.

RESEARCH ETHICS COMMITTEE: SOCIAL,BEHAVIOURAL AND EDUCATION RESEARCH (REC:SBE), 2020. *TERMS OF REFERENCE AND STANDARD OPERATING PROCEDURES*, Cape Town: Stellenbosch University.

University of the Witwatersrand, Johannesburg, 2021. *Human Research Ethics Committee Non-Medical*, Johannesburg: Wits Press.