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| **FACULTY OF MEDICINE & HEALTH SCIENCES**  **WALTER SISULU UNIVERSITY HEALTH RESEARCH ETHICS COMMITTEE** |

**Complaints Form**

*(Kindly type in all details)*

***NB****: Please email/ scan to* [*fhsrec@wsu.ac.za*](mailto:fhsrec@wsu.ac.za)*.*

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| **SECTION 1**: **Personal details (*optional*)**: ***Please note****: direct follow up will not be possible without personal details*.  Name of complainant (*optional*): ………………………………………………………………………………………………………………………………….  Contact Number (*optional*): …………………………………………………………………………………………………………………………………………  Email address (*optional)*: …………………………………………………………………………………………………………………………………………….  Address (*optional*): …………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………………………………………….. |

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| **SECTION 2**: NAME OF PERSON/ ENTITY AGAINST WHOM WHICH THE COMPLAINT IS LODGED: |
| **Name of complainee** *(one who is complained about):*   |  |  |  | | --- | --- | --- | | Title | Names | Surname | |  |  |  | | Contact Number: | | | | Email address: | | | |

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| **SECTION 3**: **Complaint details**  Conduct in an approved study   About HREC in general.  Conduct of a researcher   Alleged protocol violations.  Discrimination  Conflict of interest  Informed consent process   Health & Safety issues  Inappropriate communication  Researcher/ Fieldworker wellbeing  Human participants wellbeing/ monitoring  Data Security  Guidance or clarification  About HREC Chairperson/s  General HREC processes About HREC Member/s  Other, please specify: ………………………………………………………………………………………………………………………………………………….  …………………………………………………………………………………………………………………………………………………………………………………..  …………………………………………………………………………………………………………………………………………………………………………………. |

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| **Section 4: Nature of the complaint** |
| 4.1. If complaint pertains to a particular research project, please provide the following (if available)  Research title: ………………………………………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………………………………………………….  Name/s of the researcher/s: ……………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………………………………..  Contact details: …………………………………………………………………………………………………………………………………………………….  Site/s at which the research is being conducted: ……………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………………………………………………………….  ……………………………………………………………………………………………………………………………………………………………………………….  Name of the HREC that approved the study: ………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………………………………………………………….. |

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| 4.2. Please provide sufficient details of the complaint, with supporting evidence if possible. Attach file if any:  ……………………………………………………………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………….............................. |
| 4.3. Confidentiality associated with the complaint: ………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………………………………. |

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| **Section 5: Declaration by the complainant** |
| I ……………………………………………………………………….. (*optional*) hereby declare that the above submission is accurate and true to the best of my knowledge.  Signature: …………………………………………………… Date: …………………………………. |