

Peer Review Policy and Procedure for Academic Research and Publications

CODE:	P092
OPERATIONAL OWNER:	Chief Operating Officer – Academia
REVIEW DATE:	April 2026
POLICY VERSION:	1

Version History

VERSION	DESCRIPTION	AUTHORS	APPROVAL	EFFECTIVE DATE
1	Initial version	Dr Katya De Giovanni Mr Martin Debattista	2026	2026

Related Policies

P022 – Intellectual Property
P028 – Students’ Research
P031 – Against Plagiarism
P043 – Research
P064 – Academic Freedom and Integrity
P076 – Publications Committee
ARPB Terms of Reference (code to be assigned)
REC Terms of Reference (code to be assigned)
ITS Strategic Plan 2026–2030, Sections 8.1, 9.1, 10.3 and 11.2

External References

Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015), Standards 1.1, 1.5 and 1.7
ALLEA, The European Code of Conduct for Research Integrity (revised edition 2023)
COPE, Ethical Guidelines for Peer Reviewers (2017) and COPE Core Practices
MFHEA National Quality Assurance Framework for Further and Higher Education, Standards 1, 7 and 8

Definitions

Associate Editor	Associate Editors support the Chief Editor in appointing reviewers and overseeing peer review procedures.
Chief Editor	The Chief Editor is the chairperson responsible for managing the peer review process and ensuring that research outputs are evaluated by suitably qualified experts within the institution.
Double-blind review	A review process in which both the reviewer's and the author's identities are concealed from one another.
Peer review	The process by which research outputs and submissions are evaluated by suitably qualified independent experts.
External peer review	Peer review conducted by reviewers who are not employed by or otherwise affiliated to the ITS, whether commissioned by the PEB or undertaken by an external journal, publisher or conference.
Internal peer review	Peer review commissioned by the PEB as a pre-submission quality gate, using reviewers drawn from within the ITS who satisfy the eligibility and independence requirements of clause 4.
Publications Editorial Board	A standing sub-committee of the ARPB responsible for overseeing peer review procedures, reviewer appointments, and associated quality assurance processes relating to academic publications.
Research Ethics Committee	The ITS body responsible for the ethical review and approval of research involving human participants or personal data, as set out in its Terms of Reference. Referred to in the Strategic Plan 2026–2030 (Section 9.1) as the Research Ethics Board.
Single-blind review	A review process in which the reviewer's identity is concealed from the author.

Abbreviations

AI	Artificial Intelligence
ARPB	Academic Research and Publications Board
COO – Academia	Chief Operating Officer – Academia
ITS	Institute of Tourism Studies
PEB	Publications Editorial Board
RO	Research Office
REC	Research Ethics Committee

Contents

A. Purpose, Scope, and Eligibility.....	6
B. Internal Peer Review Procedure	7
C. External Peer Review Procedure	7
D. Ethical Principles and Conduct	8
E. Governance and Accountability.....	9
F. Complaints and Dispute Resolution.....	10
G. Document Retention	10
H. Review	10
I. Document Control.....	10

A. Purpose, Scope, and Eligibility

1. Purpose

This policy outlines the formal procedures and governance framework for both internal and external peer review processes for academic publications at the ITS, ensuring scholarly quality and integrity. It gives effect to the institutional commitment in the Quality Assurance Policy and Manual to the link between research and learning and teaching (ESG 2015, Standard 1.1) and operates within the principles of academic freedom and integrity set out in P064.

2. Scope

This policy applies to:

- Research outputs authored by academic staff, other staff and students of the ITS that are (a) submitted for publication in an ITS-managed publication or series, Student research shall only be considered under this policy once it has been formally assessed as part of an academic programme.
- Both internal and external peer review processes, managed under institutional authority as delegated by the ARPB to the PEB.
- This policy does not govern research ethics approval. Outputs derived from research involving human participants or personal data shall hold REC approval before submission under this policy.

3. Composition of the PEB

- The PEB is a standing sub-unit of the ARPB, appointed by and reporting to the ARPB.
- It shall be composed of five members with appropriate experience and qualifications.
- One member shall serve as Chairperson of the PEB and shall be appointed by the ARPB.
- The Chair of the ARPB shall serve as an ex officio member. The Chair of the ARPB shall not sit on any appeal panel constituted under Section F.
- The Research Office shall provide secretariat support to the PEB. Until the Research Office is operational, secretariat support shall be provided by the Office of the COO – Academia.

4. Eligibility of reviewers

- Reviewers shall be senior academic staff or researchers with relevant subject expertise.
- Reviewers must declare any conflicts of interest prior to appointment.
- Reviewers shall not review submissions authored by colleagues within the same department or unit, by anyone with whom they have a line-management or supervisory relationship, or by anyone with whom they have co-authored within the preceding three years.

B. Internal Peer Review Procedure

5. Reviewer appointment

- The PEB shall appoint a minimum of two reviewers for each submitted work.
- Appointments shall be confirmed in writing and shall include confidentiality agreements.

6. Internal review models

Internal reviews shall be conducted using a double-blind model.

7. Review workflow

1. Submission to the PEB and initial screening.
2. Reviewer selection and invitation within 5 to 10 working days of the review process commencing.
3. Submission of review feedback within 15 to 20 working days.
4. Consolidation of feedback by the PEB within 10 working days of receipt of the reviewers' reports.
5. Resubmission by the author incorporating revisions. Resubmission must occur within 60 working days, failing which the submission shall be considered withdrawn.
6. Final confirmation by the PEB on the author's resubmission within 10 working days.

8. Review outcomes

- A. Accept
- B. Accept with minor revisions
- C. Major revisions required prior to further consideration
- D. Reject

9. Confidentiality

All review documentation shall be treated as confidential and securely archived.

C. External Peer Review Procedure

10. Eligibility of external reviewers

External reviewers shall be independent subject experts with no professional or personal conflicts of interest.

11. Reviewer selection

- Reviewer selection shall be managed by the PEB in consultation with the COO – Academia.

- Reviewers shall be selected based on subject expertise, publication record, and consideration of diversity.

12. External review models

- The default model shall be double-blind peer review.
- Any exceptions to this model shall require prior approval from the PEB.

13. Review workflow

1. Submission and initial screening.
2. Reviewer selection and invitation within 5 to 10 working days of the review process commencing.
3. Confidentiality agreements signed by the reviewers.
4. Secure transfer of documents to reviewers.
5. Review period of up to 30 working days.
6. Receipt of reviewer reports.
7. Consolidation of feedback by the PEB within 10 working days of receipt of reviewer reports.
8. Author revisions and resubmission. Resubmission must occur within 60 working days. Failure to do so shall result in the submission being considered withdrawn.
9. Final decision by the PEB within 10 working days of the author's resubmission.

14. Review outcomes

- A. Accept
- B. Accept with minor revisions
- C. Major revisions required prior to further consideration
- D. Reject

15. Archiving

All reports and correspondence shall be securely archived in accordance with the ITS's IT policies and Section G of this policy.

D. Ethical Principles and Conduct

16. Reviewer responsibilities

- Reviewers shall accept assignments only where they possess appropriate subject expertise.
- Reviewers shall sign a declaration confirming the absence of professional or personal conflicts of interest and agreeing to maintain confidentiality.

- Reviewers shall maintain strict confidentiality throughout the review process.
- Reviewers shall provide timely, constructive, and unbiased feedback.

17. Author responsibilities

- Authors shall submit original, plagiarism-free work and ensure that any use of generative AI is ethical, appropriate, and in accordance with the editorial guidelines set by the PEB, and shall disclose any such use in the submission.
- Authors shall disclose all co-authors and sources of funding.
- Authors shall declare any conflicts of interest and shall confirm that research involving human participants or personal data holds REC approval.
- Authors shall observe the ALLEA European Code of Conduct for Research Integrity, P031 and P064.
- Authors shall respond to reviewer comments in writing.

18. Review quality control

- The PEB shall assess all peer review reports to ensure academic rigour, thoroughness, and impartiality.
- Reports that fail to meet the required quality standards shall be disregarded, and the PEB shall appoint a new reviewer to assess the submission.

E. Governance and Accountability

19. Roles and responsibilities

- The PEB shall be responsible for oversight, procedural management, academic quality assurance, and final decision-making authority on individual submissions.
- In the event that authors object to decisions of the PEB, the matter shall be referred to an independent review panel, whose decision shall be final, as defined in Section F.
- Research ethics approval is the responsibility of the REC. The PEB shall verify that REC approval is held where required and shall refer any concern regarding research integrity or misconduct to the REC and, where applicable, for handling under P031.
- The PEB shall report annually to the ARPB on submissions received, review outcomes, adherence to timelines and reviewer performance, and shall supply the data required for institutional KPI reporting under the Strategic Plan 2026–2030 (Section 10.3).

20. Transparency and communication

- Authors and reviewers shall be informed in writing of all procedures, review models, and expectations at the outset of the process.

F. Complaints and Dispute Resolution

21. Complaints and appeals handling

All complaints shall be submitted in writing to the PEB. The PEB shall issue a response within 20 working days.

Where authors wish to escalate a matter to the appeals stage, the following procedure shall apply:

- The appeal shall be evaluated by an independent review panel composed of three members of the ARPB who are not members of the PEB and who had no involvement in the decision under appeal. The panel shall consist of a Chair and two members.
- In the event that there are insufficient ARPB members available to constitute the independent review panel, other suitably qualified academic staff at the ITS shall be invited to serve on the panel.
- A decision on the appeal shall be issued within 20 working days of submission.

22. Record keeping

All complaints, appeals, and their outcomes shall be formally recorded and securely archived.

G. Document Retention

Category	Retention Period
Academic Research and Publications	10 years from the date of the final decision, or until the conclusion of any related dispute, appeal or investigation, whichever is later

H. Review

This policy shall be reviewed every three years, or earlier if required due to regulatory or institutional changes.

I. Document Control

Version	Purpose of Review/ Changes	Date Published	Date of Next Review
1	Initial version	2026	2029