

Policy Title: Malpractice & Maladministration Policy and Procedure

Created By: Office Manager to the Principal

Approved By: Principalship

Date of Approval: TBC

Review Date: June 2024

Responsible Manager: Quality Manager

Policy Category: Quality

Related Policies: Positive Behaviour

Management Policy

Exams Policy

New College Swindon Staff Disciplinary Policy and

Procedures

Policy Location: SharePoint Policy Hub

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1. Scope and purpose

The purpose of this policy is to define the process and procedures around the identification and subsequent management of instances of malpractice and maladministration across New College Swindon direct delivery.

Where specific requirement is provided by Joint Council for Qualifications (JCQ) regarding malpractice and maladministration, these will be adhered to in conjunction with the processes defined within this document. If this results in contradictory processes, awarding body procedures will be followed.

2. Aims

This procedure is designed to provide guidance to any student, visitor or other parties such as parents or employers on the processes involved regarding malpractice and maladministration and ensure that these incidences to not occur.

Our aim is to respond quickly and positively and to reach an outcome that is satisfactory and fair for all concerned. We also aim to keep all relevant parties involved, informed of our progress in dealing with the case of malpractice and maladministration, and the personnel involved.

3. Responsibility

The **Quality Team** is responsible for monitoring cases of malpractice and maladministration, and to look for trends and patterns. Within the organisation, every member of staff who is involved in the teaching or assessment process on a programme is responsible for ensuring that they understand and follow the awarding body procedures for the delivery of the qualifications in which they are involved. Anybody who identifies or is made aware of suspected or actual cases of malpractice or maladministration at any time must immediately notify the Assistant Principal, Curriculum Manager and the Quality Team. Reporting potential malpractice by staff could fall within whistleblowing, if this is the case, please refer to the Whistleblowing policy.

4. Candidate Malpractice

The carrying out of any malpractice activity by a candidate at the College is not permitted. The following is a list of examples of malpractice. It should be noted that there may be other examples of malpractice that may be determined by the college and its partners.

- Plagiarism by the copying and passing off of other's work as the learner's own.
- The collaboration on work with others, where that work is then submitted as the learner's own individually completed work.
- Impersonation of others with the intention of completing work, assessment, examination or test on their behalf.
- The fabrication of results and/or evidence.
- The failure to abide by instructions or advice of the assessor in relation to assessment rules, mandatory guidance by the awarding organisation or instructions to promote and ensure safety and security.
- The inappropriate use of examination and assessment material.

•	The use of materials which are not authorised to examinations and assessments.

- The obtaining or passing of information, where not authorised within an assessment or examination.
- The alteration of any results documents.
- Cheating to gain an unfair advantage.
- The use of Artificial Intelligence (AI) which is not referenced appropriately and / or is mis-used so that the work submitted by a learner is not their own. Full guidance is provided by the Joint Council for Qualifications (JCQ) at AI Use in Assessments: Protecting the Integrity of Qualifications JCQ Joint Council for Qualifications

5. Staff Malpractice

The carrying out of any malpractice activity by a member of staff at the College is not permitted. The following is a list of examples of malpractice. It should be noted that there may be other examples of malpractice that may be determined by the College and its partners.

- Failure to keep mark schemes in a secure location, potentially leading to their misuse.
- Alteration or amendment of mark schemes or grading criteria set by an awarding organisation.
- Assistance given to learners which influences the outcome of an assessment.
- Falsifying of witness statements or learner records.
- The allowance of evidence into a portfolio or assessment which is known not to be the learner's own work.
- The allowance of impersonation of a learner during assessment.
- Inappropriate use of any special arrangements or concessions provided to a learner with a specific learning need where the outcome of an assessment may be influenced.
- Falsifying of records or certificates.
- Claiming of certificates/awards/credit where the learner has yet to successfully complete the expected criteria or full requirements of assessment.
- Failure to keep assessment or examination papers in a safe and secure location, potentially leading to their misuse.
- Obtaining unauthorised access to examination or assessment materials where authorisation has been given.

6. Maladministration

Maladministration is essentially any activity or practice which results in non-compliance with administrative regulations and requirements and includes the application of persistent mistakes or poor administration.

Examples of maladministration:

- Persistent failure to adhere to our learner registration and certification procedures.
- Persistent failure to adhere to our centre recognition and/or qualification requirements and/or associated actions assigned to the centre.
- Late learner registrations (both infrequent and persistent).
- Unreasonable delays in responding to requests and/or communications from regulators,
 Awarding Organisations or learners.
- Inaccurate claim for certificates.

- Failure to maintain appropriate auditable records, e.g. certification claims and/or forgery of evidence.
- Withholding of information, by deliberate act or omission.

7. Procedure

Our malpractice and maladministration procedure is designed to investigate cases or suspicions of malpractice and/or maladministration and taking appropriate steps to deal with these.

Actions:

- Staff leading the investigation are independent of the staff/candidate/function being investigated.
- Individuals who are suspected of malpractice or maladministration will be informed that they are entitled to know the necessary details of the case and possible outcomes.
- Findings of the investigation will be submitted to the governing body with the final report.

The appropriate manager will initiate an investigation into the known or suspected malpractice and/or maladministration. Dependent on the level of malpractice and/or maladministration, the individual may face appropriate disciplinary action and appropriate sanctions for that and future assessments. Where the malpractice and/or maladministration has involved completed examination or assessment for which a claim may have been made, the appropriate member of the examinations or quality team will contact the relevant awarding organisation.

7.1 How to report cases of malpractice and maladministration and timeframes

If evidence of suspicion of malpractice and maladministration occurs these should be reported to an Assistant Principal, Curriculum Manager and the Quality Team. Reporting potential malpractice by staff could fall within whistleblowing, if this is the case, please refer to the Whistleblowing policy.

Further to this, any suspected incident of malpractice or maladministration should be reported to the awarding organisation within 5 working days of identification and prior to any internal investigation. This should be done so in writing or via email and include:

- The centre name, address and telephone number.
- The learner name and awarding organisation identification number.
- The centre contact, their role and contact information.
- Course and qualification details.
- The nature of the suspected malpractice or maladministration with all relevant dates.
- Details of initial investigation.
- Supporting evidence.

7.2 Outcome of an investigation into suspected learner malpractice

On completion of the investigation, the malpractice will be classified in one of three ways:

• No evidence of malpractice is found.

- Evidence found is small and can be dealt with effectively by either a Curriculum Manager/Assistant Principal or the Quality Manager.
- Evidence found is significant and the candidate's place on the course will be reviewed.
 Withdrawal from the qualification and reporting to the governing body will be considered.

The outcome of the investigation must be communicated to all parties within fifteen working days of the conclusion of the investigation.

7.3 Outcome of an investigation into suspected staff malpractice or maladministration On completion of the investigation, the malpractice or maladministration will be classified in one of three ways:

- No evidence of malpractice/maladministration is found.
- Evidence found is small and can be dealt with effectively by their line manager and or through training and support
- If the investigation concludes that any staff have deliberately committed malpractice and / or maladministration, then this could lead to disciplinary action as outlined in the New College Swindon Disciplinary Policy and Procedure and potential dismissal.
- If the employee is found guilty of malpractice staff should be aware that the College will
 follow the JCQ guidelines which may include referring the matter to the teaching
 regulatory agency

The outcome of the investigation must be communicated to all parties within fifteen working days of the conclusion of the investigation.

8. Appeals

If the member of staff concerned is unhappy with the outcome of the malpractice and/or maladministration investigation, they can request a review of the matter which will be undertaken by a differentmanager. If an outcome is appealed, the subsequent re-investigation will look to confirm that the initial case accurately followed the malpractice and maladministration procedure, and allappropriate information was reviewed. Appeals will not constitute a complete re- investigation of the initial case of malpractice and/or maladministration.

An appeal cannot be submitted until the investigation and any potential disciplinary procedures are fully completed.

You must put your appeal in writing to the Vice Principal within five working days of the final outcome.

9. References

For further detail on specific awarding body policies linked to malpractice, please see the links below. This is not an exhaustive list. If staff are delivering a qualification with an awarding organisation that is not listed, it is their responsibility to check the expectations.

JCQ

https://www.jcq.org.uk/exams-office/malpractice

Pearson

Malpractice and plagiarism | Pearson qualifications

City and Guilds

Centre document library | City & Guilds (cityandguilds.com)

Rock School

https://www.rslawards.com/about-us/policies-regulations/

Laser Awards

https://www.laser-awards.org.uk/about/policies-and-procedures/

NCFE

Malpractice and Maladministration (qualhub.co.uk)

10.Version Control

Document Location

This document, if printed, can only be considered up to date on the day that it was printed. For a current version of this document please see the Central Storage Library (Policy Hub).

Revision History

Date of this Revision: Oct 2022 Date of next Revision: June 2024

Version	Date	Author	Change Description
1.0	November 2020	Chelsea Belcher	Document created
1.1	October 2022	Darren Cass	Minor updates
1.2	September 2023	Darren Cass	Addition of AI and separated potential sanctions on staff and learners

Approvals

This document requires the following approvals:

Committee/Principalship	Date
Principal and CEO	Nov 2020
Vice Principal	Oct 2022
Senior Leadership Team	Oct 2023

Distribution

This document has been distributed to:

Title/External Organisation/All Staff	Date of Issue	Version
All staff	Oct 2021	1.0
All staff	Nov 2022	1.1
All staff	** 2023	1.2

NEW COLLEGE SWINDON EQUALITY IMPACT ANALYSIS

Function: Equal Opportunities

This policy, plan, procedure, process has been examined for equality impact, i.e., the impact that this function will have on different groups of actual and potential learners, service users and staff taking account of the protected characteristics of the Equality Act 2010 (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation).

DATE: October 2023

 If Equality Impact Analysis is not relevant to this function, give reasons and proceed to section 5 below. N/A

2. In what ways could this function have a negative impact on any of the groups above? What actions have been taken to eliminate these?

There could be resource limitations in helping students whose first language is not English to follow all of the requirements of this procedure. We would explore all the options available to us in order to support all users in their understanding and application of the procedure. We would make every effort to breakdown any barriers for disabled people and endeavour to make reasonable adjustments to the procedure if required.

- 3. In what ways could this function have a positive impact on any of the groups above? How will this function be used to eliminate discrimination, advance equality of opportunity and foster good relations between different groups? Arethere plans for the future which will further advance equality?
- This policy aims to be an open access and all-inclusive process.
- The annual analysis of malpractice is fed back to managers.
- There is an expectation that recurring issues will feature in team quality improvement plans.
- The annual review of malpractice will look to identify any patterns and trends.
- Consideration will always be given to whether any cases of malpractice relate specifically to any diversity and equality groups. The log will record if any malpractice case has an E&D/Disability/Safeguarding dimension
- 4. What evidence supports your judgment e.g. consultations, observations, expert opinions, quantitative or qualitative surveys? If the evidence is in the form of an additional document, where is it stored?
- Comprehensive and up to date records are kept and readily available.
- If appropriate, cases of malpractice can help inform areas for improvements in Team QIPs and the College Annual QIP. These are reviewed at regular intervals though the year.
- Records are kept of student appeals relating to this procedure.
- 5. Name and job title of manager responsible:

Darren Cass, Quality Manager Review Date: June 2024

	Confirm policy read (please add comments to document.
Name	In column state 'see comments' or' no comments'
Amanda Spanswick	Read see above
Andrew Mcilvain	Read, no comments
Ben Hodder	Policy read, no comments.
Carol Petropoulos	Policy read, no comments.
Caron Edwards	Policy read, see comments
Daniel Bedford	Policy read, no comments
Darran Marks	Read, no comments
lan Hole	
Jane Davison	Read, no comments
Jason Clear	Read, no comments made
Leah Palmer	
Lindsey Stewart	
Lynne Plested	Added comment
Marc Webb	
Matthew Butcher	
Michelle Beckingham	
Peta Fry	Comments made
Sarah Walker	Read, no comments made
Stephen Rodger	Read No comments