

## MALPRACTICE AND MALADMINISTRATION OF ASSESSMENT PROCEDURE

Responsibility: Performance Manager Issue Date: 29<sup>th</sup> November 2023 Equality Impact Assessment: 18<sup>th</sup> September 2023

Version: 2

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# Malpractice and Maladministration of Assessment Procedure

1. Purpose

The purpose of this procedure is to provide guidance for students and staff on what constitutes malpractice and maladministration, roles and responsibilities and how to deal with issues of malpractice and maladministration.

## 2. Scope

This procedure is to be implemented at all College sites and applies to all staff.

## 3. References

- Assessment Policy
- Disciplinary Procedure (Staff)
- **7** Student Disciplinary Procedure

### 4. Definitions

4.1	Malpractice	<ul> <li>The term 'malpractice' covers any deliberate actions, neglect, default or other practice that compromises, or could compromise:</li> <li>the assessment process</li> <li>the integrity of a regulated qualification</li> <li>the validity of a result or certificate</li> </ul>	
		<ul> <li>the validity of a result or certificate</li> <li>the reputation and credibility of the awarding body, or,</li> <li>the qualification or the wider qualifications community</li> </ul>	
4.2	Maladministration	Maladministration is any activity, neglect, default or other practice that results in the centre or the student not complying with the specified requirement for delivery of the qualifications.	
4.3	GDPR	General Data Protection Regulation	

## 5. Responsibility

- 5.1 All staff have roles and responsibilities in relation to malpractice/ maladministration. They are responsible for:
  - Complying with this procedure
  - Taking reasonable steps to prevent malpractice/maladministration from arising
  - Advising students of this procedure during their induction and throughout the session
  - **7** Being vigilant to possible instances of malpractice and maladministration
  - Notifying appropriate managers of any incidents of malpractice /maladministration
  - Assisting with any requests for information during an investigation of suspected malpractice/maladministration
  - Implementing any actions required during and after investigation into a case of malpractice

#### 6. Procedure

#### 6.1 Centre/Staff Malpractice/Maladministration

Where a potential issue relating to malpractice/maladministration is identified, this will be reviewed by relevant managers prior to taking any action. Malpractice could be considered gross misconduct under the Disciplinary Procedure (Staff). Examples of malpractice/maladministration include, but are not limited to the following:

- Misuse of assessment, including inappropriate adjustments to assessment decisions
- Failure to comply with assessment requirements as laid out by the awarding body
- Insecure storage of assessment instruments and marking guidance
- Failure to comply with requirements for accurate and safe retention of student evidence, assessment and internal verification records according to GDPR

- Failure to comply with awarding body procedures for managing and transferring accurate student data
- Excessive direction from assessors to students on how to meet national standards
- **7** Deliberate falsification of records in order to claim certificates

#### 6.2 Student Malpractice/Maladministration

Malpractice/Maladministration by a student in internal assessment can occur in:

- **7** the preparation and authentication of coursework
- 👎 the presentation of practical work
- **7** the compilation of portfolios of internal assessment evidence
- conduct during an internal assessment

Consequences of proven malpractice/maladministration may result in a student failing to complete their course and may also result in disciplinary action being taken under the Student Disciplinary Procedure.

The following are examples of student malpractice/maladministration but there may be other instances of malpractice that may undermine the integrity of qualifications.

Examples could include:

- Students using unauthorised aids e.g. reference materials, calculators, notes, mobile telephones, use of AI etc.
- Collusion with another person when an assessment must be completed by individual students
- Plagiarism failure to acknowledge sources properly and/or submission of another person's work
- Copying from another student including using ICT to do so
- Referencing skills students should clearly reference any materials that have been taken from another source and is not their own
- Personation pretending to be someone else including using another student's user id and password
- Inclusion of inappropriate, offensive, discriminatory or obscene material in assessment evidence

- Inappropriate behaviour during an assessment that causes disruption to others. This includes shouting and/or aggressive behaviour or language
- Unauthorised aids physical possession of unauthorised materials (including mobile phones, MP3 players, notes, use of AI etc.) in the examination room

#### 6.3 Consequence of Proven Malpractice/Maladministration

Malpractice identified in the registration, assessment or certification process, must be reported to the awarding body immediately by the Performance Manager and the action the centre has taken to address the issue. This has the potential of the awarding body applying sanctions on the centre. City and Guilds require allegations of malpractice to be reported within 10 working days prior to the commencement of an investigation; IMI require immediate notification; EAL don't state timescale but suspected cases need to be reported as well as confirmed cases. SQA indicate – 'bringing concerns of malpractice to SQA's attention at an early stage is part of a robust, proactive and transparent approach to malpractice within a centre'.

When investigating malpractice/maladministration and a criminal act is suspected, it may be appropriate for the Performance Manager to report the matter to the awarding body (within 48 hours) and the police.

Documentation relating to malpractice/ maladministration must be retained as per the awarding body timescale. This also includes evidence where malpractice has involved criminal prosecution or civil claim. For further information please contact the Performance Team.

#### 6.4 Dealing with Cases of (Suspected) Malpractice/Maladministration

#### 6.4.1 Identification

Malpractice/maladministration may be identified via many different sources including the following:

At centre level through on-going quality assurance activity and monitoring e.g. internal/external verification activity Through awarding body or other agency intelligence, complaints or feedback received e.g. from Students, centre staff, whistle blowers or other stakeholders

If you suspect malpractice/maladministration has taken place please discuss this immediately with your line manager in the first instance.

#### 6.4.2 Investigation

Investigations into malpractice/maladministration and suspected malpractice/maladministration should aim to:

- Establish the facts, circumstances and scale relating to malpractice / allegations / complaints in order to determine whether any irregularities have occurred. (It is important to remember that just because an allegation has been made it should not be assumed that malpractice has actually occurred)
- Identify the cause of the irregularities and those involved and if necessary, take action to minimise the risk to current students and requests for certification
- Evaluate any action already taken (possibly by the centre)
- Ascertain whether any action is required in respect of certificates already issued
- Identify any patterns or trends
- Identify any changes to policy or procedure that need to be made

#### 6.4.3 Investigation Principles

Where it is deemed necessary to investigate the suspected malpractice/maladministration, the following principles should be adhered to. Where the investigation involves suspected malpractice/maladministration against a member of staff then the investigation should follow the disciplinary procedure (staff) as well as adhering to these principles.

Confidentiality – all material collected as part of an investigation must be kept secure and not normally disclosed to any third parties (other than the regulators or the police, where appropriate).

- **Rights of Individuals** - where an individual is suspected of malpractice/maladministration they should be informed of the allegation made against them in writing and the evidence that supports the allegation. A copy of the Malpractice and Maladministration Procedure should also be provided at this stage, as well as the Student Disciplinary Procedure or Disciplinary Procedure (Staff) whichever is applicable. They should be provided with the opportunity to consider their response to the allegation and submit a written statement or seek advice, if they wish to. They should also be informed of what the possible consequences could be if the malpractice/maladministration is proven and of the possibility that other parties may be informed e.g. the regulators, the police, the funding agency and professional bodies. The appeals process should also be communicated to them.
- Staff/Candidate Interviews these interviews should be carried out in line with the college Disciplinary Procedure (Staff) or the Student Discipline Procedure. Where a student is to be interviewed and they are a minor or vulnerable adult, consideration should be given as to whether a parent or representative should also be present or to have the permission of a parent prior to the interview taking place. Staff accompaniment or representation should be in line with the Disciplinary Procedure (Staff).
- **Retention and Storage of Evidence and Records** Where the investigation shows that malpractice has taken place all relevant documents, including student work, assessments, IV records and any supporting evidence should be retained for the minimum period set by the awarding body. For further clarification please contact the Performance Team.
- Decisions and action plans all conclusions and decisions should be based on evidence. A course of proposed action should be identified and agreed by all parties. The actions should also address any improvements that are required to policies and procedures as well as any action that is related to staff or other resources.

#### 6.4.4 Briefing and Record-Keeping

Anyone involved in the conduct of an investigation should have a clear brief and understanding of their role. All investigators must maintain an auditable record of every action during an investigation to demonstrate that they have acted appropriately.

#### 6.4.5 Interviews

Interviews should be conducted face to face. Face-to-face interviews where practicable, should have a note-taker present.

Students should be informed that they may have another individual of their choosing present providing they are independent to the investigation. Staff should be made aware of their right to be accompanied/represented.

#### 6.4.6 **Communicating Outcome of Malpractice/Maladministration Decisions**

Where it is a student who is subject of the investigation, the investigator will communicate the outcome of investigation. Where it is a member of staff, the Presiding Manager under the Disciplinary Procedure (Staff) will be responsible for communicating the decision. This may take the form of a Disciplinary hearing.

#### 6.4.7 **Reporting**

A report is prepared including all the relevant facts and conclusions.

In an investigation involving a criminal prosecution or civil claim, records and documentation should be retained for the required period after the case and any appeal has been heard.

#### 6.5 Appeals against Malpractice/Maladministration

- 6.5.1 If a student disagrees with the decision, they can appeal to the Executive Director of Student Experience. In the event of failure to reach an agreement at Executive Director level the candidate may refer the appeal in writing to the Depute Principal.
- 6.5.2 Appeals against the decision by staff should follow the procedure set out in the Disciplinary Procedure (Staff).

6.5.3 Following this, if not satisfied with the outcome of the appeal they may be able to appeal to the awarding body.

## 7. Distribution

All Staff Repository

## 8. Revision Log

Revision Log				
Date	Section	Description		
August 2021	Throughout the Procedure	Quality Manager changed to Performance Manager Learner changed to student Head of Curriculum changed to Director Vice Principal Learning and Skills changed to Vice Principal, Learning Skills and Student Experience		
October 2021	3. References	SQA Malpractice document updated from January 2017 to December 2020 V2.0. EAL Guidance document updated from January 2013 to October 2020. Reference to IMI policy document added Reference to City & Guilds document added		
October 2021	Throughout the Procedure	Candidate changed to student		
October 2021	6.3 paragraph 1	Awarding body reporting requirements added		
October 2021	6.3 paragraph 2	Timescales for retention of documents for awarding bodies added.		
October 2023	6.3 paragraph 3	References to awarding body documentation removed		
October 2023	6.2	Use of AI added to listing of examples		
October 2023	6.5.3 Retention and storage of Evidence and Records	Awarding body timescale revised.		
October 2023	6.5.1	Job title updated to reflect current organisational structure		

October 2023	Format	Updated to reflect current Document Control Template, inclusion of EIA	
October 2023	Appendix 2	Investigation Example Template added	

THIS FORM TO BE UPDATED WHENEVER THERE IS A CHANGE IN ANY SYSTEM DOCUMENT				
Document Name	Document Owner	Revision	Date of	Date of
		Number	Issue	Withdraw
Malpractice and Maladministration	Performance Manager	1	04.05.22	
of Assessment Procedure				
Malpractice and Maladministration	Performance Manager	2	29.11.23	
of Assessment Procedure				

Document:	Malpractice and Maladministration of Assessment Procedure		
Executive Summary:	Impacts are neutral across the majority of protected characteristics for this procedure. Adjustments are built in to the procedure to ensure that issues relating to age and disability are accommodated, suggesting positive impacts for these groups in terms of eliminating discrimination, ensuring equality of opportunity and promoting good relations. The same provisions should ensure fairness across the additional considerations.		

Duties:

1: Eliminate discrimination, harassment and victimisation

2: Promote equality of opportunity

3: Promote good relations

\* Human Rights to privacy and family life, freedom of thought and conscience, education, employment

#### **PSED Impacts**

	Commentary		
Age	Impacts are neutral across the majority of protected		
Disability	characteristics for this procedure. Adjustments are built in to the		
	procedure to ensure that issues relating to age and disability are		
Gender	accommodated, suggesting positive impacts for these groups in		
Gender Based	terms of eliminating discrimination, ensuring equality of		
Violence	opportunity and promoting good relations. The same provisions		
Gender identity/	should ensure fairness across the additional considerations.		
reassignment			
Marriage/civil	Age - There are allowances for minors to be accompanied at		
partnership	meetings relating to this procedure.		
Pregnancy/maternity			
Religion or Belief	Disability - Candidates who have behavioural or access		
Race	problems related to a disability are accommodated through		
Sexual Orientation	examination arrangements. There are allowances for vulnerable		
	adults to be accompanied at meetings related to this procedure.		

## **Additional Considerations**

Care experienced	Impacts are likely to be neutral across the additional considerations
Carers	groups.
Mental Health	
Socio-economic	
status	
Veterans	
Human Rights*	The Human Rights to Education and Employment are advanced by
	this procedure.

Lead Officer:	Performance Manager			
Facilitator:	Performance Manager			
Date initiated:	18/09/23			
Consultation:	This procedure is structured to comply with the following:			
Research:	<ul> <li>SQA Malpractice: Information for Centres</li> <li>EAL Centre Guidance Malpractice and Maladministration</li> <li>IMI Malpractice and Maladministration Policy</li> <li>City and Guilds Managing cases of suspected malpractice in examinations and assessments</li> </ul>			
Signature	Sonya Rutter Date 18/09/23			

## Appendix 2 – Investigation Template

#### **Contact Details**

Lead Investigator (LI): Head of Centre Details:

#### **Introduction**

#### Terms of Reference

Dumfries and Galloway College "Centre Malpractice Procedure" (CMP) has been utilised to address....

Investigation Procedure

Evidence Considered

Evidence was considered as per the table below:

Report/Email/Interview	Focus	Outcome

Investigation Findings

Mitigating Factors

**Conclusion** 

## Recommendations/Future Actions

In order to prevent this occurring again the college will ensure the following:

Action	Who	When