


Reference Number: P39

# MALPRACTICE & MALADMINISTRATION POLICY AND PROCEDURE



Policy Review					
Author/Owner	Position	Approved by:	Approval Date	Review Cycle Review Date	Published on Website Y/N
Andrew Mitchell	Quality Manager	 Donna Short VP Qof E	22/05/25	June Every 2 x years	Y

Document Control – Revision History (Policies only)					
Author/Owner	Summary of Changes	Date	Date last reviewed by SED	Version	Recommend to SED Y/N
Kate Hill	New Policy	29.04.16			Y
Derrick Goddard/Kate Wills	No amendments required	13.04.18			N
Susie Peart	Minor changes to reflect change of job title	13.05.21			
Susie Peart	Removal of sections which duplicated Academic Misconduct Procedure Change to combined Policy and Procedure in line with other similar documents Addition of access arrangements for those requiring support or reasonable adjustment Reformatting in line with updated template format	19.06.23		v1	
Mark Bolton Scott Austin	Format changes References to other policies edited	13/7/23		v1.1	
Andrew Mitchell	Additional section to focus on minimising the Risk of Staff Malpractice and Maladministration. Intent and impact statements added. Inclusion of stakeholders. Additional section for appeals. Link to the JCQ M2 form to report malpractice/maladministration to AO. Addition of a college template to use for investigating suspected malpractice in incidences where an Awarding Organisation does not provide one.	14-04-25		v2	

Initial Equality Impact Screening					
Has anyone else been consulted on this policy and/or procedure? No					
What evidence has been used for this impact screening (e.g. related policies, publications)?					
Declaration (please tick one statement and indicate any negative impacts)					
<input type="checkbox"/> I am satisfied that an initial screening has been carried out on this Policy and/or Procedure and a full Equality Impact Assessment is not required. There are no specific negative impacts on any of the Protected Characteristics groups.					
<input type="checkbox"/> I recommend that an Equality Impact Assessment is required by the Equality and Diversity group, as possible negative impacts have been identified for one or more of the Protected Characteristics groups as follows:					
<div style="display: flex; flex-direction: column; align-items: flex-start;"> <input type="checkbox"/> Age           <input type="checkbox"/> Disability           <input type="checkbox"/> Gender Reassignment           <input type="checkbox"/> Race           <input type="checkbox"/> Religion or belief           <input type="checkbox"/> Sex           <input type="checkbox"/> Sexual orientation           <input type="checkbox"/> Marriage &amp; civil partnership           <input type="checkbox"/> Pregnancy &amp; maternity         </div>					
Completed by:			Position:		Date:
Reviewed by Equality & Diversity Group: YES/NO <span style="float: right;">If Yes: Date:</span> I confirm that any recommended amendments have been made					
Summary of Comments including Recommendations from Equality & Diversity Group Review:					
Amended by Author:			Position:		Date:

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## **1. PURPOSE OF THE POLICY**

- 1.1 Incidents of malpractice and maladministration can potentially lead to learners being disadvantaged, can require the conducting of costly and time-consuming investigations and may cause reputational damage to Yeovil College. It is, therefore, desirable to prevent malpractice or maladministration from occurring, whenever possible.
- 1.2 Where it is not possible to prevent this, cases of suspected or actual malpractice and/or maladministration should be dealt with quickly, thoroughly and effectively.
- 1.3 This policy has been prepared with reference to the rubric and terminology contained in Ofqual's General Conditions of Recognition<sup>1</sup>, and policy guidance from Awarding Organisations.
- 1.4 Yeovil College is committed to pursuing the highest standards of probity and the elimination of malpractice/maladministration in the management of our organisation and aims to promote accountability and a climate of openness, to encourage the disclosure of allegations of malpractice/ maladministration. Staff, learners and individuals must report allegations to the Quality Manager.
- 1.5 Allegations of malpractice and maladministration may apply to all staff involved with assessment at Yeovil College (academic and business support). Learners should be aware of this policy in terms of their right to make an allegation if they believe the college to have committed malpractice or maladministration.
- 1.6 Arrangements in place offer individuals a safe and accessible procedure for reporting allegations of malpractice in a confidential manner, on the basis that Yeovil College will take appropriate steps to ensure that individuals reporting allegations of malpractice are not penalised and are protected and that individuals accused will be protected against false, malicious or anonymous accusations. Yeovil College is keen to encourage staff, learners and individuals to report allegations without fear, and will ensure that any disclosure is treated with the utmost confidentiality.
- 1.7 Anonymous allegations will only be considered if they are of a serious nature and the evidence is sufficient to warrant an investigation and for appropriate action to be taken (this

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<sup>1</sup> <https://www.gov.uk/guidance/ofqual-handbook>

can follow the Whistleblowing Policy<sup>2</sup> route if applicable). Where appropriate, allegations will be recorded and submitted to the awarding organisation for investigation.

## **2. SCOPE**

- 2.1 All college staff (academic, business/service support and all echelons within the organisation) and learners have the right to allege malpractice or maladministration. This policy applies to internal and external summative assessments, assignments and examinations, administration and their reporting.
- 2.2 Instances of learner academic misconduct (which may include malpractice/maladministration) are not covered by this policy. Academic Misconduct will be dealt with under the separate Academic Misconduct Procedure<sup>3</sup>.
- 2.3 It is the responsibility of all Yeovil College staff to be vigilant with regard to any events which may lead to malpractice and maladministration occurring, and report promptly to the Quality Manager where they suspect malpractice and/or maladministration has and/or may occur so that appropriate action can be taken to address this with immediate effect.

## **3. RESPONSIBILITY AND AUTHORITY**

- 3.1 It is ultimately the responsibility of the Principal to ensure that this policy is published and accessible to all Staff, Learners and any relevant third parties. However, the Quality Manager is responsible for ensuring this information is fully understood by all staff within Yeovil College and by the learners who commence courses/programmes (qualifications) with Yeovil College (including all provision types across full-time, part-time, Yeovil College University Centre, apprenticeship and work-based learning provision, and sub-contracted provision where appropriate.).
- 3.2 The Quality Manager is responsible for notifying the relevant Awarding Organisation(s) of cases of suspected/actual malpractice and maladministration to ensure that appropriate action may be taken, and regulatory principles are followed.

## **4. MALPRACTICE/MALADMINISTRATION PROCEDURE**

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<sup>2</sup> Available at <https://www.yeovil.ac.uk/policies-reports/>

<sup>3</sup> Available at <https://www.yeovil.ac.uk/policies-reports/>

#### 4.1 Objectives:

- 4.1.1 To identify and minimise the risk of malpractice and maladministration by staff
- 4.1.2 To respond to any incident promptly and objectively
- 4.1.3 To standardise and record any investigation to ensure openness and fairness
- 4.1.4 To impose appropriate penalties and/or sanctions on staff where incidents (or attempted incidents) are proven
- 4.1.5 To protect the integrity of Yeovil College, Awarding Organisations and Qualifications.

#### 4.2 Malpractice

- 4.2.1 The term 'malpractice' covers any deliberate actions, neglect, default or other practice associated with the examples below; it may include a range of issues from the failure to maintain appropriate records or systems to the deliberate falsification of records in order to claim certificates.

#### 4.3 Instances of malpractice that may be committed by Staff include:

- 4.3.1 Committing plagiarism by copying and passing off the whole or part(s) of another person's work, with or without the originator's permission and without appropriately acknowledging the source.
- 4.3.2 Failing to comply with the assessor's/invigilator's instructions and/or an Awarding Organisation's regulations in relation to the assessment and security.
- 4.3.3 Misusing assessment material.
- 4.3.4 Impersonating a learner in order to produce the work for them.
- 4.3.5 Fabricating and/or altering results and/or evidence, documents and/or certificates.
- 4.3.6 Allowing unauthorised material in relation to the requirements of supervised assessment.
- 4.3.7 Behaving in such a way as to undermine the integrity of the assessment.

#### 4.4 Examples of Malpractice by Centre Staff - This list is not exhaustive and other instances of malpractice may be considered by this centre at its discretion:

- 4.4.1 Improper assistance to Learners
- 4.4.2 Inventing or changing marks for internally assessed work (coursework or portfolio evidence) where there is insufficient evidence of the learner's achievement to justify the marks given or assessment decisions made

- 4.4.3 Failure to keep learner's coursework/portfolios of evidence secure;
- 4.4.4 Fraudulent claims for certificates
- 4.4.5 Assisting learners in the production of work for assessment, where the support has the potential to influence the outcomes of assessment, for example where the assistance involves centre staff producing work for the learner
- 4.4.6 Producing falsified witness statements, for example for evidence the learner has not generated
- 4.4.7 Allowing evidence, which is known by the staff member not to be the learner's own, to be included in a learner's assignment/task/portfolio/coursework
- 4.4.8 Facilitating and allowing impersonation
- 4.4.9 Misusing the conditions for special learner requirements, for example where learners are permitted support, such as a reader or scribe, this is permissible up to the point where the support has the potential to influence the outcome of the assessment
- 4.4.10 Falsifying records/certificates, for example by alteration, substitution, or by fraud
- 4.4.11 Fraudulent certificate claims, that is claiming for a certificate prior to the learner completing all the requirements of assessment
- 4.4.12 Failure to comply with awarding organisation procedures for managing and transferring accurate learner data.

## 4.5 Maladministration

- 4.5.1 Maladministration is any non-deliberate activity, neglect, default or other practice that results in Yeovil College not complying with the specified requirements for delivery of the qualifications as set out in the relevant codes of practice, where applicable.
- 4.5.2 Examples include (this is not an exhaustive list):
- 4.5.3 Failing to ensure that learner's coursework or work to be completed under controlled conditions is adequately monitored and supervised
- 4.5.4 Inappropriate members of staff assessing candidates for access arrangements who do not meet the criteria as detailed by the Joint Council for Qualifications (JCQ)<sup>4</sup> regulations (where required);
- 4.5.5 Failure to use current assignments for assessments;
- 4.5.6 Failure to train invigilators adequately, leading to non-compliance with JCQ regulations;

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<sup>4</sup> <https://www.jcq.org.uk/>

- 4.5.7 The introduction of unauthorised material into the examination room, either during or prior to the examination; (NB this precludes the use of the examination room to coach learners or give subject-specific presentations, including power-point presentations, prior to the start of the examination/assessment).
- 4.5.8 Granting access arrangements to learners which do not meet the requirements of the JCQ publication Access Arrangements, Reasonable Adjustments and Special Consideration<sup>5</sup>;
- 4.5.9 Failing to report an instance of suspected malpractice in examinations or assessments to the appropriate awarding organisation as soon as possible after such an instance occurs or is discovered;
- 4.5.10 Failing to conduct a thorough investigation into suspected examination or assessment malpractice when asked to do so by an awarding organisation;

#### **4.6 The inappropriate retention or destruction of certificates**

- 4.6.1 Staff who commit malpractice/maladministration and who fail to comply with the guidance on regulations for assessment could lead the Awarding Organisation to withhold the learner's results. Withholding information or failing to report promptly any suspected cases of malpractice/maladministration or non-compliance by centre Staff may result in the imposition of sanctions/penalties on Yeovil College, with a possible outcome being the suspension of certification/registration or even recognised centre status.

#### **4.7 The Reporting of Malpractice or Maladministration**

- 4.7.1 In order to make an allegation of malpractice, you are required to contact:

Yeovil College's Quality Manager  
Yeovil College, Mudford Rd, Yeovil, BA21 4DR  
[feedback@yeovil.ac.uk](mailto:feedback@yeovil.ac.uk)

- 4.7.2 Reports and incidents of Malpractice or Maladministration will be logged by the Quality Manager and any investigations will be instigated and monitored by them.

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<sup>5</sup> <https://www.jcq.org.uk/exams-office/access-arrangements-and-special-consideration/>



- 4.7.3 Should the person submitting the allegation require any reasonable adjustments, such as support or assistance with a written statement, they should contact the Student Experience team.
- 4.7.4 The Quality Manager must report any allegations of malpractice or maladministration to the relevant Awarding Organisation. To do this, the [JCQ/M2 form](#) should be completed and submitted. This form is used to notify an awarding body of any suspected incidents involving staff malpractice or maladministration.
- 4.7.5 It is recognised that for any formal follow-up or investigation the Quality Manager will follow the specific guidance from the Awarding Organisation, and Joint Council for Qualifications (JCQ)
- 4.7.6 If applicable, an allegation of malpractice/maladministration may be reported directly to the awarding organisation or exam board, particularly if the individual feels the Quality Manager may be the subject of the allegation.
- 4.7.7 The college should **not proceed with gathering further information** until authorisation has been received from the awarding body

## 4.8 Investigations

- 4.8.1 It is understood that in certain cases, awarding organisations may wish to allocate their own staff to join or lead an investigation.
- 4.8.2 Investigations will adhere to the following principles:
- 4.8.3 **Confidentiality** – by their very nature investigations usually necessitate access to information that is confidential to a centre or individuals. 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). All staff must at all times comply with data protection law. Malpractice cases are usually confidential between the college and the awarding body. However, in cases of serious malpractice, information may be exchanged with regulators, other awarding bodies, and other relevant bodies
- 4.8.4 **Impartiality:** investigations will be undertaken by a senior manager (or appointed person) who has not been previously involved in the assessment or process in question. The investigating manager will assess the case against the specific

facts/evidence presented in order to arrive at a decision about intention and culpability.

- 4.8.5 **Rights of individuals** – where an individual is suspected of malpractice/maladministration they will be informed of the allegation made against them (preferably in writing) and the evidence that supports the allegation. 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 will also be communicated to them.
- 4.8.6 **Staff Interviews** - staff who are the subject of the allegation may request that they are accompanied by a colleague and these requests should be processed in line with awarding organisation/JCQ policy.
- 4.8.7 **Witness Interviews** - where a learner is to be interviewed as part of the investigation (as a witness) and they are a minor or vulnerable adult, Yeovil College should consider the need to have a parent or representative present or to have the permission of a parent prior to the interview taking place.
- 4.8.8 **Investigation Paperwork** - The designated investigator should, in the first instance, use the malpractice investigation documentation provided by the relevant awarding organisation; however, where this is unavailable, the investigator must use the YC Malpractice Investigation [Template](#) (Appendix 1).

#### 4.9 **Retention and storage of evidence and records**

- 4.9.1 All relevant documents and evidence should be retained in line with Yeovil Colleges stated policy and procedures.

#### 4.10 **Decisions and action plans**

- 4.10.1 All conclusions and decisions must be based on evidence. A course of proposed action shall be identified, agreed between Yeovil College and the awarding organisation (AO), implemented and monitored by the AO to the point of completion. The actions should address the improvements that are required to the centre's policies and procedures as well as any action that is related to staff or other resources.

## **4.11 Proportionality**

- 4.11.1 Any decision on the outcome must reflect the weight of evidence and the minor or major nature of the case

## **4.12 Sanctions**

- 4.12.1 Any sanctions applied should be proportionate with the level of non-compliance identified (and evidenced) during the investigation and should be in line with the Awarding Organisations and/or JCQ policy.
- 4.12.2 Staff who commit malpractice/maladministration, which is confirmed after investigation, may be subject to penalties, including:
  - 4.12.3 Exclusion from the delivery of the qualification.
  - 4.12.4 Exclusion from the assessment of the qualification.
  - 4.12.5 Exclusion from the internal verification/moderation of the qualification.
  - 4.12.6 Exclusion from the financial/quality management/administration of the qualification.
  - 4.12.7 Temporary suspension.
  - 4.12.8 Work only under supervision.
  - 4.12.9 Undertake specific training.
  - 4.12.10 The disciplinary procedure may be invoked.

## **5. Appeals**

- 5.1 Staff have the right to appeal against sanctions arising from malpractice decisions  
Information on the appeals process will be provided by the awarding body. Appeals must normally be made within 14 days of receiving the malpractice outcome decision. Further information can be found in the JCQ document "A guide to the awarding bodies' appeals processes"

## **6. Minimising the Risk of Staff Malpractice and Maladministration**

- 6.1 Regular Training and CPD: Staff involved in assessment, exams, and quality assurance receive regular training and updates on awarding body regulations and college procedures.
- 6.2 All staff are provided with access to relevant college policies, including this policy, and are regularly reminded of their responsibilities through staff briefings, quality meetings, and compliance updates.
- 6.3 Use of standardised assessment templates, internal verification procedures, and assessment tracking ensures consistency and reduces the risk of errors or deviations from approved practice.
- 6.4 Curriculum and/or quality teams carry out periodic audits and sample assessment and administrative records to check for compliance and detect early signs of potential issues.
- 6.5 Defined roles and responsibilities help ensure accountability across all aspects of assessment and administration. Staff know who to go to for guidance and support.

## **7. RELATED POLICIES, PROCEDURES, DOCUMENTS, DEFINITIONS<sup>6</sup>**

Ofqual General Conditions of Recognition<sup>7</sup>

Regulatory Policies in accordance with the Principles of qualification assessment JCQ Malpractice<sup>8</sup> and JCQ Documentation/Policies<sup>9</sup>

JCQ [Suspected Malpractice Policies and Procedures 24-25](#)

Awarding Organisation's Malpractice/Maladministration Policy and associated QA arrangements.

Yeovil College's Academic Misconduct Procedure

Yeovil College's Conflict of Interest Policy

Yeovil College's Internal Verification Procedure

Yeovil College's Assessment and APL-RPL Procedure

Yeovil College's Disciplinary and Grievance Policy (Staff and Learners)

Yeovil College's Whistleblowing Policy & Procedure

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<sup>6</sup> Published Yeovil College policies are available at <https://www.yeovil.ac.uk/policies-reports/>. Policies available for internal staff use (e.g. the Staff Disciplinary and Grievance Policy) are available to Yeovil College staff via the 'Policies and Procedures' section of the College SharePoint site.

<sup>7</sup> <https://www.gov.uk/guidance/ofqual-handbook>

<sup>8</sup> <https://www.jcq.org.uk/exams-office/malpractice/>

<sup>9</sup> <https://www.jcq.org.uk/>

# Appendix 1 - Yeovil College Maladministration Investigation Report Template

## Section 1: Administrative Details

<b>College Name:</b>	
<b>Centre Number:</b>	
<b>Internal Reference Number (If provided by Awarding Organisation):</b>	
<b>Date Investigation Commenced:</b>	
<b>Date Investigation Concluded:</b>	
<b>Names/position of staff involved in the investigation:</b>	
<b>Qualification(s)/Programme(s) Affected:</b>	

## Section 2: Submission Checklist

Please complete the checklist before submitting the report to the QualityTeam.

Item	Y/N
<b>All relevant evidence submitted</b>	
<b>All statements signed and dated</b>	
<b>Learner sample provided (if applicable)</b>	
<b>Evidence that all involved individuals were given the opportunity to respond</b>	

## Conflict of Interest Declaration

A conflict of interest is defined as a situation where an individual's vested interests raise a question of whether their actions, judgment, and/or decision-making can be unbiased. For instance, a member of staff with a personal relationship or direct line management responsibility for the individual they are investigating. See [JCQ Suspected Malpractice Policies and Procedure](#) (section 5.7) for further guidance.

I confirm that no conflict of interest existed for any individual involved in this investigation.

Name	Position	Date

## Section 3: Investigation Activities

### 3.1 Timeline of key investigation activities

Date	Investigation Activity

### 3.2 Allegations/Concerns Summary

Below is the list of allegations/concerns. Please ensure that all allegations/concerns are listed and that you have detailed information on whether you have concluded that there is evidence to substantiate the allegation(s).

Ref	Allegation/Concern	Substantiated (Y/N)
1		
2		
3		
4		
5		
6		
7		

### 3.3 Evidence and Analysis

Against each of your conclusions, please use the space below to detail your investigation activities, including references to any evidence that substantiates (or does not) the malpractice allegations/concerns.

Allegation Ref	Conclusion	Supporting Evidence
1		
2		
3		
4		
5		
6		
7		

### Specific items requested for inclusion in this report by the Awarding Organisation

Item (An example has been provided, delete as appropriate)	Response (or reference to relevant section)
For example • a meeting recording or a signed and dated transcript of an interview with the named member of staff,	
• a list of examinations invigilated by the member of staff in the last 12 months.	
• a meeting recording or a signed and dated transcript of interviews with the learners in the examination.	
• a meeting recording or a signed and dated transcript of anyone else you deem relevant to this situation,	
• a copy of invigilation records for the examination.	
• details of the checks you have undertaken to establish any impact on current or certificated learners. This could include but is not limited to: additional sampling of learner work, sampling of Quality Assurance records and details of pass rates and any changes/anomalies around the time of the alleged malpractice.	
• your conclusion, including whether malpractice has been identified or not and the evidence to support or refute this.	
• any additional information available such as mitigation factors that you feel may be relevant and which may help us to gain a clearer understanding of the situation.	
• any actions you have taken or intend to take to prevent a reoccurrence.	
• any other information you feel may be relevant	

### Section 4: Findings and Conclusions

Against each of findings, please detail your conclusions.

Allegation Ref	Finding
1	
2	
3	
4	
5	

## Section 5: Mitigating Circumstances

Please use the space below to detail any mitigating circumstances that should be considered when deciding if a penalty/sanction is applicable. Please note that ignorance of regulations and requirements will not, by itself, be considered a mitigating factor e.g.: refusing to take notice of regulations or failing to consider requirements.

<b>Allegation Ref</b>	<b>Mitigation</b>
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	

## Section 6: Preventative Actions

Detail the actions Yeovil College will take to prevent recurrence. Ensure these are added to the [Malpractice Plan Template](#)

<b>Allegation Ref</b>	<b>Action Plan</b>
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	

## Section 7: Head of Centre Declaration

I confirm that the findings in this report are based upon facts and knowledge, as they appeared to the individuals who carried out the investigation, and that this report is a true reflection of the findings..

<b>Name:</b>	
<b>Position:</b>	
<b>Date:</b>	
<b>Signature:</b>	