

Malpractice and Maladministration Policy

*Our policy on identifying, recording and managing
(suspected) malpractice and the application of
Sanctions*

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1. Introduction

Qualifications Network Limited (QNUK) has been established since 2003 and is a responsible awarding organisation recognised and regulated by the Office of Qualifications and Examinations (Ofqual) in England, Qualifications Wales and the CCEA in Northern Ireland. It offers regulated qualifications, primarily aimed at the Health and Safety, First Aid and Security sectors. It also provides endorsement for other courses or qualifications which meet the high standards set by QNUK.

Malpractice and Maladministration are two of the most stringently regulated areas related to the awarding of qualifications in the UK. It is covered under statutory regulation contained in the General Conditions of Recognition issued by Ofqual and CCEA and the Standard Conditions of Recognition issued by Qualifications Wales, hereinafter referred to as the 'Conditions'. It is further covered by Statutory Guidance issued by Ofqual (the 'Guidance'). As a Recognised awarding organisation, QNUK has a responsibility to ensure that all reasonable steps are taken to prevent the occurrence of any malpractice or maladministration in the development, delivery and award of the qualifications it offers. Where malpractice or maladministration occurs, QNUK has a responsibility to ensure that all reasonable steps are taken to prevent, or mitigate, any adverse effect, ensuring that all cases are investigated, recorded and, insofar as possible, resolved.

2. Document Review

All QNUK policies are reviewed on a regular basis, usually at least biennially. This policy will also be reviewed as required due to feedback from stakeholders or in line with changes in legislation, the Conditions, the Guidance or general sector or industry best practice. A full review will also be undertaken should any issue arise, whether internal or external, that QNUK considers could impact on the way in which malpractice and maladministration is managed.

The next review date for this policy is shown on the cover page.

3. Document Audience & Availability

3.1. Audience

This policy is intended for use by QNUK staff, including freelance staff, plus all Approved Centres and any other third party who either needs to be able to prevent, identify and manage incidents and possible incidents of malpractice and maladministration. It is also for use by the Regulators of our qualifications who may require information about how QNUK sets out to prevent, identify and manage any such incidents.

3.2. Availability

The Malpractice and Maladministration Policy is available to all QNUK staff (whether employed or freelance) whose role includes any element of the prevention, identification or management of malpractice or maladministration incidents or possible incidents. This is done via shared folders held within a secure portal accessed via Microsoft Sharepoint.

Where necessary, for instance for a short-term contract, a single copy of this document may be issued to individual contractors and other non-direct employees. One may also be issued to other relevant third parties, such as a Regulator, on request.

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This policy is also available to all Centres via the secure Centre Log-in area accessed via the QNUK administrative portal, MyQNUK.co.uk. Centres should ensure that any relevant members of their staff (whether employed or freelance) have access to a copy of this document, particularly any trainers, assessors or internal quality assessors.

4. Scope of Document

This policy covers the prevention, identification and management of malpractice and maladministration, including investigation and the application of sanctions, where appropriate, across the scope of the development, delivery, assessment and awarding of qualifications. In some areas this policy may refer to other QNUK policies and procedures which have been designed to minimise the risk of malpractice and maladministration.

This policy is designed to ensure that QNUK is meeting all relevant conditions and principles laid down by the Regulators within the United Kingdom. It will also apply to qualifications that have been awarded the 'Endorsed' standards badge by QNUK, meaning that, with the exception of certain notifications to the Regulators or other third parties, we will apply the same or similar processes in the prevention, identification and investigation of any actual or potential malpractice or maladministration. Similarly, we will apply any appropriate sanctions in the same way should any cases of malpractice or maladministration be confirmed in relation to an Endorsed qualification.

This policy applies to all staff of QNUK and its Centres including but not limited to:

- Contractors
- Unit writers
- Standards verifiers (e.g. External Quality Assurers)
- Graphic designers
- Printers, distributors
- Committee members
- Employees of suppliers
- Employees of companies associated with shareholders
- Assessors / Trainers (whether employed or Freelance)
- Internal Quality Assurers
- Centres

5. Definition of Malpractice, Maladministration and Adverse Effect

Malpractice and maladministration are two distinct, but closely related concepts that cover the improper actions or omissions of Learners, Centre staff (e.g. trainers, assessors, internal quality assurers, etc.), QNUK staff such as external quality assurers, or anyone involved with delivering or awarding qualifications, that would, or could, have an adverse effect on any stakeholders, the integrity of the qualification, or the

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certification thereof, contrary to the Conditions or any other relevant Statutory Regulation or Legislation. This can include where a Centre, Trainer/Assessor or Learner has breached QNUK's policies, procedures and stated standards. This will apply to QNUK 'Endorsed' qualifications as well as the fully regulated QNUK qualifications.

Whilst malpractice and maladministration are distinct, the two concepts can be on a spectrum and, as such, will sometimes merge into one another. Whether an incident is classified as malpractice or maladministration will depend on the context and can be a matter of judgement. For example, behaviour that might start as maladministration could become malpractice if the person responsible fails to respond to advice to change their approach.

What an incident is classified as may ultimately not be able to be decided upon until after the investigations have been undertaken as it may take QNUK to understand all of the details of the case before it can make such a determination. However, Centres should be aware that it is ultimately up to QNUK to decide on how any incidents are classified to ensure a consistent approach is taken across incidents, centres and over time.

5.1. Maladministration

Maladministration generally covers unintentional mistakes or poor processes where it is clear that the person responsible was not deliberately trying to cause any harm to the integrity of the qualification. Often this can be due to a lack of training, competence or experience, or simply be human error caused by carelessness. In their Statutory Guidance, Ofqual have provided the following as a non-exhaustive list of examples of possible maladministration:

- Avoidable delay
- Mistakes arising from inattention
- Faulty procedures
- Failure to follow correct procedures
- Poor record keeping
- Inadvertent failure to take action
- Poor communication, and
- Inadvertently giving misleading or inadequate information

All maladministration is avoidable but has occurred inadvertently. There are some instances where something that would normally be referred to as maladministration may be escalated to malpractice, for instance if:

- the investigation into maladministration is obstructed
- an Action Plan put in place by QNUK is not adhered to, or feedback provided via moderation and external quality assurance reports is not acted upon to improve processes to mitigate the risk of continued maladministration or even malpractice
- repeatedly logged instances of Maladministration events indicate that it is an endemic issue

So, it is important that all parties recognise maladministration, report any instances, investigate the reasons for them and take action to ensure such errors do not recur.

5.2. Malpractice

Malpractice will usually involve a person intending to break the rules or cause harm, being negligent or reckless as to the consequences of their actions. It may be one of the actions listed above as an example of Maladministration, but one that has been taken deliberately by the person responsible to subvert the legitimate course of a qualification. It could also include where intentional bias or discrimination is evident, whether it is the actions, or the words used that are discriminatory. Finally, it could be an inaction or omission of information. To give a better understanding, the clearest examples of Malpractice might be:

- Cheating, or deliberately allowing cheating, in an assessment
- Attempting to manipulate or change a result so that it does not reflect the Learner's actual performance in that assessment
- Attempting to withhold information from QNUK or otherwise cover up some form of malpractice or impede an investigation into suspected malpractice
- To, in any way, breach the principles of fairness or equality for all, whether by action or by words

Any of the above actions could be taken by the Learner, a trainer/assessor, an examinations officer, an internal quality assurer, or someone within the awarding organisation. It could even be a third party involved in, or with access to, the assessment process. Ofqual provide some additional specific examples of malpractice including, but not limited to:

- Revealing the questions on an assessment in advance (where confidentiality is required under Condition G4.1)
- Sharing confidential assessment materials ahead of an exam
- Claiming to have and/or offering to share confidential assessment materials and/or presenting hoax materials as confidential materials
- A learner breaching the rules of the assessment, for example by bringing impermissible materials into the assessment
- Producing a forged certificate which does not reflect a learner's actual performance in an assessment
- A learner passing off someone else's work as their own (plagiarism)
- A teacher/tutor providing a learner with answers, providing assistance to learners beyond what is permitted, or deliberately failing to apply the mark scheme to a learner's answer
- A teacher or learner falsifying a result

5.3. Adverse Effect

An Adverse Effect is defined by the Regulator(s) as an act, omission, event, incident or circumstance that:

- a) gives rise to prejudice to Learners or potential Learners, or
- b) adversely affects –
 - i) the ability of the awarding organisation to undertake the development, delivery or award of qualifications in accordance with its Conditions of Recognition,

- ii) the standards of qualifications which the awarding organisation makes available or proposes to make available, or
- iii) public confidence in qualifications.

All incidents that could potentially give rise to such an adverse effect must be reported immediately to the Compliance Manager. All QNUK staff and Centres have a responsibility to ensure that notification of such events is not subject to any undue delay, including for the commencement of any investigations to ascertain whether or not an actual adverse effect has occurred. Failure to delay such notification by a Centre or its staff may cause an incident to automatically be treated as malpractice on the basis that the information has been deliberately withheld from QNUK.

6. Responsibilities

All staff, including Centre Staff and independent consultants, subject experts and other persons involved in the design, development, delivery or award of a qualification offered by QNUK, have a responsibility to put in measures to prevent malpractice or maladministration, plus, if such incidents occur, to identify and declare any possible incidents of malpractice and/or maladministration and assist, as necessary, in any investigations. Even Learners have responsibilities in this regard. However, there are some responsibilities that fall more specifically into one role or group, as set out below:

6.1. QNUK

Under the current Conditions, the Awarding Organisation has a responsibility to:

- Take all reasonable steps to prevent the occurrence of malpractice/maladministration
- Have up-to-date written procedures for the investigation of suspected or alleged malpractice/maladministration
- Provide effective guidance to Centre on how qualifications should be delivered, including the prevention and detecting of any incidents, or potential incidents, of maladministration or malpractice
- Provide any additional guidance on the prevention, identification and investigation of malpractice on request from a Centre
- Ensure that all investigations are carried out rigorously and effectively
- Review how each Centre deals with, or intends to prevent and investigate any cases of malpractice/maladministration
- Inform other Awarding Organisations where malpractice/maladministration is identified within a Centre which may affect other Awarding Organisations
- Apply sanctions to Centres in line with our sanctions policy where malpractice/maladministration is identified
- Maintain adequate records of all incidents of maladministration or malpractice or potential malpractice
- Notify the Regulator(s) of any incidents of maladministration or malpractice that have, or could potentially have, an adverse effect

The Compliance Manager has been allocated specific duties in respect of malpractice and maladministration:

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- Maintain logs of all instances of malpractice and maladministration
- Investigating, or arranging for an investigation to take place, of all incidents of actual or potential malpractice or maladministration
- Monitoring and reviewing the outcome to any investigations
- Informing all relevant parties of the progress of, or outcome of, any investigation into an incident, or potential incident of malpractice or maladministration, including the Centre and the Regulator(s)
- Ensure the Action plan put in place following such an incident is adequate to satisfactorily resolve the issue and evidence how the risk of any recurrence has been mitigated
- Ensure that any Action Plans are followed up to ensure that these are carried out in a timely manner

6.2. Centres

Centres have a large part to play in the prevention, identification and investigation of any actual or potential case of maladministration or malpractice, including, but not limited to:

- Ensuring all staff are fully aware of the QNUK policies and procedures for the delivery of qualifications and assessments
- Ensuring all staff involved in the delivery, assessment or award of a qualification, including the Examinations Officer, Trainers/tutors/teachers, assessors and Internal Quality Assurers (IQAs) are provided with adequate training and support to enable them to take all reasonable steps to prevent maladministration/malpractice or, if an incident occurs, to identify it and report it as soon as possible
- Keeping an up-to-date log of any potential or actual incidents of malpractice or maladministration
- Keeping all policies and procedures under review to ensure that they align with the latest guidance from QNUK
- Attend all QNUK offered training, webinars or seminars and ensuring that all QNUK guidance documents are provided to the relevant staff involved in the delivery, assessment or award of a qualification
- Ensuring that learners are fully informed of the compliant way in which assessments will be undertaken, what is expected of them and, in particular, what is prohibited, e.g. not having their mobile phones on in or accessible during the course of an assessment; what might constitute as plagiarism, etc.
- Inform QNUK immediately any actual or potential incidents of malpractice or maladministration are detected
- Cooperate with all QNUK investigations. Centres are allowed to undertake their own investigations, and are encouraged to do so in order that lessons may be learned, however QNUK will not rely solely on an investigation undertaken by a Centre when determining the outcome of a malpractice investigation
- Ensure that all actual and potential conflicts of interest are logged, managed and notified to QNUK as soon as possible, but at least prior to any assessments being undertaken, to avoid such matters becoming a malpractice or maladministration incident

Most of the above will fall on the shoulders of the Head of Centre. Whilst they are free to delegate as necessary, the Head of Centre is expected to be aware of the conduct of their Centre on a day-to-day basis and, as such, cannot delegate the full responsibility to another individual.

6.3. Learners

Learners are generally expected to be guided and overseen by the Centre, however they also have some specific responsibilities in this regard:

- Ensure they listen to all guidance and instructions from their Centre, or the Centre staff, particularly their trainer/tutor/teacher, assessor or invigilator
- Cooperate with requests to put unauthorised equipment or materials in a designated safe place (e.g. placing mobile phones, bags, text books, etc. in a designated locker or at the front of the examination room near the invigilator, etc.) for the duration of the assessment/examination (where required)
- Cooperate with requests to turn off electronic equipment and mobile phones, etc. during any assessments (where required)
- Cooperate with any pre-assessment arrangements, particularly during proctored assessments that are being delivered remotely, e.g. carrying out system tests, particularly on webcams and microphones, etc. plus showing their photo ID to the camera immediately prior to the assessment to ensure that an image of the photo ID is captured
- Ensuring that, during any proctored assessments delivered remotely, they are alone throughout the assessment with no distractions, that all webcams and microphones are switched on throughout the assessment
- Inform the Centre of any issues which may affect the way in which they undertake their assessment at the earliest opportunity, including anything that may warrant the centre making reasonable adjustments due to a disability, including hidden disabilities such as dyslexia, autistic spectrum disorder, ADHD, etc.

7. Examples of Malpractice and Maladministration

In addition to the examples set out in section 6 above, we have included some additional examples of events which could lead to a report of suspected malpractice or maladministration. Please note, the following lists are not exhaustive.

7.1. Maladministration by a Centre

The following are some examples of maladministration by a Centre. Please note that these may be escalated to malpractice should they not be resolved by the Centre in line with any action plan put in place by QNUK.

- Failure to keep accurate and complete records in a secure manner, as required by the policies and procedures laid down by QNUK
- Failure to notify QNUK of any changes to staff or main centre contacts
- Failure to submit assessment materials to QNUK in line with the laid down timescales or on request, whichever is the sooner

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- Failure to notify QNUK of a potential Conflict of Interest which the centre has adequately managed
- Failure to comply with any of the administrative procedures and processes laid down by QNUK, including adherence to any timescales therein

7.2. Malpractice by a Centre

The following are some examples of malpractice by a Centre or its staff:

- Fabrication of Reasonable Adjustments or Special Considerations requests or supporting evidence for such requests
- Fabrication of assessment or internal quality assurance evidence or documentation
- Continued failure to rectify issues of maladministration indicated on feedback provided by QNUK, including failure to adhere to an action plan put in place by QNUK
- Failure to cooperate with an investigation by QNUK or a Regulator into any potential malpractice, maladministration or other incident which could give rise to an Adverse Effect, including refusing entry to a QNUK appointed external quality assurer whether the visit was pre-arranged or undertaken without prior notice
- Allowing a learner to commit malpractice by inadequate ID checks or invigilation of a controlled examination
- Withholding information regarding any actual or potential Conflicts of Interest which have also not been managed or logged within the Centre
- Failure to be able to produce, on demand, any requested records or evidence to support a claim for results and/or certificates for moderation or external quality assurance purposes.

7.3. Malpractice by a Learner

The following are examples of how a learner might commit, or seek to commit, malpractice:

- Provision of false identification or failure to produce required evidence of identification – this could be an indication of ‘Personation’ (i.e. taking an assessment in the name of another individual)
- Working with another learner to share answers and information about the examination – known as ‘collusion’
- Offering incentives to assessors for them to alter the results of an examination (bribery)
- Behaving inappropriately during an examination or including inappropriate or discriminatory (racist, sexist, homophobic, etc.) content or commentary within an assignment submitted for assessment

8. Risk Management

QNUK has a full Risk Management policy in place and ensures that all qualifications and centres are risk rated according to a robust risk procedure. However, Risk Management should not be seen as a standalone process. It is embedded in all that we do and is under constant review and development. To this end, we endeavour to mitigate the risk and practice of maladministration and malpractice through clear guidelines and information for our staff, centres and learners.

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Malpractice or Maladministration both pose significant risks to QNUK and the to the wider Regulated qualifications industry. These risks include (but may not be limited to):

- QNUK could be found to be non-compliant with its Conditions of Recognition or other regulatory requirements
- Learners could suffer adverse effects of the malpractice or maladministration
- QNUK's reputation as a Recognised Awarding Organisation could be adversely affected
- Consumer confidence in regulated qualifications could be adversely affected
- Adverse effects to QNUK's business, or that of its Approved Centres

QNUK is committed to ensuring that all risks are mitigated insofar as possible. The way in which we do this includes:

- Designing qualifications and assessments that meet all regulatory requirement, that are fit for purpose, but which reduce the risk of malpractice or maladministration occurring
- Having a low-risk approach to the approval of Centres to deliver qualification – i.e. QNUK undertakes detailed due diligence during the application stage for new centres, including checking all notifications received from other awarding organisations under Condition A8.7, prior to granting approval
- Using secure document sharing technologies, such as via the secure administrative portal, MyQNUK, to prevent unauthorised persons gaining access to confidential assessments and other information, insofar as possible
- Having robust policies and procedures in place for ourselves and our Centres to prevent maladministration or malpractice
- Having robust systems in place that aim to identify any potential maladministration or malpractice, including review of incidents which have happened outside QNUK (e.g. at another awarding organisation or training company not associated with QNUK) to see if there is a risk to QNUK that was not previously identified
- Having robust policies and procedures in place for the identification, investigation and management of any actual or potential incidents of malpractice or maladministration
- Providing Centres with information, training and any other assistance required to ensure that they are aware of the possibility of malpractice or maladministration, what to do should they discover a potential incident and what the consequences might be if they are found to deliberately have committed malpractice or fail to cooperate with the investigation or resolution of an incident of malpractice or maladministration.

All incidents, or potential incidents, of malpractice or maladministration will be investigated in line with the procedures outlined in this policy.

9. Resource Requirements

QNUK is committed to ensuring that it maintains adequate resources to ensure that it is able to meet all of its Conditions of Recognition and other Regulatory Requirements. In this context, 'resources' includes staff,

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equipment and technology, plus ensuring that all staff are trained and competent in their roles. The Compliance Manager is responsible, on a day-to-day basis, for identifying any additional resource requirements while managing incidents of malpractice or maladministration. These may include (but are not limited to):

- Consultants
- Independent investigators or reviewers
- Escalation to the Governance Committee
- Venues, invigilators, assessors or other resources necessary to undertake independent re-examination of learners who have been affected by the malpractice or maladministration
- Additional External Quality Assurance professionals
- Additional administrative support

Should any weaknesses or gaps be found in our policies, procedures or resources available for the prevention, identification or management of malpractice or maladministration, these will be reported to the Governance Committee for appropriate action to be agreed and undertaken.

10. Preventing Malpractice and Maladministration

QNUK is committed to ensuring that all reasonable steps have been taken to minimise the risk of malpractice or maladministration occurring during the delivery, assessment or award of its qualifications. Some of the ways in which we set out to do this, in addition to those included in Section 8 above, include (but are not limited to):

- Consider any potential risks during the development of a qualification and associated assessment methodologies planned or employed
- Regularly review the assessment methodologies employed to ensure these remain fit for purpose, particularly following an incident of malpractice/maladministration to consider any lessons learned
- Ensure that all persons involved in the development, delivery, assessment and award of our qualifications, both internal to QNUK and external (i.e. contractors and Centres, etc.), are fully aware of their responsibilities in respect of malpractice and maladministration, what might constitute malpractice or maladministration, how to report concerns and where to find all relevant policies, procedures and guidance
- Ensure that additional training and guidance is made available to all persons involved in the development, delivery, assessment or award of a qualification that we make available, including the running of workshops and seminars specifically on the prevention, identification, reporting, investigation and resolution of any incidents or potential incidents
- Ensure that minimising the risk of malpractice or maladministration is considered in all guidance and documents made available to Centres, including delivery and assessment guides
- Monitor how malpractice and maladministration is prevented, identified and managed by Centres as part of the External Quality Assurance processes

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- Ensure that the QNUK Sanctions Policy is made available to all Centres, alongside this Malpractice & Maladministration Policy, and that all Centres understand the consequences of committing malpractice or maladministration, or allowing it to be committed, or trying to conceal incidents of malpractice or maladministration
- Ensure that Centres make the consequences of committing malpractice clear to all learners who attend their Centres to take a QNUK qualification
- Identify and share any good practice amongst Centres to encourage and support high quality delivery and assessment

11. Identifying Malpractice and Maladministration

Whilst every effort is made to prevent malpractice or maladministration, QNUK acknowledges that this can still occur and is committed to ensuring that such incidents are identified and resolved as quickly as possible.

There are a number of ways in which malpractice or maladministration might be identified including, but not limited to:

- Internal monitoring and quality assurance undertaken at or by Centres. This can also include where an invigilator or assessor has witnessed learner malpractice
- External Quality Assurance activities undertaken by QNUK, including moderation, desk-based checks, observations and Centre visits
- Complaints/feedback from learners, centre staff members or other third parties which include reports of malpractice or maladministration (including whistleblowing)
- Reports from other Awarding Organisations, Regulators or other connected third parties, particularly if it is in relation to a previously accepted business practice which is found to not be fit for purpose following reviews
- Other intelligence gathering, e.g. via monitoring social media, etc. where some practices may be discussed

As soon as a malpractice or maladministration has been identified, it will move on to being reported, as appropriate depending on the incident. The details of the full process are covered in this policy, however a process flow covering the main tasks is included at Appendix A.

12. Reporting Cases of (Suspected) Malpractice or Maladministration

12.1. Maladministration

Cases of maladministration must all be logged for trend analysis, but do not all have to be reported to the Compliance Manager. All QNUK staff must be made aware of the need to log any incidents of maladministration. Incidents must be logged whether they have been reported internally by a QNUK staff member, or externally, such as by a Centre.

Where a Centre is found to have had more than 3 incidents of maladministration in any rolling 6 month period (except if they are in the first 6 months' probationary period of their Approval with QNUK), they will

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be escalated to the Compliance Manager for inclusion on the Malpractice log and for an official communication to be issued for them to be informed of this and of the application of a Level 1-2 Sanction, plus be given an action plan. This is designed to ensure that all Centres take note of the feedback they receive on any errors made and take steps to prevent any recurrence.

12.2. Malpractice

All cases (or suspicions) of malpractice must be reported to the Compliance Manager as soon as possible after identification. The Compliance Manager will review the details provided to decide if the suspicion warrants a Malpractice investigation. Where this is the case, the Compliance Manager will log the details of the Centre and the incident to be investigated onto the Malpractice Log which is held in the restricted access QNUK Sharepoint folder – Compliance – Documents – Malpractice - Malpractice log and decide the next steps (see 'Investigating Cases of (Suspected) Malpractice' below).

The Compliance Manager will open up a case file within the restricted access QNUK Sharepoint folder – Compliance – Documents – Malpractice under the Centre name, and ensure that all relevant documents, including are saved in the appropriate centre malpractice folder. The Compliance Manager will also then start a Malpractice Report using the standard template (see Appendix B).

If, following initial investigations, it is found that there is no malpractice case to answer, the Malpractice Log will be updated to reflect this, including reasons why.

13. Investigating Cases of (Suspected) Malpractice

QNUK is committed to ensuring that all cases of malpractice are investigated thoroughly, using a consistent and effective approach. The following sets out how we do this:

13.1. Who carries out an investigation?

All cases (or suspicions) of malpractice will be investigated rigorously, effectively and by persons of appropriate competence who have no personal interest in the outcome.

The Compliance Manager will decide on the most appropriate person to undertake the investigation. This may be:

- The Centre Manager or Internal Quality Assurer for the Centre – this will be on an exceptional case and only where the Compliance Manager is assured that the Centre Manager is competent and has no personal or business interest in the outcome
- The QNUK Lead External Quality Assurer – they may delegate some of the investigation to external quality assurers under their supervision
- The Compliance Manager – where the risk raised by the malpractice (or suspected malpractice) is sufficiently high, the Compliance Manager may lead the investigation, but may delegate some of this to the Lead External Quality Assurer or their EQAs, e.g. to undertake visits or observations, etc.
- The Managing Director – where the Compliance Manager is not available or there is a conflict of interest, the Managing Director may take the lead on the investigation

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- An independent third party – e.g. a subject specialist, compliance consultant or independent member of the Governance Committee; this is usually only used if there is a conflict of interest or if the Centre has appealed a decision and has requested an independent review

13.2. Investigations by a Centre

Whilst all Centres are welcome to undertake their own investigations into a suspicion of malpractice, the outcome of these will only be accepted without further investigation by QNUK in exceptional circumstances. In order for them to be accepted, the Compliance Manager must be confident that any investigations undertaken by a Centre will be, or have been, conducted by an impartial and unbiased investigator who does not have a personal interest in the outcome. The Compliance Manager must also be confident that the Centre has sufficient resources to conduct the investigation.

QNUK will, on request from a Centre, provide any assistance or guidance necessary for that Centre to be able to conduct an investigation effectively. This is regardless of whether QNUK undertakes a separate investigation or not.

If the Compliance Manager is concerned regarding the Centre's resources or the impartiality of the investigator appointed by a Centre, or if the risk posed by the malpractice or suspected malpractice is too high, they will arrange for the matter to be investigated by one of the other persons indicated in 13.1 above.

13.3. Investigation by Compliance Manager, Lead EQA or Managing Director of QNUK

The majority of investigations will be carried out by someone within QNUK, unless there is a specific reason to hand this over to a third party, or if the investigation by a Centre is deemed reliable.

The Compliance Manager will decide who is best placed to undertake an investigation. This may be affected by a number of circumstances but ensuring there is no Conflict of Interest will be the main priority in any case.

Whoever undertakes the investigation will need to report their findings to the Compliance Manager to ensure that they are able to update the information provided to the Regulators (where appropriate) and that the Centre and any affected Learners are also kept informed as to the progress of the case.

13.4. Investigations by Independent Third Parties

Where necessary, the Compliance Manager may appoint an independent third party to undertake the investigation. The types of independent third parties appointed include, but are not limited to:

- A sitting member of the Governance Committee with suitable expertise and experience
- A Compliance consultant
- A freelance professional External Quality Assurer
- An independent subject expert

An independent third party may be appointed because there is a potential conflict of interest with the available QNUK Staff which could put a bias on the outcome of the investigation, or be perceived to do so from an external viewpoint, or because there are insufficient resources available at QNUK at the time of the incident coming to light (i.e. due to clashing holidays or sickness or other exceptional absenteeism), or

because an investigation has taken place and the Centre has appealed against the outcome and requested an independent review.

The Compliance Manager will ensure that the Independent Third Party has access to all necessary records, staff and other resources in order to allow them to carry out their investigation. The Centre will also be informed of the name of the independent third party undertaking the investigation, but QNUK is not obliged to explain the reason for such an independent appointment.

The Centre must ensure that the appointed investigator is given full access to all records, information, staff and learners as they require in order to carry out a full investigation.

13.5. Process for Investigations

All investigations will follow the same general approach and process, regardless of who is undertaking the investigation. This is as follows:

- i) The Compliance Manager receives the initial report of the malpractice or suspected malpractice and decides if an investigation is warranted
- ii) The Compliance Manager appoints the appropriate investigator
- iii) Where there is an actual or potential adverse effect, the Compliance Manager will inform the Regulator(s) of the initial report and planned actions, plus issue an A8.7 notification to other relevant awarding organisations and any other interested third parties (e.g. other Centres using the same freelance trainer/assessor who has been named as party of interest in the malpractice case). All notifications will include the name and address of the Centre, name of the Head of Centre and any other staff or trainers/assessors who were involved in the malpractice, and the qualification affected
- iv) The Compliance Manager logs the malpractice and sets up a folder with the initial documents in Sharepoint under Compliance/Malpractice
- v) The Compliance Manager completes the first part of the Malpractice Report (see Appendix B) and passes this to the investigator (where appropriate)
- vi) The Compliance Manager, or the Investigator, as appropriate, contacts the Centre to inform them of the reported malpractice or suspected malpractice and requests the relevant information and formal response from them to the allegations being made*
- vii) Where appropriate and depending on the initial sanction applied, the Centre's ability to book examinations and register learners will be suspended and any outstanding results and certificates withheld.
- viii) Where warranted, a visit is arranged to the Centre to review documents and/or meet with staff and Centre Manager and/or observe a planned assessment
- ix) Where appropriate, learners will be contacted and asked to agree to be interviewed. These interviews will then be carried out, possibly via telephone or video conferencing or, where possible, in person.
- x) Once all investigations have been carried out and information has been gathered, including any response and evidence provided by the Centre, the outcome will be determined as to whether

malpractice has taken place, was it carried out deliberately and whether there been an adverse effect as a result

- xi) The Investigator must complete the Malpractice Report (see Appendix B) covering all of the details of the case, the investigative work carried out, the outcome of the investigations, the rationale for that outcome including details of how the malpractice occurred or was likely to have occurred, include any evidence (i.e. learner or staff interviews, records, assessment materials, etc.) and suggested actions for the Centre to be able to resolve the issue, taking into account any actions already taken**
- xii) The Malpractice log will be updated with the outcome
- xiii) The Regulator(s) will be updated with the outcome, where appropriate, plus an updated A8.7 notification to be issued to all interested parties (as per iii) above)
- xiv) The Centre will be informed of the outcome and provided with an action plan to resolve the issue, taking into account any actions already taken**
- xv) Copies of the Action Plan will be provided to Centre Support and the EQA Team for follow up on any actions required
- xvi) The Regulators will be kept updated with any changes to the action plan, including changing dates or where an initial plan of action is proven to be unworkable, overly burdensome or raises the risk of non-compliance with other legislation or regulation, etc.

Please Note:

*There are some instances where a Centre may not be informed of the malpractice but rather an unannounced visit will be undertaken at their premises. This will only happen if the malpractice is extremely high risk, such as there has been a report in the media about the incident or it has, or is likely to have, a major adverse effect on the validity of the qualification or the reputation of QNUK and/or the qualification it offers.

**In cases where it has been determined that the Centre has committed serious and deliberate malpractice, OR if they have refused to cooperate with the investigation into the malpractice, they may immediately be subject to our highest sanction which would mean immediate revocation of their Centre Approval under QNUK. In such cases, no action plan will be put into place. Where this is the case and learners have been affected, the learners will be contacted directly to advise them of this and invite them to contact us for assistance in completing their qualification, where applicable.

13.6. Unannounced Visits

There may be occasions when there is a suspicion of malpractice that it may be necessary to conduct an unannounced visit in order to fully identify the potential risk. Such visits are designed to enable investigators to observe centres in conducting their normal working processes and are not intended to trick, manipulate or unnecessarily disrupt centres, assessments and learners. Unannounced visits allow investigators to see the Centre in a more 'natural' way as there has been little or no opportunity for centres, staff or any involved party to prepare for the visit and to 'perform' for the investigator. Unannounced visits must still be planned by the investigator with clear objectives and outcomes recorded.

Unannounced visits must follow the principles of investigation and be carried out by the Compliance Manager, the appointed investigator or, where appropriate, a nominated external quality assurer acting as the representative of the Compliance Manager.

13.7. The Principles of Investigation

All investigations must be conducted with all due regard for the following:

- **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 will be kept securely and should not be disclosed to any third parties, except where required to under the Regulations or legal obligation.
- **Risk Based** – All investigations and decisions must take into account the risk rating applicable to the qualification and that applied to the Centre. These are applied as per the Quality Assurance Policy and Risk Management Policy.
- **Rights of individuals** – where an individual is suspected of malpractice they will be informed, in writing, of the allegation made against them and the evidence that supported the allegation. They will be provided with the opportunity to consider their response to the allegation and submit a written statement or seek advice, if they wish to do so. They will also be informed of what the possible consequences could be if the malpractice is proven and the possibility that other parties may be informed e.g. the regulators, police, funding agencies, professional bodies, etc. The appeals process will also be communicated to them. During investigations it is probable that the individual(s) will need to be interviewed to gather information on the alleged malpractice. Where Centre staff members are being interviewed during an investigation that is being carried out by the Centre, these interviews should be carried out in line with Centre policy and procedures (including the Centre’s policy for conducting disciplinary enquiries). Centre staff may request that they are accompanied by a friend or colleague and these requests should be processed in line with Centre and/or QNUK policy. Where a learner is to be interviewed and they are a minor or vulnerable adult, the Centre and/or QNUK should consider the need to have a parent, guardian or carer present or to have permission of a parent, guardian or carer prior to the interview taking place. Where legal advisors are to be present during interviews this must be made known to other parties involved to give the same opportunity to be similarly supported.
- **Retention and storage of evidence and records** – all relevant documents and evidence should be retained in line with our stated policy and procedures.
- **Decision making** – compliance decision making is not subject to the burden of proof meeting the “beyond a reasonable doubt” as it would in a criminal courtroom, but rather all such decisions should be made using the basis of being “on the balance of probabilities”, as it would in a civil litigation case. This means that, once all evidence and representations are reviewed and taken into account, including the conduct of the Centre and/or individual previously, the Compliance Manager must be satisfied that malpractice is more likely to have occurred than not.
- **Sanctions** – any sanctions applied to Centres should be commensurate with the level of non-compliance identified (and evidenced) during the investigation and should be in line with QNUK sanctions policy.
- **Internal Malpractice** - Where the allegation or suspicion of malpractice relates to QNUK and/or their staff, decisions and action plans will be agreed between the investigating party e.g. the Regulator and QNUK in accordance with current regulations and legislation.

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- **Disciplinary Action** – where the alleged or suspected malpractice has been committed by a member of QNUK Staff or contractor, any actions should be commensurate with the level of non-compliance identified (and evidenced) during the investigation and should be in line with QNUK Disciplinary Policy and procedures.

13.8. The Investigation Report and Objectives

The main objectives of any investigation are to:

- Establish whether malpractice has taken place
- Identify any adverse effect
- Ascertain how the malpractice occurred
- Identify any weaknesses in either the Centre’s processes and controls or that of QNUK which contributed to the malpractice
- Minimise the risk of any adverse effects to the learners, the validity of the qualification, the reputation of QNUK and the qualifications it holds, or to the wider regulated qualifications sector
- Identify any patterns or trends which contributed to the malpractice, including those internal to QNUK
- Identify any improvements required to the Centre’s or QNUK’s policies, procedures and controls which may prevent any recurrence in future
- Determine if there is any historical impact on certificates or results already issued to learners and seek to contact those learners to offer remedial actions to resolve this

All of the above must be clearly recorded, along with any supporting evidence. The details should be entered on the Malpractice Report Template (see Appendix B), a copy of which is available within the restricted access QNUK Sharepoint folder – Compliance – Documents – Malpractice. Additional information may be attached on separate sheets. All evidence must be copied into the folder set up for the specific case within the restricted access QNUK Sharepoint folder – Compliance – Documents – Malpractice – Centre Name.

All reports will be made available to the Centre and/or staff member against whom the accusations of malpractice have been levied. This will only be provided on request. They will, however, be provided with a written summary of the accusations, the evidence found and the outcome of the investigation, including any action plan.

14. Decisions

The final decision on the outcome of any malpractice investigation will lie with the Compliance Manager in the majority of cases (e.g. unless there are any conflicts of interest or the Compliance Manager is not available within the timeframe for a decision to be made). Decisions will take account of the content of the Malpractice/Maladministration Report and all supporting evidence provided, and be made on the basis of being “on the balance of probabilities” (see 13.7 above). They will also take into account the actual risk posed by the incident that has happened in relation to the risk rating of the qualification and the Centre to ensure that any sanctions applied are appropriate to the overall risk. Where they are not available and/or there is a potential conflict of interest, the decision making will pass to the Managing Director. Where

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neither individual is available or appropriate, another member of the Governance Committee will be appointed to determine the final outcome.

Any decision will be taken with all due regard to the suggestion of the investigator and any representations made by the Centre regarding any mitigating circumstances.

All decisions will be entered onto the Malpractice Log and the Malpractice/Maladministration Report will also be updated. Where appropriate, these may also be entered into the Risk Register by the Compliance Manager to ensure that all reasonable steps are taken to prevent recurrence.

15. Sanctions and Penalties

Where the malpractice has been found to have been caused by a learner and/or Centre, QNUK will apply appropriate sanctions and/or put in place an action plan to resolve the malpractice issue. The types of things that may be considered when deciding upon the most appropriate sanction to be applied includes, but may not be limited to:

- The risk rating of the qualification
- The adverse effect the issue has had, or may have had, on:
 - The validity of the assessment
 - The reputation of the qualification
 - The reputation of QNUK
 - The learners and their ability to fulfil their potential in relation to the qualification they had been seeking to achieve
- The number of learners who have been, or may have been, affected by the issue
- The level of cooperation and transparency offered or provided by the Centre during the investigation
- Whether there is an endemic issue at the Centre with its policies, processes or practices
- The quality assurance history of the Centre and/or its staff which may give assurance as to how likely they are to be able to resolve any issues come back to a compliant status

The way in which sanctions are applied may be flexible dependent on the full context of the issue identified, taking into account all of the above factors. The types of sanctions that may be applied, together with the types of events and risks that each sanction may be appropriate for is provided in the table held in Appendix C to this policy. Please note that the list of penalties and the types of issues that may fall into each category set out within that table are not exhaustive, neither are they fixed to the Sanction level depicted, due to our policy of looking at the overall context of the issue and the risks, as set out above.

The following sets out the meaning of the individual Sanction Types used in the table at Appendix C:

Sanction Type	Descriptors / Explanation for Application
Minor (Level 1)	Used for maladministration where an issue has not caused an adverse effect and should be easily rectified

Moderate (Level 2)	Used for more serious or repeated maladministration where there is confidence that the issue can be rectified and that it has not caused an adverse effect, particularly to the validity of the assessment or qualification
High (Level 3)	Used for the most serious or repeated maladministration or where malpractice is suspected. This is where the issue has caused an actual or potential adverse effect to a learner, the reputation of QNUK, the Centre or the qualification(s), and/or the validity of an assessment or the results thereof. This is normally the initial sanction imposed for any suspected or potential malpractice at the outset of the investigation into what has happened.
Severe (Level 4)	Used for circumstances where malpractice has been found to have occurred but that it is confirmed to have been confined to one qualification or assessment type and that the issue is not endemic throughout the Centre.
Critical (Level 5)	Used where the malpractice is so serious that there is no other reasonable recourse than to remove Centre approval as a whole. This could either be because of a singular incident where the Centre's negligence has caused a serious adverse effect or there is a culture within the Centre of non-compliance, or where a Centre has breached a term of the Centre Agreement.

The Compliance Manager will make a decision on the most appropriate sanction to apply. Where appropriate, they will also consult with other senior managers on this decision, particularly if it is decided a Severe or Critical level sanction should be applied.

QNUK staff will be informed of the decision as soon as appropriate to their role or at the next weekly Team Meeting.

16. Right to Appeal

As per Condition I1.1 of the General Conditions of Recognition published by Ofqual and CCEA and the Standard Conditions of Recognition published by Qualifications Wales, all Centres and Learners have the right to appeal against any actions to be taken against them following an investigation into malpractice or maladministration.

All appeals will be managed in line with our Appeals Policy, a copy of which is publicly available on our website at: <https://qualifications-network.co.uk/policies/>.

Any appeals against such decisions must be made within four weeks of the decision being issued to the Centre. This will normally include any actions to be taken against a Learner, although there may be times when a Learner is contacted directly by QNUK, for instance if the actions of the Centre has meant that QNUK cannot be assured that they will pass on relevant information to the Learners, etc.

If the case was brought against a QNUK staff member or contractor, the right of appeal will be determined under the current Disciplinary Procedures, taking into account all current legislation and recommendations by ACAS.

17. Notifications to Regulators

Where an adverse effect has occurred, or there has been the potential for an adverse effect to occur, the malpractice/maladministration issue will be reported to the relevant Regulator (e.g. Ofqual, CCEA or

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Qualifications Wales) as per Condition B3 of the General Conditions of Recognition for Ofqual and CCEA and the Standard Conditions of Recognition for Qualifications Wales).

For notifications that affect Centres and/or qualifications that fall under the jurisdiction of Qualifications Wales, an email should be sent to statementofcompliance@qualificationswales.org giving full details of the malpractice, the name of the Centre, how many learners/centre may be affected and what action has been taken to date to mitigate the risk of any adverse effect.

Where a notification is required to Ofqual and/or CCEA, then this should be done using the Ofqual Portal. Due to the detail that is required by their form and the time it can take to complete those details, it is recommended that all details are put into the template provided at Appendix D to this document and then transferred to the Portal form. A copy of this template is also available in the restricted access Sharepoint folder – Compliance – Documents – Malpractice.

18. Notifications to other Awarding Organisations and Third Parties

Under Condition A8.7 of the General Conditions of Recognition for Ofqual and CCEA and the Standard Conditions of Recognition published by Qualifications Wales, where there is an actual or potential adverse effect, all awarding organisations have a duty to inform other awarding organisations or relevant third parties who may have a legitimate interest in the maladministration or malpractice. For instance:

- Other Awarding Organisations who offer the same qualification as that affected by the malpractice / maladministration
- Other Awarding Organisations who also approve the Centre involved in the malpractice / maladministration
- Other regulators who have an interest in the sector the qualification is designed for, e.g. CITB for the Level 1 Health and Safety in a Construction Environment; SIA for Security Licence-Linked qualifications, etc.
- The Information Commissioners' Office if the malpractice / maladministration has led to a breach of personal data security

Please note: the above list is not exhaustive and all relevant third parties should be considered where they are deemed to have a legitimate interest in the issue that has occurred.

Email addresses for most of the other Awarding Organisations that offer similar qualifications to QNUK are included on the same Excel document as the A8.7 spreadsheet mentioned previously. Where unsure, the contacts will be taken from the Ofqual Register available here - <https://register.ofqual.gov.uk/> or the Qualifications Wales Directory of Awarding Bodies available here - <https://www.qualificationswales.org/english/our-work/regulating-awarding-bodies/directory-of-awarding-bodies/>.

19. Notifications of (Suspected) Malpractice from other Awarding Organisations

Any notifications received from other Awarding Organisations regarding malpractice or suspected malpractice will be logged onto the "A8.7 Notification Log" held in Sharepoint – EQA Team – Documents – 3. A8.7 Spreadsheet by the staff member who receives it, usually the Centre Support Team.

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A8.7 notifications will also be passed to the Compliance Manager for information and review. Should the A8.7 notification affect a Centre that is also approved by QNUK, the Compliance Manager will contact the issuing awarding organisation for more details of the incident. The Compliance Manager will also look for any, equivalencies with any of the processes, procedures or controls employed by QNUK to see if any lessons can be learned or improvements made. Where appropriate, the details of the A8.7 notification will be raised at the next weekly Team Meeting with all staff so that they are aware of what to look out for.

All applications for Centre Approval are reviewed against this log to see if the applicant Centre has previously had any malpractice issues which they have not declared on their application.

20. Information Received from Other Third Parties

QNUK may sometimes receive information from third parties that are not other Awarding Organisations that could indicate malpractice taking place at a Centre approved to deliver QNUK qualifications. The types of third parties QNUK may receive such notifications from includes, but is not limited to:

- Qualifications Regulators (e.g. Ofqual, CCEA, Qualifications Wales or SQA)
- Sector Regulators (SIA, CITB, HSE, etc.)
- Other Training Organisations (not Centres)
- Whistleblowers (Centre staff or learners)

In all cases where information is received from a third party, a full investigation will be undertaken, however how these are dealt with in the initial stages may differ slightly depending on the source of the information received, as follows:

20.1. Information from Qualifications or Sector Regulators

Whenever information is received from a Regulator, QNUK will immediately treat it as a notifiable event in that there is a high possibility of the occurrence of an adverse effect. Where the information has come from a qualifications regulator, but the incident affects our Recognition with another qualifications regulator, this will include making the required notifications to the relevant regulator(s). Where information is received from a Sector Regulator, QNUK will notify the appropriate qualifications regulator, as per Condition B3.

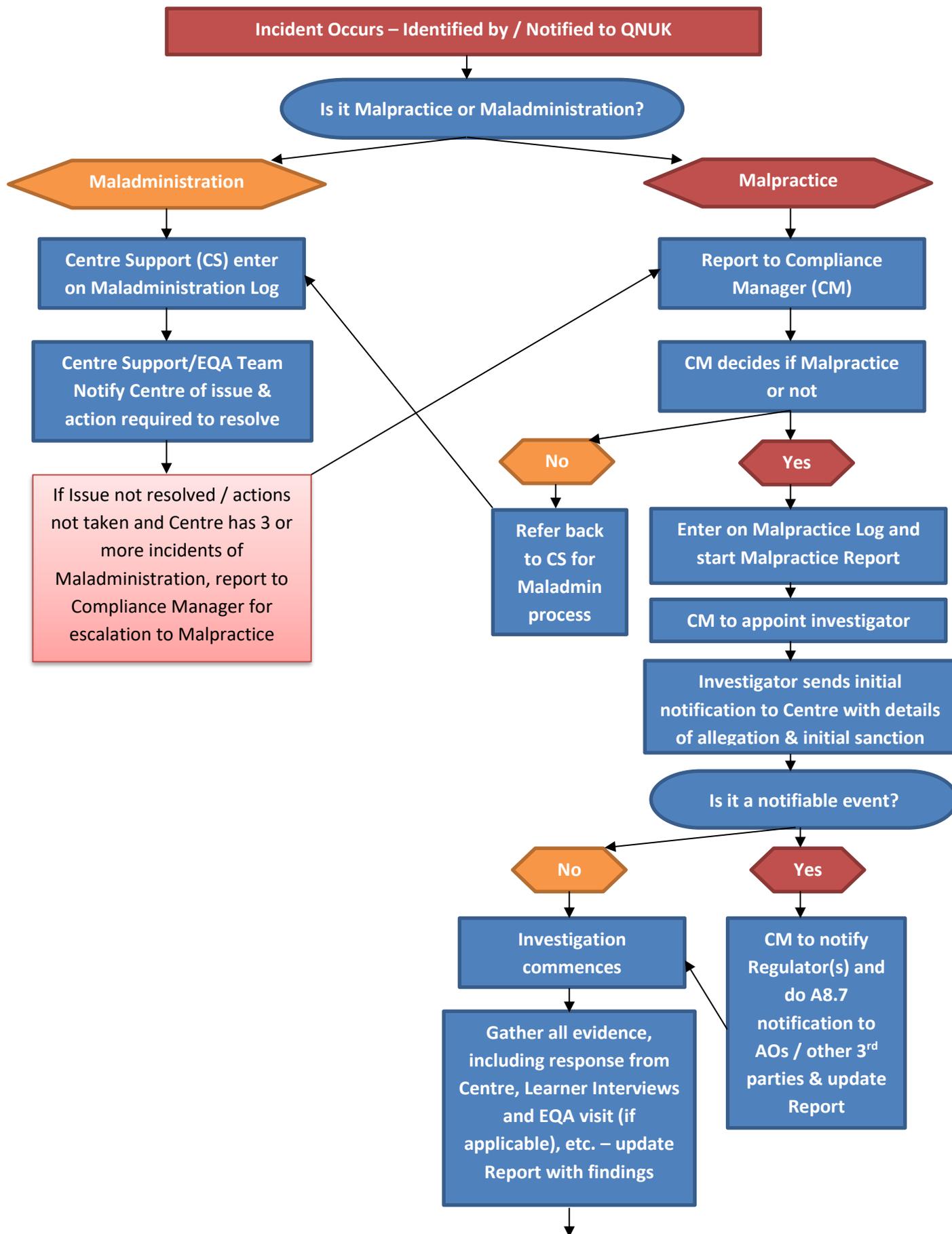
20.2. Information from Other Training Organisations or Whistleblowers

Where the information has been received from another training organisation or Whistleblowers, QNUK will undertake initial investigations to ascertain the veracity of the information being provided. This initial look will be undertaken as quickly as possible so as not to unduly delay any required notifications if there is any possibility of an adverse effect having occurred. The initial investigation will look at the evidence that has been provided, the background to the centre, i.e. outcome of the last EQA visit, when the last unannounced visit was undertaken and if any feedback had been given from moderation activity, plus the Centre's overall history of engagement with QNUK events, etc. Where necessary, additional evidence will be requested from the organisation or individual making the initial allegation. QNUK may decide to organise an unannounced EQA visit, particularly if the Centre is due to deliver a qualification related to the allegations being made, as part of the initial investigations. Where there is no evidence to suggest that the allegation is vexatious, and there is a potential for an adverse effect to have occurred, the Compliance Manager will notify the relevant regulators, as per Condition B3.

21. Informing our Approach

Investigations and outcomes into alleged or suspected cases of malpractice/maladministration can influence how we review our approach. As such, all incidents will be reviewed by the Senior Management Team and/or the Governance Committee to see if there are any lessons to be learned from the findings. Where it is determined that there are, an internal action plan will be put into place to change any affected processes, procedures, controls or documents.

Where the issue found is one of Centre understanding, additional guidance and/or training will be provided to all Centres to mitigate the risk of such an incident recurring at another Centre.



Does the Outcome of the Investigation show, on the balance of probabilities, that Malpractice has occurred?

No Malpractice or Serious Maladministration has been found

Inform Centre of Outcome – No Sanctions

If previously notified, update Regulator(s) and A8.7 recipients

Update Report, Malpractice Log and ensure all correspondence and evidence filed appropriately

Close Case

Serious Maladministration has been found

Inform Centre of Outcome – including Action Plan and any Sanctions. Update Risk Rating of Centre

If previously notified, update Regulator(s) and A8.7 recipients

Update Report, Malpractice Log and ensure all correspondence and evidence filed appropriately

Follow up on Action Plan, keeping Report and Log updated plus update Regulator(s)/A8.7 if appropriate

When all actions closed, Update all reports & logs. When appropriate, update Risk Rating of Centre.

Close Case

Malpractice has been found

Inform Centre of Outcome – including Action Plan and any Sanctions. Update Risk Rating of Centre

If previously notified, update Regulator(s) and A8.7 recipients

Update Report, Malpractice Log and ensure all correspondence and evidence filed appropriately

Follow up on Action Plan, keeping Report and Log updated plus update Regulator(s)/A8.7 if appropriate

If A Level 5 Sanction (e.g. Centre Approval Revoked) Ensure Centre removes all references to QNUK from websites, social media, etc. If not removed, inform CM to issue Cease and Desist

When all actions closed, Update all reports & logs. When appropriate, update Risk Rating of Centre. Also update Regulator(s) if appropriate

Close Case

Appendix B – Malpractice Report Template

Date issue identified /CM notified:		How found:	
Notifier:		Role:	
Centre Name:			
Investigator:		Role:	
Background to Centre, including EQA activity			
Date Issue Occurred:			
Qualification(s) affected:			
Details of issue(s) identified:			
Initial Actions / Investigations by QNUK:			
Initial Sanction(s) applied:			
Risks / Rationale for Sanction(s):			
Regulator(s) Notified:			
Date Regulator(s) notified:			
Date A8.7 Notification Sent:			
Any additional 3rd parties notified:			
Details of Learners contacted:			
Dates and Summary of Response(s) received from learners:			
Date and summary of response from Centre:			

Decision, including rationale:				
Final Sanction(s) applied:				
Action Plan:	Action 1		Date Complete	
	Action 2		Date Complete	
	Action 3		Date Complete	
	Action 4		Date Complete	
Details of any follow up actions:				

Sign Off:

Date Checked:		Checked By:		
Comments/ Observations:				
Signed:			Date:	

Appendix C – Sanction Levels, Penalties and Indicative Cause Examples

Sanction Type	Risk Level of Malpractice / Maladministration issue	Penalties / Action Plan points associated with Sanction Type	Types of issues Sanction / Risk Level may be applied to
Minor (Level 1)	Low Risk	<p>Trainer / Assessor / Centre / IQA</p> <ul style="list-style-type: none"> • Temporary loss of direct claims status until issue resolved • Additional moderation / quality assurance activities • Written assurances required from Head of Centre / Trainer / Assessor / Exams Officer / IQA • Requirement for staff to attend QNUK webinar or view recorded training presentation <p>Learner</p> <ul style="list-style-type: none"> • Reminder issued regarding policy and procedure and monitoring over remainder of course or qualification 	<ul style="list-style-type: none"> • Minor maladministration on assessment paperwork • Delays in uploading assessment paperwork following claim for results / certificates • Non-compliance with Centre Agreement but no threat to the integrity of assessment decisions or adverse effect • Conflict of Interest not previously declared but with no threat to the integrity of assessment decisions or other adverse effect
Moderate (Level 2)	Low/Medium or Medium	<p>Trainer / Assessor / Centre / IQA</p> <ul style="list-style-type: none"> • Loss of direct claims status • Additional moderation / quality assurance activities • Withholding results pending outcome of investigation • Overturning assessment decisions <p>Learner</p> <ul style="list-style-type: none"> • Withholding results pending outcome of investigation • Requirement to re-sit assessment using a different paper, possibly under additional scrutiny (e.g. via video link or in person EQA) 	<ul style="list-style-type: none"> • Maladministration affecting claims for results / certificates but no adverse effect on validity of assessment decisions / results • Unable to authenticate part of the work submitted by a learner
High (Level 3)	Medium to Medium/High	<p>Trainer / Assessor / Centre / IQA</p> <ul style="list-style-type: none"> • Suspension of registration to one or all qualifications approved for • Possible reporting to Regulator(s) and/or other relevant Awarding Organisations or third parties with a legitimate interest 	<ul style="list-style-type: none"> • Threat of adverse effect to learners • Loss of integrity to assessment decision (potential for invalid result to be issued – but where issue has been identified and investigated prior to results going out.

		<ul style="list-style-type: none"> • Withholding all outstanding results for one or all qualifications approved for • Additional moderation / quality assurance activities including, but not limited to, EQA visits • Financial penalties of charges for additional moderation / quality assurance activity • Re-evaluation of assessment decisions made by assessor / signed off by IQA • Observations of training delivery • Requirement of Centre Staff to attend mandatory training session (in person or webinar) by QNUK (chargeable to Centre) • Longer term removal of direct claims status (e.g. until compliant status has been confirmed by quality assurance/moderation and EQA visit/s) <p>Learner</p> <ul style="list-style-type: none"> • Withholding results pending outcome of investigation • Requirement to re-sit assessment using a different paper, possibly under additional scrutiny (e.g. via video link or in person EQA) 	<ul style="list-style-type: none"> • Potential learner collusion or plagiarism, etc. • Potential adverse effect to the ability to maintain compliance with the relevant regulation(s) • Potential breach of Centre Agreement • Potential breach of other relevant legislation or statutory regulation • Potential adverse effect to the reputation of the qualification or QNUK.
<p>Severe (Level 4)</p>	<p>Medium/High to High</p>	<p>Trainer / Assessor / Centre / IQA</p> <ul style="list-style-type: none"> • Reporting to the relevant Regulator(s) • Reporting to other Awarding Organisations and third parties with a legitimate interest • Withdrawal of approval for one or more qualifications • Ongoing additional moderation / quality assurance activities including, but not limited to, EQA visits, for all qualifications Centre or staff member is approved to deliver • Overturning assessment decisions 	<ul style="list-style-type: none"> • Failure to comply with previous Action Plans / Sanctions in respect of specific qualification • Failure to show evidence of meeting delivery, assessment and/or IQA staff requirements in respect of specific qualification • Clear plagiarism / collusion by learner in respect of a specific qualification assessment session/ cohort so that the work submitted cannot be authenticated

		<ul style="list-style-type: none"> • Revoking results or certificates already issued • Full review of all assessment decisions made by the assessor / signed off by IQA • Financial penalties of charges for additional moderation / quality assurance activity / training • Requirement of Centre Staff to attend mandatory training session (in person or webinar) by QNUK (chargeable to Centre) • Longer term removal of direct claims status (e.g. until compliant status has been confirmed by quality assurance/moderation and EQA visit/s) for all qualifications approved for • Written assurances from Head of Centre / Assessor / Training / IQA / Exams Officer that issue will not be allowed to recur <p>Learner</p> <ul style="list-style-type: none"> • Withholding results pending outcome of investigation • Requirement to re-sit assessment using a different paper, possibly under additional scrutiny (e.g. via video link or in person EQA) 	
Critical (Level 5)	High / Very High Risk	<p>Trainer / Assessor / Centre / IQA</p> <ul style="list-style-type: none"> • Revocation of Approved Status as a Centre, Trainer, Assessor and / or IQA • Reporting to the relevant Regulator(s) • Reporting to other Awarding Organisations and third parties with a legitimate interest <p>Learner</p> <ul style="list-style-type: none"> • Withholding results pending outcome of investigation • Requirement to re-sit assessment using a different 	<ul style="list-style-type: none"> • Failure to comply with previous Action Plans / Sanctions • Failure to cooperate with a malpractice / maladministration investigation • Failure to allow access to QNUK's appointed representative for the purposes of carrying out quality assurance activities (e.g. EQA) • Failure to show evidence of meeting delivery, assessment and/or IQA staff requirements in

		<p>paper, possibly under additional scrutiny (e.g. via video link or in person EQA)</p>	<p>respect of qualifications approved for</p> <ul style="list-style-type: none"> • Clear plagiarism / collusion by learner in so that the work submitted cannot be authenticated • Breach of Centre Agreement • Failure to meet required standards during initial 6-month probationary period • Trainer continuing to fail to meet delivery standards for qualifications • Failure to settle invoices in line with payment terms • Trainer / Centre found to be complicit in the malpractice of Learners, including taking bribes, allowing personation, etc. • Learner found to be offering bribes to trainers/assessors to influence the outcome of an assessment • Learner found to be guilty of personation or arranging personation
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Appendix D – Ofqual Event Notification Template

Notify
<input type="checkbox"/> Ofqual <input type="checkbox"/> CCEA <input type="checkbox"/> Qualifications Wales <input type="checkbox"/> Institute for Apprenticeships and Technical Education (IfATE)
Main Details
Title *
Date of Event
Date you became aware of the event
Reason for Delay
AO Reference
Affected Exam Series
Add Exam Series
Awareness
How you became aware
Nature and cause
Adverse Effect <i>Choose from drop down list of:</i> Actual Potential
Adverse Effect Description
Who is aware <i>Choose from drop down list of:</i> Centre DFE Learners Media (Traditional) Member of the Public OFSTED Other Other Awarding Organisations Other Regulators Other Stakeholder Social Media
Details
Date you will provide next update
More information
Affected - Qualifications

You should add specific qualifications and units through Linked Records once you have saved the event notification. If you want to provide more information about qualifications and units, please use the field below.

More information

Affected – Centres

Add Centre

Note: click on ‘add centre’ box and then asks for following details:

Centre Number type <i>Choose from drop down list of:</i> NCN UKPRN N/A	Centre Number	Centre name
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Affected - Learners

- England
- Wales
- Northern Ireland
- Other

Note: for each of the above options you choose, you will then get the following boxes to complete:

Centres – No Entered for Unit	Centres – Directly Affected	Centres – Indirectly Affected
Learners – No Entered for Unit	Learners – Directly Affected	Learners – Indirectly Affected

Nature of Event

- Assessment Material Error*
- Security Breach**

***Note: If choose Assessment Material Error, following boxes appear to complete:**

Paper Type <i>Choose from drop down list of:</i> Standard Modified Standard and Modified	Type of Modification (if applicable) <i>Choose from drop down list of:</i> Braille Enlarged Accessible PDF Interactive PDF Language Colour Tactile diagram
When Identified <i>Choose from drop down list of:</i> Prior to dispatch Prior to exam During exam After exam	Who identified it? <i>Choose from drop down list of:</i> QA Modification Centre Learner Ofqual

Appendix D
Ofqual Event Notification Template

	Examiner Print AO Other
**Note: <i>If choose Security Breach, following boxes appear to complete:</i>	
Means of Breach <i>Choose from drop down list of:</i> Conversation Commercial transaction Private chat/message Public social media Practice material Coaching	Evidence of Two People Present at Opening <i>Choose from drop down list of:</i> Yes No
Incorrect Paper Outcome <i>Choose from drop down list of:</i> Candidate didn't open Candidate allowed to continue Candidate sat correct paper (in the same sitting) Paper was breached further	
Actions taken	
Identify cause and effect	
Mitigate the adverse effect	
Prevent re-occurrence	
Compliance	
Are you Declaring non-compliance? <i>Choose from drop down list of:</i> Yes No	General Conditions (Read Only)
Qualification Conditions (Read Only)	Subject Conditions (Read Only)

When Complete – click  at the top of the page