

Policy and supporting guidance on preventing, investigating and dealing with malpractice and maladministration

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Introduction

The integrity and reputation of AAT qualifications is directly linked to the rigour and robustness of their assessments. Anything which threatens the integrity of these assessments, including malpractice or maladministration, also threatens the integrity of the qualifications, and the reputation of AAT.

This document sets out AAT's policy, process and supporting guidance for preventing, investigating and dealing with malpractice and maladministration. It is intended for all those who are involved in the development, delivery and award of AAT qualifications, including organisations that are approved or recognised by AAT to deliver AAT qualifications and/or host AAT assessments.

The guidance is applicable to all qualifications and assessments that are offered by AAT, including both regulated and non-regulated provision, and End Point Assessments (EPAs). The policy has therefore been designed to meet the requirements of the qualifications regulators¹, and other relevant bodies.

¹ Regulators – Ofqual-England, SQA Accreditation-Scotland, Qualifications Wales-Wales, CCEA-Northern Ireland, BQA – Botswana.

Policy

AAT aims to provide high quality qualifications and assessment to all its learners and therefore takes all reasonable steps to prevent the occurrence of any malpractice or maladministration.

AAT will, as far as possible, take all reasonable steps to prevent malpractice or maladministration from occurring. If any malpractice or maladministration is suspected or alleged and there are reasonable grounds for the suspicion or allegation, AAT will investigate to establish whether malpractice or maladministration has taken place.

If following an investigation, it is found that malpractice or maladministration has taken place, AAT will take all reasonable steps to limit the impact on existing and potential learners and on the qualifications that it makes available, and to prevent any re-occurrence.

AAT is committed to:

- maintaining and complying with up to date written procedures for preventing, identifying and investigating suspected, or alleged, malpractice or maladministration
- ensuring that investigations are carried out rigorously, effectively, and by persons of appropriate competence who have no personal interest in their outcome.

AAT will:

- oversee all investigations into suspected or alleged malpractice or maladministration
- withhold the issuing of results until the conclusion of the investigation, or permanently, where the outcome of the investigation warrants it
- apply AAT approved sanctions, penalties and special conditions in cases of proven malpractice or maladministration commensurate with the gravity and scope of the occurrence
- report to the regulators and other awarding organisations, as appropriate and in accordance with each regulator's published requirements
- report the matter to the police where a criminal act is suspected
- take appropriate action to prevent the malpractice or maladministration recurring.

Definition of malpractice

For the purpose of this policy, malpractice refers to any deliberate action(s), neglect, default or other practice that compromises, or could compromise:

- the assessment processes
- the integrity of AAT qualifications and assessments
- the validity of a result or certificate
- the reputation and credibility of AAT as an awarding organisation (and EPA Organisation)
- the wider qualifications community.

In short, malpractice can be the breach of any published regulations or codes of practice, whether intentional or inadvertent, or any practices which place the integrity of qualifications and assessments at risk. It can be caused by training providers or assessment venues (staff and students) and awarding organisations.

Examples of malpractice (not an exhaustive list):

Malpractice may occur at training providers and assessment venues if:

- assessment materials are not kept securely
- assessment and/or internal verification records are fabricated

- students are prompted or assisted with the production of answers
- there is abuse of on-line logging systems
- there has been misleading recruitment of students
- records are falsified in order to claim certificates
- assessment material(s) is being sold to students
- live assessment material is being used to teach students
- any identified issue or malpractice is not dealt with appropriately.

Students (including Apprentices taking EPAs) may be guilty of malpractice if they:

- copy from other students
- plagiarise material
- take unauthorised material into an examination room
- breach invigilator instructions for the conduct of assessments
- impersonate other students, or allow themselves to be impersonated, for the taking of controlled assessments or examinations.

An awarding organisation may be guilty of malpractice where it:

- knowingly fails to investigate and resolve instances of malpractice
- provides coaching or training to training providers and/or their students, using testing or assessment items that will be used in live assessments
- allows certification on the basis of incomplete or incorrect records of assessment
- allows certification where known breaches of security for its tests or testing items have taken place.

Definition of maladministration

For the purpose of this policy, maladministration is any activity, neglect, default or other practice that results in non-compliance with the requirements for delivery of AAT qualifications and assessments (including EPAs), as set out in the relevant specifications, codes of practice or other documents.

In practice, maladministration is not normally deliberate and can be perpetrated by training providers/assessment venues and awarding organisations.

All maladministration must be addressed to prevent re-occurrence and/ or development into something more significant.

Examples of maladministration (not an exhaustive list):

At training providers and assessment venues, examples may include:

- failure to invigilate according to AAT guidelines
- failure to comply with other AAT requirements
- granting inappropriate access arrangements
- inaccuracies in assessment, verification and/ or registration records
- poor security/administration
- failure to maintain appropriate records or systems
- failure to provide AAT and regulators (if appropriate) with access to records and systems.

At an awarding organisation, examples may include:

- mismanagement relating to the development, delivery or award of qualifications and assessments (including EPAs)
- poor certificate security or administration

- lack of adherence to procedures in qualification development, delivery or award.

Preventing malpractice and maladministration

AAT has a variety of publications, along with systems and procedures covering the development, delivery and award of its qualifications. These have been specified in a way that should prevent malpractice or maladministration from occurring, so must be adhered to at all times. Some examples of this include:

- a secure online assessment platform, accessible only via individualised key codes
- use of different assessment scenarios and randomised assessment tasks, drawn from question banks that are continually updated
- the implementation of a conflict of interest policy, which requires staff and contractors to declare any professional or personal interests that may conflict with their roles in developing, delivering and awarding AAT qualifications
- reviewing social media channels, to identify any comments or leads about potential malpractice or maladministration.

Training providers and assessment venues must be aware of AAT's malpractice and maladministration policy. They are also required to prevent the occurrence of malpractice and maladministration through:

- having in place their own malpractice/maladministration policy
- appointing a CBA administrator who is responsible for the conduct, security, supervision and environment of the assessment, in line with AAT published requirements
- using sufficiently qualified Invigilators
- ensuring students provide photographic proof of identity before they are permitted to take an assessment
- checking that students are not in possession of notes or mobile phones
- reading out the relevant invigilation/assessment instructions
- ensuring there is adequate spacing between desks and/or use of privacy screens
- providing appropriate signage
- providing rough paper for students to make notes.

The training provider and assessment venue policies and procedures should also set out how malpractice or maladministration is dealt with, should it occur, to include:

- who is responsible for and involved in dealing with cases of malpractice/maladministration, including confirmation of how they are independent
- the various stages (including timeframes for completion) of the malpractice/maladministration process (from identification to the application of sanctions)
- what is deemed to be malpractice/maladministration
- how malpractice/maladministration is identified and what methods are used to investigate any cases
- the timeframes within which each stage will be completed, including when AAT is notified of any alleged malpractice/maladministration
- any possible sanctions based on the outcome.

These policies and procedures are checked at approval stage and during on-going quality monitoring.

Identifying malpractice and maladministration

AAT may become aware of malpractice or maladministration from a number of different sources, including but not limited to:

Internal sources:

- annual reporting against regulatory and other requirements
- monitoring of self-assessment reports completed and submitted by training providers
- risk management identification and reporting
- quality assurance reports, feedback and intelligence from AAT representatives
- scanning of websites/social networking sites
- through AAT's governance arrangements (i.e. its Boards and Panels)
- student registration data and any trends that emerge from this
- monitoring of assessment statistics

External sources:

- information made available or reported to the qualification's regulators (for regulated qualifications)
- other awarding organisations
- training providers (via incident reports)
- students (e.g. those who are unhappy with their training provider or assessment venue)
- other stakeholders, such as funding agencies
- the police, if criminal activity is suspected
- media reports focusing on incidents within particular institutions
- Whistleblowers and informers.

More detail about these sources is given in the supporting guidance accompanying this policy.

Investigating malpractice and maladministration

Where malpractice or maladministration is suspected or has been alleged AAT will carry out an investigation. If a centre has discovered irregularities, information will be shared with all relevant parties and it may be appropriate for its staff to undertake the initial investigation after reporting the matter to AAT, under its direction.

AAT has provided supporting guidance for such an investigation to clarify roles and processes, and to ensure that comprehensive and standardised information is collected, and all evidence, findings and reports are properly recorded. All alleged incidents of malpractice or maladministration are logged and tracked in AAT's reporting system.

All cases of suspected or alleged malpractice or maladministration, concerning qualifications that are regulated in Scotland will be reported to SQA Accreditation immediately, upon identification.

Where allegations of malpractice or maladministration are found to be more serious or widespread, or have wider implications, an Incident Report (IR) will be raised and elevated immediately to critical status. If appropriate, details of the incident will be reported to other regulators as part of an event notification.

Dealing with malpractice and maladministration

If AAT establishes that malpractice or maladministration has occurred, we will take appropriate and immediate action against those responsible and to prevent it from recurring.

- If the incident concerns a student, the student's result may be overturned, and other disciplinary action may also be taken.

- If the incident concerns a member of AAT staff or an AAT contractor, appropriate disciplinary procedures will be instigated according to AAT's staff policy or contractual arrangements.
- If the incident relates to the actions of a training provider or assessment venue, sanctions may be applied.

Depending on the severity of the incident (and especially if the matter has been assigned critical status), the case will be reviewed by the Education & Development Senior Management Team.

AAT's Malpractice Review Panel will review incidents of student and centre staff malpractice and will make a recommendation on any sanctions or disciplinary action.

Non-severe cases that warrant informal warnings or actions, will be handled by AAT's Centre Compliance Manager or another Designated Officer.

If the occurrence of malpractice or maladministration could affect other training providers, assessment venues or other awarding organisations, for example, if another training provider uses an assessor who is implicated in the incident, or another awarding organisation has approved a training provider or assessment venue that is implicated in the incident, AAT will inform those organisations. All such information sharing will be recorded in the incident report.

AAT reserves the right to charge training providers or assessment venues for development and other costs incurred by AAT in investigating malpractice, or for replacing live assessment materials that have been compromised, as a result of any breach in the security of materials, and which can be attributed to the actions of training providers or assessment venues, or students associated with these organisations.

Monitoring malpractice and maladministration

AAT will ensure that:

- records of actual or suspected cases of malpractice and maladministration, along with details of any actions taken, are maintained and reviewed on a regular basis
- records are used by AAT senior management to identify broader issues or themes that may emerge over time and to recommend appropriate corrective actions that might need to be taken
- reports are made to AAT's Awarding Organisation Compliance Board (AOCB) on a regular basis and as part of the self-evaluation procedure
- guidance from the regulators and other relevant bodies is reviewed and the policy is updated to comply with best practice
- information from monitoring activities is made available (on request) to qualifications regulators (for regulated qualifications) and to the relevant External Quality Assurance (EQA) body (for EPAs).

Supporting Guidance

Roles and responsibilities

At the training provider/assessment venue

Investigations will normally be carried out by the Main Contact / Head of Centre under AAT's direction.

Investigations into allegations of malpractice, maladministration or irregularities against the Main Contact / Head of Centre may be carried out by AAT directly (solely or in conjunction with the regulators), the Chair of the Governing Body of the training provider or assessment venue, or another suitably competent person who is unconnected to the department involved in the alleged malpractice or maladministration, and who is able to undertake the investigation independently and without bias.

The Head of Centre (or another nominated person) must:

- ensure policies, procedures and systems are designed and implemented in such a way as to prevent malpractice or maladministration occurring
- build and maintain a culture in which malpractice and maladministration does not take place, but if any incidents do occur, then students and staff feel enabled to report them
- report to AAT within 48 hours all suspected incidents of malpractice/maladministration
- supervise all investigations relating to an allegation of malpractice/maladministration
- ensure that potential conflicts are managed, the investigation is conducted independently, and decisions are made without bias
- respond speedily and openly to all requests for an investigation into an allegation of malpractice/maladministration
- co-operate and ensure their staff co-operate fully with an enquiry into an allegation of malpractice/maladministration, whether the training provider/assessment venue is directly involved in the case or not
- inform staff members and students of their individual responsibilities and rights
- pass on to the individuals concerned any warnings or notification of penalties and ensure compliance with any requests made by AAT in connection with a malpractice/maladministration case.

At AAT

AAT staff and contractors

AAT staff and contractors must adhere to relevant policies and procedures and avoid taking actions that could lead to malpractice or maladministration.

Staff and contractors must bring suspected cases of malpractice or maladministration to the attention of their line manager, or another member of senior staff, who should report this in writing to the Centre Compliance Manager (CCM). Information about suspected malpractice or maladministration may come from a variety of sources, both internal and external, which are summarised below. Staff and contractors may be asked to provide further information as part of any on-going investigation.

External quality assurers (EQAs), verifiers, examiners, markers and assessors that are appointed by AAT have a specific responsibility to prevent malpractice and maladministration and to report, to the relevant AAT manager, anything suspicious that they find in the course of their duties, which suggests that malpractice or maladministration could have occurred, or has the potential to occur. This duty extends to ensuring that any allegation can be fully substantiated.

Centre Compliance Officer (CCO)

The CCO, acting as Incident Lead, manages the initial investigation into suspected malpractice or maladministration, before referring the case to the Centre Compliance Manager (CCM). The CCO ensures that:

- an incident report and case file has been created
- the information provided is sufficient
- there is a full report (either from the training provider or assessment venue, or other relevant person), which has been completed in accordance with AAT's requirements
- the report is acknowledged and logged
- the CCM or Designated Officer (DO) has access to, and is aware of, the report with any further information that may have been collected.

The CCO may ask other members of AAT staff for information to support the investigation, especially those who have been involved in reporting suspected malpractice or maladministration. This is likely to include the Assessment Operations Manager (for suspected cases of malpractice in computer-based assessments), and the End Point Assessment Manager (for suspected cases of malpractice in the portfolio/reflective component of End Point Assessments). Relevant managers will be required to liaise with those whom they contract with, such as EQAs, examiners, markers and assessors, to facilitate collection and evaluation of information that can support the investigation.

Centre Compliance Manager (CCM)

The CCM reviews the incident and decides whether he/she can deal with the matter reported by the CCO or refer the matter to the Malpractice Review Panel (MRP).

The CCM will review less serious cases, which may include:

- inadvertent / innocent use of a mobile phone, which is unlikely to have involved cheating
- invigilation practice which has not followed procedures
- a student communicating with another during an assessment which, whilst possibly innocent, is unacceptable.

If the CCM's involvement could for any reason lead to a conflict of interest the matter will be referred to a Designated Officer (DO) who is competent to undertake the review both independently and without bias.

For more serious cases and/or where the matter has led to an IR that that has been escalated to critical status, the matter will always be referred to the Malpractice Review Panel.

Head of Awarding Organisation Compliance (HAOC)

The HAOC is accountable for effective implementation of the policy and procedures for dealing with malpractice and maladministration and takes responsibility for any actions and communication with regulators.

Malpractice Review Panel (MRP)

The MRP consists of:

- the AAT Centre Compliance Manager, acting as chair
- another senior representative from AAT's Education and Development Division who has no personal interest in the matter
- a representative from an independent training provider.

The MRP considers more serious issues and/or issues that have caused or have the potential to lead to a critical incident. This may include:

- continued plagiarism at a training provider, despite previous identification and alleged 'corrective attention'
- fraudulent issue of certificates, perhaps where certificates have been requested and issued before all achievements have been made
- sustained disruption of an assessment environment
- major disparity between the achievements for project work assessed by the training provider, and those achieved through AAT marked assessment
- corruption of the assessment situation, for example, if during an online assessment, staff are found taking the assessment on behalf of students
- unauthorised materials being taken into the examination room
- copying between students
- plagiarism
- students allowing themselves to be impersonated in completing assessments.

Appeals Panel (AP)

The AP will review and make decisions about the extent to which due process has been followed and appropriate conclusions reached in the conduct of malpractice/maladministration investigations, and will consist of:

- the Head of Awarding Organisation Compliance (to act as Chair)
- another senior member of AAT who is not a member of the Education and Development Division
- at least one individual who is not associated with AAT or has been independent of AAT for at least seven years, and who has relevant experience in dealing with appeals or investigations.

Awarding Organisation Compliance Board (AOCB)

The AOCB is the first step in AAT's Governance chain. It has a primary responsibility to oversee the quality and integrity of AAT qualifications and associated assessments, and their compliance with regulatory requirements. By so doing it can provide the necessary reassurance to the AAT Council.

Cases of malpractice and maladministration are reported to AOCB on at least an annual basis. AOCB must be satisfied that these cases have been managed effectively and that any ongoing recommendations are being implemented and monitored correctly.

The process for investigating malpractice and maladministration

AAT's process for investigating malpractice and maladministration including key stages/activities, roles, responsibilities and timescale for each stage of the process, and notes for those involved is provided at [Appendix 1](#).

Sources of information

Sources internal to AAT

Annual self-assessment reporting against regulatory requirements

AAT monitors its performance against regulatory and other requirements and submits annual compliance statements to the qualification's regulators or, in the case of SQA Accreditation, annual self-assessment reports. For EPAs, AAT provides information to inform auditing carried out by the designated EQA body. Training providers are required to prepare and submit self-assessment reports to AAT. These reports may identify concerns or issues, which need further investigation.

Risk management identification and reporting

Regular risk management reports on key risk areas particularly associated with the integrity of assessment and the reputation of AAT qualifications and assessments.

Quality Assurance reports, feedback and intelligence

As made by EQAs, examiners, assessors and other individuals working on AAT's behalf relating to the activities of training providers and assessment venues, evidence submitted for assessment, and the ongoing evaluation and analysis of associated reports and findings.

Scanning of websites/social networking sites

Through the sampling of relevant sites to ascertain what is being said about AAT and its qualifications.

Requirements of Governance groups

Key group for AAT in terms of compliance is the AOCB, which reports directly to Council.

Registration data

Identify key trends through the regular analysis of registration data.

Monitoring of statistics relating to assessments

Regular monitoring of statistics from online testing such as:

- time taken to sit and complete assessments
- time taken between different assessments
- dates and times of assessments
- variations in achievement rates.

Sources external to AAT

The qualification regulator(s)

Information made available/reported to the regulator(s) by stakeholders, about regulated qualifications, which may be subsequently notified to AAT for further investigation.

Other awarding organisation information

Through usual networking activities or where another awarding organisation is offering its qualifications in a training provider that is also approved by AAT and has taken action to manage malpractice at this provider.

From training providers and assessment venues

AAT requires its training providers and assessment venues to identify, report, and review malpractice and maladministration as commensurate with the agreement made when they were approved.

From students

Through those who may be unhappy with the quality of learning and assessment provided by their training provider.

From other stakeholders

These can include funding organisations, employers and other individuals and organisations with a stake in the status and integrity of AAT's qualifications and assessments. Concerns may arise through their own quality assurance and compliance systems.

Police

Police may have picked up reports on criminal activity, such as sale of examination or testing materials made available before the 'testing' date or found evidence of fraudulent issue of certification.

Media

The media may report on incidents within particular institutions.

Whistleblowers and informers

AAT's *Whistleblowing policy* encourages individuals to raise concerns over any wrongdoing within AAT or its approved training providers and assessment venues. Where issues are not correctly addressed by the training provider/assessment venue, the individual may report their concern directly to AAT.

Dealing with Whistleblowers, anonymous informants or confidential Information

Informants may wish to remain anonymous through fear of repercussions from peers, staff, employers or others. In such cases, care must be taken to ensure that anonymity for the individual is maintained throughout any investigation, within the constraints of legal requirements.

Where, after appropriate evaluation or investigation, there is no other evidence other than the informant's statement, such persons may be advised that the investigation may not or cannot continue, unless their name can be put against the allegations.

Key considerations for an effective investigation

All investigations must be conducted objectively by appropriately qualified persons. Any subsequent judgements must be based solely on the evidence available.

All persons involved should be treated fairly and reasonably, and all information handled securely.

The ability to be objective is critical, as is the investigator's ability to obtain and review relevant information. There should be no conflict of interest.

Investigations should be properly planned to ensure that all evidence will be collected within agreed timescales. They must be carried out promptly.

Decisions and sanctions

Decisions may include the application of sanctions (as specified in the AAT Code of Practice), but will also be guided by the JCQ penalties that are identified in [Appendix 5 of the JCQ Suspected Malpractice in Examinations and Assessments](#).

In less serious cases, where the decision is taken by the CCM (or other DO), a sanction may be applied to a training provider/assessment venue and/or a student may receive an informal written warning. The levels of sanctions that may be applied to training providers/assessment venues are as follows:

- No further action
- Impose an action plan (Level 1 sanction)
- Suspend certification (Level 2 sanction)
- Suspend the right to register students or schedule assessments (Level 3 sanction)

In more serious cases, where the decision is taken by the MRP, actions may be as follows:

For training providers and assessment venues, the MRP may recommend:

- applying one of the sanctions (listed above)
- withdrawing AAT approval for named qualifications (or EPAs)
- withdrawing approval for all qualifications (or EPAs)

For students, the MRP may recommend:

- issuing a written warning, indicating clear penalties that will be applied given re-occurrence
- withholding unit/qualification/assessment results
- overturning results that have already been issued
- banning the student from taking AAT assessments for a period of time

For training provider or assessment venue staff, the MRP may recommend:

- banning them from overseeing or marking assessments
- imposing a formal training programme
- issuing a formal written warning.

Appeals

Student malpractice

Training providers and assessment venues must inform students of their right to appeal if a case of malpractice has been upheld.

A student has the right to appeal to AAT if they disagree with the outcome of the Malpractice Review Panel review.

Training provider/assessment venue malpractice/maladministration

A training provider or assessment venue has the right to appeal to AAT if it disagrees with the outcome of a malpractice/maladministration investigation. The appeal must be made by the Head of Centre or a senior manager.

The process

All appeals must be received in writing by AAT within ten days of receiving the decision. For more information please refer to Stage 2 of the [AAT Enquiries and Appeals Procedure](#).

For regulated qualifications, if a student, training provider or assessment venue believes that AAT has not followed due process in any aspect of the appeals process they may report this to the appropriate regulator who will deal with it according to their complaint's procedure.

Maintaining records (training providers and assessment venues)

Training providers and assessment venues should retain records of any investigations for a minimum of two years and must make them available to AAT and the qualifications regulators upon request.

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

AAT retains records of malpractice/maladministration cases for seven years, after the case is closed, in line with our retention policy whilst also ensuring compliance with the relevant data protection legislation.

Informing other awarding organisations

AAT is required to notify other awarding organisations where cases of malpractice/maladministration are likely to impact on them. This will usually be necessary where:

- the training provider or assessment venue at which suspected malpractice/maladministration has occurred is approved by another awarding organisation, and the alleged malpractice/maladministration could impinge on the awarding organisation's activities

- the training provider is approved with another awarding organisation for similar qualifications and the student/member of staff is likely to attempt to move its operations to that awarding organisation, in an attempt to avoid sanctions
- the training provider or assessment venue has indicated they are seeking approval from another awarding organisation.

AAT documents relevant to malpractice/maladministration

Other relevant documents that should be read in conjunction with this policy and guidance are available on the [AAT website](#) and include:

- *AAT Code of Practice*
- *Guidance for training providers*
- *Instructions for conducting AAT Computer Based Assessments (CBA)*
- *Whistleblowing policy*
- *Enquiries and Appeals procedure*

Appendix 1 – Process for investigating malpractice or maladministration

Activity	Who responsible	Service Level	Notes
Identification and initial investigation			
Suspected malpractice/ maladministration reported to AAT.	Training Provider/ assessment venue OR Relevant AAT manager/contractor	Within 48 hours of incident occurring.	<p>If a training provider/assessment venue is reporting an incident, they should complete and submit to AAT a supervision report and any associated evidence. The report should provide, as a minimum, the following details:</p> <ul style="list-style-type: none"> - Training provider/assessment venue name - Training provider/assessment venue code - The qualification - The assessment - The date and time of the incident - Summary of the incident <p>Where suspected malpractice or maladministration is identified by a member of staff or an AAT contractor, such as an examiner or assessor, they should submit a detailed report and supporting evidence to the relevant manager. The manager should then review and submit this to the CCM, who will allocate the case to a CCO.</p>
Log report, open case file and make an initial assessment.	CCO (and CCM)	Within 2 working days of receiving incident report.	<p>The CCO will:</p> <ul style="list-style-type: none"> - open a case file and log in the system - file all electronic and hard copy information provided - identify any additional or supporting evidence that may be needed (where the case relates to malpractice/maladministration at an assessment venue, information will be shared with the appropriate parties at the training provider where the student is registered). - if suspected malpractice or maladministration relates to students/training providers in Scotland, inform SQA Accreditation immediately, including reasons why it is suspected <p>The CCO should be satisfied that the initial report and associated evidence:</p> <ul style="list-style-type: none"> - has been signed by the Head of Centre (if from a training provider/assessment venue) - meets AAT requirements for protocols, format and content - has been submitted within 48 hours of the reported incident occurring

Activity	Who responsible	Service Level	Notes
			The CCO will, in liaison with the CCM, consider whether an IR should be raised and also, if it is necessary to notify the other qualifications regulators.
If necessary, raise an IR, with a critical status and notify other regulators	CCM (and HOAC)	Within 2 working days of receiving incident report, or as soon as it becomes clear that the incident is critical	<p>If necessary, the CCM should raise an IR, elevate to critical status, and discuss the case with the HOAC who will, if appropriate, and in consultation with other senior staff, notify other regulators and any other relevant stakeholders. The IR should include the following information:</p> <ul style="list-style-type: none"> • A detailed background and factual account of the case, including timelines • Investigation methodology and approach • Impact on providers, learners or qualifications • Any sanctions that have been, or could be applied • Any involvement of third parties • Identification and mitigation of risk • Corrective and preventative actions • Outcomes and lessons learned. <p>Updates should be provided to all regulators (and other stakeholders) as and when required, or at key stages of the process.</p>
Request full report from training provider/assessment venue AND/OR If required, request further information from relevant AAT manager/contractor	CCO	Within 2 working days of receiving incident report.	
Training provider/assessment venue conducts investigation and submits full report AND/OR Relevant AAT manager/contractor submits additional information	Training provider OR Relevant AAT manager/contractor	Within 5 working days of AAT requesting full report/additional information.	<p>Full reports from training providers/assessment venues include the following information:</p> <ul style="list-style-type: none"> - Malpractice/Maladministration Case Checklist – Appendix 2 - What occurred (detailed account of the circumstances, stating the facts) - Who was involved - The timings/sequence of events - The location of events - Actions already taken by the training provider/assessment venue - Written statements from those involved

Activity	Who responsible	Service Level	Notes
			<ul style="list-style-type: none"> - A seating plan - Any unauthorised material found - Any student work relevant to the investigation - Any mitigating factors - Details of any remedial action taken to ensure the integrity of the qualification/assessment - Details of internal investigation carried out (method, findings, conclusions and confirmation that there was no conflict of interest through the person undertaking the internal investigation) <p>Relevant AAT managers are responsible for liaising with contractors, such as EQAs, examiners, markers or assessors to obtain additional evidence, which must be submitted to the CCO.</p>
Review report/additional information, re-assess severity of case, and request additional information (if required)	CCO (and CCM)	Within 5 working days of receiving full report or other information	The CCO will review the full report (and/or other information) to ensure all relevant evidence has been provided, through completing the AAT malpractice/maladministration checklist. The CCO may at this stage need to request further clarification if details are still unclear or missing.
Clarification/additional information is provided (if requested)	Training provider/ assessment venue OR Relevant AAT manager/contractor	Within 5 working days of receiving the request for further information.	Any additional information or clarification provided at this stage must be complete, accurate and submitted promptly to avoid unnecessary further delays in reviewing the case.
Update case file/log and pass to CCM for review.	CCO	Within 2 working days of receiving further information.	<p>The CCO will:</p> <ul style="list-style-type: none"> - ensure that the additional information is complete, accurate and relevant - ensure that all of the supporting documentation is accessible - update the case file/log with the most up to date information - make any initial recommendations (e.g. need for independent investigation) - pass the report and case file to the CCM for review.
Review case file and consider next steps	CCM	Within 1 working day of receiving case file from CCO.	<p>The CCM will give particular consideration to whether:</p> <ul style="list-style-type: none"> - the information provided by the CCO is clear in terms of what it reports and the action that has been taken/needs to be taken, including any recommendations from CCO

Activity	Who responsible	Service Level	Notes
			- the case should be referred to another DO or to the MRP for review.
Review less serious cases not referred to MRP / undertake further investigation to inform decision making			
<p>Check reports and other evidence in case file – if required, request further information</p> <p>If appropriate, undertake an independent investigation.</p>	CCM (or DO)	<p>Within 10 working days of receiving case file from CCO.</p> <p>NB: the timescale may be longer if an independent investigation is required.</p>	<p>The QACC or DO will give particular consideration to the following:</p> <ul style="list-style-type: none"> - Whether the evidence meets the essential requirements for detail and format - Whether procedures have been followed correctly (including internal procedures of training provider/assessment venue, if relevant) - The training provider/assessment venue's compliance history (if appropriate) - Any CCO recommendations - What, if any, further information is needed to support understanding and decision making <p>If an independent investigation is needed to obtain further information the CCM or DO will undertake this, involving other staff as appropriate. The investigation may include a site visit, interviews with staff and students, and other activities as appropriate to the case. Training provider/assessment venue staff, students and other relevant parties are required to co-operate fully with such investigations.</p>
<p>Make decision, apply sanctions and close case, or refer to MRP for final decision</p> <p>Communicate outcomes to training provider/assessment venue, student(s), and others (as appropriate)</p>	CCM (or DO)	<p>Within 10 working days of receiving case file from CCO, if there is sufficient evidence.</p> <p>NB: the timescale may be longer if an independent investigation is required.</p>	<p>The CCM or DO (in consultation with the CCM) will:</p> <ul style="list-style-type: none"> - Consider all available evidence and prepare a final report - Review the report taking into account the nature of the offence, as described and guided by Appendix 5 of the JCQ Suspected Malpractice in Examinations and Assessments and also any previous history of malpractice/maladministration - Where appropriate, apply relevant actions/sanctions, or refer the matter to the MRP.
<p>Update case file and if appropriate, amend IR and send update to regulators and other interest parties</p>	CCM (and HOAC)	<p>Within 1 working day of making a decision</p>	<p>The QCC (or the CCO under their direction) should update the case file.</p> <p>The CCM will discuss the case with the HOAC who will, as appropriate, provide a final update to the regulators, other senior staff and any other relevant stakeholders.</p> <p>Action required to prevent similar incidents of malpractice or maladministration occurring in future will be implemented and monitored through to completion.</p>

Activity	Who responsible	Service Level	Notes
Review more serious cases / consider the outcome of any investigation undertaken by the CCM/DO			
Schedule MRP meeting.	CCM	Within 10 working days of receiving report from CCO.	
Review all available evidence	MRP	At MRP meeting	<p>The MRP will consider all of the evidence available and decide whether it is sufficient, or whether additional information is required.</p> <p>To make a decision, the MRP will normally follow the lead of civil law in responding to the question 'Does the evidence, on the balance of probabilities, indicate that malpractice or maladministration has taken place?'</p> <p>Given the evidence arising from all evaluations and any investigations, the MRP must arrive at a clear decision and make recommendations for development.</p> <p>In the case of training providers and assessment venues, the MRP will consider:</p> <ul style="list-style-type: none"> - the risk rating of the training provider or assessment venue concerned - the training provider/assessment venue's compliance history, and its effectiveness in dealing with actions identified by AAT - where CBAs are involved: <ul style="list-style-type: none"> o the security of training providers/assessment venues' information technology systems, and results of any spot checks on this o information from the Assessment Systems Operations team at AAT o comparison of pass rate statistics within the training provider or assessment venue, across different series of tests, and different training providers/assessment venues for the same tests o the assessment records of the training provider or assessment venue o the time taken for assessments vs. average times for comparable assessments - where impersonation has occurred, i.e. who? when? why? how confirmed? - whether any Whistleblower information has been corroborated, i.e. <ul style="list-style-type: none"> o Is there more than one witness saying the same thing? o What does any AAT evidence say? For example, quality assurance report summaries, data arising from online testing o What is the relationship between evidence generated and witness or suspect statements? - any reports from unannounced visits by AAT

Activity	Who responsible	Service Level	Notes
			<ul style="list-style-type: none"> - where there was an investigation team, their findings and recommendations - any information or evidence supplied by other organisations, such as the regulators/other awarding organisations - whether there has been non-compliance with regulatory requirements (if appropriate) - whether further information or evidence is required - whether the correct procedures have been followed by the training provider, the student or by AAT - whether all relevant avenues been explored - what must be done to prevent reoccurrence and in what timescale - who will have responsibility for required monitoring. <p>In the case of students, the MRP will consider:</p> <ul style="list-style-type: none"> - any specific rules/ procedures that have been broken or abused - whether the student followed correct procedures - the time taken for any assessment and how this compares to normal - the nature of the offence, as described and guided by Appendix 5 of the JCQ Suspected Malpractice in Examinations and Assessments - any previous history of malpractice/maladministration - whose testimony has identified the offence - the testimony of student(s) concerned - whether there is any other evidence which supports witness testimonies - any action(s) the training provider or assessment venue has taken against the student(s) - where plagiarism has occurred; <ul style="list-style-type: none"> o the sources of information which were/are believed to have been copied o whether the opinion of a subject or assessment expert has been sought on the nature/ extent of any plagiarism
Agree sanctions (if appropriate)	MRP	At MRP meeting	The MRP will reflect on its deliberations and agree appropriate actions/sanctions that reflect the severity of the incident.
Agree minutes of MRP meeting	CCM and MRP members	Within 5 working days of MRP meeting	

Activity	Who responsible	Service Level	Notes
Communicate outcomes to training provider/assessment venue, student(s), and others (as appropriate)	CCM	Within 5 working days of MRP meeting	Those, against whom allegations have been made, will be informed in writing of the outcome.
Update case file send update to regulators and other interest parties	CCM (and HOAC)	Within 5 working days of MRP meeting	<p>The CCM (or the CCO under their direction) should update the case file.</p> <p>The CCM will discuss the case with the HOAC who will, as appropriate, provide a final update the regulators, other senior staff and any other relevant stakeholders.</p> <p>Action required to prevent similar incidents of malpractice or maladministration occurring in future will be implemented and monitored through to completion.</p>

Appendix 2 - Malpractice/Maladministration Case Checklist

Training Provider/Assessment Venue Name:

Training Provider/Assessment Venue Code:

Student name:

Name of Assessment:

Date of Incident:

Date when AAT were sent details of the incident:

Overview of Case

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Evidence provided

Please indicate what information has been provided to AAT as part of the training provider/assessment venue investigation:

Evidence type	Has this been provided to AAT Yes or No?	If this has not been sent to AAT, then please provide some commentary on the reasons why
Investigation report to include: <ul style="list-style-type: none"> • a detailed account of the circumstances • who was involved • actions already taken by the training provider/assessment venue 		
<u>Written</u> invigilator(s) statement		
Written student(s) statement		
Written statement from any other individuals involved		
Seating plan		
Copies of any evidence/work relevant to the investigation for example any unauthorised material brought into the assessment		
Details of any mitigating factors		
Details of internal investigation carried out (method, findings and any conclusions) and copies of internal investigation records for example interview notes		

Details of any remedial action taken to ensure the integrity of the qualification/assessment		
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Internal use only

Date of when all the information was received:

Were any assessment results placed on hold? Yes or No

If yes, confirm the JIRA ticket number

Was the case sent to the Malpractice Review Panel (MRP)? Yes or No

If no, please provide a brief summary why?

If yes, date of when the case was heard by the MRP?:

If yes, please the outcome of the MRP?: