



Malpractice and Maladministration Policy and Procedure

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Please ask if you, or someone you know, would like this document in a different format or language.

Revision Date & Change Log

Date of Revision	Brief Description of Change	Date Approved
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04/2018	Section 4 – clarity regarding reporting chain/roles/links to student disciplinary policy and final bullet point – clarity regarding notification to awarding bodies. Section 5 – clarity regarding roles/reporting chain in the appeals process to meet SQA requirements	
08/2018	Appendix 2 – Distribution List amended to reflect changes to the academic management structure. Section 4 & 5 – change who is responsible in line with new academic management structure	
09/2023	General updates including distribution list to reflect structural changes.	

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1. Introduction

- 1.1. This policy and procedure is a requirement for external awarding bodies whose qualifications are delivered by UHI Moray, to ensure that all malpractice and maladministration investigations are undertaken in a consistent manner and that the integrity of qualifications is upheld.
- 1.2. This document aims to support staff and students by:
 - defining malpractice and maladministration,
 - providing examples of what it is and how it may arise,
 - Providing guidance on what staff and students should do if malpractice or maladministration is suspected, and
 - signposting the appropriate UHI Moray staff, policies, and procedure.
- 1.3. The document also seeks to ensure the college deals fairly, promptly and transparently with staff and students who are believed to have committed a breach of college regulations.

2. Scope

- 2.1. This policy applies to all staff and students at UHI Moray, including any temporary or agency staff or unpaid members of staff and voluntary workers.
- 2.2. This policy should be read in conjunction with the policies and procedures referred to in section 7.
- 2.3. Where allegations relate to a Scottish Qualifications Authority (SQA) UHI approved qualification or assessment at SCQF level 7 or above, these will be dealt with under the Academic Standards and Quality Regulations of UHI.

3. Definitions

- 3.1. **Malpractice** means any act, default of practice (whether deliberate or resulting from neglect or default) that is a breach of or contravenes awarding body assessment requirements/regulations. This includes any act, default or practice that:
 - Compromises, attempts to compromise or may compromise the process of assessment, the integrity of any awarding body (such as SQA or City and Guilds) qualification, or the validity of a result or certificate; and/or
 - Damages the authority, reputation or credibility of an awarding body or any officer, employee, or agent of the awarding body.
- 3.2. Malpractice can arise for a variety of reasons:
 - Some incidents are intentional and aim to give an unfair advantage or disadvantage in an examination or assessment (deliberate non-compliance)
Examples might include:

- Completing assessment work on behalf of students; or
 - Falsification of information leading to certification.
- Some incidents of malpractice are unintentional. Unintentional malpractice is defined as '**maladministration**', which includes incidents that arise due to ignorance of awarding body requirements, carelessness or neglect in applying requirements. Examples might include:
 - Seeking approval to offer a new qualification after the deadline for new approval applications has passed; or
 - Requesting certification of learners after a regulated qualification's certification end date.
- 3.3. Malpractice can include both maladministration in the assessment and delivery of awarding body qualifications and deliberate non-compliance with awarding body requirements.
- 3.4. Whether intentional or not, it is necessary to investigate and act upon any suspected instances of malpractice, to protect the integrity of the qualification and to identify any wider lessons to be learned.
- 3.5. Failure by UHI Moray to notify, investigate and report to an awarding body, any allegations of suspected malpractice constitutes malpractice. Also, failure to take action as required by awarding bodies or to cooperate with an investigation by an awarding body constitutes malpractice.
- 3.6. Student Malpractice means any type of malpractice by a student which threatens the integrity of an examination or assessment. Malpractice by a student can occur, for example, in:
- The preparation and authentication of coursework
 - The preparation or presentation of practical work
 - The compilation of a portfolio of assessment evidence
 - The completion of an examination paper, or controlled write-up stage of externally assessed coursework, or
 - Conduct during or after an assessment.
- 3.7. Centre Malpractice means any type of malpractice by a centre, or someone acting on its behalf (for example an assessor), which threatens the integrity of an examination or assessment.
- 4. Responsibilities**
- 4.1. Staff and students will be made aware of the Malpractice and Maladministration Policy and Procedure at induction. It is the responsibility of all staff to ensure the

integrity of any qualification being delivered within UHI Moray and to follow the reporting procedures outlined below if they suspect there has been student or centre malpractice.

- College managers are responsible for ensuring that staff are aware of their responsibilities under this policy and procedure for suspected centre, staff or student malpractice.
- Academic and related support staff, e.g. invigilators, have a responsibility to ensure that students are aware their responsibilities under this policy and procedure
- For student malpractice staff should refer to the stages outlined in the [Student Disciplinary Procedure](#).
- If student malpractice is suspected, staff should contact the relevant Head of Curriculum
- The Head of Curriculum must keep the Quality Officer informed of cases of malpractice and report the outcomes, this will allow the Quality Officer to refer details to the appropriate awarding body under their regulations if necessary.
- Any student who suspects malpractice, either by a fellow student or member of staff should report their suspicions to either, the delivering lecturer, their Learning Development Worker, or any other member of academic staff, who should then report it to their line manager to escalate.
- If any suspected incidences of centre, staff or student malpractice are reported direct to the Quality Officer, details will be referred to the relevant Head of Curriculum, who will deal with them in line with the Student Disciplinary Procedure or Staff Conduct and Capability Procedure depending on the circumstances.
- All staff have a professional duty to ensure they uphold this policy and procedure. Whilst the policy and procedure sets out general principles, staff must ensure they abide by the assessment and administrative requirements for each course, and qualification as set out by the relevant awarding body.
- Reporting incidents of suspected malpractice or maladministration to awarding bodies
 - Report all instances of suspected staff/centre malpractice or maladministration.
 - Only report instances of suspected student malpractice which relate to regulated qualifications.
 - The matter must also be reported to the police if the malpractice involves a criminal act.
- The Quality Officer will ensure that resulting is put on hold pending the outcome of any investigation and subsequent appeal.

5. Appeals (after a malpractice / maladministration incident)

- 5.1. Students have a right to appeal a decision where a concern of student malpractice has been upheld. A student may appeal a malpractice decision in writing to appeals.moray@uhi.ac.uk. The appeal will then be dealt with by a member of senior management.
- 5.2. If a malpractice decision is escalated to SQA, student have a right to appeal to SQA (see other awarding body appeals guidance where applicable) within 15 working days of receiving notification of SQA's decision, where:
- The centre has conducted its own investigation and the student disagrees with the outcome, where the centre's internal malpractice appeals process has been exhausted;
 - SQA has asked the centre to conduct an investigation and the student disagrees with the outcome, where the centre's malpractice appeals process has been exhausted; or
 - SQA conducts its own investigation and the candidate disagrees with the decision.
- 5.3. The College's Quality Officer will provide details of who the student should contact at SQA.
- 5.4. Staff have a right to appeal a decision where a concern of staff malpractice has been upheld. The member of staff may appeal in writing to the college's Director of Human Resources and Organisational Development.
- 5.5. Centres have the right to appeal a decision where a case of reported malpractice by the centre has been confirmed through investigation by SQA, (or other awarding body) This can be submitted to SQA by the Head of Centre, or appropriate nominee, within 10 working days of notification of SQA's decision.
- 5.6. For SQA regulated qualifications only e.g. SQA SVQ's – if the student or centre is still dissatisfied with the outcome of the malpractice appeal and is undertaking a regulated qualification, then the final stage of appeals process is for the malpractice appeal to be raised as follows, within 10 working days of being notified of SQA's final decision:
- Student and centres have the right to request a review by the appropriate regulator (SQA Accreditation, Ofqual or Qualifications Wales) of the awarding body's process in reaching a decision in an appeal of a malpractice decision for qualifications subject to regulation.
 - The Head of Centre or student's letter must be received by SQA Accreditation within 10 working days of receiving SQA's final decision on the outcome of the malpractice appeal.

6. Record Retention

- 6.1. Where suspected malpractice or maladministration has been upheld, all records will be retained in line with the [Assessment Retention Policy](#). The policy states that candidate evidence plus assessment and internal verification records must be retained if subject to a malpractice appeal or an appeal to SQA against a malpractice decision.
- 6.2. Records must be retained in line with SQA retention requirements, [Retention of candidate assessment records table.pdf \(sqa.org.uk\)](#).

7. Related Policies and Information

[Academic Quality Policy](#)

[Staff Conduct and Capability Procedure](#) (internal link)

[Student Conduct Policy](#)

[Student Disciplinary Procedures](#)

[Assessment Retention Policy](#) (Adopted by UHI Moray applicable to FE SQA Provision)

[Retention of candidate Assessment Records Table SQA](#)

[SQA Malpractice: Information for Centres](#)

[Malpractice Policy and Procedures for SQA Qualifications regulated by Ofqual and/or Qualification Wales](#)

[EAL Malpractice and Maladministration Policy](#)

[UAL Malpractice and Maladministration Policy](#)

[City and Guilds Managing Cases of suspected malpractice in examinations and assessments 2022-23](#)

Appendix 1

Examples of Student Malpractice

The following are examples of student malpractice, this list is not exhaustive, and the College at its discretion may consider other instances of malpractice.

- Collusion with others when an assessment must be completed by individual candidates.
- Copying from another candidate (including using ICT to do so) and/or working collaboratively with other candidates on an individual task.
- Allowing work to be copied (for example posting written coursework on social networking sites prior to an examination / assessment)
- Frivolous content — producing content that is unrelated to the assessment.
- Misconduct — inappropriate behaviour in an assessment room that causes disruption to others. This includes talking, shouting and/or aggressive behaviour or language, and having a prohibited electronic device that emits any kind of sound in the assessment room.
- Offensive content — inclusion of inappropriate, offensive, discriminatory or obscene material in assessment evidence.
- Personation/Impersonation — assuming the identity of another student or a student having someone assume their identity during an assessment.
- Plagiarism — failure to acknowledge sources properly and/or the submission of another person's work as if it were the student's own.
- Prohibited items — physical possession of prohibited materials (including mobile phones, electronic devices and handwritten notes etc) during a controlled assessment.
- Behaving in a manner so as to undermine the integrity of any exam or assessment. exchanging, obtaining, receiving, passing on information (or attempt to) which could be examination related by means of talking, electronic, written or non-verbal communication
- Allowing others to assist in the production of controlled assessments, coursework or assisting others in the production of controlled assessments or coursework
- Bringing into the examination room notes in the wrong format (where notes are permitted in examinations) or inappropriately annotated texts (in open book examinations)
- Bringing into the examination or assessment room unauthorised material, for example, notes, study guides and personal organisers, own blank paper, calculators, dictionaries (where prohibited), instruments which can capture a digital image, electronic dictionaries and devices, mobile phones, reading pens, translators.

Examples of Centre or Staff Malpractice

The following are examples of centre or staff malpractice, this list is not exhaustive, and the College at its discretion may consider other instances of malpractice.

- Managers or others exerting undue pressure on staff to pass candidates who have not met the requirements for an award.
- Excessive direction from assessors to candidates on how to meet national standards.
- Misuse of assessments, including repeated re-assessment contrary to requirements, or inappropriate adjustments to assessment decisions.
- Failure to assess internally assessed unit or course assessment work fairly, consistently and in line with national standards.
- Failure to apply specified awarding body assessment conditions in assessments, such as limits on resources or time available to candidates to complete their assessments.
- Insecure storage of assessment instruments, materials and marking instructions.
- Failure to comply with requirements for accurate and safe retention of candidate evidence, assessment and internal verification records.
- Failure to comply with the procedures of the awarding body for managing and transferring accurate candidate data.
- Deliberately withholding information about circumstances which may compromise the integrity of any qualification and/or credibility of the awarding body.
- inventing or changing marks for internally assessed work (coursework or portfolio evidence) where there is insufficient evidence of the candidate's achievement to justify the marks given or assessment decisions made
- Failure to keep candidate coursework / portfolios of evidence secure
- Assisting learners in the production of work for assessment, where the support has the potential to influence the outcomes of assessment, for example where the assistance involves producing work for the learner
- Producing falsified witness statements, for example for evidence the learner has not generated
- Allowing evidence to be included for assessment which is known by the staff member not to be the learner's own
- Facilitating and allowing impersonation
- Misusing the conditions for special learner requirements
- Falsifying records/certificates, for example by alteration, substitution, or by fraud
- Fraudulent certificate claims, that is claiming for a certificate prior to the learner completing all the requirements of assessment
- Failure to adhere to awarding body registration and certification procedures
- Failure to adhere to centre approval requirements
- Late learner registrations (both infrequent and persistent)
- Unreasonable delays in responding to requests and communications from awarding bodies
- Inaccurate claims for certification or award
- Failure to maintain appropriate auditable records e.g. certification claims and/or forgery of evidence
- Withholding of information, either by deliberate act or omission, which is required by the awarding body to ensure the rigour of quality assurance and by implication the integrity of the qualification, certification or award
- Failure to adhere to, or incorrect application of, any awarding body policy in relation to reasonable adjustments and/or other special considerations.

Appendix 2
Distribution list

TITLE
Principal
Deputy Principal
Director of Information, Planning and Student Support
Director of Human Resources and Organisational Development
Heads of Curriculum (ALL)
Head of Academic Partnerships
Deputy Heads of Curriculum (ALL)
Deputy Head of Academic Partnerships
Curriculum Team Leaders
Head of Registry and Academic Operations
Head of Student Services
Quality Officer
Exams Officer
Clerk to the Board