

MALADMINISTRATION POLICY

CENTRE RESPONSIBILITY

It is important that your staff involved in the management, assessment and quality assurance of our qualifications, and your learners, are fully aware of the contents of the policy and that your centre has arrangements in place to prevent and investigate instances of malpractice and maladministration.

A failure to report suspected or actual malpractice/maladministration cases or have in place effective arrangements to prevent such cases, may lead to sanctions being imposed on your centre as per our Disciplinary Policy.

If you wish to receive guidance/advice from us on how to prevent, investigate, and deal with malpractice and maladministration then please contact us (details below) and we will happily provide you with such advice and/or guidance.

Your centre's compliance with this policy and how it takes reasonable steps to prevent and/or investigate instances of malpractice and maladministration will be reviewed by us periodically through our ongoing centre monitoring arrangements.

REVIEW ARRANGEMENTS

We will review the policy annually as part of our annual self-evaluation arrangements and revise it as and when necessary in response to customer and learner feedback, changes in our practices, actions from Ofqual or external agencies, changes in legislation, or trends identified from previous allegations.

In addition, this policy may be updated in light of operational feedback to ensure our arrangements for dealing with suspected cases of malpractice and maladministration remain effective.

If you would like to feedback any views, please contact us via the details provided at the end of this policy.

DEFINITION OF MALADMINISTRATION

Maladministration is any activity or practice which results in non-compliance with administrative regulations and requirements and includes the application of persistent mistakes or poor administration within a centre (e.g. inappropriate learner records).

EXAMPLES OF MALADMINISTRATION

The categories listed below are examples of centre and learner maladministration. Please note that these examples are not exhaustive and are only intended as guidance on our definition of maladministration:

- persistent failure to adhere to our learner registration and certification procedures,
- persistent failure to adhere to our centre recognition and/or qualification requirements and/or associated actions assigned to the centre,

- late learner registrations (both infrequent and persistent),
- unreasonable delays in responding to requests and/or communications from ABMA,
- inaccurate claim for results and/or certificates,
- failure to maintain appropriate auditable records, e.g. certification claims and/or forgery of evidence,
- withholding of information, by deliberate act or omission, from us which is required to assure us of the centre's ability to deliver qualifications appropriately,
- misuse of our logo and trademarks or misrepresentation of a centre's relationship with SSBR and/or its recognition and approval status with SSBR,
- failure to adhere to, or to circumnavigate, the requirements of the SSBR Reasonable Adjustments and Special Considerations Policy.

PROCESS FOR MAKING AN ALLEGATION OF MALPRACTICE OR MALADMINISTRATION

Anybody, including EQAs, who identifies or is made aware of suspected or actual cases of malpractice or maladministration at any time **must immediately notify SSBR**. In doing so they should put them in writing/email and enclose appropriate supporting evidence (centres can submit details of potential/actual cases of malpractice via the 'Malpractice and/or Maladministration Form' on SSBR website.

All allegations must include (where possible) the:

- centre's name, address and number,
- learner's name and SSBR learner number,
- centre/SSBR personnel's details (name, job role) if they are involved in the case,
- details of the SSBR qualification affected or nature of the service affected,
- nature of the suspected or actual malpractice and associated dates, and
- details and outcome of any initial investigation carried out by the centre or anybody else involved in the case, including any mitigating circumstances.

If a centre has conducted an initial investigation prior to formally notifying us, the centre should ensure that staff involved in the initial investigation are competent and have no personal interest in the outcome of the investigation. However, it is important to note that in all instances the centre must immediately notify us if they suspect malpractice or maladministration has occurred as we have a responsibility to Ofqual to ensure that all investigations are carried out rigorously and effectively.

In all cases of suspected malpractice and maladministration reported to us we will protect the identity of the 'informant' in accordance with our duty of confidentiality and/or any other legal duty.

CONFIDENTIALITY AND WHISTLEBLOWING

Sometimes a person making an allegation of malpractice or maladministration may wish to remain anonymous. Please refer to our Whistleblowing Policy for how we manage allegations made by a whistleblower.

RESPONSIBILITY FOR THE INVESTIGATION

In accordance with regulatory requirements, all suspected cases of maladministration and malpractice will be examined promptly by us to establish if malpractice or maladministration has occurred and will take all reasonable steps to prevent any adverse effect from occurring as defined by Ofqual.

All suspected cases of malpractice and maladministration will be passed to our Compliance Department (CD) and we will acknowledge receipt, as appropriate, to external parties within 5 working days.

Our CD will be responsible for ensuring the investigation is carried out in a prompt and effective manner and in accordance with the procedures in this policy. The CD will allocate a relevant member of staff to lead the investigation and establish whether or not the malpractice or maladministration has occurred, and they will also review any supporting evidence received or gathered by SSBR.

At all times we will ensure that SSBR personnel assigned to the investigation have the appropriate level of training and competence and they have had no previous involvement or personal interest in the matter.

NOTIFYING RELEVANT PARTIES

In all cases of suspected or actual malpractice, we will notify the head of your centre involved in the allegation that we will be investigating the matter and/or in the case of learner malpractice, we may ask your centre to investigate the issue in liaison with our own personnel – in doing so we may withhold details of the person making the allegation, if to do so would breach a duty of confidentiality or any other legal duty.

Where applicable, our CD will inform Ofqual if we believe there has been an incident of malpractice or maladministration which could either invalidate the award of a qualification or if it could affect another Awarding Organisation (AO).

INVESTIGATION TIMELINES AND SUMMARY PROCESS

We aim to action and resolve all stages of the investigation within a maximum of 8 weeks of receipt of the allegation. Please note that in some cases the investigation may take longer; for example, if a centre visit is required. In such instances, we will advise all parties concerned of the likely revised timescale.

The fundamental principle of all investigations is to conduct them in a fair, reasonable and legal manner, ensuring that all relevant evidence is considered without bias. In doing so investigations will be based around the following broad objectives:

- to establish the facts relating to allegations/complaints in order to determine whether any irregularities have occurred,

- to identify the cause of the irregularities and those involved,
- to establish the scale of the irregularities,
- to evaluate any action already taken by the centre,
- to determine whether remedial action is required to reduce the risk to current registered learners and to preserve the integrity of the qualification,
- to ascertain whether any action is required in respect of certificates already issued,
- to obtain clear evidence to support any sanctions to be applied to the centre, and/or to members of staff, in accordance with our Sanctions Policy, and
- to identify any adverse patterns or trends.

The investigation may involve a request for further information from relevant parties and/or interviews with personnel involved in the investigation. Therefore, we will:

- ensure that all material collected as part of an investigation must be kept secure. All records and original documentation concerning a completed investigation that ultimately leads to sanctions against a centre be retained for a period of no less than 2 years. If an investigation leads to invalidation of certificates, or criminal or civil prosecution, all records and original documentation relating to the case will be retained until the case and any appeals have been heard and for 2 years thereafter, and
- expect all parties, who are either directly or indirectly involved in the investigation, to fully co-operate with us.

Either at notification of a suspected or actual case of malpractice or maladministration and/or at any time during the investigation, we reserve the right to impose sanctions on the centre in accordance with our Disciplinary Policy in order to protect the interests of learners and the integrity of the qualifications.

We also reserve the right to withhold a learner's, and/or cohort's, results for all the SSBR qualifications and/or units they are studying at the time of the notification or investigation of suspected or actual malpractice/maladministration.

If appropriate, we may find that the complexity of a case or a lack of cooperation from a centre means that they are unable to complete an investigation. In such circumstances we may consult the relevant Regulatory Bodies in order to determine how best to progress the matter.

Where a member of SSBR's staff is under investigation we may suspend them or move them to other duties until the investigation is complete.^[1]

Throughout the investigation our CD will be responsible for overseeing the work of the investigation team to ensure that due process is being followed, appropriate evidence has been gathered and reviewed and, for liaising with and keeping relevant external parties informed.

INVESTIGATION REPORT

After an investigation, we will produce a draft report for the parties concerned to check the factual accuracy where appropriate. Any subsequent amendments will be agreed between the parties concerned and ourselves. The report will:

- identify where the breach, if any, occurred,
- confirm the facts of the case,
- identify who is responsible for the breach (if any),
- confirm an appropriate level of remedial action to be applied, and
- confirm any actions/sanctions (if any) should be imposed on the centre.

We will make the final report available to the parties concerned and to Ofqual and other external agencies as required.

If it was an independent/third party that notified us of the suspected or actual case of malpractice, we will also inform them of the outcome – normally within 2 weeks of making our decision – in doing so we may withhold some details if, to disclose such information would breach a duty of confidentiality or any other legal duty.

If it is an internal investigation against a member of our staff the report will be agreed by the Senior Executive with the relevant internal managers and appropriate internal disciplinary procedures will be implemented.

INVESTIGATION OUTCOMES

If the investigation confirms that malpractice or maladministration has taken place we will follow our Sanctions Policy.

We will consider what action to take to:

- minimise the risk to the integrity of certification now and in the future,
- maintain public confidence in the delivery and awarding of qualifications,
- discourage others from carrying out similar instances of malpractice or maladministration, and
- ensure there has been no gain from compromising our standards.

The action we may take includes:

- imposing actions in relation to your centre with specified deadlines in order to address the instance of malpractice/maladministration and to prevent reoccurrence,
- imposing sanctions on your centre – if so these will be communicated to you in accordance with our Sanctions Policy along with the rationale for the sanction(s) selected,
- in cases where certificates are deemed to be invalid, inform your centre concerned and, for regulated qualifications, inform Ofqual why they are invalid and any action to be taken for reassessment and/or for the withdrawal of the certificates. We will also ask the centre to let the affected learners know the action we are taking and that their original certificates are invalid and ask the centre – where possible – to return the

invalid certificates to us. We will also amend our learner database so that duplicates of the invalid certificates cannot be issued and we expect the centre to amend their records to show that the original awards are invalid,

- amending aspects of our qualification development, delivery and awarding arrangements and, if required, assessment and/or monitoring arrangements and associated guidance to prevent the issue from reoccurrence, and
- informing relevant third parties (e.g. funding bodies) of our findings in case they need to take relevant action in relation to the centre.

In proven cases of malpractice and/or maladministration by a centre, SSBR reserves the right to charge the centre for any re-sits and reissuing of certificates and/or additional External Quality Assurer (EQA) visits. The fees will be the current SSBR prices for such activities at the time of the investigation.

In addition to the above, the CD will record any lessons learnt from the investigation and pass these onto relevant internal colleagues to help us at SSBR prevent the same instance of maladministration or malpractice from reoccurrence.

If the relevant party(ies) wishes to appeal against our decision to impose sanctions, please refer to our Appeals Policy.

