



## Riseladder School of Business and Technology

### Malpractice and Maladministration Policy

**Version:** 1.2

**Approved by:** Academic Board

**Review Date:** July 2025

**Next Review Due:** July 2026

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### 1.0 Policy Purpose

This policy outlines the procedures for preventing, identifying, managing, and reporting malpractice and maladministration in the delivery of Pearson BTEC qualifications at Riseladder School of Business and Technology. It supports the integrity of assessment and ensures full compliance with the **Pearson Centre Guide to Quality Assurance**, JCQ guidance (where applicable), and Ofqual regulatory requirements.

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### 2.0 Scope

This policy applies to:

- All learners registered on Pearson BTEC programmes
- All teaching, administrative, assessment, and support staff
- External contractors, partners, or third-party providers involved in qualification delivery, assessment, or certification processes

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### 3.0 Definitions

- **Malpractice:** Any act, default or practice that deliberately compromises, or has the potential to compromise, the integrity of assessment, the validity of certification, or the reputation of Pearson qualifications.
- **Maladministration:** Any unintentional failure in internal procedures or administrative systems that leads to non-compliance with Pearson's regulatory requirements.

### Examples of Malpractice:

- Plagiarism, collusion, or contract cheating including AI

- Impersonation or submitting work on behalf of another
- Tampering with assessment materials or grade outcomes
- Inappropriate assistance during assessments
- Fabrication of results or certification claims

#### **Examples of Maladministration:**

- Incomplete or inaccurate learner records
  - Failure to maintain secure assessment records
  - Non-compliance with internal verification procedures
  - Poor record keeping or uncontrolled access to assessment materials
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### **4.0 Prevention Measures**

Riseladder maintains a proactive approach to prevention through:

- Clear communication of malpractice policies to staff and learners
  - Learner induction modules on academic integrity
  - Regular training and updates for assessors and internal verifiers
  - Secure LMS access and version-controlled assessment documents
  - Use of plagiarism detection tools (e.g., Turnitin)
  - Assignment design that minimises opportunities for malpractice (e.g., scenario-based tasks)
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### **5.0 Detection and Reporting**

Suspected malpractice or maladministration can be identified by:

- Assessors, internal verifiers, learners, administrative staff, or external reviewers
- Routine quality assurance checks or LMS audit logs

All suspicions must be reported immediately to the **Quality Nominee**, who will:

- Log and acknowledge the incident
- Assess the nature and severity of the concern
- Notify Pearson where reportable thresholds are met
- Initiate a formal investigation as outlined in Section 6.0

Reports may be submitted:

- In person or during assessment moderation
  - By email to a designated secure address
  - Anonymously through a reporting channel where necessary
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## 6.0 Investigation Process

- Investigations are conducted by a designated senior member of staff uninvolved in the original assessment
- Affected parties are notified in writing and given an opportunity to respond
- The process ensures confidentiality, impartiality, and procedural fairness
- A record of evidence, interviews, and findings is maintained throughout

Upon conclusion, outcomes and recommendations will be:

- Documented and stored securely
  - Communicated to relevant parties
  - Actioned within 10 working days where possible
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## 7.0 Outcomes and Sanctions

Depending on the outcome of the investigation, sanctions may include:

- Reassessment opportunities under supervised conditions
- Formal written warnings
- Removal of grades or disqualification from the programme
- Suspension or dismissal of staff (subject to HR procedures)
- Mandatory training or quality assurance audits
- Immediate notification to Pearson and agreement of remedial action

All confirmed cases of serious malpractice will be reported to Pearson within **5 working days** using the appropriate reporting form.

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## 8.0 Appeals

Appeals against investigation outcomes must be:

- Submitted in writing to the Academic Board within **10 working days** of the decision
- Reviewed independently by a panel that was not involved in the original decision-making process
- Concluded within 15 working days of receipt, where feasible

Learners also retain the right to escalate concerns to Pearson if they are dissatisfied with the internal appeal outcome.

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## 9.0 Roles and Responsibilities

Role	Responsibility
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<b>Assessors</b>	Deliver assessments in line with policy, detect and report concerns
<b>Internal Verifiers</b>	Check for malpractice indicators during sampling and verification
<b>Quality Nominee</b>	Coordinate investigations, communicate with Pearson, maintain records
<b>Academic Board</b>	Monitor policy effectiveness, handle appeals, and review outcomes
<b>Learners</b>	Complete original work, follow assessment conduct requirements
<b>External Partners</b>	Adhere to Riseladder's quality assurance framework and malpractice protocols

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## 10.0 Record Keeping

- All reports, investigation notes, evidence, and outcomes are retained securely for **a minimum of three years**
  - Documents are stored electronically in restricted-access folders
  - Files are made available to Pearson upon request or during CQR/EQA reviews
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## 11.0 Monitoring and Continuous Improvement

- This policy is reviewed annually and updated in line with:
    - Pearson updates
    - Regulatory changes (e.g., Ofqual, JCQ)
    - Lessons learned from reported cases
    - Staff and learner feedback
  - Trends are reviewed to inform quality enhancement plans and targeted training interventions
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**Document Owner:** Quality Nominee

**Policy Status:** Live and in effect from September 2025

**Next Review Due:** July 2026