

Malpractice & maladministration process

Staff resources: where the DPD or ACM are unavailable (e.g. due to annual leave) a nominated representative will carry out their role. For the DPD head, this will be a member of the Cifa senior management team; for the ACM, this will be a member of the Cifa team.

CifaQ is alerted to potential malpractice

Centre staff, candidates and other stakeholders are required to report malpractice by completing a **malpractice form** and emailing it to the assessment centre manager (ACM) at:

assessment@archaeologists.net

Cifa Qualifications will acknowledge reports within two working days and may ask for further clarification. Note that Cifa Qualifications may be alerted to malpractice and/or maladministration via other routes. **Information submitted to Cifa Qualifications is treated in confidence.**

Immediate escalation & risk management

Stage 1: escalation, results freeze and initial screening

- The ACM escalates concerns to the head of professional development and practice (PDP head) who will lead an investigation, supported by the ACM
- The PDP head and ACM:
 - ensure that no results connected with the case will be claimed
 - carry out an initial screening to establish the nature of the concern

Scrutiny of allegation & record keeping

Stage 2: initial assessment of the allegation and administration

The PDP head will assess whether reasonable grounds for a suspicion or allegations exists and will scrutinise:

- the initial information provided with the allegation or other information which gives rise to the suspicion
- the source of the allegation
- any evidence that may reduce the credibility of the allegation
- any previous allegations, suspicions or evidence that may support, or contradict, the facts or information presented
- any existing records (where applicable) and cross reference the allegation if appropriate
- the time between the alleged malpractice and the date the allegation was made

Cifa Qualifications (usually the ACM) will:

- enter details of the allegation on the malpractice and maladministration log; the log is in Excel format with fields to assist in trends analysis
- set up a folder (soft copy only) that will store all records related to the case, including any records that may inform trends analysis

Within five working days



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Within five working days - CTD

Report to Ofqual

Stage 3: decision on Ofqual reporting

The PDP head will decide whether to report to Ofqual at this stage. Note that they must not wait until they have the full picture before informing Ofqual. They will report to Ofqual if:

- they have cause to believe the incident could invalidate the award of a qualification
- the incident could have an Adverse Effect

Where there is a credible allegation of suspected malpractice or maladministration that could constitute criminal activity, the PDP head will also consider whether they should notify the police, as well as Ofqual.

Risk assessment & mitigate

Stage 4 risk assessment & mitigate adverse effects

The PDP head and ACM will conduct a risk assessment to ascertain:

- whether any current assessment activity needs to be suspended or urgent mitigating action taken
- ascertain any adverse effects
- draw up an action plan to mitigate any adverse effects or other issues

Within a further five working days

Investigation plan (including timescale and reporting)

Stage 5: investigation plan

The PDP head/ACM will develop an investigation plan. This will include:

1. **expected timescale and reporting points (Ofqual, ClfA and the individual accused of malpractice)**

2. relevant staff/stakeholders to be involved
3. evidence to be gathered and scrutinised.

Evidence could include:

- a) reviewing assessment evidence and records
- b) seeking a second opinion from an IQA
- c) interviewing other candidates/members of staff/employer representatives
- d) examining product/service evidence

The timescale is shared with the candidate or member of staff in question.

The investigation plan is shared with Ofqual (if appropriate) and other relevant stakeholders (e.g. ClfA staff, the person/s raising the case)

In accordance with the published timescale

Investigation

Stage 6: conduct investigation

The PDP head leads on this and:

- involves the ACM and other staff as appropriate
- reports in accordance with the investigation plan
- amends the investigation plan if necessary (and reports on this as appropriate)

Investigation principles

Interested parties

Typically, interested parties will be notified in writing with relevant stakeholders copied in.

Conducting interviews

CifA Qualifications will seek to use interviewers who are competent to conduct them, depending on the nature of the interview, and people involved. This will be considered and noted in the investigation plan. Interviews will be recorded.

Information management

Evidence will be collated and stored in the dedicated case file. Relevant information is logged on the malpractice log. All information will be subject to the CifAQ GDPR management policy and will be kept securely in the OneDrive.

Evidence verification

Where evidence is not straightforward to verify, the DPD head may confer with other members of the CifA management team; if evidence cannot be found to be valid, it may have to be discounted.

Presenting investigations

The malpractice log should provide a clear and auditable record of the issue and its investigation.

Report & checkpoint before panel

Stage 7: investigation report, recommendations and report to Ofqual (if appropriate).

1. The PDP head will lead on the production of an investigation report which will detail:
 - initial report of malpractice
 - investigation plan
 - investigation activities
 - investigation conclusions & recommendations (including the implementation of any sanctions)
 - **whether the investigation should proceed to the panel stage.**

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Within 25 working days

Scrutiny panel

Stage 8: scrutiny panel

1. The PDP head presents findings and recommendations to a scrutiny panel. The panel consists of:
 - an independent assessor who is familiar with the relevant qualification/standard
 - a ClfA board member
 - a member of ClfA's senior management team
 - an independent representative (e.g. an assessment practitioner, an FAB consultant, a representative from the Institute of Building Conservation)
2. The panel will agree on which recommendations to accept and a plan of action is agreed **including**:
 - **a timescale for the plan**
 - **how the plan will be communicated to the candidate or member of staff in question**
3. The panel meeting is recorded.

In accordance with the panel timescale

Panel outcome

Stage 9: implementation of scrutiny panel's action plan

1. The PDP head leads on the implementation of the plan
2. Where appropriate, relevant parties are reminded of their right to appeal against a malpractice panel decision using the **appeal against a malpractice decision process** (see next page)

Within 10 working days

Centre operations

Stage 10: evaluation and improvement

The PDP head and ACM will develop a plan to implement any lessons learned and improvements in light of issues raised by the malpractice case.

Where alleged malpractice or maladministration is brought against the ACM, then the PDP head will work with a member of the ClfA senior management team to agree an appropriate investigation plan.

Where alleged malpractice or maladministration is brought against the PDP head, a member of ClfA's senior management team will develop an appropriate investigation plan and inform/involve Ofqual as appropriate.

Appeal against a **malpractice decision process**

A fee is chargeable for this service. If an appeal is upheld, then the fee is refunded. Please see EPAO fees & charges list for details.

Staff resources: where the DPD is unavailable (e.g. due to annual leave) a nominated representative will carry out their role. For the DPD head, this will be a member of the ClfA senior management team.

Where a party feels that:

- **an unfair malpractice decision has been made and/or**
- **the malpractice process has not been followed correctly**

then they have the right to appeal.

Appeals must be made in writing and addressed directly to the PDP head. They must clearly state the reason for the appeal and supply any relevant evidence.

They must be made within five working days of receiving the malpractice decision.

Within 10 working days

The PDP head will:

- review the appeal evidence to ascertain whether it's sufficient to be sent on to an independent reviewer and will ask for further evidence from the appellant if necessary
- report to Ofqual on the malpractice decision appeal
- confer with Ofqual on a suitable independent reviewer

Within 2 working days

The following evidence is sent to the independent reviewer:

- the form containing the original malpractice report
- the investigation action plan
- the investigation report and recommendations
- all evidence generated by the investigation
- the recording of the scrutiny panel

Appeal against a **malpractice decision process** - ctd

Within 25 working days

The independent reviewer scrutinises the evidence and judges whether the malpractice decision is fair and should stand or whether it should be changed.

The independent reviewer completes a written report detailing their activity, decision and the rationale for their decision. The report is shared with:

- Ofqual
- the person/s raising the appeal
- ClfA's senior management team

ClfA Qualifications stores the report and all associated evidence in the malpractice folder dedicated to that case.

Where an individual disagrees with the decision made by the independent reviewer, it is considered to be the case that EPAO internal appeals process has been exhausted and they have the right to appeal directly to Ofqual.