

Malpractice (and Maladministration) Policy – 2025/26

Updated 06 November 2025 to align with JCQ Regulations 2025/26 and current best practice.

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Approved by Governors	November 2025
Next Review	September 2026 (or sooner if JCQ updates)
Applies to	All qualifications delivered by the centre (General & VTQ)

1. Introduction & Scope

This policy sets out Dowdales School's approach to preventing, identifying, investigating and reporting suspected malpractice and maladministration in all assessments, including examinations, non-examination assessments (NEAs), on-screen tests and coursework. It aligns with the JCQ 'Suspected Malpractice: Policies and Procedures' (1 Sept 2025–31 Aug 2026), JCQ 'General Regulations for Approved Centres' (2025/26), JCQ 'Instructions for Conducting Examinations (ICE)' (2025/26), 'Plagiarism in Assessments' guidance, and 'AI Use in Assessments: Your role in protecting the integrity of qualifications' (Apr 2025).

2. Definitions

For the purposes of this policy, 'malpractice' includes both malpractice and maladministration. Candidate malpractice refers to actions by a candidate which may give them an unfair advantage or compromise an assessment. Centre staff malpractice refers to actions by any member of centre staff, contractor or volunteer that compromise assessment integrity. Suspected malpractice encompasses all alleged or suspected incidents.

3. Roles and Responsibilities

Head of Centre (HoC): overall accountability for compliance; ensures immediate reporting to awarding bodies using JCQ forms (M1/M2/M3) and oversees investigations.

Exams Officer: operational lead; maintains secure records/evidence log; liaises with awarding bodies and SLT; coordinates staff training and candidate communications.

SENCo/Access Arrangements Lead: ensures arrangements reflect 'normal way of working'; advises on potential malpractice related to support arrangements.

Heads of Department/Assessors: prevent and identify malpractice in NEAs/coursework; ensure internal standardisation and authenticity checks.

Invigilators: follow ICE; report suspected malpractice immediately; complete incident logs.

All Staff & Candidates: must comply with JCQ regulations and centre policies; report concerns via the channels below (including whistleblowing routes).

4. Prevention and Deterrence

4.1 Annual training and briefings:

- Annual training for staff and invigilators on ICE, SMPP, AI and plagiarism.
- Candidate briefings at start of year and before exam season; distribution of JCQ Information for Candidates and candidate-facing AI guidance.

4.2 Secure assessment practice (NEAs/coursework):

- Authentication: candidates sign declarations; staff check originality (including proper referencing/acknowledgement of sources).
- Internal standardisation and retention of evidence in line with JCQ guidance.

4.3 Technology & AI:

- Clear rules for permitted/forbidden use of AI tools; requirement to acknowledge any AI support and to retain prompts/outputs when allowed for research/ideation.
- Explicit reminder that using AI to produce work which means the candidate has not independently met the marking criteria will not be rewarded and may constitute malpractice.
- Controls in exam rooms: unauthorised devices/materials prohibited; word processor set-up per ICE; secure account management for digital materials.

5. Identification and Reporting of Suspected Malpractice

5.1 Internal escalation routes: Any member of staff or candidate may report concerns. Report to Exams Officer and Head of Centre immediately. Concerns about the Exams Officer should go to the Head of Centre; concerns about the Head of Centre to the Chair of Governors.

5.2 Safeguarding: Where a candidate is a child/vulnerable adult, parents/carers/appropriate adult will be kept informed, in line with safeguarding duties.

5.3 Reporting to awarding bodies: Head of Centre notifies the awarding body without delay using JCQ forms – M1 (candidate), M2 (staff – initial notification), M3 (staff – report). All supporting evidence is scanned and submitted together; originals are retained within the centre.

5.4 Evidence handling: Maintain a secure evidence log (dates, who collected, where stored). Preserve originals; use copies for working files.

6. Investigations

6.1 Investigator independence: Wherever possible, appoint an investigator with no conflict of interest; consider external support where necessary.

6.2 Process: Gather statements, logs, seating plans, scripts/coursework, device logs where applicable; follow awarding body timelines and instructions.

6.3 Rights of accused individuals: Inform individuals of the allegations, their right to respond and to be accompanied to meetings; keep a written record of communications and decisions.

6.4 Outcomes: Complete a written report summarising findings, evidence, recommendations and any centre actions to prevent recurrence; submit to the awarding body with required forms.

7. Decisions, Sanctions and Appeals

7.1 Communication of decisions: Awarding bodies issue decisions to the Head of Centre, who will inform affected parties and implement sanctions/actions.

7.2 Appeals: Provide individuals with information about the appeals process and timelines in line with JCQ 'A guide to the awarding bodies' appeals processes'.

7.3 Records: Retain case files securely until the case and any appeal are fully closed, in accordance with JCQ requirements.

8. Examples (non-exhaustive)

Appendix A – Staff malpractice (e.g., breach of security; deception; improper assistance; failure to cooperate).

Appendix B – Candidate malpractice (e.g., plagiarism; collusion; possession of unauthorised materials/devices; impersonation; disruptive behaviour; improper use of AI).

Appendix C – Maladministration (e.g., non-compliance with ICE; failure to train invigilators; failure to issue candidate notices; venue non-compliance).

9. Public Interest Disclosure (Whistleblowing)

Staff, candidates and third parties may raise concerns confidentially. The centre will signpost JCQ's Public Interest Disclosure (Whistleblowing) arrangements and protect whistleblowers from detriment.

10. Data Protection and Confidentiality

All evidence and case files are handled under the Centre's Data Protection Policy and JCQ requirements. Access is restricted to those with a legitimate role.

Appendix A – Examples of Staff Malpractice

Mirrors JCQ SMPP categories. Centre will update annually in line with the latest SMPP appendix.

Appendix B – Examples of Learner Malpractice

Mirrors JCQ SMPP categories, including plagiarism and improper use of AI.

Appendix C – Examples of Maladministration

Mirrors JCQ SMPP categories for centre processes and administration.

Appendix D – Forms and Key Documents

- JCQ Suspected Malpractice: Policies and Procedures (2025/26)
- JCQ General Regulations for Approved Centres (2025/26)
- JCQ Instructions for Conducting Examinations (2025/26)
- JCQ Plagiarism in Assessments – Guidance for Teachers/Assessors
- JCQ AI Use in Assessments (Apr 2025)
- JCQ Forms: M1, M2, M3 (2025/26)
- A guide to the awarding bodies' appeals processes (current year)

Change Log & Comparison with Previous (Sep 2024) Version

- Updated references to JCQ 2025/26 documents (SMPP, General Regulations, ICE).
- Strengthened AI section to reflect Apr 2025 guidance; clarified that AI which prevents independent demonstration of criteria is not rewarded and may be malpractice; added requirement to retain prompts/outputs when AI use is allowed for research.
- Added explicit evidence handling, scanning and retention requirements; clarified use of JCQ M1/M2/M3 forms and submission rules.
- Added investigator independence and conflict-of-interest statements; clarified safeguarding/parental communication for minors.
- Consolidated examples into appendices aligned with JCQ categories; ensured whistleblowing signpost and data protection statements are present.
- Tightened timelines for immediate reporting to awarding bodies and clarified roles/responsibilities.