



<b>Policy</b>	<b>Malpractice and Maladministration Policy and Procedure</b>
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*N.B. Any reference in red italics refers to the Ofqual General Conditions of Recognition (GCOR)*

### Introduction

This policy and procedure is aimed at NEBDN's centres and learners, who are delivering/registered on NEBDN approved qualifications or units within or outside the UK and who are involved in alleged malpractice/maladministration and to NEBDN staff or associates who are suspected of being involved in such cases. It is also for use by our NEBDN staff and other investigatory roles to ensure they deal with all malpractice and maladministration investigations in a consistent manner and to comply with Ofqual Condition *A8.3a*.

It sets out the steps to follow when reporting alleged cases of malpractice/maladministration such as academic misconduct and NEBDN's responsibilities in dealing with such cases. It also sets out the procedural steps NEBDN will follow when reviewing the cases.

Incidents of alleged malpractice and/or maladministration may be brought to the attention of NEBDN via various routes including but not limited to:

- Centre's
- Learners
- Learners' Employers
- Whistle-blowers
- Regulatory authorities
- Other awarding organisation's
- NEBDN Staff

Consideration may be given to any Malpractice or Maladministration guidance provided by the Joint Council of Qualifications (JCQ) in determining whether they have occurred.

### Definition of Malpractice

Malpractice is any activity or practice, which deliberately contravenes NEBDN regulations and compromises the integrity of the internal or external assessment process and/or the validity of the award of certificates. It covers any *failure to act appropriately*: actions, neglect, default, or other practice that compromises, or could compromise:

- the assessment process.
  - the integrity of a regulated or unregulated qualification.
- the validity of a result or certificate.
- the reputation and credibility of NEBDN; or,
- the 'perceptions' of regulated qualifications for stakeholders.



Examples of malpractice may include a range of issues from the active failure to maintain appropriate records or systems to the deliberate falsification of records to claim certificates. For the purpose of this policy this term also covers any forms of discrimination or bias towards certain or groups of learners.

### Examples of Malpractice

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

- Denial of access to premises, records, information, learners, and staff to any authorised NEBDN representative and/or the regulatory authorities.
- Deliberate misuse of the NEBDN logo, brand, name and trademarks or misrepresentation of a centre's relationship with NEBDN and/or its recognition and approval status with NEBDN.
- Failure of centre's to ensure robust investigations in Fitness to Practice investigations and share the resulting data.
- Deliberate failure to continually adhere to our centre's accreditation and/or qualification approval requirements or actions assigned to the centre.
- Intentional withholding of information from NEBDN, which is critical to maintaining the rigor of quality assurance and standards of qualifications.
- Deliberate failure to carry out internal assessment, internal moderation, or internal verification in accordance with our requirements.
- Deliberate failure to disclose and mitigate Conflicts of Interest in any marking and assessment of learner work.
- The unauthorised use of inappropriate materials / equipment in assessment settings (e.g., mobile phones).
- A loss, theft of, or a breach of confidentiality in, any assessment materials. (Ofqual General Conditions **B3.2b** and **G4.2 – G4.6**).
- Insecure storage of assessment materials.
- Inappropriate circulation/distribution of assessment materials.
- Unauthorised amendment, copying or distributing of exam/assessment papers/materials.
- Inappropriate assistance/support to learners by anyone involved in the assessment (e.g., unfairly helping them to pass a unit or qualification).
- Deliberate failure to adhere to the requirements of our Reasonable Adjustments and or Extenuating Circumstances Policy.
- Plagiarism/copying by learners /staff.
- Cheating by learners /staff.
- Impersonation - assuming the identity of another learner or having someone assume their identity during an assessment.
- Collusion or permitting collusion in exams/assessments.
- Deliberate contravention by learners of the assessment arrangements NEBDN specify for qualifications.
- Fraudulent claim for certificates and/or deliberate submission of false information to gain a qualification (Ofqual General Condition **B3.2F**)
- Falsification of records
- Deliberate failure to adhere to our learner registration and certification procedures.



- Deliberate failure to maintain appropriate auditable records, e.g., certification claims and/or forgery of evidence.
- Learners still working towards qualification after certification claims have been made.
- Selling certificates for cash.
- Selling papers/assessment details.
- Sharing or selling assessments on-line.
- Extortion.
- Fraud.
- Threatening or abusive behaviour that threatens the safety of staff and/or is intended to put undue influence on the outcomes of an assessment/award.
- Learners paying or using others to complete assessments

### **Learners Malpractice in online assessments**

Learners are reminded that online assessments are subject to a range of electronic and human checks to ensure that learner work is authentic and indicative of their own knowledge and experience; the GDC also requires appropriate ethical standards of dental professionals. Learner penalties for collusion may be substantial and involve disclosure to the GDC registration team or result in a Fitness to Practice issue, either at centre or GDC level.

### **Definition of Maladministration**

Maladministration is linked to Malpractice and is essentially any activity or practice, which results in non-compliance with administrative regulations and requirements where there has been no intention on the part of the person responsible to do any harm. It may involve some degree of incompetence or ineptitude or may simply be because of carelessness or inexperience. and includes the application of persistent mistakes or poor administration by a centre (e.g., inappropriate learners' records) or on behalf of a centre (e.g., Inappropriate invigilation of an assessments, incomplete assessments returned to NEBDN).

### **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 NEBDN's definition of maladministration:

- Persistent failure to adhere to NEBDN's learner registration and certification procedures.
- Persistent failure to adhere to NEBDN's centre accreditation 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 NEBDN.
- Inaccurate claims for certificates (Ofqual General Condition **B3.2F**).
- Failure to maintain appropriate auditable records, e.g., certification claims and/or forgery of evidence.
- Inadvertent delay of providing information, by omission, from NEBDN which is required to assure NEBDN of the centre's ability to deliver qualifications appropriately.
- Misuse of our logo and trademarks or misrepresentation of a centre's relationship with NEBDN and/or its recognition and approval status with NEBDN.
- Poor administration arrangements and/or records.
- Persistent mistakes in relation to our delivery arrangements.



- Failure to adhere to the requirements of our Reasonable Adjustments and or Extenuating Circumstances Policies.

## **Accountability and Responsibility**

### **Trustees are accountable for:**

- Ensuring regulatory requirements are adhered to.
- Agreeing strategies, receiving progress reports, reviewing performance and monitoring trends in relation to compliance within NEBDN to Ofqual General Conditions of Recognition

### **Education and Standards Committee are responsible for**

- Monitoring incidents on behalf of the Board of Trustees
- Reporting to the Board of Trustees on the management of the impact of any malpractice and maladministration on NEBDN

### **The Chief Executive Officer (CEO) is responsible for:**

- To research and implement appropriate policies and procedures
- Ensure NEBDN is complying with all regulatory obligations,
- Assure the Board of regulatory compliance.

### **The Responsible Officer (RO) is responsible for:**

- Representing NEBDN as a single point of regulatory contact
- Liaison with regulatory bodies (Ofqual and General Dental Council) on the identification, progress, and outcomes of investigations as appropriate.

### **The Head of Quality and Standards (HQS) is responsible for:**

Overseeing the Malpractice & Maladministration Management Procedure

- Maintaining, applying, and reporting on the Malpractice & Maladministration Management Procedure.  
Compiling and submitting reports and maintaining records
- Escalating issues of malpractice or maladministration which may require the removal of qualification/ centre  
Staff approval
- Communicating with learners and centres in relation to malpractice or maladministration
- Reporting to SMT regarding suspicious activity for any online assessments; including notification of suspicions to centres.

### **The Head of Operations (HOPs) is responsible for:**

Analysis of Exam performance data

- Identification of suspicious learner behaviour in written and OSCE assessments
- Referring cases to Quality Assurance for investigation by centres in first instance

### **The Chief External Examiner (CEE) is responsible for:**

- Ensuring external assessment, marking and moderation activities are effectively monitored for signs of potential malpractice/maladministration in Face to Face or online Assessments

### **All NEBDN staff, External Examiners and volunteers are responsible for:**

- Ensuring any information received which may refer to alleged malpractice and/or maladministration is brought to the attention of QA team and or the HQS immediately for investigation.

### **Centres are responsible (Ofqual General Condition [A8.4](#)) for:**



- Ensuring all staff involved in the management, assessment, and quality assurance of NEBDN qualifications and all learners are fully aware of the contents of the policy.
- Reminding learners of the professional requirements to avoid accidental or planned plagiarism in their portfolios and exams.
- Ensuring arrangements are in place to prevent, investigate and report instances of alleged malpractice and maladministration or any learner Fitness to Practice issues.
- Ensuring any information received which may refer to alleged malpractice and/or maladministration is brought to the attention of the HQS immediately for investigation.
- Ensuring centres and learners adhere to all relevant policies and procedures.
- Leading effective learner Fitness to Practice investigations and providing sufficient records and outcomes to NEBDN.

It is important that centre staff involved in the management, assessment and quality assurance of the qualifications, and the learners, are fully aware of the contents of the policy and that the centre has arrangements in place to prevent and investigate and report instances of alleged 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 centre (see the NEBDN's Sanctions policy for details of the sanctions that may be imposed).

Advice and Guidance for centres is provided by NEBDN regarding how to investigate and deal with malpractice and maladministration. (Ofqual General Conditions [A8.5 / A8.4](#)).

Centre compliance with this policy and how it takes reasonable steps to prevent and/or investigate instances of malpractice and maladministration will be reviewed by NEBDN periodically through ongoing monitoring arrangements.

### **Review arrangements** (Ofqual General Condition [A8.3a](#))

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

In addition, this policy may be updated considering operational feedback to ensure NEBDN arrangements for dealing with alleged malpractice and maladministration remain effective.

### **Procedure**

The Malpractice & Maladministration Management Procedure includes the following activities:

- Identification Process
- Investigation (internal or external, e.g., a centre's learner Fitness to Practice outcome)
- Findings and Review
- Appeals
- Reporting
- Lessons Learnt

### **Process for making an allegation of malpractice or maladministration.**



Anybody who identifies or is made aware of alleged cases of malpractice or maladministration at any time **must immediately notify the Quality Manager at NEBDN and should also email the issue to: [qa@nebdn.org](mailto:qa@nebdn.org), as soon as possible.**

Evidence should be submitted in writing/email and enclose all appropriate supporting evidence and other parties such as learners, parents, examiners, or whistle-blowers may contact NEBDN direct – (our contact details are outlined at the end of this policy).

Please note that while we aim to maintain anonymity to people alleging irregularities; the nature of the allegations may be enough to identify a disclosing individual. Criminal activity may need investigation by external organisations (e.g., Police) that may have legal right to personal data for effective investigation of alleged criminal activity. Individuals considering disclosures may wish to review legal protections and guidance applicable to them under 'whistleblowing'.

Information will be added into TheHub software as a 'Malpractice/Malpractice investigation report' by the relevant Quality Assurer/Quality Manager as needed to provide a central and current record.

All allegations should include as much of the following information as possible:

- Centre's name, address and number and centre (where applicable)
- Learner's name and NEBDN registration number
- Centre/NEBDN personnel's details (name, job role) if they are involved in the case.
- Details of the NEBDN course/qualification affected or nature of the service affected.
- Nature of the suspected or actual malpractice and associated dates and how detected
- Details and outcome of any initial investigation carried out by the centre or anybody else involved in the case, including any extenuating circumstances.

NEBDN ask that the person making the allegation declares any personal interest they may have in the matter and reminds individuals to ensure they do not breach any laws in investigation of alleged irregularities.

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 (Ofqual General Condition **A8.3b**).

NEBDN would expect that such investigations would normally involve the Head of the centre (if there is an investigation into allegations of malpractice or irregularities against them or the management of the centre then such investigations should be carried out by a suitable alternative such as the Chair of the Governing Body of the centre or his/her nominee).

In all instances the centre must immediately notify NEBDN if they suspect malpractice or maladministration may have occurred as NEBDN have a responsibility to the regulatory authorities to notify them of potential concerns as soon as possible and to ensure that all investigations are carried out rigorously and effectively (Ofqual General Condition **A8.3b**).

### **Confidentiality and whistle blowing (Raising a Concern)**

A person making an allegation of malpractice or maladministration may wish to remain anonymous (the whistle blower). It is always preferable to identify yourself and provide NEBDN with contact details. However, if an individual is



concerned about possible adverse consequences that may occur should their identity be revealed to another party, then the individual should inform NEBDN. NEBDN will always aim to keep a whistle-blower identity confidential where asked to do so although this cannot be guaranteed; we may need to disclose your identity should the complaint lead to issues that need to be taken forward by other parties. For example:

- the police, fraud prevention agencies or other law enforcement agencies (to investigate or prevent crime, including fraud)
- the courts (in connection with any court proceedings)
- other third parties such as the relevant regulatory authority (e.g., Ofqual in England).

Please see our Whistleblowing Policy for further information. Please also refer to the relevant centre or NEBDN Raising Concerns Policy and Fitness to Practice Policy.

The investigator(s) assigned to review the allegation will not reveal the whistleblower's identity unless the whistleblower agrees or it is necessary for the purposes of the investigation (as noted above). The investigator(s) will advise the whistleblower if it becomes necessary to reveal their identity against their wishes.

A whistleblower should also recognise that he or she may be identifiable by others due to the nature or circumstances of the disclosure (e.g. the party which the allegation is made against may manage to identify possible sources of disclosure without such details being disclosed to them).

Once a concern has been raised, we have a duty to pursue the matter. It will not be possible to prevent the matter being investigated by subsequently withdrawing their concern as we are obliged by the regulators to follow-up and investigate allegations of malpractice or maladministration Ofqual General Condition [A8.2](#)).

In all cases, we will keep you updated as to how we have progressed the allegation (e.g. we have undertaken an investigation) and the whistle-blower will have the opportunity to raise any concerns about the way the investigation is being conducted with the investigator(s). However, we won't disclose details of all of the investigation activities, and it may not be appropriate for us to disclose full details of the outcomes of the investigation due to confidentiality or legal reasons (e.g. disclose full details on the action that may be taken against the parties concerned). While we cannot guarantee that we will disclose all matters in the way that you might wish, we will strive to handle the matter fairly and properly.

### **Responsibility for the investigation**

In accordance with regulatory requirements all suspected cases of maladministration and malpractice will be examined promptly by NEBDN to establish if malpractice or maladministration has occurred, and we will take all reasonable steps taken to prevent any adverse effect from occurring as defined by the regulators (Ofqual General Condition [D4.2](#)).

All suspected cases of malpractice and maladministration will be passed to NEBDN's Quality Manager who will acknowledge receipt, as appropriate, within 2 working days.

NEBDN's Quality Manager 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 and will allocate a relevant member of staff (e.g., a member of the quality team) to lead the investigation to establish whether the malpractice or maladministration has occurred and review any supporting evidence received or gathered by NEBDN (Ofqual General Condition [A8.2a](#)).



NEBDN personnel assigned to the investigation will have the appropriate level of training and competence and no previous involvement or personal interest in the matter (Ofqual General Conditions [A8.3b](#) and [G4.6](#)).

### Investigation

Should an investigation be undertaken into your centre, the head of the centre must, and NEBDN will:

- ensure the investigation is carried out by competent and appropriate investigators who have no personal involvement in the incident or interest in the outcomes (further centre guidance can be provided as needed). The relevant QA staff will discuss and record that the investigator(s) either do not have any conflicts or explain the basis of which they consider the Conflicts of Interest have been successfully mitigated.
- ensure that the investigation is assigned to personnel who have the appropriate level of training and competence.
- ensure the investigation is carried out in an effective, prompt, and thorough manner and that the investigator(s) look beyond the immediate reported issues to ensure that any arrangements made by the centre are appropriate for all qualifications.
- respond speedily and openly to all requests relating to the allegation and/or investigation.
- cooperate and ensure everyone involved cooperates fully with any investigation and/or request for information.

**All relevant information should be recorded in TheHub as needed, to provide a full and up to date record of information gathered.**

### Notifying relevant parties

In all cases NEBDN will tell the person who made the allegation who will be handling the matter, how they can contact them, what further assistance may be needed from them.

In cases of alleged malpractice or maladministration, NEBDN will notify the most senior member of the centre staff involved in the allegation (except when the most senior member of centre staff or management is under investigation; in which case communication may be with the Chair of Board, Local Authority officials or other appropriate authorities) superior to the Head of the centre that NEBDN will be investigating the matter.

In the case of learner malpractice NEBDN may ask the centre to investigate the issue in liaison with our own personnel. NEBDN will only ask the centre to investigate the matter where NEBDN have confidence that the investigation will be prompt, thorough, independent, and effective (Ofqual General Condition [A8.7a](#)).

In all cases 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 (Ofqual General Condition [D4.2](#)).

NEBDN may engage and communicate directly with members of centre staff who have been accused of malpractice if appropriate (e.g., the staff member is no longer employed by the centre) and/or communicate directly with a learner or their representative (e.g., if there is a contradiction in the evidence provided during an investigation or where the centre is suspected of being involved in malpractice).

Where applicable, the Responsible Officer will inform the appropriate regulatory authorities if NEBDN believe there has been an incident of malpractice or maladministration, which could either invalidate the award of a qualification, or if it could impact another awarding organisation (Ofqual General Condition [B3.2g](#)) or causes an Adverse Effect. We will



keep them informed of progress in large and/or complex cases. It may also be necessary to report a GDC registrant for Fitness to Practice to the General Dental Council.

Where the allegation may affect another awarding organisation and their provision, we will also inform them in accordance with the regulatory requirements and obligations imposed on NEBDN by the regulator, Ofqual (Ofqual General Condition [A8.7b](#)). If fraud is suspected and/or identified, NEBDN may also notify the police.

### **Investigation timelines and summary process**

Where possible, NEBDN aim to complete an investigation as soon as possible and within 1 calendar month 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, NEBDN will advise all parties concerned of the likely revised timescale.

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

- To establish the facts relating to allegations/complaints to determine whether any irregularities have occurred.
- To identify the cause of the irregularities and those involved.
- To establish the scale of the irregularities and whether other qualifications may be affected.
- To log and 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 NEBDN's Sanctions Policy.
- To identify any adverse patterns or trends.

NEBDN will strive to ensure that the investigation is carried out as confidentially as possible and the organisation/person who is the subject of the allegation will have the opportunity to raise any issues both about the approach and the conduct of the investigation with the investigator(s) during the investigation.

In carrying out any investigation NEBDN will be sensitive to the effect on, and reputation of, a centre and/or those members of staff who may be the subject to investigation. We will strive to ensure that the investigation is carried out as confidentially as possible and the organisation/person who is the subject of the allegation will have the opportunity to raise any issues about the proposed approach and the conduct of the investigation with the investigator(s) during the investigation.

The investigation may involve a request for further information from relevant parties and/or interviews with personnel involved in the investigation. In any interviews carried out with the person(s) accused of malpractice/maladministration they can choose to be accompanied by a work colleague, trade union representative, or other party.



NEBDN will:

- Ensure all material collected as part of an investigation is kept secure. All records and original documentation concerning a completed investigation that ultimately leads to sanctions against a centre will be retained according to NEBDN's data protection timelines.
- 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 in accordance with the Information Management Policy.
- Expect all parties, who are either directly or indirectly involved in the investigation, to fully co-operate.

Upon notification of an alleged case of malpractice or maladministration and/or at any time during or after the investigation, NEBDN reserve the right to impose sanctions on the centre in accordance with our Sanctions Policy to protect the interests of learners and the integrity of the qualifications.

The Head of Quality & Standards (HQS) will be responsible for regularly reviewing the application and maintenance of sanctions to ensure they continue to be appropriate and proportionate to the incident(s) and risk of future incidents occurring.

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

If appropriate, NEBDN may find that the complexity of a case or a lack of cooperation from a centre that we are unable to complete an investigation. In such circumstances NEBDN may consult the relevant regulatory authority/ies to determine how best to progress the matter.

Where a member of NEBDN's staff is under investigation we may suspend them or move them to other duties until the investigation is complete.

Throughout the investigation NEBDN's Quality Manager 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 informed relevant external parties.

### **Investigation report**

If NEBDN believe there is enough evidence to reach a conclusion of malpractice/ and/or maladministration NEBDN will:

- Communicate the initial findings as soon as possible to relevant regulators where required (e.g., Ofqual), following the Incident Management Policy.
- Summarise the allegation(s) in writing.
- Provide a determination that they have/have not been engaging in Malpractice/Maladministration.
- Inform them of the evidence found to support the judgment.
- Inform them that information in relation to the allegation and investigation may be, or has been, shared with the regulators and other relevant bodies (e.g. police)
- Notify them that sanctions will be considered and communicated to them within the next 10 days along with any remedial actions needed.
- Provide them with an opportunity to consider and respond to the findings.
- Inform them of NEBDN's Appeals policy should they wish to appeal against the decisions.



After an investigation, we'll produce a report for regulators, where relevant, to close the case. (centres will normally receive this via TheHub). Any subsequent amendments will be agreed between the parties concerned and ourselves. The report will cover the following areas and any required responses for regulators:

- Identify where the breach, if any, occurred.
- Confirm the facts of the case (and any extenuating factors if relevant)
- Identify who is responsible for the breach (if any)
- Contain supporting evidence where appropriate (e.g., written statements)
- Confirm an appropriate level of remedial action to be applied.
- Indicate any lessons learnt and changes made as a result.

NEBDN will make the final report available to the regulatory authorities and other external agencies as required.

If it was an independent/third party that notified NEBDN of the suspected or actual case of malpractice, NEBDN may also inform them of the outcome - in doing so NEBDN may withhold some details if to disclose such information would breach a duty of confidentiality or any other legal duty.

If it's an internal investigation against a member of NEBDN staff the Responsible Officer will agree the report with the relevant internal managers and appropriate internal disciplinary procedures will be implemented. In some circumstances the police or other external authorities may need to be alerted.

### **Investigation outcomes**

If the investigation confirms that malpractice or maladministration has taken place, NEBDN 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.
- Ensure there has been no gain from compromising our standards.
- Redress any breach of regulatory standards and or expectations.

The action NEBDN may take is outlined in the Sanctions Policy.



## **Suspicious learner behaviour during assessment activity**

### *Assessment*

NEBDN will check for suspicious activity indicating learner collusion using a range of software and human checks to protect the integrity of the qualification and ensure that learners are safe beginners to become a registered Dental Nurse.

Online assessments are constantly monitored by invigilation software. Suspicious activity is scored by the software and scores over a certain value are further investigated by NEBDN staff to manually review and assess the degree of similarity of answers, timings of inputs, consistency of movement through the exam(s) and other markers compared to other learners. The software also monitors learners' movements and sounds; unusual activity is recorded and can be raised in real time. The issues identified are reviewed after the exam and to determine if there has been any suspicious behaviour; this may support other concerns identified or generate new concerns such as direct support of a learner by a 3<sup>rd</sup> party while completing the exam.

Where staff have material evidence for concerns of suspicious behaviour, using various markers of collusion, then suspicious activity of learners along with NEBDN's evidence is reported back to centres for disciplinary intervention by the centre and clear warning to learners. This allows for centre consideration of impact on learner employment, where relevant, and ensures that centres are using their mandatory (GDC requirement) Fitness to Practice policy.

Centre feedback and outcomes must be communicated to NEBDN for confirmation and would be expected to at least include withdrawal from the affected exam, where warranted. NEBDN ultimately reserve the right to withhold certificates and further investigate the centre's appropriate use of their Fitness to Practice policy where we still hold concerns.

Subsequent suspicious activity may result in substantial sanctions against the learner including barring from future exams and withholding of certificates. Failure of a centre to carry out and follow their Fitness to Practice Policies and or apply penalties to learner(s) may also result in sanctions against the centre

Examiners will be available at Face to Face and Online assessments to monitor for any inappropriate communication between learners, use of mobile phones or other inappropriate conduct. Examiners will challenge any behaviour of concern at the time and record any issues identified and pass these to NEBDN staff for further review by the Presiding Examiner and to determine the action(s) needed.

## **Appeals**

Where it is felt by centre or learners that the decision(s) made against them are unfounded or in breach of NEBDN policies and procedures, they have the right to appeal the decision(s) as per the Appeals Policy.

## **Additional Reporting**

HQS or other staff will report volumes and trends in malpractice/maladministration to ESC meetings. When requested/required, the Responsible Officer will be responsible to ensure communication of the relevant data to Regulatory Bodies and other relevant organisations.

## **References**

The following documents should/may be used in conjunction with this procedure:

NEBDN Sanctions Policy

NEBDN Sanctions Management Procedure



NEBDN Complaints Policy and Complaints Management Procedure  
NEBDN Appeals Policy and Procedure  
Data Protection Act 2018, (GDPR (General Data Protection Regulation)) including any replacements or additions  
NEBDN Centre Agreement  
NEBDN Centre Welcome Pack  
NEBDN Toolkit to support centres with conducting interviews for Malpractice and Maladministration  
NEBDN Toolkit for Incident Management and investigations  
NEBDN Centre Investigation Report (Malpractice and Maladministration Templates) in TheHub  
Ofqual General Conditions of Recognition (<http://ofqual.gov.uk/>)  
General Dental Council – Standards for the Dental Team ([www.gdc-uk.org](http://www.gdc-uk.org))

Documents can be found at [www.NEBDN.org](http://www.NEBDN.org)

### Questions

If employees or staff at Centres are in any doubt as to their responsibilities or if they have any questions about this policy, in the first instance, they should speak to their line manager, or a member of their Senior Management Team.