



**Northern Ireland Post Qualifying
Education and Training Partnership**

Assessment Board Handbook

February 2008

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Introduction

The Northern Ireland Post Qualifying Education and Training Partnership (PQ Partnership) comprises the main social work employers and Higher Education Institutions engaged in the provision of post qualifying education and training for social work in Northern Ireland.

The PQ Partnership is approved by the Northern Ireland Social Care Council (NISCC) to determine and manage the arrangements within the Northern Ireland Post Qualifying (NI PQ) Framework for the provision of post qualifying education and training in Northern Ireland.

These arrangements include an **Individual Assessment Route**, providing Candidates with the opportunity to achieve PQ Requirements and/or NI PQ Awards by submitting work on an individual basis for assessment.

The purpose of this Handbook is to inform the work of the Assessment Board and its members.

SECTION ONE

PQ Partnership Assessment Board

Assessment Board

Assessment and achievement via the Individual Assessment Route is managed by the Assessment Board which is representative of the members of the PQ Partnership. Each member body of the Partnership provides a member and a deputy for the Assessment Board. Assessment Board members are expected to attend all Assessment Board meetings and contribute to policy development as representatives of their Agency.

The Assessment Board is responsible to the Management Board of the PQ Partnership. The Assessment Board Chair reports to the Management Board at agreed intervals.

The Chair of the Assessment Board normally serves for a period of three years. This can be extended on an annual basis with the agreement of the Assessment Board and the approval of the Management Board.

Assessment Board Terms of Reference:

1. To ensure all PQ Partnership Assessment Standards are met.
2. To provide fair and open assessment processes based on objective and clear criteria.
3. To undertake assessment of individual submissions within all professional groupings in the NI PQ Framework.
4. To make provision for the specific needs of Accreditation of Prior Learning (APL).
5. To provide for equality of access to assessment, including APL, within the Individual Assessment Route.
6. To make decisions in respect of awarding of Requirements to Candidates for all professional Awards within the NI Post Qualifying Framework.
7. To have a system for overseeing that assessment recommendations on individual Candidates are subject to sampling and independent verification.
8. To comply with the quality assurance arrangements within the PQ Partnership.

9. To ensure the provision of information, advice, guidance and training to Agency PQ Representatives in order to facilitate Candidates' submissions to the Individual Assessment Route.
10. To provide information, advice, guidance and training to Board members, deputies and Agency Assessors in order to facilitate standardised and quality assessment of submissions as approved by the Management Board.
11. To be accountable to and report assessment decisions to the Management Board.
12. To inform respective Management Board representative about significant issues arising with Assessors or assessment.
13. To have in place appeals and complaints procedures, reporting to the Management Board.

Criteria for Membership of the Assessment Board

The Assessment Board is representative of the PQ Partnership partner organisations and partners nominate Assessment Board Members based on the following criteria:

- Must be nominated to represent the partner organisation/sector for a period of three years
- Must have a named deputy
- Must be a qualified Social Worker and registered with the NISCC
- Must have a minimum of 4 years post qualifying social work experience
- Must have achievement within the UK or NI PQ Framework and or equivalent post-qualifying academic achievement
- Must have experience of assessing or have been trained to assess at M level

Assessment Board Functions

The Assessment Board acts as the decision making body for achievement within the Individual Assessment Route.

Board members normally act as Assessors and undertake assessment functions within the full range of methods of assessment (refer to NIPQETP Guidance for Assessors on the Individual Assessment Route – February 2008)

The Assessment Board meets to discuss and ratify recommended assessment outcomes.

The Assessment Board's decisions are reported to the Management Board and outcomes are recorded on the PQ Database.

Criteria for Assessors

Assessment within the Individual Assessment Route is undertaken by suitably qualified Assessors nominated by the employer/organisation/institution. In order to assess submissions within the Individual Assessment Route the following criteria must be met.

- Must be a qualified Social Worker and registered with the NISCC
- Minimum 4 years post qualifying social work experience
- Achievement within the UK or NI PQ Framework and or equivalent post-qualifying academic achievement
- Experience of assessing or trained to assess at M level
- Attendance at a minimum of one standardisation event per year
- Have undertaken training for Assessors provided by the PQ Partnership

A register of suitably qualified Assessors will be retained by the PQ Partnership.

Quality Assurance and Governance of the Individual Assessment Route

Quality Assurance Arrangements

The PQ Partnership recognises the importance of ensuring that all of its provision and arrangements for the delivery of the NI PQ Framework meets good governance and quality assurance standards. The NISCC's approval of the PQ Partnership requires arrangements to be in place for:

- Ensuring consistency of assessment across the range of assessment arrangements
- Providing development and standardisation opportunities for those involved in the delivery of the NI PQ Framework
- Ensuring the validity of assessment decisions

The Assessment Board has in place standards and performance indicators which cover all areas of its core activity including assessment, training and standardisation, provision of information and guidance, decision-making and accountability. Measurement tools and timescales have also been identified for each standard. These arrangements are detailed under the four key themes of the PQ Partnership's Quality Assurance Framework, i.e. Leadership & Accountability, Safe & Effective Practice, Accessible, Flexible & Responsive Service Provision and Effective Communication & Information.

The Assessment Board will review its Quality Assurance Arrangements on an annual basis in line with the PQ Partnership's Operational Plan.

External Examiners

The PQ Partnership normally appoints an independent External Examiner/s from outside Northern Ireland to:

1. Monitor the efficacy of the assessment processes.
2. Monitor the standards and consistency of assessment.
3. Contribute to assessment decisions where appropriate.

The following criteria for appointment apply:

- Social work qualified and registered with their appropriate Social Work Regulatory Body
- Experience of social work post qualifying education and training in the UK

- Experience of M level assessment
- Commitment to attending Assessment Board meetings
- Commitment to undertaking sample reviews of submissions
- Commitment to providing a written report
- Commitment to attending appropriate standardisation events

The Assessment Board recommends the appointment of the External Examiner/s to the Management Board for approval.

The appointment is for an initial period of 3 years and may be re-appointed on an annual basis for a further 3 year period.

The Management Board informs NISCC of the appointment.

Monitoring

Assessor(s) receive feedback from the Assessment Board on issues identified by the monitoring process through their Agency PQ Representatives on the Assessment Board, via Assessment Board reports, the Assessment Newsletter and by attending Standardisation events.

The areas monitored include:

- Assessors' understanding of the requirements, standards and processes
- The quality of Assessor reports and feedback to Candidates
- Attendance at standardisation, training and Assessors' meetings

The performance of Assessors can be monitored via the production of reports and analysis from the on-line assessment process. The Agency PQ Representative can access their own assessment reports after each Assessment Point.

To enable standardisation and quality assurance, the Assessment Board undertakes an audit of assessment outcomes against individual Assessors on an annual basis. This information is made available to respective Assessment Board Members.

Reporting

The Assessment Board reports directly to the Management Board on policy developments for approval, procedural developments, issues for discussion and assessment decisions.

The Assessment Board reports when required to the Quality Assurance Board on particular aspects of its work.

The Quality Assurance Board monitors, reviews and quality assures the work of the Assessment Board, along with quality assuring all other aspects of work of the PQ Partnership and reports to the Management Board.

The Management Board reports to NISCC on the work of the PQ Partnership and NISCC Professional Advisers are in attendance at Management Board meetings.

The NISCC also undertakes annual thematic reviews that may from time to time review the work of the Assessment Board.

The NI PQ Framework has three Professional Awards (*see Northern Ireland Post Qualifying Education and Training Framework in Social Work, DHSSPS, NISCC, December 2006*);

1. NI Specific Award in Social Work:-

To develop and enhance competence beyond the Social Work Degree level and help prepare for movement into more specialist work.

2. NI Specialist Award in Social Work:-

For those involved in complex work requiring high levels of responsibility and accountability.

3. NI Leadership and Strategic Awards in Social Work:-

For those influencing developments and influencing others.

Each of the three awards is a separate entity and therefore a Candidate can achieve each award or indeed can achieve an award more than once across a range of routes. Candidates can work towards achievements by using any of the following routes;

- **Individual Assessment** to the NI PQ Assessment Board
- **Accredited programmes/modules** which may have academic credits at Post Graduate M level
- **Combined Route**, i.e. a combination of Accredited Programme and Individual Submissions

Equal Opportunities

The PQ Partnership is committed to the provision of equality of opportunity and access to assessment in the NI PQ Framework regardless of any real or perceived differences.

The PQ Partnership is committed to fair and objective assessment.

Where a Candidate feels he\she is being unfairly treated in respect of access to assessment or within the assessment process, the Agency PQ Representative should advise that an appeal or complaint may be made using the PQ Partnership Review of Decision Process (Appendix Four) or the PQ Partnership Comments, Compliments and Complaints Process (Appendix One).

Where Candidates have issues relating to post qualifying developments, provision or gaps in provision these issues should be taken up by employers and fed into the PQ Partnership via the Information and Development Forum for Agency PQ Representatives or via the Management Board Representative on the PQ Professional Developments Sub Committee.

SECTION TWO

Supporting Policies and Procedures

Consent

Service user or carer permission must be sought, wherever possible, before any material is submitted for assessment. A statement must be included in the submission indicating that permission was sought and confidentiality was explained to the service user. Where permission has not been sought the Candidate must explain the circumstances as to why they did not seek permission and why they, nevertheless, are including the material. (See Appendix Two).

Confidentiality

Social workers have a professional responsibility to ensure that confidentiality in work submitted for assessment is maintained at all times. Failure to ensure that the identity of service users and others is protected demonstrates a breach of trust, a failure to meet the NISCC Codes of Conduct, NI PQ Standards on Submissions and NI PQ Requirements.

- 1.4 *Respecting and maintaining the dignity and privacy of service users;*
- 2.3 *Respecting confidential information and clearly explaining agency policies about confidentiality to service users and carers;*

NISCC Code of Practice and Standards of Conduct

When submitting work for assessment to the Assessment Board via the Individual Assessment Route care must be taken to ensure that the information presented does not lead to the identification of a service user. A Confidentiality policy is strictly applied to all methods of assessment. (See Appendix Two).

Plagiarism

The PQ Partnership defines plagiarism as, when a Candidate includes, in a mode of assessment, unacknowledged and verbatim, substantial material which has been produced by another.

This definition includes unpublished work, for example web sources, other people's portfolios and dissertations. Plagiarism is dishonest, involves the appropriation or purchase of the ideas and work of others. Within the context of a PQ Submission plagiarism involves the misrepresentation of the Candidate's level of competence. In this context plagiarism is a breach of professional ethics and the NISCC Code of Practice and Standards of Conduct.

- 2.1 *Being honest and trustworthy;*

NISCC Code of Practice and Standards of Conduct.

For further information on Plagiarism and Guidance on Referencing see Appendix Three.

Review of Decision

The PQ Partnership has developed standards and systems to ensure consistency, impartiality and accountability in the assessment of submissions to the Individual Assessment Route. There may be circumstances when Candidates consider the assessment processes to be flawed. In such situations the Candidate can request a review of the decision making process.

A Candidate may request a "Review" only on the grounds that there may have been procedural irregularities or administrative error of such nature as to cause reasonable doubt as to whether the Assessors would have reached the same conclusion had they not occurred.

The professional decision of the Assessment Board and its External Examiner is **not** open to appeal.

For further information on the Review of Decision policy and processes see Appendix Four.

Comments, Compliments and Complaints

The PQ Partnership encourages feedback from Candidates on their experiences of the assessment process and undertakes to use this knowledge to learn and improve the systems.

Where a Candidate has concerns about the assessment process within the Individual Assessment Route they have the right to complain.

In the first instance the Candidate should attempt to resolve the issue via the Professional Officer for the Assessment Board and the Agency PQ Representative.

Where a matter is not satisfactorily resolved through this route, a Candidate may make a formal complaint using the procedures outlined in the Comments, Compliments and Complaints policy available on the website (www.nipqetp.com).

Where a Candidate wishes to compliment or give positive feedback on particular aspects of the assessment process the Candidate may use a range of opportunities including: written feedback to the appropriate Chair or Professional Officer, verbal feedback to their Agency PQ Representative or PQ Management Board Representative; or comment via the website (www.nipqetp.com).

Reference Documents

J M Consulting Ltd (2004) A Strategy for Professional Development, Belfast: DHSSPS

NISCC Codes of Practice for social care workers and their employers, Belfast: NISCC

NISCC (2006) Rules for the Approval of Post Qualifying Education and Training in Social Work in Northern Ireland, Belfast: NISCC

NISCC (2006) Standards for Approval of the Post Qualifying Education and Training Partnership, Belfast, NISCC

NISCC (2006) Northern Ireland Post Qualifying Education and Training Framework in Social Work, Belfast, DHSSPS, NISCC

NISCC (2007) Quality Assurance Framework for Education and Training Regulated by the NISCC, Belfast, NISCC

NIPQETP (2007) PQ Partnership Handbook, Belfast, NIPQETP

NIPQETP (2008) Guidance for Assessors on the Individual Assessment Route, Belfast, NIPQETP

NIPQETP (2008) Guidance for Candidates on the Individual Assessment Route, Belfast, NIPQETP

NIPQETP (2007) Guiding Principles and Arrangements for Accreditation of Prior Learning within the NI PQ Framework, Belfast, NIPQETP

SECTION THREE

APPENDICES

Appendix One	Policy and Procedure on Comments, Compliments and Complaints for the Individual Assessment Route
Appendix Two	Policy on Confidentiality and Consent
Appendix Three	Policy on Plagiarism
Appendix Four	Policy on Review of Assessment Decision

Appendix One

NI Post Qualifying Framework Individual Route Policy and Procedure on Comments, Compliments and Complaints Available on the website www.nipqetp.com

1. Introduction

- 1.1 The Northern Ireland Post Qualifying Education & Training Partnership (PQ Partnership) strives to ensure that the service it provides is of a consistently high standard and is underpinned by a commitment to continuous improvement.

The PQ Partnership therefore welcomes feedback on all aspects of its service and provision.

The PQ Partnership has developed the Comments, Compliments and Complaints policy and a set of procedures to assist all stakeholders who wish to provide feedback or make a complaint.

The Comments, Compliments and Complaints policy and procedures document is made available to: all members of the PQ Partnership's Boards and Committees; candidates at the point of enrolment and is available for download from the PQ website; www.nipqetp.com

2. Scope of Policy

- 2.1 This policy addresses the process for making positive or negative comments as well as a formal complaint.

- 2.2 It is important to note that this Policy does **not** cover issues related to the decision making processes of either the PQ Assessment or Accreditation Boards. These matters are dealt with via the respective Review of Decision/Appeals Procedures which are available on the PQ website www.nipqetp.com

- 2.3 Where the complaint relates to a programme accredited by the PQ Partnership for awarding PQ Requirements or PQ Award(s) with the NI PQ Framework, the complainant should direct this in the first instance, to the programme provider. Each programme accredited with the NI PQ Framework will have its own complaints policy in place – where the programme is based within a University or College setting, the institution will have a complaints policy.

- 2.4 Where a complaint relates to an agency representative, this should be directed in the first instance to that person's line manager/employer.

3. Comments

- 3.1 The PQ Partnership is happy to receive written or verbal comments in relation to any aspect of the service provided. These should be directed to the Professional Manager. All comments are recorded and acknowledged.

- 3.2 Comments in respect of the operation of, or service provided by a PQ Board, will be shared with the relevant Chair and Professional Officer.

- 3.3 Comments will be used as part of any review process.

- 3.4 Comments are most helpful when they are specific and relevant to the remit of the PQ Partnership and its Boards or provision.

4. Compliments

- 4.1** Where the experience of the service provided has been positive, we would very much welcome compliments. This will help to identify those aspects of our service which are working well.
- 4.2** Compliments, whether verbal or written, should be directed to the Professional Manager. All compliments received are recorded and acknowledged.
- 4.3** Compliments in respect of the operation of, or service provided by a PQ Board, will be shared with the relevant Chair and Professional Officer.
- 4.4** A summary of all compliments received will be included in the annual report to NISCC.

5. Complaints

What is a Complaint?

- 5.1** A complaint is an expression of dissatisfaction about the service NIPQETP provides, including the conduct of our staff or the action we take.
- 5.2** Any person affected by our service, the conduct of our staff or the action which we take, may make a complaint. This will include candidates, employers, service users, providers or anyone involved in the work of the PQ Partnership and/or the delivery of the PQ Framework.
- 5.3** The following are examples of issues which should be treated as complaints:
- Dissatisfaction about how we have dealt with a situation
 - Claims that we have provided a poor standard of service
 - Claims that members of staff have been rude or unhelpful
- 5.4** A complaint must be made within 3 months of the event, or within 3 months of the complainant being aware of the event, upon which the complaint is based.

Objectives of Policy

- 5.5** The PQ Partnership aims to ensure that where a complaint is received:
- It is investigated and resolved as quickly as possible
 - The complainant is kept informed of the progress of the investigation of the complaint
 - All the points at issue are addressed and an effective response and appropriate redress provided
 - The privacy and confidentiality of the complainant is respected as far as possible at all stages of the process
 - The complainant is not in any way disadvantaged as a result of making a complaint
- 5.6** Specialist support will be made available to any complainant with particular needs, for example, providing help with completing the Complaints Form. This support will be available at all stages of the complaints process.

Complaints Procedure

- 5.7** The PQ Partnership believes it is in everyone's interest to resolve complaints as quickly as possible, as close to the source of the problem as possible and by informal means in preference to formal means. The complaints procedure outlined below has been developed with these aims in mind. There are three stages in the process.

Step One – Informal Stage

5.8 The normal expectation is that, where a minor complaint or concern arises, this should be resolved informally with the person within the PQ Partnership responsible for the particular service area or the person 'closest' to the perceived problem without being personally involved or implicated. This individual will clarify the concern and attempt to resolve the problem. They will also ensure the resolution is shared with the complainant. They will also seek clarification as to whether the matter has been addressed satisfactorily or not. A record of the concern or complaint will be maintained.

Step Two – Formal Written Complaint

5.9 If the complainant is dissatisfied with the response offered, or where the complaint is deemed to be of a serious nature, the complaint should be submitted in writing to the Professional Manager using the Complaints Form (**see Appendix One**). If the complaint to be made is in respect of the Professional Manager, the Complaints Form should be sent to the Chair of the Quality Assurance Board, who will then take on the subsequent responsibilities of the Professional Manager role. The Form should clearly identify:

- Name and contact details
- The reasons for the complaint
- The circumstances leading to the complaint
- The necessary information to substantiate the complaint
- Details of any attempts made to resolve the complaint at an informal level
- What action the complainant now wishes NIPQETP to take to put things right

The complaint will be acknowledged in writing within 5 working days.

5.10 The Professional Manager will advise the Chair of the PQ Management Board of the nature and detail of the complaint. The Chair and Professional Manager will determine whether the complaint can be dealt with by the Professional Manager reporting to the Chairs Group and onto the Management Board.

5.11 Alternatively, the Chair will appoint a member of the Management Board not associated with the circumstances surrounding the complaint, to co-ordinate and oversee the investigation process. This person will report back to the Management Board the outcome of their investigation. The Professional Manager will assist if appropriate.

5.12 Where the complaint involves a staff member of the PQ Partnership, they will be informed of the nature and detail of the complaint at the earliest opportunity and kept informed of the process of the complaint and its outcome.

5.13 The complainant will be informed of the outcome of the complaint normally within 15 working days. If this is not possible, an explanation for the delay will be given.

Step Three – Complaints Review

5.14 If the complainant is not satisfied with the outcome at the formal stage, an appeal may be made in writing to the Chair of the PQ Management Board, within 10 working days of having received the initial written response.

5.15 The Chair of the PQ Management Board will appoint a Review Panel, drawn from Management Board membership and an independent member, where appropriate.

- 5.16** The Review Panel will convene within 15 working days and access all records and reports related to the complaint and may, as part of their review, interview the complainant and/or those connected with the complaint.
 - 5.17** The Review Panel will make a recommendation regarding the case to the Chair of the PQ Management Board who will notify the complainant in writing within 10 working days, of the process that has occurred, the outcome and the action to be taken.
 - 5.18** Where the investigation determines that a disciplinary offence may have been committed, this will be referred to the relevant disciplinary authority and the Management Board
 - 5.19** If it is deemed that a breach of the NISCC codes has been committed, this will be referred to NISCC and to the Management Board.
- 6. Record of Complaints**
- 6.1** The PQ Partnership will maintain a record of all complaints received along with corresponding processes, outcomes and action taken. The Quality Assurance Board, Management Board and NISCC as the Approving Body, will be informed by annual report, of all complaints received.



COMPLAINT FORM

Please complete this form if you wish to complain about the service you have received from NIPQETP, any action which we have taken or the conduct of our staff.

Completing this form will provide us with the information we need to deal with your complaint. If you require any help to complete the form, please contact the PQ office on 028 90461495.

1. Your Details	
Title: (e.g. Mr, Mrs, Ms etc)	
First Name:	
Last Name:	
Address:	
Tel No: (Home)	
Tel No: (Work)	
Tel No: (Mobile)	
E-mail Address:	
Please specify your preferred point of contact (e.g. work telephone no, e-mail):	

2. Details of the Complaint

Please provide full details of the following:
-the reason for the complaint

- the circumstances leading to the complaint

- any attempts made to resolve the complaint at an informal level

- what action you would like NIPQETP to take to put things right

3. Declaration

To the best of my knowledge, the information I have provided above is accurate. I understand that to investigate my complaint, NIPQETP will need to share this information with those parties concerned.

Signed:

Date:

When you have completed this form, please return to:

**Professional Manager
NIPQETP
Unit 2a
2 River's Edge
13-15 Ravenhill Road
Belfast
BT6 8DN**

Appendix Two

NI Post Qualifying Framework Individual Route Policy on Confidentiality and Consent

Confidentiality

Social workers have a professional responsibility to ensure that confidentiality is maintained at all times.

- 1.4 *Respecting and maintaining the dignity and privacy of service users;*
- 2.3 *Respecting confidential information and clearly explaining agency policies about confidentiality to service users and carers;*

NISCC Code of Practice and Standards of Conduct

Failure to ensure that the identity of service users and others is protected demonstrates a breach of trust, a failure to meet NI PQ standards on submissions and NI PQ Requirements.

*“Demonstrate a systematic understanding of their own practice and a critical awareness of current issues and challenges in the context of the NISCC Codes of practice, professional ethics, the principles of diversity, equality and social inclusion in a wide range of situations;”
Specific Award Requirement*

*“Apply independent critical judgement to systematically develop their own practice and that of others in the context of the NISCC Codes of Practice, professional ethics, the principles of diversity, equality and social inclusion in a wide range of situations;”
Specialist Award Requirement*

*“Use independent critical judgement to take a leading role in systematically developing their own practice and that of others in the context of the NISCC Codes of Practice, codes of professional ethics, the principles of diversity, equality and social inclusion in a wide range of situations;”
Leadership and Strategic Award Requirement*

When submitting work for assessment to the Assessment Board via the Individual Assessment Route, care must be taken to ensure that the information presented does not lead to the identification of a service user. The term ‘service user’ for our purposes is interpreted broadly to include other individuals such as relatives, carers, foster and adoptive parents, and students. Care should also be taken on identifying other professionals unless their permission has been given.

Guidelines on Confidentiality for Individual Submissions

Candidates should include a statement as to how they have ensured confidentiality. Ensuring confidentiality is a relative exercise and generally means removing from the submission any information that could identify the service user. There are some absolutes such as removing names, addresses and phone numbers but the Candidate must make judgements as to whether the names of schools, localities, etc should be removed.

No identifying features or fictitious names should be used which could lead to the identification of service users. Candidates are advised to use letters, such as Mr X rather than invent more involved pseudonyms which can lead to misunderstandings. Similarly, letters should not correspond to real names.

Candidates must ensure that information referring to colleagues, other individuals or agencies is not derogatory. If comments critical of practice are relevant to the Candidate's submission and are being included in the submission, Candidates should ensure as much as possible that the individual or agency is not identifiable.

Video, DVD and/or audio tapes which identify service users may not be submitted as evidence.

Relevant excerpts of transcripts are good samples of direct evidence. When video or DVD is used for assessment purposes, e.g. Direct Observation, the service user should not be able to be identified. The record must be deleted after the assessment process is complete. Deletion is the Candidate's responsibility and should be checked by the agency representative.

Where correction fluid has been used to remove identification from evidence, the page with the corrections must not be submitted. The Candidate should submit a photocopy of the "corrected" page.

The use of all agency records must be authorised by the Candidate's Line Manager in the Line Manager's Report.

Service user or carer permission must be sought, wherever possible, before any material is submitted for assessment. A statement must be included in the portfolio indicating that permission was sought and confidentiality was explained to the service user. Where permission has not been sought the Candidate must explain the circumstances as to why they did not seek permission and why they, nevertheless, are including the material. There are ethical issues in submitting evidence for which the service user refuses consent. It is understood that refusal may be as a consequence of a legitimate concern or because the service user sees this as an opportunity and/or expression of feelings about their position as a service recipient. The Candidate and their management must make the decision whether to submit material for which the service user has not given consent.

When cases are high profile or in the public domain it may be more difficult to ensure, even when these guidelines are followed, that the case will not be recognisable to an Assessor. Candidates should not be discouraged from submitting such material but should ensure that their submission adheres to the guidelines. Assessors are also bound by confidentiality. In situations where there are "security" implications in submissions, Assessors who have the appropriate clearance can be used.

Breaches of Confidentiality

There should be **no** breaches of confidentiality in work submitted for assessment. A breach of confidentiality is a breach of professional ethics and the promise to the service user when seeking consent.

Assessors are requested to identify and comment on any breaches of confidentiality as part of the assessment process without replicating the actual breaches in the assessment records.

Where breaches of confidentiality have been identified the Assessors are required to bring the matter to the attention of the Assessment Board where possible responses are discussed. The Board may consider the following options:

Breach: For example an oversight of a first name when anonymising. The Candidate will be required to amend the breaches before the assessment process progresses.

Serious Breach: For example surnames and addresses. A breach may be deemed serious due to the sensitivity or high profile nature of the work submitted. Serious breaches will result in referral on basis of a breach of professional values and NI PQ requirements. The breach will be communicated to the Candidate and the Agency. The Candidate will be referred to their employer Representative on the Management Board.

Serious breaches of confidentiality require the Candidate to;

- Amend all the breaches
- Submit a written piece 750-1000 words on the importance of confidentiality to social work practice
- The Chair of the Assessment Board may designate a time frame for this to be enacted

In the event of a re-submission Candidate will be asked to amend all breaches and address the issue of confidentiality as a breach of social work values. The Line Manager will also be asked to address the issue of confidentiality in the Line Manager's verification report.

In addition;

- The Agency Representative of the Candidate on the Management Board will be informed by the Chair of the Assessment Board.

Summary Guidance

- Anonymise anything that might be used to identify the service user
- Always use letters for identification rather than initials or false names
- Remember a combination of details can identify the client, e.g. school and local area
- A third party, preferably your Line Manager, should check the portfolio for confidentiality
- The names of professionals may be used with their permission. Some organisations and professionals are sensitive about staff names being used
- Journalists read their work from back to front looking for keywords, e.g. names. This focuses the mind on the search rather than reading the content
- The editing function on your computer may have a “replace” function
- If in doubt leave it out!

NI Post Qualifying Framework Individual Assessment Route Policy on Plagiarism

Policy Context

For the purpose of this policy, plagiarism is defined as: when any Candidate includes, in a mode of assessment, unacknowledged and verbatim, substantial material which has been produced by another person.

This definition includes unpublished work, for example, other people's portfolios and dissertations. Plagiarism is dishonest, involves the purchase or appropriation of others ideas and work. Within the context of a PQ Submission plagiarism involves the misrepresentation of the Candidate's level of competence. In this context plagiarism is a breach of professional ethics and the NISCC Code of Practice and Standards of Conduct.

2.1 *Being honest and trustworthy; NISCC Code of Practice and Standards of Conduct*

Plagiarism which is agreed by both Assessors to be brief should not lead to suspension of assessment but the matter should be raised within the assessment report.

Candidates must ensure that all verbatim material taken from another person or source (including websites) is acknowledged, e.g., if taken from a book or article it should be referenced and page numbers should be given for all direct quotes. Candidates may be breaking the law if material is used that was written by someone else without acknowledging the original author. Guidance on referencing is included in Appendix One. There should be **no** plagiarism in work submitted for assessment.

In the event of suspected Plagiarism

Assessors are requested to identify and comment on plagiarism as part of the assessment process.

Where plagiarism has been identified the Assessors are required to bring the matter to the attention of the Assessment Board where possible responses are discussed.

A minor plagiarism or possible referencing oversight will be treated in the same way as a breach of confidentiality, i.e. the Candidate will be required to amend the submission before the assessment process progresses.

Should the plagiarism be more significant the assessment will be suspended pending an investigation. The Candidate will be informed in writing that the assessment of the portfolio has been suspended with an outline of the reasons. The Candidate will be asked to forward an explanation in writing to the Chair of the Assessment Board within 14 working days. The Chair of the Management Board and the Candidate's Agency Representative on the Assessment Board will be copied in on this correspondence.

After 14 working days and within 28 working days of the suspension, a Plagiarism Sub-Group will be convened by the Chair of the Assessment Board. The subgroup will consist of the Chair of the Assessment Board, an appropriate Assessment Board member and the Candidate's Agency Representative. The NI PQ Assessment Board Professional Officer will be in attendance. The subgroup will consider the nature of the suspected plagiarism and the Candidate's explanation (if any).

The Assessor who suspected the plagiarism will attend to provide relevant information.

The Candidate will be invited to attend the meeting of the Sub-Group.

The Assessment Board sub group will establish:

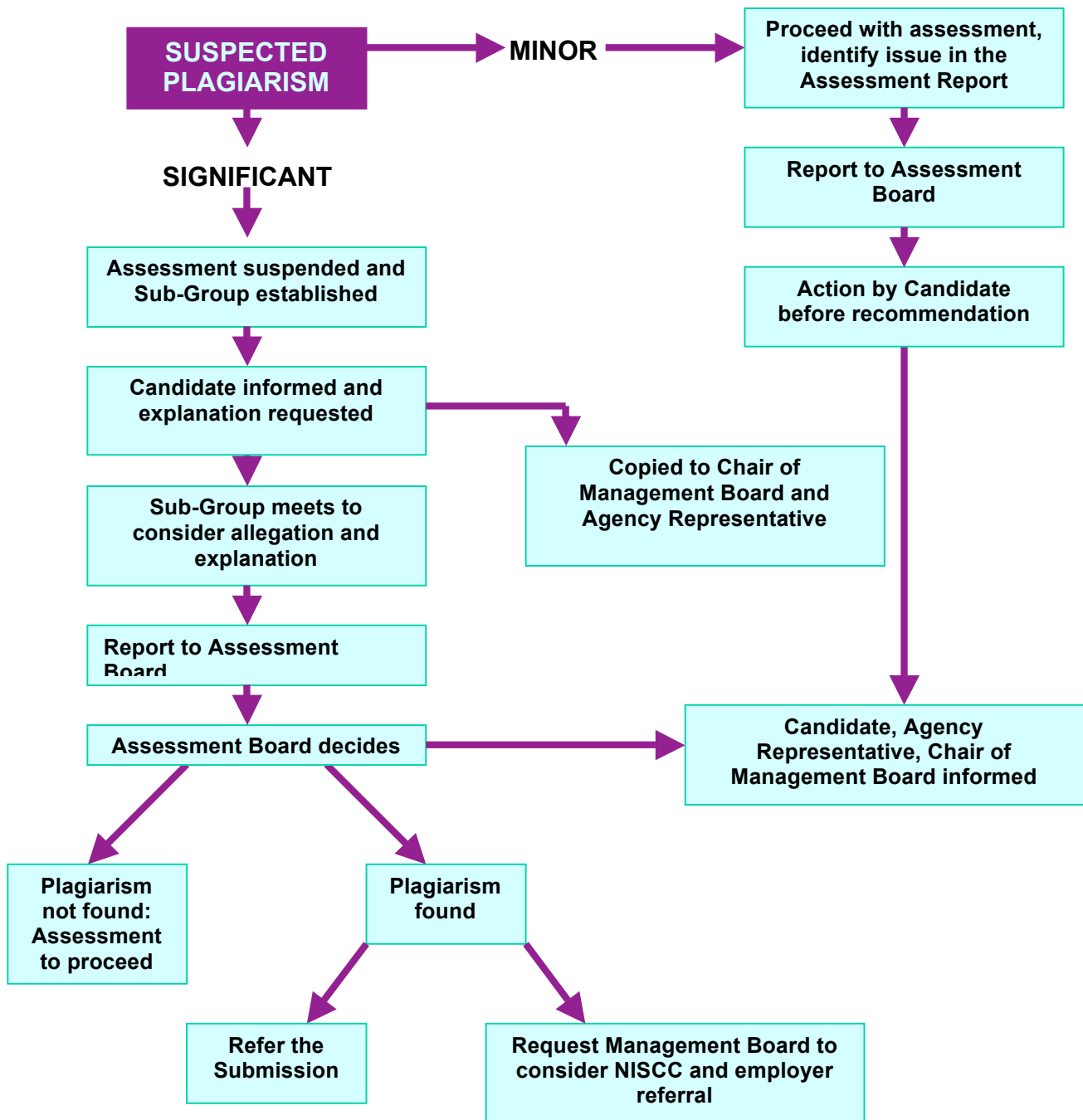
1. Whether or not plagiarism has occurred.
2. In the case of not finding plagiarism – assessment will proceed and will be completed within 28 working days.
3. In the case of finding plagiarism – the subgroup can recommend the following
 - a) Referral of the submission
 - b) Referral to the employer Representative on the Management Board.

The Sub-Group will report to the Assessment Board with conclusions and recommendations. The Assessment Board will communicate all decisions in writing to the Candidate, the Chair of the Management Board and the Candidate's Agency Representative on the Management Board within 7 working days.

The Candidate has the right of appeal of decisions made by the Assessment Board through the Appeals Procedure.

The Candidate may also appeal any decision made to the Management Board who will establish an Appeals Committee consisting of an Independent Chair and a member not otherwise involved in the decisions taken in relation to the case.

Figure 1: Process for Dealing with Suspected Plagiarism



NI Post Qualifying Framework Individual Route Policy on Reviewing an Assessment Decision

Introduction

The PQ Partnership has developed assessment and standardisation processes to ensure consistency, impartiality and accountability in the assessment of individual submissions for NI PQ Requirements. There may be circumstances when Candidates consider the assessment processes to be flawed. In such situations the Candidate can request a review of the decision.

A Candidate may request a 'Review of Decision' only on the grounds that there were procedural irregularities or administrative error of such nature as to cause reasonable doubt as to whether the Assessors would have reached the same conclusion had they not occurred.

A procedural irregularity is normally regarded as a deviation from agreed assessment arrangements which has been applied to some but not all Candidates making submissions.

The professional decision of the Assessment Panel and its External Examiner is **not** open to appeal.

The Process for a 'Review of Decision'

A request for a 'Review of Decision' must be submitted, in writing, to the Chair of the Assessment Board not later than 28 days from the date of the letter informing the Candidate of the outcome of the assessment phase.

The Candidate should identify specifically the alleged procedural irregularity or administrative error.

The Professional Manager and the PQ Agency Representative on the Assessment Board will be informed that a request for a 'Review of Decision' has been received.

Within 14 days of receipt, the Chair of the Assessment Board, in consultation with the Professional Manager, will decide whether there were procedural irregularities or administrative errors which give sufficient grounds to continue the 'Review of Decision' process.

Whatever decision is taken at this stage the Candidate will be informed in writing.

Where a Review of Decision is to take place the following procedures will apply:

- the original Assessors will be asked to re-consider their decision in light of all new information
- the External Examiner will be asked to review the submission again

N.B. At the Chair of the Assessment Board's discretion, a new Assessor may be allocated if appropriate.

Within one month a sub-group of the Assessment Board will be convened.

The sub-group will consist of the Chair of the Assessment Board, and the Assessors, with the Professional Officer in attendance.

The sub-group may take any of the following decisions:

- to state that a new outcome has been reached
- to permit the Candidate to re-submit their work without payment of additional fees
- to confirm the original decision

The sub-group, as part of their decision making, will take cognisance of the feedback from the External Examiner.

The Chair of the Assessment Board will inform the Professional Manager and the PQ Agency Representative of the decision reached and the reason for the outcome.

The Chair of the Assessment Board shall inform the Candidate of the result.

This decision is final.

Record of 'Review of Decision'

The Management Board and the Quality Assurance Board will be informed, by annual report from the Assessment Board of all Reviews of Decision received by the Assessment Board.

'Review of Decision' Process

