Malpractice Policy

Reference: GCSB-POL-012
Version: 1.0
Issuing authority: Global Converged Security Board
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1. Purpose and scope

This Policy protects the integrity of GCSB assessment, qualifications, Trustmark decisions, verification and supporting records. It applies to candidates, credential holders, assessors, reviewers, administrators, governance members and organisations submitting evidence. Academic integrity requirements under GCSB-STD-003 remain authoritative; Journal submissions also follow the separate Journal policies.

GCSB independently assesses and awards within its remit. CSI and other providers deliver their own learning services. A provider may supply evidence but cannot decide a GCSB outcome for its own candidate or prevent an independent integrity investigation.

2. Malpractice and maladministration

Malpractice includes deliberate or reckless conduct that compromises the integrity of a process or credential. Examples include plagiarism, impersonation, collusion, fabricated credentials or work products, falsified identity or assessment records, bribery, unauthorised disclosure of assessment material, concealment of conflicts, interference with independent decisions and misuse of a GCSB credential or verification claim.

Submitting another person's or generated work as one's own analysis may constitute malpractice where it breaches the authorised assessment instructions. Assessors must apply the published instructions rather than inventing a retrospective blanket technology prohibition. A similarity score or automated detection result alone is not proof of misconduct.

Maladministration includes errors, omissions or procedural failures such as lost records, incorrect data entry, inconsistent application of criteria or issuing documentation without the required decision. It requires correction and investigation proportionate to its impact, even where there was no dishonest intent. Repeated or concealed failures may warrant a malpractice investigation.

3. Prevention and reporting

GCSB must communicate evidence-authenticity expectations and the applicable assessment instructions, verify relevant credentials, restrict access to private records and assessment material, and retain a traceable decision history. Relevant conflicts must be declared and managed under GCSB-POL-003 and GCSB-POL-007.

Suspected misconduct may be reported to info@gcsb.uk with the subject "Malpractice concern" or through the existing authorised assessment contact. Reports should identify the process, facts and available supporting evidence. Reporters must not circulate private portfolios or sensitive evidence publicly. Genuine reports and witness participation must not attract retaliation.

The existing confidential reporting route remains available at vladimir.bunic@gcsb.uk with the subject "Confidential concern". Where the report concerns its recipient or another connected person, the matter must be referred for unconflicted handling under the governance and recusal rules; a reporting

address does not confer investigation or decision powers.

4. Triage and protective action

An authorised, unconflicted person records the concern, assesses its credibility and urgency, preserves relevant evidence and determines the appropriate investigation remit. Evidence must be kept securely, with its source and handling documented. A report is an allegation, not a finding.

Where necessary, GCSB may defer an affected assessment, conferment or document issue under the applicable rules while authenticity or authorisation is unresolved. Any protective action must be proportionate, reasoned and communicated to the affected person unless lawful evidence preservation requires a limited delay. An existing award or register status is not silently changed by an allegation; suspension or withdrawal requires the authorised process and decision.

5. Investigation and response

The investigator must be independent of the suspected conduct and original disputed decision. The affected person receives the allegation, relevant evidence or a fair summary, possible consequences, and a reasonable opportunity to respond and supply evidence. Confidentiality, witness protection and third-party rights must be balanced with a fair opportunity to answer the case. Any response timetable is communicated for the particular case and must respect the governing rules and adjustment needs.

The investigation distinguishes established facts, disputed evidence, procedural errors and unresolved questions. It records the applicable rules and reasons for its recommendations. Findings use the evidential standard specified by the governing conduct or assessment rules; this Policy creates no new burden of proof. If an authorised independent investigator or decision-maker is unavailable, the substantive decision is deferred rather than self-approved.

6. Decisions and remedies

The authorised board or committee decides within its existing remit, with recusals recorded. Outcomes may include no case established, correction of an administrative error, further evidence or authorised reassessment, or a misconduct finding and sanctions permitted by the governing rules. A sanction must be proportionate to the evidence, seriousness, intent, impact and relevant circumstances; no automatic penalty or new sanction power is created here.

Candidates receive a written, reasoned outcome identifying any effect on their assessment or credential, required action and applicable appeal route. Corrections and authorised status changes must retain the original record and decision history. External notification occurs only where legally required or justified under the applicable rules and privacy obligations, not as a public allegation or automatic referral.

7. Appeals, records and learning

Assessment and award appeals follow GCSB-STD-005, including its published deadlines and exceptional-circumstance provisions. Anyone involved in the original outcome must not hear its appeal. Administrative complaints follow GCSB-STD-006; Journal matters follow Journal procedures. Investigations do not extinguish statutory rights.

Case evidence and deliberations remain private and follow the published retention schedule, including any applicable lawful hold. Qualification and appeal decision records follow the minimum retention requirements of the governing regulations. GCSB reviews causes and records corrective actions, without publishing personal case details or rewriting concluded decisions outside an authorised review.

8. Document control

- Owner and oversight: Governing Council; investigation and decisions by the competent, unconflicted body under the applicable regulations.
- Review: during the annual policy review, or earlier after significant integrity incidents or changes to governing rules.
- Read with: GCSB-STD-003, GCSB-STD-004, GCSB-STD-005, GCSB-STD-006, GCSB-POL-003, GCSB-POL-007, and applicable programme and privacy rules.
- Precedence: published standards determine decision powers, sanctions and appeals. This Policy does not amend them or authorise an administrator, trainer or certificate signatory to determine an award.

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