Hull York Medical School

Code of Practice on Academic Misconduct

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<tr>
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<td>Chair of the Academic Cases Committee</td>
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To obtain this document in an alternative format or if you have any queries regarding any aspect of this Code, please contact: governance@hyms.ac.uk
Definition of terms

The following terms will apply throughout this Code of Practice:

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<tr>
<th>Academic Cases Committee</th>
<th>The Committee with responsibility for the consideration of cases of academic misconduct and fitness to study. Its terms of reference are stated in the Code of Practice on Academic Committees.</th>
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<tr>
<td>Case Management Group</td>
<td>A core group of experienced staff responsible for considering all student cases brought to its attention by Phase Leads/Programme Directors, clinical placement staff, members of the public and/or the Hull York Medical School Student Wellbeing Office. This group will determine what action and/or escalation is most appropriate for individual students based on all of the information and evidence that is available at that time. If required this group will initiate a formal meeting or an investigation into any concerns about a student's health, conduct, or progress, issue a caution, or refer directly to the Student Fitness to Practise Committee or the Academic Cases Committee.</td>
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<td>Day</td>
<td>A calendar day unless stated otherwise.</td>
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<td>Investigating Officer</td>
<td>This can be any member of Hull York Medical School staff, including academic, senior administrator, member of Academic Cases Committee or honorary appointments within the NHS. The investigating officer should not be the student's current or recent tutor, mentor or supervisor. All investigating officers follow the Hull York Medical School Guidance Notes for Investigating Officers.</td>
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<td>Programme</td>
<td>All academic activities, and/or clinical placements or experiences undertaken by a student for the purpose of achieving the award of credits, a certificate, diploma or degree, or for the purpose of achieving progression within training and meeting requirements for registration as a doctor with the General Medical Council, or other Professional and Regulatory Body, as prescribed in the relevant regulations.</td>
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<tr>
<td>Tutor</td>
<td>A clinical or academic member of staff who facilitates, organizes and oversees student training.</td>
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<td>Mentor</td>
<td>A member of Hull York Medical School staff who meets regularly with the student to provide pastoral support. The mentor supports the student’s wellbeing by providing a compassionate space for students to discuss personal, academic and emotional challenges. They help students navigate academic and personal stressors.</td>
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**Supervisor**
An academic or clinical member of staff who oversees and 
guides work being conducted by a student, providing 
feedback and direction to academic or clinical tasks.

**Supporter**
A friend, fellow student, Students’ Union representative or 
member of Hull York Medical School staff who may assist 
the student with their case. This is a university process 
and so attendance of legal representation as a supporter 
is not permitted although students may seek legal advice 
before and after any discussions which take place.

### Abbreviations

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<th>Abbreviation</th>
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<tr>
<td>ACC</td>
<td>Academic Cases Committee</td>
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<td>CMG</td>
<td>Case Management Group</td>
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<td>ISM</td>
<td>Independent Study Module</td>
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<td>NHS</td>
<td>National Health Service</td>
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<td>STEP</td>
<td>Supporting Trainees Entering Practice</td>
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<td>UKFPO</td>
<td>United Kingdom Foundation Programme Office</td>
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Please note: Advice on plagiarism and the proper use of sources is provided by Hull York Medical School and the Universities through several mechanisms including direct instruction where appropriate, in course handbooks and via internet resources. Students will be considered liable for the use of plagiarised material whether or not they intended to behave dishonestly. Students are required to successfully complete the online academic integrity tutorial as early into their studies as possible and this should be before the first summative assessment.
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Appendix 1: Flow chart of academic misconduct procedures
Appendix 2: Guide to determining the severity of misconduct allegations
Appendix 3: Investigation Proforma
1. Introduction

1.1. Academic integrity is fundamental to the reputation of individual scholars, students and to academic institutions. Hull York Medical School is committed both to developing high standards of academic practice among its students and to safeguarding the standards of academic awards by detecting and acting upon cases of academic misconduct.

2. Scope of the code

2.1. This Code of Practice sets out the expectations of Hull York Medical School students and Hull York Medical School itself, and the processes by which academic integrity is upheld. It deals with the way in which Hull York Medical School identifies how students meet the requirements of their programme in terms of academic integrity, and how plagiarism and other forms of academic misconduct are identified and investigated (summarised as a flowchart in Appendix 1). These programme requirements are further specified in the regulations, Codes of Practice and guidance for each individual programme.

2.2. There are additional expectations of personal integrity in terms of professional behaviour of those studying for a medical degree, and in terms of collecting, analysing and reporting research data for those studying for a research degree. These and the corresponding investigatory processes are laid out in the:

Hull York Medical School Code of Practice on Student Fitness to Practise
Hull York Medical School Code of Practice on Student Research Misconduct

3. Forms of academic misconduct

3.1. In relation to assessed work, students at Hull York Medical School must not commit any offence outlined below at any stage of their course.

Assessment offences

3.1.1. **Plagiarism:** Using the ideas or work of another person (including experts and fellow or former students) and submitting them as though they are original work.

By not referencing the source properly, paraphrasing it without acknowledging it, or by not mentioning it at all, the true origin of the material is hidden from the marker.

Plagiarism may take the form of direct copying, reproducing or paraphrasing ideas, sentences, drawings, graphs, internet sites or any other source and submitting them for assessment without appropriate acknowledgement.

Plagiarism can also include copying another student’s work without their knowledge, or submitting work which has already been published in another language. The latter relates to copying of translated material, copying and re-arranging material, as well as taking ideas and findings of the material without attribution.

3.1.2. Any unattributed use of material is plagiarism:

3.1.2.1. whether from articles, books, computer programs, data, essays,
papers, reports, presentations, or any other material originated by another person;

3.1.2. whether obtained from written, printed or electronic sources, including via the internet or any other computer-based or networked system;

3.1.2.3. whether the medium of reproduction is literary (essays and reports), graphical (designs, diagrams, graphics), electronic (computer programs) or mathematical (proofs).

3.1.3. **Self-Plagiarism:** Submission of work that is the same as, or broadly similar to, assessments previously awarded academic credit, without proper acknowledgement. This may include work submitted and awarded credit at the Hull York Medical School or another institution.

3.1.4. **Collusion:** The process whereby two or more students work together – without official approval – and share ideas, solutions or material in work which is then submitted by each of them individually as their own work.

3.1.5. **(a) Breach and/or (b) cheating:** Either possessing or using materials prohibited in the examination venue and/or breaching any of rules of closed assessments. This may include, but is not limited to, actions such as:

3.1.5.1. Continuing to write after the invigilator has announced the end of the examination.
3.1.5.2. Copying, or attempting to copy, from any other candidate during the examination.
3.1.5.3. Communication of any kind with any other person other than an invigilator or other authorised member of staff during an examination.
3.1.5.4. Possession of, or access to any unauthorised written, printed or electronic materials in the examination room.
3.1.5.5. Involvement in impersonation of another during an examination or other assessment event.

3.1.6. **Commission and incorporation/contract cheating:** Seeking to gain advantage by incorporating material in work submitted for assessment that has been improved by, or commissioned, purchased or obtained from, a third party, e.g. family members, friends, essay mills or other students.

3.1.7. **Fabrication or falsification of data:** The submission of work for assessment or publication containing data measured in the field, in the laboratory or other setting, any part of which is untrue, made up, falsified or fabricated in any way. This includes the presentation of data in reports, projects, theses etc. based on experimental work falsely purported to have been carried out or data obtained by unfair means. This also includes using false statements or presenting false evidence to demonstrate successful completion of teaching practice (e.g. clinical skills) or in support of a request to withdraw from an examination, obtain an assessment extension, or explain any form of absence.
Disciplinary offences

3.1.8. **Personation:** One or both of: a) Production of work for another student with the reasonable expectation that the incorporation of that work is intended to deceive an examiner; b) Appearance as another student in an assessment(s).

3.1.9. **Deception:** Presenting fabricated or misleading evidence to gain advantage in assessment arrangements (e.g. exceptional circumstances affecting assessment) or in making research proposals.

3.1.10. **Failure to meet legal, ethical and professional obligations in carrying out research:** Unethical behaviour in the undertaking of research or in seeking funding including e.g. failure to obtain appropriate permission to conduct research, unauthorised use of information which was acquired confidentially, failure to acknowledge work conducted in collaboration, or fraud or misuse of research funds or equipment.

3.1.11. **Academic misconduct involving staff members:** Any offence, as defined above, involving staff members who are also students.

3.1.12. **Academic misconduct alleged subsequent to the conferment of an award:** Any offence, as defined above, alleged or discovered after the award of a degree.

4. Determining the severity of academic misconduct concerns

4.1. Where markers, examiners, invigilators or other individuals suspect academic misconduct to have occurred, they should consider the severity of the allegation against the following guidance (summarised in Appendix 2).

**Poor academic practice**

4.2. This may arise from a lack of understanding of the standard methods of acknowledging the source of words, ideas or diagrams in a piece of work or the appropriate levels of collaboration or the correct behaviour within an exam. It may also be applicable where the extent does not justify further investigative proceedings or a penalty, for example, for errors made through carelessness.

**Academic misconduct**

4.3. This is behaviour which, if not detected, would give a student an unfair advantage in an assessment. The main difference between academic misconduct and severe academic misconduct is the extent of the alleged misconduct. Indicative examples of what constitute academic misconduct are:

4.3.1. Failure to correctly reference sources and claim an idea as original work (i.e. plagiarism);
4.3.2. Submitting for assessment an item which has been previously submitted for credit in another module with little change made to the assessment (i.e. self-plagiarism);
4.3.3. Submitting coursework in collaboration with another student (i.e. collusion);
4.3.4. Attempts to communicate with another candidate during an examination (i.e. cheating).
Severe academic misconduct
4.4. Where there is clear evidence of extensive or substantial attempts to gain an unfair advantage or where there has been a previous, proven case of academic misconduct or severe academic misconduct against a student. Any proven allegations of commission and incorporation/contract cheating, personation, fabrication or falsification of data will always initially be considered as cases of severe academic misconduct.

4.5. Severity of academic conduct is determined on a case-by-case basis. The Academic Cases Committee may also use additional factors such as year of study, repeated misconduct, precedence, and case history to determine severity.

5. General principles

Standard of proof
5.1. It is sufficient to establish cases of academic misconduct ‘on the balance of probabilities’, rather than ‘beyond all reasonable doubt’. This means that decisions are based on whether it is likely that misconduct occurred, rather than requiring indisputable evidence that misconduct has occurred.

Student responsibilities
5.2. Learning in an academic environment requires mutual trust and responsibility from everyone involved. Underlying this is acceptance of a common set of values, often referred to as academic integrity. The elements of academic integrity include:

5.2.1. Honesty: Students must be open and honest about the work they are being assessed on. This includes following the accepted referencing conventions to acknowledge when a piece of work uses or quotes the work of others.

5.2.2. Responsibility: Students have responsibilities to meet the requirements of their course and to engage fully with the learning opportunities provided, including meeting specified deadlines and attendance requirements.

5.2.3. Fairness: Students must not use unfair means to gain an advantage. Hull York Medical School will ensure its academic processes and procedures are fair, and enable all students to be considered fairly.

5.2.4. Respect: Effective learning is conducted in an environment of mutual respect between students and staff. Students should know that their efforts, even if imperfect, will be respected by staff. Staff should know that students will respect them and learn from honest, constructive criticism.

5.2.5. Trust: These elements of academic integrity combine to ensure there is general trust in the educational provision by Hull York Medical School and the standards demonstrated by students. It is important that degrees awarded by Hull York Medical School are trusted internally and externally as representing a mark of a student's academic and professional achievement.

5.3. Students shall be considered responsible for the academic integrity of all work they submit for assessment, including group assessments. If insufficiently
acknowledged material is discovered in open assessments by examiners, the question of whether the student has behaved (or intended to behave) dishonestly or unethically must not be a factor in the decision to initiate the Academic Misconduct Procedures. Expressions of a lack of intent are not a valid justification for misconduct. The principle that students are responsible for their actions also applies to the reporting of any illicit material brought into closed examinations by students.

5.4. Students are responsible for engaging with any investigations open as part of a misconduct case. If a student fails to engage with the investigation (e.g. failing to provide written statements or failing to appear at the hearing), the ACC may proceed to investigate the case if it is satisfied that the student has had sufficient time to engage with the request, and that there are no grounds for believing that the student might have good and proper reasons for not engaging. Otherwise, the hearing may be adjourned, usually on one occasion only, for the service of further notice to the student.

Proofreading

5.5. The aim of assessment is to establish the level of understanding, skills and performance of the individual student enrolled on the programme rather than measuring the extent of the student’s social and/or familial networks’ level of understanding, skills and performance.

5.6. Proofreading should only be done in accordance with the University of York Proofreading Policy.

5.7. Students are responsible for making the Guidance on Proofreading available, and the rules against commissioning clear, to any third party they ask to check their work for English language usage and presentation. Support agreed by the Board of Studies and given in acknowledgement of a specific disability is not considered to be Academic Misconduct.

Failure to detect previous academic misconduct

5.8. Where academic misconduct is alleged or suspected, a student may not use as a defense the failure of any member of academic staff to detect academic misconduct at an earlier point in time in their studies.

5.9. When an allegation is raised about a given piece of work, any previously assessed work which has been returned to the student with marks and feedback may not be returned to or referred for investigation. Penalties will not be applied to previously assessed work. The Academic Cases Committee may, however, review previous work outside of the Academic Misconduct Panel procedures to determine whether a pattern of behavior has persisted across multiple pieces of work. During decision on any penalties, the Academic Misconduct Panel may take into consideration any emerging pattern of behaviour.

5.10. Mitigating and exceptional circumstances cannot normally be used as a defence for an offence of academic misconduct. The only exceptions are cases where, in the opinion of an appropriate health professional, the student was unable to distinguish between right and wrong in relation to their actions. However, the ACC may take mitigating or exceptional circumstances into account when formulating an outcome or penalty.

5.11. In the event that an assessment with mitigating or exceptional circumstances is found to be subject to an allegation of academic misconduct, any penalty applied to the original assessment will also apply to any offers of a new first sit. In
practice, this will mean that, where a mark of zero has been applied, the 'sit as if for the first time' will become a resit assessment.

**Second offences and concurrent investigations**

5.12. A second offence means an offence discovered after procedures for the first offence have been completed. Two offences that are investigated concurrently will be treated equally in regards to penalties available. Two offences of the same type as described above in 3.1 need to be committed and procedures for the first offence completed for the penalties for second offences to apply.

**Self-plagiarism and re-use of previously assessed work**

5.13. Self-plagiarism is deemed to be an academic offence where reuse of assessed material is specifically prohibited within and/or between assessment components, modules or programmes. Where re-use of work is allowed, guidance on referencing this work is provided in Programme and Module Handbooks.

**Misconduct in formative work**

5.14. Formative assessment is primarily designed to give feedback on progress and inform development but does not contribute to a module mark or progression decision on non-modular programmes. In this spirit, if the affected work does not count towards an award, a transcript mark, or a progression decision, the misconduct should normally be addressed by specific and extensive feedback on the issue that has raised concern.

**Misconduct in re-assessment tasks**

5.15. If a student is found to have committed misconduct in a reassessment and thereby fails the progression hurdle, no further reassessment opportunity should be given, except with the explicit permission of the Academic Cases Committee.

**Misconduct by students repeating a year of study**

5.16. Repeating students are welcome to use their previously submitted work for their own learning and reference, in the same way they would use third-party information, but they may not re-submit work for assessment. Such self-plagiarism will be regarded with the same severity as plagiarism in general in submitted work.

### 6. Identifying academic misconduct concerns

6.1. Where markers, examiners, invigilators or other individuals suspect academic misconduct to have occurred, they should identify the form of misconduct suspected (see section 3 above) and determine the severity of the concern (see section 4 above).

6.2. Where poor academic practice is identified, the examination process should be completed and an indication that poor academic practice was identified should be clearly made within the feedback to the student. This should include reference to appropriate sources of guidance. No penalty is imposed in cases of poor academic practice, beyond a reflection of the poor practice in the marks awarded, consistent with the marking criteria.

6.3. Where the concern is determined as either academic misconduct or severe academic misconduct, an expression of concern (Expression of Concern Form) should be submitted to the CMG along with the work, the assignment brief and any relevant supporting evidence. This submission should normally be made:
6.3.1. within 28 days of the assessment event or deadline for non-ISM modules
6.3.2. within 42 days of the deadline where the concern relates to a dissertation submission.

6.4. If the work is anonymous, CMG should remove anonymity protection at this point.

6.5. The CMG will normally refer all expressions of concern about possible academic misconduct to the ACC. Within seven days, the CMG will acknowledge receipt of a concern and confirm to the student when a concern has been raised regarding their work.

6.6. The ACC will dismiss any allegation that is considered to be frivolous, wholly untrue or, the result of poor academic practice. Where a concern is dismissed, the student and staff member who submitted an expression of concern will be informed.

7. De-escalation of non-severe academic misconduct cases

7.1. In the decision making for cases of non-severe academic misconduct, the ACC will consider the stages of student progression and number of offences committed by a student.

7.2. The ACC may consult with the CMG to gain insight into students who are in their early stages of progression (i.e. MB BS Gateway Year and Phases I and II, Year 1 of the MSc in Physician Associate Studies, and non-ISM postgraduate taught modules).

7.3. On a case-by-case basis, the ACC has the power to decide to deal with a non-severe case by de-escalating it to the relevant academic lead, e.g. MB BS Phase Lead or Programme Director for postgraduate taught programmes.

7.4. If a case is de-escalated, the ACC reserves the power to impose a mark cap or downgrade an assessment if it is deemed appropriate.

7.5. The route of de-escalation is not allowed for severe misconduct allegations, second or repeated offences, or misconduct that occurs in MB BS Phase III and postgraduate ISM modules – all of which will be subject to formal procedures specified in this Code.

7.6. The ACC reserves the right to decide that any non-severe cases should be subject to formal procedures in this Code.

8. Academic Cases Committee investigation

8.1. If the concern is not dismissed or de-escalated, the ACC will initiate an investigation.

8.2. The ACC has the power to conduct different manners of investigation depending on the severity and complexity of the case.

8.3. For less severe and less complex cases, the ACC may conduct a paper-based investigation asking all parties involved to provide written statements. Students
will be given seven days to provide a written response to the alleged misconduct. Alternatively, students may request to present their response verbally at a meeting with the Chair of the ACC or delegated deputy.

8.4. For severe and complex cases, the ACC will conduct a formal investigation and appoint an Investigating Officer.

8.5. If the case relates to a piece of research carried out by a postgraduate student, the Chair of the Postgraduate Board of Examiners and the Chair of the ACC will determine whether the allegation is to be investigated under this Code or under the Hull York Medical School Code of Practice on Student Research Misconduct.

8.6. The Investigating Officer will be provided with:

8.6.1. The expression of concern form.
8.6.2. The Investigating Officer guidance notes.
8.6.3. An agreed timescale for completion of the investigation.

8.7. When an Investigating Officer is appointed, the ACC will notify the student of:

8.7.1. The details of the allegations against them.
8.7.2. The identity of the Investigating Officer.
8.7.3. An anticipated timescale for completion of the investigation.
8.7.4. Any suspension or limitation placed upon the continuation of studies and/or clinical attachment during the period of the investigation recommended to and agreed by the Board of Studies.

8.8. The Board of Examiners will be informed that the assessment is subject to investigation and the mark will be withheld until the academic misconduct procedure has been completed.

9. Procedure for investigation of academic misconduct allegations

9.1. The Investigating officer will assemble evidence to confirm the factual accuracy of the allegation using the Investigation Proforma (Appendix 4). The Investigating Officer may interview the student, and other relevant individuals as appropriate, and may require that these individuals submit written comments. At such an interview, the student may bring a supporter. The Investigating Officer should use an independent note-taker to prepare a written record of the meeting.

9.2. Upon completion of the investigation, the Investigating Officer will submit their report to the ACC for consideration.

10. Outcomes following investigation

10.1. The student will be informed when the investigation is concluded and the written statements or Investigating Officer’s report have been submitted to the ACC for consideration.

10.2. Normally, the ACC will consider the report within seven days of receipt. If, on
the basis of the written statements or the Investigating Officer’s report, the ACC determines that the allegation is untrue or poor academic practice, the ACC will dismiss the allegation. Where an allegation is dismissed, the student and staff member who submitted an expression of concern will be informed. The ACC can provide advice to the Programme Director or relevant colleagues on determination of allegations and strategies for improving poor academic practice.

10.3. If the ACC determines that there is evidence of academic misconduct, or severe academic misconduct, then the ACC will consider the following:

10.4. **Direct Action** (one or more of the following may be applied):

10.4.1. **Issue a formal warning**: Warning letter will remain on the student record.

10.4.2. **Apply a mark penalty of 0 at first attempt and allow resubmission for the pass mark**: The student will receive a mark of 0 in the assessment and be allowed to resubmit the affected work. The resubmission will be capped at the pass mark. If academic misconduct is found in reassessment, a further attempt will not normally be granted as stated in section 5.14 of this Code.

10.4.3. **An informal meeting with the student to explain the decision of the ACC**: This meeting will be attended by the ACC Chair or their delegated deputy, plus one other member of ACC. Students found to have committed academic misconduct may request such a meeting, even if not required by ACC. The Committee Secretary should attend any such meeting to take notes for the record.

10.5. **Referrals**:

10.5.1. **Disclosure to the Student Fitness to Practise Committee** of a Student Fitness to Practise concern. See Section 13.

10.5.2. **Appointment of an academic misconduct panel**. See section 11.

10.6. The ACC will inform the student of the outcome within 7 days of consideration of the Investigating Officer’s report.

11. Academic misconduct panels

11.1. The ACC appoints panel members according to the following criteria: The panel should comprise no fewer than three members and no more than five members of Hull York Medical School or University staff, including a member of the Academic Cases Committee as Chair. No Panel member shall be a current or recent tutor, mentor, or supervisor of the student under consideration.

11.2. The Chair for the Panel is responsible for ensuring all panel members have been fully briefed on current regulations and guidance relevant to the student’s programme of studies and the allegation being considered.

11.3. Before the Hearing, the Chair of the Panel will:

11.3.1. Set a date for the formal hearing of the case by a Panel. This must be at least 21 days later to allow the student at least 14 days to prepare a case and submit any supporting information for that case in advance of
the Hearing for circulation to members of the Panel.

11.3.2. Appoint a secretary for the Hearing who will be responsible for taking formal minutes and ensuring their safe keeping.

11.3.3. Inform the student of any change to conditions in relation to suspension or limitation placed at the beginning of the formal investigation.

11.3.4. Ensure that all documents circulated to members of the panel relating to the case are also circulated to the student.

11.3.5. Ensure that any Hull York Medical School staff who may have relevant information to the case, and any other person(s) who may be able to provide expert advice on specific aspects of the case, are invited to attend or submit written statements where they are not able to attend.

11.4. To conduct the meeting, the Chair of the Panel will:

11.4.1. Bear responsibility to ensure that the proceedings are fair; this includes proceedings where the student is not in attendance.

11.4.2. Conduct introductions of panel members and all other persons present, and explain the functions and powers of the panel.

11.4.3. Confirm that all documents circulated to members of the panel have also been circulated to the student.

11.4.4. Invite the student, the Investigating Officer, and all witnesses to join the meeting. The student may be accompanied by a supporter who may speak at the discretion of the Chair.

11.4.5. Ensure that if the student is not in attendance, the Panel satisfies itself that all reasonable attempts have been made to inform the student of the panel meeting, that the student has been given adequate opportunity to attend and that, as far as can reasonably be ascertained, the student has declined to attend. Once the Panel has been satisfied on these points, the meeting may proceed in the student's absence.

11.4.6. Point out that if, at any time during the panel meeting, the prospect of mutual agreement on the occurrence of misconduct between the panel and the student emerges and is appropriate, the consent of the student will be sought to end the hearing and deliver an outcome.

11.4.7. Invite the Investigating Officer, and any other staff required to attend, to make statements, allowing members of the panel to ask questions after each statement. The Chair will allow reciprocal questioning by the various parties.

11.4.8. Invite the student, and if applicable, the student's supporter, to make a statement in their own words, and allow members of the panel to ask questions of the student.

11.4.9. Once satisfied that all parties have had a full opportunity to make statements and ask questions, invite all but the members of the panel to withdraw but remain in waiting.
11.4.10. Lead discussion of the case, if necessary seeking clarification by recall of all parties.

11.4.11. Advise all parties when they can disperse.

11.4.12. Confirm the decision of the panel, along with any findings of fact, to the student in writing as soon as reasonably practicable and normally within seven days of the decision being reached.

11.4.13. Prepare a formal report to Hull York Medical School Board of Studies of the outcome. This may also require disclosure/referral to the Hull York Medical School Student Fitness to Practise Committee.

11.5. The report may also be passed to other relevant Hull York Medical School committees for consideration and possible action in the appropriate area of responsibility.

12. Outcomes and penalties following academic misconduct panel hearings

12.1. Direct action

A panel established by the Academic Cases Committee has the authority to agree or enforce the sanctions detailed below:

12.1.1. No further action

12.1.2. Issue a formal warning with no change to awarded mark: Warning letter will remain on the student record. No change to original mark awarded will be recommended.

12.2. Reports/decisions

A panel established by the Academic Cases Committee will make reports of decisions to the relevant Board of Examiners or equivalent.

12.2.1. Mark of 0 awarded in the assessment task at first attempt with the right to reassessment: If the Academic Misconduct was for a first attempt at the assessment, the student will have the right to undertake a second attempt in the reassessment period. The result of this reassessment attempt for this element will be capped at the pass mark. The student will also be issued with a Warning letter. If academic misconduct is found in reassessment, no further attempt will be granted as stated in section 5.14 of this Code.

12.2.2. Mark of 0 in the module: If the Academic Misconduct was for a first attempt at the module, the student will be required to undertake reassessments in all assessment components of the module. The result of these reassessment attempts will be capped at the pass mark. The student will also be issued with a Warning letter.

12.2.3. Termination of study: This should only occur where there is evidence of sustained attempts at Academic Misconduct, or Severe Academic Misconduct.
12.2.4. **Fitness to Practise referral:** See Section 14

12.3. Board of Examiners recommendations

12.3.1. Any work, or part of a piece of work, submitted by a student at Hull York Medical School which is found to have been plagiarised or otherwise resulted from academic misconduct will be subject to a score of zero. It is for the relevant Board of Examiners or equivalent to determine, based on advice from the panel, whether any section of the piece of work unaffected by the identified academic misconduct meets requirements for approving progression through a course or award of a qualification and if so what grade of achievement may be awarded.

12.3.2. If the piece of work is found not to meet requirements for progression or award, the Board of Examiners or equivalent must recommend to Board of Studies whether the student has available the possibility of repeating the affected assessment and any conditions for doing so. If no repeat is to be permitted the Board of Examiners or equivalent must recommend to the Board of Studies that the student is unable to meet the requirements of the course and that their course of studies should be terminated. In such cases the Board of Examiners and Board of Studies will have the right to request all of same information that is available and accessible to the Academic Cases Committee to ensure the consistency and transparency of decision-making.

13. Fitness to Practise and other disciplinary action

13.1. For all Hull York Medical School students, the Medical School’s Fitness to Practise or University disciplinary procedures should also be consulted and invoked where necessary. This involves cases where::
- both first and second offence marks are fails because of content affected by misconduct;
- an academic misconduct offence has been established and this raises concerns about a student’s fitness to practise, or other disciplinary offences are related to the incident of misconduct

13.2. For Hull York Medical School students registered for the MB BS or MSc in Physician Associate Studies degrees, a panel established by the Academic Cases Committee may make a disclosure to the Student Fitness to Practise Committee in respect of the implications of the identified academic misconduct for the student’s professional behaviour.

13.3. For Hull York Medical School students who are current registered health professionals, or who are studying outside Hull York Medical School for a regulated health profession, a panel established by the Academic Cases Committee may make a disclosure to the student’s training providers, employers or professional regulatory organisations.

14. Privacy, confidentiality and data protection

14.1. Any case will be treated with the highest level of confidentiality that can be maintained. Hull York Medical School, the Universities of Hull and York and any other relevant body will only disclose confidential information to members of staff who are directly involved in the administration of the case and as necessary to
allow an open and fair investigation and for the outcome of the investigation to be reported appropriately. This is in order both to protect the privacy of the student and to protect members of staff from unsubstantiated public allegations.

14.2. Depending on the nature of the case, the information gathered may include third party data, opinion and information which was provided in confidence. This information needs to be handled consistently and fairly and in accordance with common data protection principles making it clear to all parties that the sharing of this information is agreed for the purposes of reaching an informed and fair decision.

14.3. Hull York Medical School may on occasion be required to share information related to a student’s case with third parties, for example, on STEP documentation and UKFPO references.

15. Appeals

15.1. When the Hull York Medical School Board of Studies has confirmed the outcome of an Academic Misconduct Panel Hearing the student concerned may appeal against any decision and/or penalty in accordance with the terms of the Hull York Medical School Code of Practice on Academic and Fitness to Practise Appeals.

16. Monitoring

16.1. The Academic Cases Committee shall provide an annual report of the following information to the Board of Studies relating to the previous academic session, taking into account the programme, mode, year, gender, disability, ethnic origin and any outstanding issues:

16.1.1. The number and types of concerns received, investigated, and dismissed.
16.1.2. Penalties made by the ACC following investigation without convening a Hearing Panel.
16.1.3. Penalties made by ACC following the decisions from Hearing Panels.

16.2. A summary report of cases will be provided to HYMS Joint Senate Committee.
Appendix 1: Flow chart of academic misconduct procedures

Marker, examiner, invigilator or other individual determines that student academic misconduct may have occurred. Expression of Concern form completed and submitted via online form within 28 days of the assessment or within 42 days of the deadline where the concern relates to a dissertation, along with the work, the assignment brief and any other supporting evidence.

Expression of Concern logged by Case Management Group and forwarded to Academic Cases Committee for consideration.

Academic Cases Committee receives and considers the Concern.

In cases of non-severe academic misconduct - de-escalate to relevant academic lead or Programme Director. The Committee has the power to deduct marks if appropriate.

Appoint an Investigating Officer to report on the factual accuracy of the Concern.

Conduct a paper based investigation or ask the student to attend a meeting.

Determine the investigation to be undertaken under the Code of Practice on Student Research Misconduct.

Academic Cases Committee considers the Investigating Officer's report and decides the outcome after investigation. The decisions below are not mutually exclusive and can be applied in combination.

Dismiss the allegation

Issue a Warning

Appoint an Academic Misconduct Panel

Apply a mark penalty

Informal meeting with the student to explain the decision of the Academic Cases Committee.

Refer to the Student Fitness to Practise Committee if appropriate.

Student is advised of the outcome of the Panel Hearing.

Formal Hearing by the Academic Misconduct Panel.

Student may appeal the decision in accordance with the Hull York Medical School Code of Practice on Academic and Fitness to Practise Appeals.

The matter is recorded at the next full meeting of the Academic Cases Committee and Hull York Medical School Board of Studies.
**Appendix 2: Guide to determining the severity of misconduct allegations**

<table>
<thead>
<tr>
<th>Poor Academic Practice</th>
<th>Academic Misconduct</th>
<th>Severe Academic Misconduct</th>
</tr>
</thead>
</table>
| This may arise from a lack of understanding of the standard methods of acknowledging the source of words, ideas or diagrams in a piece of work or the appropriate levels of collaboration or the correct behaviour within an exam. It may also be applicable where the extent does not justify further investigative proceedings or a penalty, for example, for errors made through carelessness. | This is behaviour which, if not detected, would give a student an unfair advantage in an assessment. The main difference between academic misconduct and severe academic misconduct is the extent of the alleged misconduct.  
**E.g. With regard to plagiarism**  
Failure to correctly reference sources and claim an idea as original work.  
Where there is evidence of more wide spread or systematic misunderstanding, or of badly executed paraphrasing or acknowledgement of sources, or of another misconduct offence then this should be brought to the attention of the ACC together with evidence of the errors/misrepresentation that is causing concern.  
**E.g. With regard to self-plagiarism**  
Submitting for assessment an item which has been previously submitted for credit in another module with little change made to the assessment  
**E.g. With regard to collusion**  
Submitting coursework in collaboration with another student.  
**E.g. With regard to breach of examination conditions**  
Attempts to communicate with another candidate during an examination. | Where there is clear evidence of extensive or substantial attempts to gain an unfair advantage or where there has been a previous, proven case of academic misconduct or severe academic misconduct against a student. Any proven allegations of commission and incorporation/contract cheating, personation, or fabrication or falsification of data will always initially be considered as a case of severe academic misconduct. |
### 16.3 Appendix 3: Investigation Proforma

<table>
<thead>
<tr>
<th>Investigating Officer’s Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Number</td>
<td></td>
</tr>
<tr>
<td>[Academic Misconduct/ Fitness to Study] Investigating Officer’s Report</td>
<td></td>
</tr>
<tr>
<td>Date of Investigation Commencement</td>
<td></td>
</tr>
</tbody>
</table>

#### Matter under investigation
Please provide a clear statement of the allegation or concern and why it is significant to the practice or study of the student.

#### List of evidence identified and used
This should include a list of those interviewed, where and when. Written evidence should be provided as an appendix to the report.

#### Account of the factual investigation
Describe of the facts of the matter as revealed by the investigation. Keep this section confirmed to established fact, with any matter of opinion clearly labelled as such.

#### A chronological summary
Provide a chronology for the concern. This should not selectively include only adverse matters but include data on all basic aspects including ones that are favourable to the student.

#### Observations
Outline your conclusion in relation to the facts obtained from the investigation as a whole. The observations should specifically answer the concerns addressed in the investigation and highlight any discrepancies. The observations here should offer clarity about all relevant factors uncovered which have impact on the concerns raised about the student, without attempting to identify or influence the appropriate course of action for the relevant Committee.

#### For the Attention of the School
Outline any system or structural issues that came to light as a result of the investigation.

| Date of Investigation Completion: |  |