

# Policies and Procedures

Sport & Physical Activity – Coach Education

UNIVERSITY OF LEEDS

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# DATA PROTECTION



## Data Protection Policy

The Data Protection Act 1998 (DPA) was introduced to establish a framework for the protection of personal or sensitive data and is underpinned by a set of eight principles. By processing data in accordance with the data protection principles, the University of Leeds Sport and Physical Activity Department (SPA) will ensure the safeguarding of data for all individuals engaged with the Coach Education programme.

Sport and Physical Activity follows procedures which aim to ensure that all employees, elected members, trainers who have access to any personal data held by or on behalf of the SPA, are fully aware of and abide by their duties under the Data Protection Act 1998.

Sport and Physical Activity strictly adhere to the University of Leeds data protection policy, this can be found via the following link;

<https://dataprotection.leeds.ac.uk/wp-content/uploads/sites/48/2019/05/Data-protection-CoP.pdf>

## Personal learning record

The personal learning record is an internet-based register of learners and achievement data, designed to assist learners with their personal learning development. It allows learners to view their education and training qualifications in one place. A unique learner number (ULN) is required to access a record and is completely unique to each learner.

The SPA is responsible for creating and providing a valid ULN for those learners who do not already possess one. It is also the responsibility of the centre to inform learners that their data will be processed for the purpose of creating a ULN and updating their personal learning record. This notification will take place in the form of a privacy notice as identified below.

## Privacy notice

The SPA is required to inform learners of how their data will be processed for the purpose of registration and certification of an ASA qualification. In particular, a privacy notice will inform learners of how their data will be processed for the purposes of the personal learning record. SPA will provide the following statement to learners at the point of application or registration onto an ASA qualification, along with the opportunity to opt out if they do not want to share their data.

“Some of the information you supply will be used by Skills Funding Agency to fulfil its statutory functions, issue/verify your unique learner number (ULN) and update/check your personal learning record. The Skills Funding Agency may share your ULN and personal learning record with other education related organisations, such as careers service, school, college, university, government departments and public bodies responsible for funding your education. Further details of how your information is processed and shared can be found at [www.learningrecordsservice.org.uk/privacynotice](http://www.learningrecordsservice.org.uk/privacynotice)”.

Further information on the personal learning record and how data is used and shared is set out below. For those individuals who wish to fully understand the implications of sharing data, further information is contained within the Extended Privacy Notice directly from Learning Records Service.



- Some of the information you supply will be used by the Skills Funding Agency to fulfil its statutory functions, issue/verify your ULN and update/check your own personal learning record.
- Your personal learning record will include information about your qualifications, awards, training and learning achievements that you may collect throughout your lifetime – at all levels and also whilst you are working and learning.
- Your personal learning record can be shared with organisations who have a responsibility for providing, funding and serving your education and training.
- If you are below the age of 16, you might wish to discuss this privacy notice with your parent or legal guardian.
- The Skills Funding Agency is a public body that funds qualifications and training that you may be receiving. It is responsible for maintaining ULNs and personal learning records on behalf of all individuals aged 13 and above in England, Wales and NI.
- Your ULN is a ten digit reference number, which is unique and individual to yourself for use within education. Please keep this number in a safe place.
- It is used to create and update your own personal learning record, which will be conveniently located online for you to access at [www.learningrecordsservice.org.uk/products/learnerrecord/](http://www.learningrecordsservice.org.uk/products/learnerrecord/)
- The Skills Funding Agency may obtain and use third party reference data to assist when verifying your ULN and when checking that the data it holds about you is correct, in order to comply with the requirements of the Data Protection Act to keep your details accurate and up to date.
- The Skills Funding Agency may use your information for management and statistical purposes and for monitoring the accuracy of the information it holds about you.
- The Skills Funding Agency may share your ULN and personal learning record information with other education related organisations such as your careers service, school, college, university, Government departments and public bodies responsible for funding your education.
- Please note that you can opt-out of the Skills Funding Agency sharing your personal learning record. You may not however opt-out of the Skills Funding Agency storing your information.
- You can opt-out of sharing your participation and achievement data by contacting the Learning Records Service customer helpdesk on 0845 602 2589. You will be required to provide some personal details to confirm your identity, which may include your ULN, if known.



# Complaints Procedure



# Complaints Procedure

The University of Leeds Sport and Physical Activity Department (SPA) is committed in its service provision to offer standards of the highest quality. Working to continually achieve this benchmark assists in the maintenance of quality assurance standards and compliance with regulatory requirements.

SPA aims to provide an efficient and effective service to all. However, whilst every care is taken to ensure high quality standards, we acknowledge that there may be occasions where we fall short of expectations and individuals are not completely satisfied. One of the ways in which we can continue to improve our service is by listening and responding to the views of our customers, and in particular responding positively and putting mistakes right.

## Policy aim and purpose

Sport and Physical Activity is committed to providing individuals directly affected by our services with the opportunity to provide feedback on whether or not standards have been met. Our customers must have confidence that they will be listened to, therefore all feedback received, both positive and negative, will be acknowledged. All expressions of dissatisfaction received will be treated as a complaint.

The aim of this policy is to provide a clear and structured process which highlights who can make a complaint (the complainant), how they can make a complaint and what SPA will do to seek a resolution to the complainant's satisfaction.

Therefore SPA aims to ensure that:

- Making a complaint is as easy as possible
- Complaints are treated as a clear dissatisfaction with our service
- The right response is provided, i.e. an explanation, apology or action taken
- Complaints are reviewed to improve service

## Definition of a complaint

A complaint is an expression of dissatisfaction about the standard of service, actions or lack of action by SPA, a member of its staff or a representative, affecting an individual customer or a group of customers. Complaints may relate to a failure on the part of SPA to perform to an agreed or reasonable standard.

Dissatisfaction may be associated with the service provided or with the way an individual perceives to have been treated by a SPA member of staff or representative, which may or may not be justified or associated with professional misconduct.

## Equality of access and treatment

Through publication of this policy on the University of Leeds website, and through other means, individuals can access information about complaints procedures. We are committed to ensuring



all individuals have equal access to this information and the opportunity, where possible, to communicate with us in any way.

## Who can make a complaint?

Complaints can be made by an individual customer or group of customers (who have received, been adversely affected by or have witnessed the cause of dissatisfaction) or someone acting on behalf of the customer (referred to as third parties).

Customers wishing to raise dissatisfaction must address their concern directly to the SPA Sports Development Office.

## Complaint Procedure

### Stage 1

If a complaint is raised verbally by a customer, they are asked to provide their comments in writing to ensure the issue can be passed to the relevant member of staff. The majority of complaints are raised with the reception and front of house members of staff, the issues normally requires a response from a more senior member of staff. Complaints can be made in writing directly to the relevant party; if the complaint is addressed to the generic SPA email address then it will be passed on to the relevant member of staff. When submitting a complaint, the complainant should provide the following:

- Name and contact information
- Full details of the complaint i.e. the cause of dissatisfaction with operations, actions or behaviour
- All supporting information i.e. relevant documentation, dates, locations, any witnesses
- Details of any previous attempts to resolve the identified dissatisfaction
- What action or response they seek to resolve the dissatisfaction

### Stage 2

We recognise that most individuals who are dissatisfied will want a problem to be addressed as quickly as possible.

The Office Administrator will acknowledge the complaint in writing within two working days of receipt; record details on the complaints register and begin investigations into the cause of dissatisfaction. SPA will identify an appropriate member of senior management to review the complaint for further investigation. Acknowledgement of further investigation will be provided to the complainant in writing within two working days of receipt of the complaint.

The member of senior management will conduct a further investigation into the cause of dissatisfaction. Upon cessation of investigations, the member of senior management will communicate directly with the complainant and provide an explanation or resolution. This will be communicated to the complainant within 7 working days of receipt of the complaint. The duration of further investigation will depend on the nature and severity of the complaint and at this stage, the complexity of the response required. In some cases the investigation may take longer and in such instances, the complainant will be notified of the revised timescale.





# Health and Safety Policy

# Health and Safety Policy

## 1. Sport and Physical Activity Health and Safety Policy Statement of Intent

*Extract from the University's health and safety policy*

*"The Council of the University of Leeds believes that the health, safety and welfare of its staff, students and visitors are its highest priorities. The University commits itself to allocating the resources necessary to meet this policy objective."*

*<http://www.leeds.ac.uk/safety/policy/policy.pdf>*

The Sport and Physical Activity (SPA) health and safety policy and arrangements are designed to be in compliance with and fully supportive of the principles, aims and objectives of the University's health and safety policy as indicated above and recognise and accept their role and responsibilities as outlined therein.

To help ensure effective implementation of the University's policy SPA have developed appropriate local health and safety management structures and arrangements for the areas and activities over which they have control and influence. These arrangements are outlined in the sections 2 to 6 of this document. The Service has also developed a Standards document that is used to define expectations of staff at all levels, this makes explicit reference to the priority and importance of safety to all activity within the Service.

SPA encourages and promotes participation in sport for students, staff and visitors. Participating in sport involves some elements of physical risk; SPA is committed to minimising these risks as far as reasonably practicable whilst maintaining the inherent challenges and benefits of sporting activity. The Health and Safety Executive (HSE) indicates that sensible risk management is about balancing benefits and risks, focusing on reducing real risks and not about stopping important recreational and learning activities where the risks are managed. Effective health and safety management is complimentary to and supportive of this and SPA's own vision.

*Inspire through Excellence*



Our vision means that we will seek to deliver excellent standards across all that we do, inspiring our customers. In realising our vision, the University of Leeds will become one of the leading universities for sport and physical activity in the UK.

It is recognised that to deliver a leading first class service in sport and physical activity the Service must ensure the very highest standards of health and safety.

SPA recognises that in order for this policy to be effective it must have the full support, co-operation and participation of all employees in making the workplace a safer place for all. We expect and encourage similar support from contractors, partners and volunteers and co-operation from students, service users and visitors who use our services, facilities or premises. We will work in a mutually supportive way with our partners and stakeholders e.g. LUU, UoL Estates Services, Unions etc to help ensure consistent high standards and compliance.

We believe that our managers and leaders in particular have a vital role in achieving effective health and safety management and that being a manager / line manager brings additional responsibilities. A key policy objective is to ensure that health and safety is embedded and integrated into all staff roles and therefore not seen as a separate issue. We will achieve this by:

- Ensuring that health and safety is afforded an equivalent level of importance to other business objectives and is allocated the appropriate level of resource and support.
- Be committed to developing our staff to ensure they have the necessary health and safety skills and competencies as appropriate to their role and responsibilities.
- Recognising that continual improvements in health and safety performance are achieved primarily through the identification, assessment and management of risk and that this not only reduces accidents and ill-health at work but also contributes to the health and wellbeing of local communities as well as the protection of the environment.
- Whilst accepting the minimum legal standards set by national legislation, namely the Health and Safety at Work etc Act 1974 and its associated regulations, SPA is committed to promoting a positive health and safety culture, which aims to produce high standards of health and safety for staff students and visitors in all aspects of activities and premises over which we have control and influence.
- Setting objectives for health and safety and strive to raise standards within the Service beyond the minimum legal requirements. We believe that achieving these high standards will positively contribute to the overall quality of the services we provide.

## **2. Organisation, Roles and Responsibilities**

### **2.1 Structure and Governance**

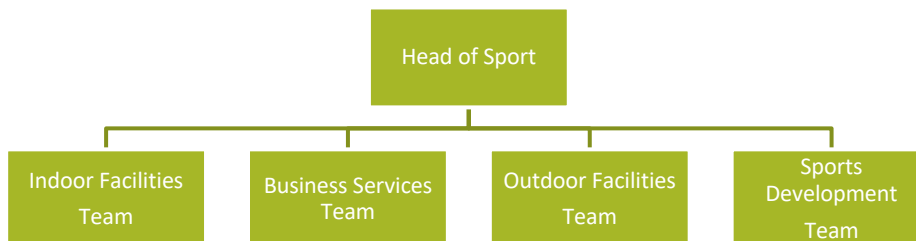
SPA is part of Commercial Services alongside Catering, Events and Sales & Marketing. Commercial Services sits in the Facilities Directorate of the University. In delivering effectively its activities SPA also collaborates with internal partners such as Leeds University Union and external partners such as Leeds City Council. SPA is organised functionally as outlined below in

Figure 1 with the indoor and outdoor facilities staff being supported by a marketing and administration team based centrally within the SPA offices in the campus sports centre. The sports development team comprises staff organising our programmes of activity, including for example our recreational leagues.

The department is led by the Head of Sport. The Head of Sport is supported by a senior management team (SMT) which is drawn from each of the functions and a broader leadership forum that comes together once a quarter. A detailed staffing structure is provided here as Appendix 2.

A key policy objective for the Service is to ensure that health and safety is embedded and integrated into all staff roles and therefore not seen as a separate issue. Health and safety is organised and managed alongside all other management activities. All managers are responsible for managing health and safety in their areas of responsibility in line with the management structure outlined.

Figure 1 ~ SPA Functions



- SMT and the management team

Responsible for the leadership of the Service, setting and managing financial targets, implementing the strategy.

- Indoor facilities

Management of the Edge, Cromer Terrace fitness studio, Gryphon Sports Centre and the fitness facilities within Halls of Residence.

- Outdoor facilities

Management of the playing fields at Weetwood and Bodington sites as well as the two outdoor centres.

- Business Services

Delivery of business services for the whole service including , finance and clerical support, internal and external communication and PR.



- Sports development

Delivery of programmes supporting talented sports performers, LUU sports clubs, and recreational users through structured leagues. Also responsible for coaching and coach education programmes.

It is intended that a "Safety Manual" or "File" will be developed to provide detailed operational arrangements for managing health and safety e.g. inspection regime, risk assessments, records, codes of practice, agreements and protocols etc.

## 2.2 Roles and responsibilities

This section outlines the key roles and responsibilities within the Service.

All employees are expected to take actions and make decisions which are reflective of the principles aims and objectives of both the University and SPA' health and safety policy and procedures as set out in section 1 – statement of intent.

### Head of Sport & Physical Activity

- Overall responsibility for ensuring effective health and safety management in the service and ensuring compliance with both legal and university health and safety requirements
- Management responsibility for detailed implementation of the University's health and safety procedures within SPA.
- Briefly
  - Producing / disseminating a service health and safety plan
  - Providing leadership for health and safety
  - Fostering a culture where health safety and welfare are seen as essential and integral parts of the service's activities
  - Trade union consultation and involvement
  - Operational arrangements to support health and safety management
  - Monitor and review health and safety performance
  - Taking appropriate action when procedures have not been complied with
  - Involvement with accident and incident investigation
  - Ensuring staff involvement by promoting two way communication
  - Allocation of appropriate resources



- Ensuring monitoring activities and hazard / risk identification arrangements are in place e.g. Inspections, risk assessments
- Liaising with health and safety manager and other professional advisers as necessary
- Ensuring staff are competent to undertake tasks safely and that they attend appropriate training courses

### Senior Management Team

- Without detracting from the Head of Sport's overall responsibilities Managers assist and support the Head of SPA and have the day to day management responsibility for health and safety. Including detailed implementation of the University's and SPA health and safety policy and procedures in their area of responsibility.
- They set performance standards for their areas of responsibility and monitor adherence to these standards
- In particular they are responsible for
  - Ensuring that hazards are identified and risk assessments are completed, are written to a consistent and reasonable standard; maintained, properly document and retained for future reference
  - Operationally responsible for the implementation of control measures identified by risk assessments
  - Effectively communicating the control measures to relevant employees
  - Ensuring staff are competent to undertake tasks safely, that they attend appropriate training courses and records are documented
  - Consider health and safety training requirements as part of SRDS
  - Raise any issues of non compliance with the Director
  - Carry out accident/ incident investigations within their areas of responsibility liaising with the HSM for serious cases
  - Ensure all relevant emergency arrangements and procedures are in place
  - Ensure all equipment is maintained as indicated by risk assessment or statutory requirements e.g. lifting equipment, electrical items etc
  - Maintain effective health and safety records e.g. risk assessments, inspection reports, action plans etc to demonstrate compliance and provide an effective audit trail



## Managers – i.e. Leaders, Duty Managers, Officers

The term “manager” relates to function rather than title – you are a manager if you direct, lead, instruct, control, tutor or are otherwise in control of activities and /or people.

- Assist and support the Head of Sport and Senior Management Team of SPA in the implementation of their health and safety responsibilities as outlined above .
- Have the day to day management responsibility for health and safety within their area/s of responsibility; including detailed implementation of the University’s and SPA health and safety policy and procedures.
- Set performance standards for their areas of responsibility and monitor adherence to these standards
- In particular they are responsible for
  - Ensuring that hazards are identified and risk assessments are completed, are written to a consistent and reasonable standard; maintained, properly document and retained for future reference
  - Operationally responsible for the implementation of control measures identified by risk assessments
  - Effectively communicating the control measures to relevant employees
  - Ensuring staff are competent to undertake tasks safely and that they attend appropriate training courses
  - Consider health and safety training requirements as part of SRDS
  - Raise any issues of non compliance with the Head of Sport
  - Carry out accident/ incident investigations within their areas of responsibility liaising with the Head of Sport for serious cases
  - Ensure all relevant emergency arrangements and procedures are in place
  - Ensure all equipment is maintained as indicated by risk assessment or statutory requirements e.g. lifting equipment, electrical items etc
  - Maintain effective health and safety records e.g. risk assessments, inspection reports, action plans etc to demonstrate compliance and provide an effective audit trail

## All Employees - general duties

- All members of staff have the following health and safety responsibilities:



- To ensure your own health and safety and that of others that may be affected by your work
- To co-operate with the University (including SPA) on matters of health and safety
- To be aware of both University and SPA standards and procedures
- To comply with health and safety standards e.g. risk control measures, NGB codes of practice, relevant legislation / guidance, SOP's etc
- To be aware of emergency procedures and local hazards in your area
- To report any concerns you may have regarding health and safety
- To carry out and be involved , as appropriate in the risk assessments associated with your work
- Don't interfere with or misuse anything provided for health and safety
- Report any accident, near miss or dangerous occurrence at work, however minor
- Not proceed with any activity if they feel it poses a threat to their health and safety, or to that of others
- Report any unsafe or unhealthy working conditions your line manager or the Director without delay

### Link Officers

Link Officers are locally appointed to help contribute towards effective communication and feedback at an operational level. In performing this role it is important to note that this group does not carry any additional legal responsibilities other than those which are outlined above as are relevant to their role within the organisation.

- Each function has an appointed "link" – i.e. indoor sports facilities ~ fitness and dry side functions, sports development, outdoor facilities ~ Weetwood and outdoor activities functions and administration functions.
- Their role is primarily to:
  - Be a sounding board for discussion of operational health and safety matters e.g. new risk assessments / control measures and proposed procedures and safe methods of work
  - Assist management with two way communication of health and safety matters e.g. obtain views, feedback and input from their peers.





- Help provide an operational perspective to inform and influence the management decision making process relating to health and safety e.g. the workability of proposed control measures
- Be involved in a “link officers forum” (see consultation section) which will then feed into the Services’ formal consultation forum the Health and Safety Committee (H&SC)

### **Facilities Directorate (FD) Health and Safety Manager**

- To provide dedicated proactive, strategic and professional support to Sport and Physical Activity
- To Work in partnership with the Head of Sport to ensure effective implementation of University policies and procedures
- To work with the SPA management team to Improve health and safety management systems ensuring compliance with legislation
- To act as principal adviser and support for agenda development, presenting reports and investigation findings, making recommendations for new policy and strategy developments
- To work with SPA management team to ensure University policies and standards are implemented and translated into operational best practice at faculty and school level

### **Health and Safety Adviser (Commercial Services)**

- To provide day to day operational advice and guidance to all staff
- To attend the SPA H&S Committee as ex officio
- To partake in formal annual H&S inspections with Managers
- To work with the management team to ensure suitable and sufficient risk assessments and SOP’s are in place

### **2.3 Consultation and Communication**

SPA seeks to ensure that both formal and informal communication methods are in place for staff to keep up to date with H&S issues and activity. In addition to ensuring that minutes of relevant meetings are circulated to staff via the internet and on notice boards the Service also issues a monthly e-news to staff and this is used to communicate H&S matters as appropriate. The Service makes use of operational meetings to consider H&S issues on a weekly/fortnightly/monthly basis and H&S is a mandatory agenda item for team discussions.

#### **Formal**

The arrangements for consultation within SPA are outlined below – this may be subject to revision when the University publishes its statement of practice for Committees.

- **SPA Health and Safety Committee**



- The prime purpose is to enable consultation between management, trade union representatives and staff on health and safety issues
- The committee operates in a positive way - reinforcing safety culture and employee participation in solving health and safety problems within SPA.
- The Committee meets a minimum of 3 times per year
- Is not a forum to report operational issues that should be dealt with locally
- Is chaired by the Head of Sport
- It is expected that the committee will in its' discussions arrive at a consensus view on how to carry matters forward on any particular topic
- The membership comprises of senior management, union representation and staff representatives if applicable.
- Link Officers and the Health and Safety Manager attend in an "advisory" capacity as opposed to "members"
- Detailed arrangements and terms of reference are available on request.

• **Management Team Meetings**

- Held monthly
- Management team meetings include Health and Safety as a standing agenda item
- Management raise issues and HSM provides regular updates on H&S matters
- Two way process of communication with the H&SC where matters can be referred both ways

• **Link Officers operational forum/ project group**

- Meets as required or as (by H&SC or senior team)
- Forum to discuss operational issues reports back to the H&SC etc
- Two way communication staff and management
- Be a sounding board for discussion of operational health and safety matters e.g. new risk assessments / control measures and proposed procedures and safe methods of work

**2.4 Competency**

The Service is committed to maintaining and developing staff competency on a continual and ongoing basis. There is an overall Service training and professional development plan for all members of staff and management in which health and safety is a key element. The plan covers health and safety training from basic induction to job specific modules it is strongly influenced by job role/ needs analysis, legislation, industry best practice, individual development plans and the Service's / University's strategic objectives.

The plan is refreshed and reviewed annually and records kept of the training undertaken by staff and when they are required to be updated. The health and safety elements are informed by the Service's risk assessments and outcomes of monitoring activities such as inspections, spot checks, accident investigations etc.



Job descriptions specify essential health and safety requirements and H&S competencies are defined for each group – via the training plan / matrix.

### 3. Planning

Risk Assessments form the cornerstone of the Service's health and safety management system. The Head of Sport and all managers are responsible for ensuring that suitable and sufficient risk assessments are carried out and control measures are implemented, both for staff / student activities and hazard specific topics e.g. fire.

There is a documented (prioritised) procedure for Risk Assessment completion, sign off, implementation and review. The process is a team based participative approach with the most relevant / competent people being involved. All managers/leaders receive training in risk assessment basics and are expected to involve the most appropriate people.

Risk assessment control measures are incorporated into standard operating procedures (SOP's) where relevant, as these are the key working documents of the Service; there is a document control system in place to ensure the correct versions are in use.

Where there are interdependencies the Service engage and work with their partners to ensure risks are managed and there is clarity of roles and responsibilities e.g. LUU SLA for coaching staff and club activities.

### 4. Monitoring

Performance monitoring is a key part of the health and safety management systems. The primary aim being to ensure that the standards achieved conform to the objectives of the University and Service Health and Safety policy.

- **Active Monitoring** – e.g. auditing, self-auditing, inspections, monitoring in the field risk assessment and SOP review, results from consultation and communication processes.
- **Re-active Monitoring** – e.g. investigations of accidents, incidents and cases of occupational ill health, analysis of statistics, investigations of complaints.

The Service and its management team carry out regular monitoring activities both active and reactive.

Inspections: The Service has in place a documented process for workplace inspections, this includes spot checks, routine daily, weekly type inspections and the more formal H&S inspections led by the senior management team.

Nb: An inspection is a hazard spotting exercise, involving a physical examination of the premises, equipment, systems of work and activities in a workplace. The results of all inspections, whoever carry them out, are part of the monitoring process. They should be acted upon and fed into the overall system i.e. Health and Safety Action Plans, Risk Assessments SOP's etc. These results should also be effectively communicated to relevant parties e.g. Employees, Safety Committees



## 5. Audit

Auditing is an element of “active monitoring”, which although needed less often, is vitally important. Auditing is a formalised technique for assessing efficiency, effectiveness and reliability of the health and safety management system as a whole. The Service will seek to ensure that it complies with any auditing procedures and timelines required by the University. In the past the Service has independently sought an audit of its systems and procedures with regard to Health and Safety and used the recommendations from this process to inform ongoing action planning.

## 6. Review

This document will be reviewed annually by the SPA Health and Safety Committee.

### Appendix One

#### SPA Health and Safety Committee

**Important Note:** may be subject to revision pending publication of the University’s Statement of Practice for Health and Safety Committees

#### Constitution

##### Aims and Objectives

- The prime purpose of the Committee is to enable consultation between management, trade union representatives and staff on health and safety issues
- The Committee operates in a positive way - reinforcing safety culture and employee participation in the management of health and safety within SPA.

##### Membership

- The aim is to achieve 50% trade union membership ideally from the Service but if this is difficult to achieve then it is acceptable for Unions to nominate representatives from a different area and agree this with the Head of Sport.
- The Director chairs the Committee
- The Director has appointed management representatives with sufficient authority to give proper consideration to views and recommendations
- Staff with specific health and safety roles, officers from cross cutting Services and representatives of the LUU attend or are invited in the capacity of ex officio (attendance by position only) members

#### SPA H&SC membership detail

Trade union representatives x 3

Management Representatives



- Head of SPA – Chair
- SPA Manager x 1
- Sports Development Manager x 1

Ex Officio members

- Health and Safety Manager
- LUU Student Activity manager (H&S)

Ex Officio members by invite only

- Representatives of cross cutting services e.g. Estates, HR, RCS, ISS
- SPA Link Officers



## Organisation

- The Committee meets at least 3 times a year in advance of University Health and Safety Committees
- Meeting dates are published well in advance
- Agenda items – all members (union and management) are expected to contribute to the forming the agenda and to table items for special consideration where relevant
- Meetings will not be cancelled or postponed except in exceptional circumstances
- If a member of the group is unable to attend a meeting, the member concerned should nominate a named substitute.
- If union representatives are unable to attend or field a substitute the Committee will still take place.
- Responsibility for meeting arrangements and facilitation, as well as taking, recording & distributing minutes lies with the Business Services Team.

## Terms of reference

This is a broad outline of the terms of reference of this group but is not intended to be exhaustive.

The Committee operates in a positive way - reinforcing safety culture and employee participation in the management of health and safety within SPA. The Committee will make recommendations for improvement where relevant. It is expected that the Committee will in its' discussions arrive at a consensus view on how to carry matters forward on any particular topic.

It is not a forum to report operational issues that should be dealt with locally by managers.

The Committee shall:

- Assist in the development of and procurement of compliance with the Universities' health and safety policy, standards, associated guidance and best practice.
- Assist in ensuring that local policies, risk assessments, guidance and operating procedures give due consideration to the health safety and welfare of employees, students and others affected by the activities of SPA so far as is reasonably practicable.
- Assist in the monitoring and review of risk assessments, local policy and guidance and consider/evaluate their effectiveness.
- Consider & evaluate the effectiveness of the SPA health and safety training strategy.
- Assist with, contribute to and monitor SPA Annual Health & Safety Action Plan.
- Consider reports and statistics relating to significant accidents / incidents and dangerous occurrences
- Consider reports (including inspections and audits) and correspondence or issues raised by trade union representatives, members of staff, the Health and Safety Manager, other relevant University Officers and enforcing authorities.



- Where appropriate set up working groups e.g. link officers, to investigate problems or specific aspects of health and safety.
- Receive relevant decisions from previous University Health and Safety Committees that may impact on SPA. I.e. via minutes presented by the Head of Sport
- Report any issues of concern to health and safety services via HSM, or cascade up salient issues to the University Health and Safety Committee if necessary.

### **Suggested model agenda**

- Apologies
- Minutes of previous meeting
- Matters arising
- **Chairs report**
  - Receive minutes from University H&S Committees
  - Annual H&S Plan Update / Review
  - In house spot checks
- **Reports from the Head of Sport**
  - Re H&S activity, matters of importance e.g. project group updates, link officers feedback, training update, new risk assessments /SOP's, incidents investigations, inspections, monitoring outcomes (via standard monitoring template\*\*)
- **Report from Health and Safety Manager**
  - Accident statistics
  - General Update – Local, corporate and general
- **Reports from LUU**
  - Re H&S issues, activity, matters of importance, new risk assessments, incidents, investigations, inspections, monitoring outcomes, club monitoring outcomes
- **Items for special consideration?**
  - For Union issues on behalf of their members and staff in general
  - For Chair & management
  - For any other “member” via the Chair
- **Items for special consideration**
- AOB
- Date of next meeting

# Safeguarding Policy



# Safeguarding Children and Vulnerable Adults Policy

The University of Leeds Sport and Physical Activity Department (SPA) is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults. We aim to provide all learners with the opportunity to maximise their learning and development within a safe and secure environment.

## Policy aim and purpose

The SPA aims to maintain the highest possible standards which meet social, moral and legal obligations to protect and safeguard the welfare of children, young people and vulnerable adults. Through promotion of this policy, the SPA will raise awareness of preventative measures to protect the interests of the SPA workforce.

## Definition of safeguarding

Safeguarding can be defined as the protection of children, young people or vulnerable adults from neglect, physical, emotional or sexual abuse. In particular, those children and young people up to the age of 18 who are unable to protect themselves from abuse or vulnerable adults aged 18 or over who are unable to take care of themselves, protect themselves from harm or prevent themselves from being exploited.

## Types of abuse

### Physical abuse

Physical abuse is deliberate, physical harm to an individual, or the wilful and neglectful failure to prevent physical harm or suffering. Types of physical abuse are inclusive of, but not limited to, hitting, throwing, shaking, burning or scalding, poisoning, drowning, suffocating. This includes physical harm caused by a parent or carer wishing to fabricate or induce the symptoms of illness.

### Emotional abuse

Emotional abuse is the persistent emotional maltreatment of an individual leading to severe and adverse effects on the individual's emotional development. Such examples of emotional abuse include making the individual feel worthless or unloved, inadequate or unvalued. Symptoms may include limitation of learning or prevention of the individual's participation to normal social interaction. Emotional abuse could also lead to extreme bullying making the individual feel frightened, in danger or lead to exploitation or corruption of the individual. Domestic violence, adult mental problems and parental substance misuse may expose the individual to emotional abuse.

### Sexual abuse

Sexual abuse involves forcing or enticing a child, young person or vulnerable adult to take part in sexual activities, whether or not they are aware of what is happening. These activities may involve physical contact (including penetrative or non-penetrative acts) or non-contact activities (including looking at or involving the individual in the production of pornographic materials, forcing the individual to watch sexual activities or encouraging them to behave in sexually inappropriate ways).

### Neglect

Neglect is the persistent failure to meet an individual's basic physical, emotional and/or psychological needs, which is likely to result in significant harm. Types of neglect may include failure to provide

adequate food, clothing, shelter (i.e. exclusion from the home or abandonment), failure to protect the individual from physical harm or danger, failure to provide access to medical care or treatment, or failure to provide adequate supervision (i.e. childminder).

## Indicators of abuse

The below table provides examples of indicators of abuse, however this list is not exhaustive.

Physical indicators	Emotional indicators
Unexplained bruising	Unexplained changes in behaviour
Repeated injuries	Difficulty in making friends
Injuries to the mouth	Distrustful to adults
Torn or bloodstained clothing	Excessive attachment to adults
Burns or scalds	Sudden drop in performance
Bites	Changes to attendance patterns
Fractures	Inappropriate behaviour or language
Inconsistent stories or excuses	Inappropriate sexual awareness

## ASA licensing requirements

All tutors/assessors utilised for the delivery and assessment of ASA qualifications must hold a current ASA license. As part of the licensing scheme, the holder will:

- Maintain current technical knowledge and skills of the intended ASA qualification(s) for delivery
- Complete a Disclosure and Barring Service (DBS) check (previously referred to as a CRB) and update this every three years
- Complete an ASA approved safeguarding and protecting children in sport course and update this every three years
- Read and understand the ASA Code of Ethics.

The SPA will:

- Utilise tutors/assessors who hold a current ASA license
- Ensure all workforce members have read and understood ASA Wavepower 2012/15
- Provide learners with access to ASA Wavepower 2012/15
- Adopt safeguarding procedures through codes of conduct for workforce members, learners and staff (also including parents and participants)
- Provide a safe environment for learners to maximise learning and development.

## Protection against false allegations

It is equally important for those individuals involved with the delivery and assessment of qualifications to take steps to ensure that they are not put in a position where an allegation of abuse can be made against them. These steps include:

- Maintaining a register at all times for learners, including lateness or absences
- Maintaining a register for participants where required for practical elements of a qualification



- Following appropriate procedures in the event of lateness or absence of a learner and/or participant
- Working in an open environment where easily visible to others
- Remaining in the pool area until all participants have been collected or are continuing to be supervised by an appropriate member of staff
- Avoiding unnecessary physical contact with learners and/or participants unless to prevent a danger to themselves or others
- Avoiding first aid treatment unless delay could prove life threatening; this must always be carried out by the responsible First Aid Officer and with another adult present
- Avoiding unaccompanied time with learners and/or participants
- Avoiding suggestive remarks or acting inappropriately familiar with learners and/or participants
- Reporting potential concerns, allegations or abuse made by learners and/or participants to the responsible Welfare Officer
- Refraining from inviting or allowing learners and/or participants to socialise with them outside of the learning environment
- Refraining from providing personal information to learners and/or participants (i.e. home address, telephone number).

## Making referrals

Should a member of SPA staff or learner at the delivery site suspect or have concerns about possible abuse, the concern must be reported to the Welfare Officer at the centre, who will in turn follow internal procedures for reporting the case to Children's Social Care Services.

Should suspicion or concern be raised about a member of the SPA workforce, the allegation must be reported immediately to the SPA Coach Education Coordinator through the completion of the *Allegations Form*. Upon receipt of the allegation, the SPA will carry out an investigation in line with the *Malpractice and Maladministration Policy*.

# Malpractice and Maladministration Policy



# Malpractice and Maladministration Policy

The University of Leeds Sport and Physical Activity Department (SPA) is committed in its service provision to offer standards of the highest quality. Working to continually achieve this benchmark assists in the maintenance of quality assurance standards and continued compliance with the General Conditions of Recognition - Ofqual 2013.

## Policy aim and purpose

The aim of this policy is to safeguard the integrity and credibility of the SPA, ensure the avoidance of malpractice and maladministration in every aspect of the delivery, development and assessment of ASA qualifications and provide a robust and transparent framework for the identification and management of malpractice and maladministration by:

- Establishing principles and standards to govern the actions of individuals connected to qualification assessment
- Establishing clear standards for dealing with malpractice and maladministration
- Reducing the possibility of malpractice and maladministration
- Providing the means to identify and resolve malpractice and maladministration

This policy applies to the University of Leeds Approved Centre and all employees of SPA involved with the development, delivery and assessment of qualifications.

## Definition of malpractice

Malpractice is defined as those deliberate or neglectful acts which undermine the integrity and validity of assessment, the certification of qualifications and/or compromise the credibility and authority of those responsible for conducting these processes.

By way of example, this may include:

- Failure to adhere to qualification and/or centre eligibility criteria
- Actions required by an External Verifier not being met within agreed timescales
- Failure to carry out delivery, assessment or internal verification in accordance with course requirements
- Failure to adhere to course learner registration and certification procedures
- Fraudulent claim for certificates
- Intentional withholding of information from the SPA which is critical to maintaining the rigour of quality assurance
- Forgery of evidence
- Plagiarism of any nature by learners
- Breach of assessment arrangements specified for accredited qualifications
- Breach of confidentiality
- Insecure storage of assessment materials
- Submission of false or inaccurate information to gain a qualification or unit(s)
- Failure to adhere to the requirements of the SPA Reasonable Adjustments and Special Considerations Policy

## Definition of maladministration

Maladministration is defined as any activity which results in non-compliance with administrative regulations and requirements. By way of example, this may include:

- Bias
- Neglect
- Incompetence
- Rudeness
- Refusal to answer reasonable questions
- Knowingly giving advice which is misleading or inadequate
- Failure to monitor compliance with adequate procedures
- Disregard of guidance to be followed in the interest of equitable treatment

## What sanctions may be applied

If malpractice or maladministration is proven by SPA to have taken place by our centre, learner or member of staff, the offender risks the application of sanction.

See appendices for the types of sanction that may be applied, individually or combined, in the event of a proven case.

## Preventing malpractice and maladministration

The SPA has established a process for investigating alleged cases that have been raised, which comprises of three stages:

- Stage 1: Notification of an alleged case of malpractice or maladministration
- Stage 2: Investigation of the allegation
- Stage 3: Management of confirmed cases of malpractice or maladministration

On all occasions when information regarding an allegation is received by SPA, it will be treated as a potential case for malpractice or maladministration until an outcome has been derived by way of investigation.

Where there are grounds to suspect malpractice or maladministration against a member of staff, that individual risks suspension of their duties and an investigation by SPA of professional misconduct.

Where there are grounds to suspect malpractice or maladministration against a learner, that learner risks failure of the unit(s), invalidation of the qualification and an investigation of professional misconduct by the awarding body, during which the issue of results will be suspended.

## Investigating and managing malpractice and maladministration

### Stage 1: Notification of a suspected case of malpractice or maladministration

SPA employees and learners must be vigilant regarding the assessment of accredited qualifications when concerning malpractice or maladministration. SPA is responsible for any matters relating to the conduct of the learner whilst undertaking the qualification. The investigation will be carried out which includes:

- Investigation of the allegation of possible malpractice or maladministration
- Notification to the individual concerned, in writing, of the nature of the allegation



- Notification of the possible consequences should the allegation be proven
- Provision of the opportunity for the individual concerned to respond, in writing, to the allegations made
- A procedure for handling an appeal against the decision and/or sanction
- Reporting of all proven cases to the awarding body at the earliest opportunity with details of the actions taken and the sanction applied

If an irregularity is discovered by the SAP after the signing of declarations of authentication, full details of the case will be submitted to the awarding body at the earliest opportunity. The matter will then be treated as a formal case of suspected malpractice.

Notification of the suspected allegation must be submitted by the learner or SPA staff, in writing, through the *Allegation Form* (appendix 1), accompanied by any supporting information for review.

Information required for review includes:

- A detailed account of the circumstances surrounding the suspicions and allegations
- Any extenuating circumstances (e.g. medical reports)
- Any unauthorised materials found during assessment
- Written statements signed and dated by any personnel involved (e.g. Tutor, External Verifier, Internal Verifier)
- Signed and dated statements by any learner involved.

Evidence, along with the completed *Allegation Form*, should be sent by post to:

Coach Education Coordinator

Sport and Physical Activity

Sports Development Office

The Edge

University of Leeds

Leeds

LS6 9JT

## **Stage 2: Review and investigation of allegation**

Once the *Allegation Form* has been received the SPA will check that the required information has been submitted, acknowledge receipt (within 3 working days) and record the details on the *Allegations Register*. In all cases the SPA will protect the identity of the informant.

Following this step the SPA Coach Education Coordinator will call upon an appropriately competent and unbiased review panel comprising of identified SPA personnel and, where appropriate, an independent member. The purpose of the review panel is to assess the suspected case, carry out an investigation to establish whether or not malpractice or maladministration has occurred and take all reasonable steps to appropriately mitigate those cases of malpractice or maladministration identified.

The review panel will provide feedback, appropriate action and resolve the investigation within 30 working days of receipt of the allegation. In some cases the investigation may take longer, for example, if a centre visit is required. In such instances all concerned parties will be advised of the revised timescale.



During the investigation the review panel may:

- Request further information from the SPA representative or learner
- Conduct interviews (face to face or by telephone) with individuals involved in the investigation

Pending the outcome of the investigation, the SPA may:

- Refuse learner registrations or entries
- Withhold the release of results or certificates
- Withhold assessment materials if the security of the assessment is considered compromised or at risk.

Any party, directly or indirectly, connected to allegations are expected to fully cooperate with all pending investigations. If the SPA, SPA representatives or learners do not co-operate as required, the SPA will have no alternative but to permanently or temporarily withdraw SPA representatives from their role or remove learners from the qualification.

The SPA reserves the right, at any time, during an investigation to suspend any claims for learner certification submitted. The SPA also reserves the right to withhold any results for the qualification(s) being pursued at the time of and during the investigation.

In cases where certificates are deemed to be invalid, the SPA will inform the ASAAB as to why they are invalid and any action to be taken for reassessment and/or certification. The SPA will notify those learners affected of the action being taken and that any certificates received concerning the investigation are invalid.

### **Stage 3: Management of confirmed cases of malpractice and maladministration**

If the investigation confirms malpractice or maladministration has taken place, the SPA will have to consider whether the integrity of its assessments and qualifications might be jeopardised and shall impose, proportionate to the severity and scope of the confirmed malpractice or maladministration, one or more sanctions, inclusive of, but not limited to, the following:

- Suspension of learner registrations and/or certifications for one or more qualifications
- Increased level of internal verification sampling
- Training for SPA staff
- Disallowing all or part of the learners internal assessment evidence
- Disallowing all or part of the learners external assessment marks
- Not issuing the learners certificate(s)
- Not accepting any further registrations for the affected learner
- Disqualification of the learner from the qualification

The allegation will be recorded on the *Allegations Register* and will be monitored by the SPA Coach Education Coordinator. All confirmed cases of malpractice or maladministration will be reviewed.

In all cases of malpractice or maladministration in relation to ASAAB the ASAAB will be informed.

While the ASAAB is investigating a case, SPA will set up a review panel containing members of staff from SPA and independent representatives. This panel will be constructed on a case by case basis. The purpose of this panel will be to support the lead investigation from the ASAAB.





## **Failure to report malpractice or maladministration**

In the event of failure to report a suspected case of malpractice or maladministration, withhold information and therefore impede a formal investigation, could result in the imposition of sanctions on SPA staff or learners. Failure to comply will prompt the withholding of results and in certain circumstances, certificates may become invalid and those already issued may be withdrawn as a result.

## **Appeals**

The SPA has established procedures for SPA staff and learners who wish to consider appealing against penalties or sanctions resulting from malpractice or maladministration. Further information on appeals may be found in the *Enquiries and Appeals Policy*.

# Internal Verification Policy



## Internal Verification Policy

Internal verification is the process through which University of Leeds Sport and Physical Activity Department (SPA) ensures that all courses / programmes are delivered in a consistent manner. It seeks to ensure that all criteria set by the awarding body are met.

SPA is committed to the effective internal verification of all learning programmes. Appropriate systems are in place with all tutors, assessors and internal verifiers receiving effective training and standardisation to ensure effective implementation. All learning programmes will be internally verified. This will include both assessment activities and assessment decisions. The frequency and quantity of internal verification will be dependent on performance. SPA will aim to IV 100% of the courses run out of the facility with a minimum of a 25% sample of the course.

The internal verifier is appointed by the SPA to undertake internal quality assurance and to ensure that course assessors apply consistent assessment practices in line with the awarding body criteria. The process may take place during or after the course and the internal verifier may attend at any point, no advance notice is required. The course organiser and course tutor are expected to co-operate fully at all times. Internal verifiers must work closely with SPA.

The internal verifier will be responsible for:

- Maintaining internal quality assurance procedures
- Ensuring that delivery and assessment policies and procedures are available and adhered to
- Ensuring the consistent application of criteria and standards
- Providing support to tutors and assessors (including identification of their development and training needs)
- Ensuring that assessors apply the appropriate assessment methods, standards and training needs
- Supporting assessors and identifying any additional training required
- Ensuring that appropriate policies and procedures are in place for appeals and complaints
- Ensure that equal opportunities is in place and operational
- Liaise fully with SPA throughout the IV process
- Provide SPA with a summary of information required by the awarding body
- Identify their own training and development needs
- Attend appropriate training sessions and workshops
- Produce a verification plan for each course
- Verify each programme or course
- Observe each newly appointed assessor at the earliest opportunity
- Observe each assessor a minimum of three times a year
- Sample assessments and discuss these with the assessors
- Maintain consistency of assessment practices
- Conduct standardisation meetings with assessors and record all contacts with the assessors
- Ensure that the centre is operating according to the awarding body requirements and regulations relating to assessment standards
- Provide SPA with copies of all records and documentation as required



## APPENDIX 1: INTERNAL VERIFICATION OF ASSESSMENT ACTIVITIES

Assessment decisions will need to be sampled by the IV prior to distribution to the learners. In addition, any changes to the accuracy of the agreed assessment activity must be authorised by the IV.

Qualification:	
Unit:	
Task:	
Criteria being targeted?	
Type of activity:	
Issue date:	
Produced by:	
Internally Verified by:	
Date:	

### Accessibility, Attractiveness and Learning Styles

	Comments
Please comment on the attractiveness of assessment activity to the learners.	
Please comment on the suitability of the language.	

	Yes/No	Comments
Overall, is the assessment activity interesting and engaging for the learners?		
Is the assessment activity ready to be used/issued?		

**Accuracy**

	Yes/No	Comments
Is the level of activity correct (is the verb the same as stated in the criteria)?		
Is the content reflective of what is specified in the unit?		
Overall, does the activity generate the evidence required to meet the assessment criteria?		

**Key strengths of the assessment activity are:**



--

**Key areas for development of the assessment activity are:**

--

**Please identify any remedial action (by who, when, what):**

--

**Has remedial action been taken?**

--

Internal Verifier Signature:

--

Date:

--



## APPENDIX 2: INTERNAL VERIFICATION OF ASSESSMENT DECISIONS

Assessment decisions made by all assessors will be sampled by the IV. Please refer to your IV schedule for timing, frequency and size. This will depend on the qualifications and experience of the assessor.

Qualification:	
Unit:	
Task:	
Assessment criteria being assessed?	
Assessor:	
Internal Verifier:	
Date of Assessment:	
Learner:	

	Yes/No	Comments
Is the evidence accurately assessed in terms of:		
Level (the verb)		
Content (the syllabus)		
Accuracy		



Is the learner's work their own?		
----------------------------------	--	--

Please add any other comments:

Internal Verifier

Signature:

Date:


Please identify any remedial action: (by who, when, what)
Review of the remedial action:





## Appendix 2: Sanctions - Learner

In the event that malpractice or maladministration is proven against a learner, that learner may incur the application of sanctions.

The severity of the sanction applied will be determined the SPA and will be in accordance with the evidence presented, proportionate with the gravity of the malpractice or maladministration and the type of qualification involved. The following sanctions may be applied individually or in combination to those learners proven to have been involved in malpractice or maladministration.

Sanction	Description
Warning	The learner is issued with a written warning that if the offence is repeated within a set period of time then further specified sanctions will be applied.
Disqualification from a unit	The learner is disqualified from further participation in the unit. The effect of this sanction is to prevent the learner from applying for certification of the full qualification, albeit those units not affected can be certificated at the learner's expense.
Disqualification from a whole qualification	The learner is disqualified from further partaking in the concerned qualification with immediate effect and further excluded from participating in any further ASA qualifications for a period of 12 months.
Learner disqualification	The learner is disqualified from entering for one or more qualifications and subsequent assessments for a set period of time. This penalty is applied in conjunction with any of the other sanctions listed, if the circumstances warrant it.

Unless a sanction is accompanied by a disqualification on future qualification entry, all learners sanctioned by disqualification may retake the unit(s) or qualification(s) affected in the next permitted assessment opportunity if the learner registration period permits. If the learner registration period expires, the learner will need to re-register in accordance with SPA and awarding body requirements.



### Appendix 3: Sanctions – ASA representatives

In the event that malpractice or maladministration is proven against an SPA member of staff, the offending individual may incur the application of sanctions. The severity of the sanction applied will be proportionate with the gravity of the malpractice or maladministration.

In determining the appropriate sanction or penalty, the SPA will consider factors including the potential risk to the integrity of the assessments, the potential impact on learners, the number of learners and/or centres affected and the potential risk to those relying on the qualification (e.g. employers or members of the public).

The following information informs the level of sanction or penalty that be imposed on an SPA member of staff where malpractice or maladministration is proven.

Sanction	Description
Written warning	Issue the member of staff with a written warning that if the offence is repeated within a set period of time, further specified sanctions will be applied.
Training	Require the member of staff to undertake specific training or mentoring within a particular period of time and undergo a review process at the end of the training.
Special conditions	Impose special conditions on the future involvement in its assessments by the member of staff. This may involve the internal assessment, the conduct, supervision or administration of its assessments.
Suspension	Bar the member of staff from all involvement in the delivery or administration of its assessments for a set period of time. Other awarding organisations and regulators will be informed when a suspension is imposed.



## Appendix 1: Allegation Form

Name of learner	
Address	
Telephone number	
Email address	

Qualification title		
Type of allegation	- Complaint against centre service(s)	Y / N
	- Appeal against assessment decision(s)	Y / N
	- Report of child/vulnerable adult abuse	Y / N
	- Report of suspected malpractice	Y / N
	- Complaints against SPA customer services	Y / N
	- Other ( <i>please specify</i> )	Y / N
Details of the allegation*		

*\*Continue on a separate sheet of paper if required*

Deceleration
I confirm that the information in this form is accurate, to the best of my knowledge, and that the centre will provide arrangements in accordance with the guidance given by the SPA.

Signature	
Date	

*Please return to Coach Education Coordinator, Sport and Physical Activity, The Edge, University of Leeds, Leeds, LS2 9JT.*

# Equality and Diversity Policy



## Equality and Diversity Policy

*Set out below is the University's Equality and Diversity Policy, which applies to staff and students alike. The Equality and Diversity Statement set out at paragraph 2 below is forwarded to all applicants for posts within the University.*

*The University has also established a separate Single Equality Scheme and Action Plan, which are available via the University website [www.equality.leeds.ac.uk/university-policies](http://www.equality.leeds.ac.uk/university-policies).*

### Why the University is Committed to Equality and Diversity

The rationale for the University's commitment to equality and diversity includes:

- an understanding of the importance of opening the University up to all sections of the community and of identifying, using and developing the skills and talents offered by members and potential members of the University, to their and the University's benefit;
- the awareness that, in addition to being illegal and immoral, discrimination is also wasteful;
- the recognition of the negative impact on individuals of the effects of discrimination in terms of educational attainment, career progression, self-fulfilment and self-esteem.

### Equality and Diversity Statement

The University of Leeds is proud to be a multi-cultural community. We value diversity, and are determined to ensure:

- that we treat all individuals fairly, with dignity and respect;
- that the opportunities we provide are open to all;
- that we provide a safe, supportive and welcoming environment – for staff, for students and for visitors.

We recognise that we still have work to do to secure a truly inclusive community, and we are committed to a wide-ranging plan of action to tackle discrimination and to promote diversity.

### Discrimination

The University will not tolerate discrimination against individuals on the basis of gender, gender identity or gender reassignment status, race, colour or ethnic or national origin, religion or equivalent belief system, disability, sexual orientation, social class, age (subject to the usual conventions on retirement), marital/civil partnership status, pregnancy/maternity or family responsibilities or as a result of any conditions or requirements that do not accord with the principles of fairness and natural justice. Further information on the University's approach to tackling discrimination - which includes guidance for staff and students and information on procedures - can be found in the University's Policy on Dignity and Mutual Respect.

### Status of the Policy

This policy forms part of the formal contract of employment for staff and part of the formal agreement between students and the University. All members of the University must abide by this policy - albeit that those in senior or managerial positions or with specific responsibilities for recruitment, selection, training, appraisal and promotion should be especially mindful of the policy - and any failure to comply could result in disciplinary proceedings.

All visitors to the University, together with those contracted to work at or for the University, will be expected to comply with this policy. This includes those with honorary contracts or 'Visitor' status, for example, members of NHS staff who teach University students and Visiting Professors and Fellows.



## Corporate and Individual Responsibilities

6. The University's corporate responsibilities under this policy, together with the responsibilities of individual members of the University, are set out below.

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### CORPORATE RESPONSIBILITY

Responsibility for ensuring that the University meets its legal obligations in respect of legislation relating to equality and diversity rests with the University Council. In practice, however, the management of these obligations is delegated to University officers - and in particular to the Director of Human Resources and the Head of the Equality Service - and to committees, especially the Equality and Diversity Committee.

Nonetheless the University is responsible as a corporate entity for putting into place mechanisms and procedures - and for encouraging a culture and environment - that accords with its statutory obligations and commitment to equality of opportunity. In furtherance of this responsibility it has - in addition to establishing this policy:

- **drawn up a Single Equality Scheme setting out actions to be taken in respect of its obligations under current equalities legislation.**
- **established an associated Policy on Dignity and Mutual Respect;**
- **established a Diversity Action Plan (part of the Single Equality Scheme), which identifies a range of actions for implementation during 2009 -2012 (in the first instance).**

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### DEANS OF FACULTY AND HEADS OF SCHOOL/SERVICE

Deans of faculty and heads of school/service are accountable to the University Council for ensuring compliance with the Equality and Diversity Policy within their own areas but may, however, delegate responsibility for this matter to heads of academic sub-units where this is appropriate.

Specifically - *and in addition to their responsibilities as individual members of the University* - deans of faculty and heads of school/service (or academic sub-unit, where appropriate) are responsible for:

- fostering an environment in which compliance with this policy is regarded as integral to the work of the resource centre or department;
- ensuring - as part of the development of this environment - the production and implementation of faculty Diversity Plans;
- giving serious consideration to complaints of harassment or discrimination.

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### RESPONSIBILITIES OF INDIVIDUAL MEMBERS OF THE UNIVERSITY

In order to ensure that the Equality and Diversity Policy is put into practice, individual members of the University:

- should seek actively to promote equality of opportunity for others and strive to create an environment in which academic goals may be pursued without fear or intimidation;
- must not discriminate unfairly in the way they provide or procure services on behalf of the University;



- must not discriminate unfairly if involved in the recruitment, promotion and management of staff or in the selection and supervision of students;
- must neither practice unfair discrimination or harassment nor encourage other staff or students to do so;
- must not victimise any person who has complained of harassment or unfair discrimination, or who has given information in connection with such a complaint.

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## CORPORATE SUPPORT

Corporate support for the University's commitment to equality of opportunity is provided, *inter alia*, by the following.

- The Head of the University's Equality Service and the staff of that service have responsibilities for developing equality and diversity strategies, policies and procedures; for providing practical help and advice to ensure that they are effectively implemented and to ensure 'reasonable adjustment' in the work and study environments; and for delivering change initiatives.
- The University requires chairs of Appointing and Promotions Committees to attend training in equality and diversity principles.
- The University has established an Equality and Diversity Committee to monitor the way in which its policies are put into practice and to recommend improvements. Data, conclusions and recommendations arising from monitoring exercises, for example, those required as part of the University's specific duties under equalities legislation, together with the outcome of any impact assessments, will be reported to the University's Equality Committee (which in turn reports to Council) and to other committees as appropriate. Furthermore, individuals may draw to the attention of the Committee any matters of policy or general principle by addressing them to the Secretary, Equality and Diversity Committee, Equality Service, Social Sciences Building.

# Conflict of Interest Policy





# Conflict of Interest Policy

One of the aims of the University of Leeds Sport and Physical Activity Department (SPA) is to verify that learners have been assessed fairly and accurately, confirm that they have completed the necessary combination of units and certificate those qualifications achieved.

As a service provider, the SPA is committed to ensuring those individuals engaged with any activity concerning the delivery and assessment of accredited qualifications do so confidentially, honestly, fairly and with integrity, objectivity, due skill, care and diligence.

## Policy aim and purpose

This policy has been established to safeguard the integrity and credibility of SPA services and functions. It provides a robust and transparent framework for identification and management procedures, this policy will:

- Draw attention to potential conflict of interest situations
- Establish principles and standards to govern the actions of individuals connected to the SPA
- Establish clear standards for dealing with real, perceived or potential conflicts of interest
- Reduce the possibility of professional and personal conflicts of interest in relation to SPA activities
- Provide the means to identify and resolve conflicts of interest in favour of public interest

Not attempting to highlight every situation where a conflict of interest might arise, this policy has been designed as a general policy and reference point that is relevant to a rapidly changing social environment.

This policy applies to all SPA staff and other individuals that interact or potentially interact with the Coach Education Programme.

## Definition of conflict of interest

A conflict of interest is a situation in which an individual, in a position of trust, has a direct or indirect, professional or personal interests or loyalties. This includes financial interest, however those interests that are not financial are just as important. Friendship, membership of an association, society, trusteeship and many other kinds of relationships can sometimes influence judgments and give an impression that personal motives are involved. Therefore such competing interests could make it difficult for individuals to fulfil their duties as it may:

- Impair objectivity, or
- Create an unfair advantage for any person or organisation



## Identification of conflicts

### Register of identified conflicts -

All individuals are entitled to manage their own affairs in privacy; however when those affairs give rise to actual or potential detriment to the SPA Coach Education Programme, attention should be drawn to it.

Affected persons must subscribe to the *Conflict of Interest Register*, monitored by the SPA Coach Education Coordinator, declaring any interest, whether direct or indirect, which may have or is expected to have an impact upon activities.

By way of example, this may include situations where the affected person:

- Is likely to make a financial gain or avoid a financial loss at the expense of a customer
- Has an interest in the outcome of a service provided to a customer or carried out on behalf of a customer
- Has a financial or other incentive to favour the interest of any customer over the interests of another customer
- Is employed by the same business as a customer
- Has received or will receive from a person other than a customer, an incentive in relation to a service provided to a customer in the form of monies, goods or services.

## Declaration of conflicts

Affected persons engaged with the delivery and assessment of SPA Coach Education Programme must declare any interests, whether direct or indirect, which may conflict with the interests of the SPA. This must be done as soon as practicably possible.

Information for declaration must include:

- The type of interest
- The nature of the interest
- A description of all parties involved in the interest (financial or non-financial) and any other relevant information

The conflict of interest must be declared immediately prior to engaging with any activity relating to the delivery or assessment of SPA Coach Education Courses.

## Management of conflicts

Upon review of the declaration and any relevant supporting information, it shall be determined whether the affected person has an actual, potential or apparent conflict of interest. Specifically for positive resolution and management, appropriate action may be required. This is inclusive of, but not limited to, the following:

- Written and, in some cases, oral disclosure of the conflict to other participants involved with the activity
- Recusal from participating in voting or decision making of the affected activity and limitation of participation only to the provision of factual information of benefit to the activity



- Restriction of access to particular information
- Complete recusal from a portion of a meeting
- Transfer of the affected person to a non-conflicting activity
- Rearrangement of the affected persons responsibilities
- Replacement of the affected person in the conflicting activity

Completion of the *Conflict of Interest Declaration* does not constitute a resolution to the situation, therefore additional measures to resolve or manage the conflict will be considered. Once a conflict of interest is fully disclosed to the relevant parties, the possible influence of the conflict will be evaluated and if necessary further action may be applied.

The decision to declare a conflict of interest must be based on whether it is likely to be perceived, in any way, as having the ability to influence an individual or outcome. The responsibility for declaring a conflict of interest (perceived or actual) rests with the affected person, therefore, if there is any doubt as to whether there is a conflict of interest, this should still be declared. The SPA staff, if approached, may only offer advice and guidance; there is no duty upon the SPA staff to advise individuals who are in doubt as to their position or to warn individuals who may be putting themselves at risk.

## Confidentiality

The affected person may acquire, during the course of involvement, information which is not public knowledge and is confidential. It is a grave betrayal of trust to use such confidential information irresponsibly or for personal advantage of the affected person, or anybody known by the affected person. Therefore the affected person must not:

- Divulge any confidential information which has been communicated to, produced or acquired by the affected person
- Divulge any confidential information acquired to any person not authorised by the SPA
- Benefit directly or indirectly from revealing confidential information to any person not authorised by the SPA
- Use any confidential information in any personal undertaking



## Appendix 1: Conflict of Interest Declaration

This form is to be completed by all individuals engaging with the development, delivery or award of ASA accredited qualifications or any other SPA service. Individuals must declare any professional or personal interests, whether direct or indirect, or loyalties that may conflict with the interests of the SPA. If there is no known conflict of interest, this must also be declared.

Full name	
Address	
Telephone number	
Email address	

Information for declaration must include:

- The type of interest
- The nature of the interest
- A description of all parties involved in the interest (financial or non-financial) and any other relevant information

Declaration*

The information you provide will be treated confidentially and will be respected as far as possible with information shared only on a need to know basis.

I acknowledge that the above interests exist and that I will inform the SPA in the event that there is any change in my circumstances.

Signature	
Date	

*Please return to Coach Education Coordinator, Sport and Physical Activity, The Edge, University of Leeds, Leeds, LS2 9JT.*



## Appendix 2: Conflict of Interest: Change in Circumstance

Individuals remain under a continuing obligation to declare conflicts of interest as they arise. Therefore should circumstances change after completion of the initial declaration, or new situations arise, all information must promptly be disclosed to the SPA.

Full name	
Address	
Telephone number	
Email address	

Information for declaration must include:

- The type of interest
- The nature of the interest
- A description of all parties involved in the interest (financial or non-financial) and any other relevant information

Declaration*

The information you provide will be treated confidentially and will be respected as far as possible with information shared only on a need to know basis.

I acknowledge that the above interests exist and that I will inform the SPA in the event that there is any change in my circumstances.

Signature	
Date	

*Please return to Coach Education Coordinator, Sport and Physical Activity, The Edge, University of Leeds, Leeds, LS2 9JT.*

# Recognition of Prior Learning Policy



# Recognition of Prior Learning (RPL) Policy

## Aim

The RPL is a process that recognises the existence of previously obtained knowledge, understanding or skills that can meet the assessment requirements for a specific unit without the need to undertake formal training

## Function

1. Identifies what the candidate knows and can do
2. Compares the candidates knowledge and skills against the unit standard
3. Assesses the candidate against the requirements of the unit
4. If applicable credits the candidate

## Process

1. The candidate informs the assessor what skills/knowledge they wish to be evaluated
2. An agreed level of outcome is set
3. The candidate submits a Portfolio of Evidence
4. The assessor evaluates the portfolio and the candidate's competence
5. The assessor makes a recommendation and a subsequent level of credit that is applicable on the evidence
6. The assessor produces a written recommendation on whether the candidate should be given credits / qualification

## Methods of Assessment

- Interviews
- Portfolios
- Tests, exams, projects
- Site visits
- Demonstrations of learned outcomes that underpin a specific set of skills
- Submission of assignments / projects

## Responsibility

It is the responsibility of the candidate to provide evidence of competence acquired through previous learning. Any claim must be submitted against a whole unit or whole units, partial completion will not be accepted or credited. To obtain RPL recognition the candidate must contact the Coach Education Coordinator, Ben Witz, who will liaise accordingly with the tutor to assess according to the methods outlined above.

## Appeals

Any candidate wishing to appeal against the assessment must follow the process detailed in the 'Procedure for Appeal' policy. The award of credits through RPL has no bearing on the fee charged for the relevant course which remains as published.

# Enquiries and Appeals Policy



# Enquiries and Appeals Policy

The University of Leeds Sport and Physical Activity Department (SPA) is committed in its service provision to offer standards of the highest quality. Working to continually achieve this benchmark assists in the maintenance of quality assurance standards and compliance with regulatory requirements. The SPA aims to ensure that all assessment decisions are fair, consistent and based on valid judgements, however acknowledges that there may be occasions where the training provider or learner wish to question a decision made.

## Policy aim and purpose

The SPA will ensure:

- Assessments are conducted by staff that have the appropriate qualifications, knowledge, understanding and skills
- Assessment evidence produced by learners has been authenticated according to the requirements of the qualification
- The consistency of assessments is secured through internal and external verification

Everyone has the right to appeal; therefore this policy has been established to define the stages of appeal and the procedures to follow. The policy aims to provide guidance on:

- The method by which an enquiry or appeal should be made
- Who the enquiry or appeal should be directed to
- The timeframes for an enquiry or appeal
- The SPA will accept appeals in relation to the following areas:
  - Appeals against results
  - Appeals against the outcome of an investigation of malpractice or maladministration
  - Appeals against decisions made in relation to access arrangements or special consideration.
- Learners wishing to appeal against results must follow the internal appeals process through the SPA

## Stage 1: Enquiry

Should a learner be dissatisfied with an assessment result and has reason to suspect that they may not be accurate; the individual should submit a written request for the case to be reviewed.

When submitting a request, the individual must ensure the following information (depending on the nature of the enquiry) is provided:

- Learner name
- Title of qualification or unit(s) and date of assessment
- Date evidence submitted for internal and/or external verification
- Nature of the enquiry
- All original copies of evidence relating to the enquiry

## Enquiries regarding assessment decisions

If a learner wishes to contest an assessment result, the learner may apply to the SPA for a second opinion. This must be requested in writing and within 28 calendar days of results notification. A fee of up to £100 will be chargeable, upon which the SPA will appoint an independent verifier to review the evidence submitted. A report will be produced detailing the findings and whether the original decision is upheld.



The SPA is not obliged to disclose any information that is deemed to be in breach of confidentiality or any other legal duty.

Fees: If after an enquiry the original decision is upheld, all fees will be charged to the learner. If the original decision is overruled then all charges made will be refunded.

## Stage 2: Appeal

If the learner remains dissatisfied after receiving the outcome of the enquiry, they can pursue a stage 2 appeal against the decision. All appeals must be made in writing and within 14 calendar days of receipt of the enquiry outcome. A fee of up to £120 will be chargeable for the appeal process.

Appeals will only be accepted directly from learner.

In the event that a learner exhausts the SPA internal appeals process and still remains dissatisfied with the outcome, they are eligible to report details of their appeal directly to the ASAAB.

Examples of appeals against a centre may include:

- Inappropriate recruitment decisions made without the consideration of equal opportunities
- Poor handling of a previous appeal
- Poor delivery of learning outcomes in association with the assessment criteria
- Inadequate assessment process
- Poor organisation of assessment
- Poor appraisal of assessment
- Unfair treatment during assessment

## Procedure for making an appeal

The learner must register an appeal in writing through completion of the *Allegation Form* (appendix 1) within 14 calendar days of receipt of the enquiry outcome. Acknowledgement of the allegation will be communicated by the SPA Coach Education Coordinator in writing within 3 working days of receipt. Details of the allegation will be recorded on the *Allegation Register* and will be monitored. The information provided must clearly set out the grounds for appeal and include all supporting evidence.

## Panel investigation

Upon receipt of the appeal, the Coach Education Coordinator will establish an appeals panel which consists of three to four individuals, whom of which will be competent of acting on the panel, have no personal interest in the outcome of the appeal and consist of one independent member .

The panel will conduct a re-examination of all available documentation, evidence, comments and reports, including the inspection of the initial enquiry for accuracy. In reaching a decision, the panel will consider whether the procedures applied were consistent, properly and fairly applied.

A letter summarising the results of the appeal will be sent to the appellant within 28 calendar days of receipt of the *Allegation Form*. In the event that the panel is unable to complete its investigations and determine an outcome within the 28 days, the learner will be advised of the extent of any delay.

If after an appeal the original decision is upheld, all fees will be charged to the learner. If the original decision is overruled then all charges made will be refunded. This completes the appeal process.



### **Stage 3: ASA Appeal** (ASA courses only)

If, following the outcome of an appeal, the individual still remains dissatisfied with the decision, they shall then be directed to appeal through the ASA. Please see the ASA Enquiries and Appeals Policy to find out more details about this process, this policy is available at;

[www.swimming.org/asa/teaching-and-coaching/centre-information/](http://www.swimming.org/asa/teaching-and-coaching/centre-information/)

Please note: The appeals process is not directly concerned with making judgements about the quality of a learners work as this is the responsibility of the Assessor and Internal Verifier. Appeals do not normally involve further re-marking or re-validation of work unless the initial appeals investigation suggests that procedures were not followed during the enquiry stage.

### **Appeals procedure**

Where the outcome of an appeal leads the SPA to discover a failure in its assessment process affecting the accuracy of results, the SPA will identify any other learner who may have been affected, recall and re-evaluate those assessments concerned. The SPA will in turn review its processes to ensure the identified error has minimal risk for reoccurrence.

# Reasonable Adjustment and Special Consideration Policy

# Reasonable Adjustment and Special Consideration Policy

The University of Leeds Sport and Physical Activity Department (SPA) endeavours to make sure that there are no unnecessary barriers to qualification assessment by ensuring that the requirements and methods used are flexible enough to enable the widest range of learner access to qualifications, as well as fairly and reliably demonstrate their competence for attainment.

## Policy aim and purpose

This policy has been established to facilitate access to assessments and qualifications for learners who are eligible for adjustments in a range of assessments. Adjustments are set out in two categories:

**Reasonable adjustment:** This is implemented prior to the start of a qualification where a learner is deemed to be at a significant disadvantage to another learner due to disability. Any adjustment is not intended to give the learner an unfair advantage, but to provide all learners with access to a level playing field in which to demonstrate their skills, knowledge and understanding to the levels of attainment required by the specification of the qualification, without compromising the qualification assessment criteria or outcomes.

**Special consideration:** This may be given following an assessment to ensure that a learner with a temporary illness, injury or indisposition at the time of assessment is given some recognition of the difficulty they have faced, which has affected the learner's ability to take the assessment or demonstrate his or her attainment in an assessment. Clearly, any special consideration granted cannot take away the difficulty the learner has faced and can only be a relatively minor adjustment to ensure that the integrity of the standard is not compromised. There will be instances when a learner is either too unwell or distressed to cope with an assessment and this needs to be taken into consideration.

In establishing the appropriate support provision, the SPA aims to ensure appropriate arrangements, implemented as a result of reasonable adjustment or special consideration, are applied accurately and effectively to allow learners to demonstrate their skills, knowledge and understanding to achieve assessment criteria, and ultimately the qualification pursued.

Therefore, this policy aims to:

- Describe the practice for dealing with identification, justification and recording of data
- Identify individual roles and responsibilities
- Explain how to manage those reasonable adjustments or special consideration implemented in accordance with Equalities Law.

## Recruitment

It is vital that SPA recruit with integrity onto accredited qualifications, whilst ensuring learners are provided with accurate information and the correct advice for the qualification they have chosen to pursue. The recruitment process should include the assessment and identification of the learner's potential to successfully achieve their chosen qualification. Such assessment must identify, where appropriate, the support that will be made available to the learner to facilitate access to the assessment.



Where the recruitment process identifies that the learner may not be able to demonstrate attainment, thus gain achievement in parts of assessment, this must be communicated to the learner clearly from the onset. A learner may still decide to proceed with pursuing a qualification and not be entered for all or part of the assessment.

SPA try to ensure learners are aware of:

- The range of options available, including any access arrangements that may be necessary, to enable the demonstration of assessment criteria attainment
- Any restrictions on progression routes to the learner as a result of not achieving all or part of the qualification.

## Reasonable adjustment

All possible, practical steps will be taken to apply reasonable adjustments and promote equality of access for learners who are placed at a 'substantial disadvantage' in comparison to other learners without a disability or difficulty. Where applied, these arrangements must not affect the reliability or validity of assessment criteria and outcomes, nor will they give the learner an unfair assessment advantage over other learners undertaking the same or similar qualifications. By way of example, arrangements permissible are inclusive of, but not limited to, the following:

- Modifying assessment materials, such as large font
- Providing appropriate assistance during assessment, such as a Scribe, Reader, Practical Assistant or Interpreter
- Using assistive technology, mechanical and electronic aids, such as computer software which scans but does not encode or interpret assessment questions
- Alternative ways of presenting responses, such as word processor
- Allowing for extra time for completion of assessed work.

## Eligibility and application of reasonable adjustments

A learner does not have to be disabled to qualify for a reasonable adjustment, nor will every learner who is disabled be entitled to reasonable adjustment. Allowing the application of a reasonable adjustment is dependent on how it will facilitate a learner's access to assessment. Reasonable adjustments may take on a number of forms, however may only be granted where adjustment does not:

- Affect the validity or reliability of the assessment
- Give the learner in question an unfair advantage over other learners taking the same or similar assessments
- Influence the final outcome of the assessment decision.

Reasonable adjustments will be applied in a clear, transparent and unbiased manner. All reasonable adjustments made will be recorded by SPA.

All reasonable adjustments are subject to meeting the requirements of the appropriate specification and assessment criteria for the qualifications.



## Assessing achievement

Where reasonable adjustments are applied, centres must ensure achievement is given only for the skills demonstrated by the learner and that the reasonable adjustment applied does not compromise the outcomes of the assessment (as identified within eligibility and application of reasonable adjustments). Where reasonable adjustments are applied, the centre is required to evaluate the outcomes on behalf of the learner via completion of the evaluation section of the *Reasonable Adjustments Notification* and retain within the appropriate learners file.

In the event a learner is not satisfied with the access arrangements made by the SPA, the concern should be reported to the centre and ensure it is reported formally to the awarding body.

## Special Education Needs (SEN)

A statement of SEN does not automatically qualify the learner for a reasonable adjustment as:

- The SEN statement may not contain a recent assessment of needs
- The reasonable adjustment may compromise assessment

## Synopsis of Reasonable Adjustments

Type of need	Learners special needs	Reasonable adjustment
Sensory and physical needs	Visual impairment	OCR scanners Low vision aid Prompter Reader
		Large print Modified enlarged format A4-A3 Modified language Tactile diagrams Voice activated computer
		Prompter Colour naming
	Hearing impairment	BSL Communicator Live speaker
		Amplification equipment Coloured overlays Transcriber (transcript of tape)
		Additional tapes / CD / DVD Speech / screen reading software
	Physical disabilities (e.g. dyspraxia)	Practical Assistant Reader Scribe Voice activated software Word processor
Illness / injury / medical	Coursework extension Enable a competent person to conduct the demonstration	
Psychological	Alternative accommodation/venue	
Communication and foreign language needs	First language is not English but is Irish (or Gaelige) or Welsh	Provision of qualification specifications and assessment materials in Welsh / Irish.
Cognition and learning needs	Dyslexia	Photocopy onto coloured paper Word processor
	Learning difficulties	Reader Prompter
	Handwriting difficult to decipher	Transcriber Word processor



The following assistive personnel and equipment may be used in the application of reasonable adjustments provided by the centre:

Communicator	A Communicator may be used to interpret learners responses in British Sign Language (BSL).
Practical Assistant	A Practical Assistant may be used to undertake practical tasks at the instruction of the learner during the assessment.
Prompter	A Prompter may be used with learners who have little or no sense of time, to draw their attention back to the assessment task.
Reader	A Reader may be used to read all, part or only certain words of the assessment material, as requested by the learner, as well as read the learners written response.
Scribe	A Scribe may be used to write down or type the learner's answers exactly as spoken during the assessment.
Transcriber	A Transcriber may be used to produce a transcript after completion of assessment, to assist the Assessor in the assessment of learner work where handwriting is illegible or responses are in Braille/BSL.
Word processor	A word processor may be used by learners whose disability impairs their handwriting or if it illegible. Work must be signed by the learner, completed and printed within the deadline set.

All assistive equipment and personnel used are required to be contained within the reasonable adjustments framework for the best interests of the learner and to prevent disadvantaging others who are not affected by any difficulties or particular needs. Deliberate exploitation of reasonable adjustments to affect the assessment outcome or enable the learner to unfairly achieve the qualification constitutes malpractice and an investigation will be conducted.

## Special considerations

Any special consideration granted cannot remove the difficulty experienced by the learner at the time of assessment and can only be a relatively small adjustment to ensure the integrity of the assessment is not compromised.

Learners who have fully prepared for the assessment and successfully completed the whole qualification, but whose performance during assessment is affected by adverse circumstances outside of their control, will be eligible for special consideration.

It is important to note that it may not be possible to apply for special consideration in instances where:

- Assessment requires the demonstration of practical competence
- Criteria have to be met fully
- Units/qualifications confer license to practice.

A special consideration must not give the learner an unfair advantage, nor must its use cause the user of a certificate to be misled regarding a learner's achievement. The learner's result must reflect real achievement in assessment and not potential ability. To this end, special consideration can only be a small post-assessment adjustment to the outcome result.

Responsibility for approving special considerations lies with the awarding body. The decision made will be based on various factors, which will vary from learner to learner, and from one subject to another. These factors may include the severity of the circumstances, the date of assessment, and the nature of the assessment.

## Eligibility and application of special consideration

A learner who is fully prepared and present for a scheduled assessment may be eligible for special consideration if:

- The learner's performance in an assessment is affected by adverse circumstances beyond the learner's control (e.g. injury, recent temporary illness, accident, bereavement, serious disturbance at the time of the assessment)
- The learner missed a component of the assessment or was not present at the time of the assessment and has been disadvantaged due to circumstances beyond their control
- Accidental events related to the organisation of the assessment or the provision of access arrangements affected the learner's performance
- Alternative arrangements agreed prior to assessment proved inappropriate or inadequate
- Sufficient differentiation is shown between the parts of assessment to which the special consideration was applied, and other parts of the qualification which have been achieved, to conclude that the learner could have performed more successfully during the assessment.

Learners will not be eligible for special consideration if:

- A component of the assessment is missed due to personal arrangements, including holidays or unauthorised absence
- All components of the assessment were missed without a viable reason
- The learner fails to request access arrangements on time
- Preparation for a component is affected by difficulties during the qualification (e.g. disturbances through building work, permanent illness/disability, lack of proper facilities, changes in or shortages of staff, or industrial disputes)
- The application for special consideration is submitted without the relevant evidence to demonstrate that the learner's performance has been affected at the time of the assessment by a particular condition.

The following are examples of circumstances that may be eligible for special consideration (this is not exhaustive):

- Terminal illness of the learner
- Terminal illness of a parent
- Recent bereavement of a member of immediate family
- Serious and disruptive domestic crises leading to acute anxiety about the family
- Incapacitating illness of the learner
- Severe car accident
- Recent traumatic experience such as death of a close friend or distant relative
- Flare up of severe congenital conditions such as epilepsy, diabetes, severe asthma attack
- Recent domestic crises
- Recent physical assault trauma
- Broken limb on the mend.



Unlike reasonable adjustments, there are no circumstances whereby a centre can apply its own special consideration. Applications must be made directly to the ASAAB.

### **Requesting special consideration**

The learner must explain their situation to SPA Coach Education Coordinator who will then be able to put the case forward to the awarding body.

### **Monitoring of access arrangements**

In responding to requests for reasonable adjustments or special consideration, we aim to ensure that the arrangements made will be valid, reliable and applied to accurately reflect the learner's competence to meet qualification assessment outcomes. On this basis, we will continually monitor the application of access arrangements to verify learners are not given an unfair advantage over learners without particular needs.

In accordance with our continual strive for quality development, the SPA monitors and evaluates the effectiveness of our access arrangements procedure annually to ensure that the requirements of current legislation and learners particular needs are met.



## Appendix 1: Allegation Form

Name of learner	
Address	
Telephone number	
Email address	

Qualification title		
Type of allegation	- Complaint against centre service(s)	Y / N
	- Appeal against assessment decision(s)	Y / N
	- Report of child/vulnerable adult abuse	Y / N
	- Report of suspected malpractice	Y / N
	- Complaints against SPA customer services	Y / N
	- Other ( <i>please specify</i> )	Y / N
Details of the allegation*		

Deceleration
I confirm that the information in this form is accurate, to the best of my knowledge, and that the centre will provide arrangements in accordance with the guidance given by the SPA.

Signature	
Date	

Please return to Coach Education Coordinator, Sport and Physical Activity, The Edge, University of Leeds, Leeds, LS2 9JT.

# Whistle Blowing Policy



# Whistle Blowing Policy

The University of Leeds Sport & Physical Activity whistle blowing policy is in-line with the [University Of Leeds Whistle Blowing Code Of Practice](#).

Definitions:

**Whistle Blowing** has been defined as the disclosure of some information which relates to some danger, fraud or unethical conduct related to the workplace be it of the employer or employees.

With regards to the Coach Education programme this can also be related to tutors, assessors, internal verifiers, external verifiers and candidates.

The Public Interest Disclosure Act 1998 encourages employees to raise such concerns internally in the first instance, and regulates the situations in which they may raise the matter externally (see below). Among other things, the Act defines the type of 'qualifying disclosure' covered by the Act as one which is made in 'good faith', in the reasonable belief that the allegation is substantially true, and which has not been made for personal gain.

## What type of incident or behaviour is covered?

Although this list is not exhaustive, instances of serious malpractice or impropriety might include:

- Criminal activity
- Financial malpractice or fraud, and non-financial maladministration or other impropriety
- Failure to comply with legal obligations, or with those of the University's constitution
- Danger to health, safety and the environment
- Professional malpractice
- Improper conduct or unethical behaviour
- Sexual or racial harassment or work-place bullying
- Abuse or misuse of University property
- Attempts to conceal any of the above

The whistle blowing policy is in place to prevent those making an allegation from becoming victimised; therefore all information is kept confidential unless disclosure of this information is deemed necessary to carry out a full investigation. There is opportunity for anonymous disclosures.

## Procedure

Initial concerns need to be made to the Coach Education Coordinator in the form of a written report on the attached form. A full and fair investigation will be taken within the Sport and Physical Activity department and dependent upon the allegation, across the whole University. A further review can be carried out if the individual making the allegation is not satisfied with the initial decision. If the whistle-blowers concern has substance to it further appropriate action will be taken in-line with the University disciplinary procedure.



### Whistle Blowing Report Form

<b>Course Title:</b>	
<b>Name:</b>	
<b>Name of individual reporting against:</b>	
<b>Incident details:</b>	
<b>Signed:</b>	<b>Date:</b>

# Plagiarism Policy





# Plagiarism Policy

The University of Leeds Sport & Physical Activity department plagiarism policy is in-line with the [University of Leeds Cheating, Plagiarism, Fraudulent or Fabricated Coursework and Malpractice in University Examinations and Assessments Policy and Procedures](#) across all Coach Education courses.

## Definitions:

**Plagiarism** is defined as presenting someone else's work, in whole or in part, as your own. Work means any intellectual output, and typically includes text, data, images, sound or performance.

**Cheating** in University Examinations occurs when a candidate transgresses any of the following University rule governing the conduct of University Examinations. Specifically, candidates shall not, intentionally or otherwise:

- Introduce unauthorised items into the examination room, e.g. notes (however so recorded), or other unauthorised material (including blank paper), mobile telephones or pagers, portable or laptop computers or other electronic devices (NB – this list is not exhaustive);
- Copy from other candidates or from notes;
- Access or copy from sources of information (except as allowed by the Examiners or the Head of Exams) or annotate or mark this authorised information (except as authorised by the Examiners);
- Disobey the regulations relating to the use of calculators;
- Communicate in any way with other candidates or person(s) except the invigilators;
- Remove script books (blank or otherwise) from the examination room.

**Procedure:** if a candidate has been suspected of cheating or plagiarism during Coach Education courses at the University of Leeds the following action points will be taken to ensure a thorough and fair investigation into the allegations:

- A written report of the incident/allegation would be submitted and recorded (see attached form)
- The Coach Education Coordinator would be informed of the allegation
- Consultation will be made between the Coach Education Coordinator, tutor, assessor, IV, EV and Governing Body or company overseeing the specific course
- The following documentation will support as evidence: a report of this consultation and copy of the questions paper or work.

**Penalty:** if the candidate is found to have cheated or plagiarised they will not pass the course and will not be allowed to resubmit this work or retake the examination at a later date.



**Plagiarism, Fraudulent or Malpractice Report Form**

<b>Course Title:</b>	
<b>Name:</b>	
<b>Candidate Name:</b>	
<b>Incident details:</b>	
<b>Signed:</b>	<b>Date:</b>

# Recruitment and Selection Policy



## Recruitment and Selection Policy

It is vital that Sport and Physical Activity recruit with integrity onto accredited qualifications, whilst ensuring learners are provided with accurate information and the correct advice for the qualification they have chosen to peruse. The recruitment and selection process should include the assessment and identification of the learners' potential to successfully achieve their chosen qualification. Such assessment must identify, where appropriate, the support that will be made available to the learner to facilitate access to the assessment.

Where the recruitment process identifies that the learner may not be able to demonstrate attainment, thus gain achievement in parts of assessment, this must be communicated to the learner clearly from the onset. A learner may still decide to proceed with perusing a qualification and not be entered for all or part of the assessment.

Sport and Physical Activity try to ensure learners are aware of:

- The range of options available, including any access arrangements that may be necessary, to enable the demonstration of assessment criteria attainment
- Any restrictions on progression routes to the learner as a result of not achieving all or part of the qualification

## Monitoring and review

These policies and procedures will be reviewed annually to ensure that they remain fit for purpose.

The next policy review will take place in August 2019.