



# **Pearson HE Conflict of Interest in Assessment Policy**

Reviewed by: **Dr Mark Smithers - Dean & Group Director for Higher Education**

Document owner: **HE Quality & Standards**

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Approval Committee: **Higher Education Committee**

## **Policy Statement**

1.1 New City College is committed to ensuring that assessment and internal quality assurance is free from conflicts of interest that could adversely affect judgement or objectivity and possibly advantage or disadvantage a student.

## **2. Scope**

2.1 The policy covers all staff working on behalf of the College. It is essential that every member of staff follows the Conflict of Interest in Assessment Policy. All relevant staff employed by the College have a responsibility to be aware of the potential for a conflict of interest.

## **3. Definition of Conflict of Interest**

3.1 A conflict of interest is a situation in which a tutor, assessor, or internal verifier has competing interests or loyalties, for example, where someone works for or carries out work on behalf of the College who has friends or relatives taking assessments or examinations. This could potentially compromise or appear to compromise their decision(s).

## **4. Key Points**

4.1 It is the responsibility of each individual to recognise and disclose any situation which may have a conflict of interest, or might be perceived by others to have a conflict.

4.2 Where there is a potential conflict or actual conflict of interest the individual should in the first instance report the matter to the Group Curriculum Director. If deemed appropriate a "Conflict of Interest in Assessment" form should be completed (see Appendix1).

4.3 Prior to each examination series all staff and other individuals are required to inform the College of any candidates being entered for examinations and other assessments, who are family members, other relatives or friends.

**5. Appendix 1                      Conflict of Interest in Assessment Form**

This document is to be completed in discussion by all relevant parties.

The completed form should be retained by the Group Curriculum Director (GCD) and a copy forwarded to the Group Deputy Director: HE

<b>Student Name:</b>	
<b>Programme Title:</b>	
<b>Assessor Name:</b>	
<b>IV Name:</b>	
<b>GCD Name:</b>	

**What is the conflict of interest that may advantage/disadvantage the student?**

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**How will this conflict of interest be managed?**

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<b>Student signature</b>		<b>Date</b>	
<b>Assessor signature</b>		<b>Date</b>	
<b>IV signature</b>		<b>Date</b>	
<b>Group Curriculum Director signature</b>		<b>Date</b>	

