Hull York Medical School

Code of Practice on Assessment and Evaluation for MB BS

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Definition of terms and abbreviations

The following terms may be used by Hull York Medical School to describe the assessment and examination process:

- “Formative assessment” refers to assessment that is informal and dynamic. It is primarily for the benefit of the student’s learning, not the institution’s need to track progress. Formative assessments are opportunities for learning rather than tests that must be passed in order to progress or achieve a Degree award.

- “Summative assessment” is the formal assessment upon which decisions about progression are made.

- “First Attempt” refers to the first attempt at an assessment.

- “Second attempt” refers to a reassessment following an unsuccessful first attempt, which may be allowed after a first attempt or upon returning to a Programme following a successful appeal.

- “New first attempt” refers to a reassessment that is treated as a new first assessment and granted by Board of Examiners in the light of Exceptional Circumstances or Board of Studies in exceptional circumstances. Where a new first attempt is offered and accepted, the previous attempt will become void.

- “Failure to progress” occurs when a student does not meet the criteria for progression. This will result when a student has failed one or more assessments, including reassessments, and therefore not demonstrated the necessary knowledge and/or skills to progress to the next stage or the award of the final exit qualification.

- “Suspension” may occur when academic misconduct of a student or other serious inappropriate professional behaviour has taken place, or a student poses a risk to patients or colleagues.

- “Termination of studies” occurs when, following due process (including appeal if requested), academic standards have not been achieved or academic misconduct of a student or other serious inappropriate professional behaviour has taken place, or a student has been found to be suffering from a disability, illness, or other health impairment which poses a long-term risk to patients or colleagues.

Abbreviations:

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>HYMS</td>
<td>Hull York Medical School</td>
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<tr>
<td>CMG</td>
<td>Case Management Group</td>
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<tr>
<td>EMQ</td>
<td>Extended Matching Question</td>
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<td>GMC</td>
<td>General Medical Council</td>
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<tr>
<td>MCQ</td>
<td>Multiple Choice Question</td>
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<tr>
<td>MEQ</td>
<td>Modified Essay Question</td>
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<tr>
<td>OSCE</td>
<td>Observed Structured Clinical Examination</td>
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<tr>
<td>OSLER</td>
<td>Observed Structured Long Examination Record</td>
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<tr>
<td>SSIP</td>
<td>Scholarship and Special Interest Programme</td>
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1. **Introduction**

1.1. This Code of Practice describes the conduct of student assessments for the Hull York Medical School (HYMS) MB BS and MB BS with a Gateway Year. Details of implementation of assessments within the curriculum are outlined in the relevant Programme and Module Specifications, Phase handbooks and related guidance for students which should be read in conjunction with this Code of Practice.

1.2. Where a report is received by the Case Management Group (CMG) during the Programme, that gives rise to concerns with regards to a student’s fitness to study, fitness to practise, or academic misconduct is suspected to have occurred, that report will be forwarded to the MB BS Board of Examiners. In the case of serious concern about the health or conduct of a student, reports will be forwarded to the HYMS Student Fitness to Practise Committee or HYMS Academic Cases Committee, as appropriate. (See Code of Practice on Academic Misconduct, Code of Practice on Student Fitness to Practise and Code of Practice on Fitness to Study).

1.3. This Code makes reference to the application of Exceptional Circumstances. For further information please refer to the Policy on Mitigating and exceptional circumstances affecting Assessment and Examination.

2. **Academic Integrity and Conduct**

2.1. All assessments are subject to the Code of Practice on Academic Misconduct. Students must not, in relation to assessed work at any stage of their programme, cheat, collude, fabricate, personate or plagiarise.

2.2. In accordance with the Code of Practice on Academic Misconduct, the Board of Examiners will take account of any breach of the requirements in determining eligibility for progression.

3. **Formative Assessment**

3.1. Formative assessments are conducted throughout the MB BS and MB BS with a Gateway Year Programmes. The terms and the details of each assessment are explained in the relevant Programme and Module Specifications and student Phase handbooks. Notwithstanding any formative intent, assessments that highlight serious issues of attendance, illness, inappropriate behaviour or neglect of academic obligations will be brought to the attention of the appropriate committee(s).

3.2. Students receive formative feedback from tutors at regular intervals throughout the Programme and this is recorded in their electronic portfolio.

3.3. Students should maintain documentation of their learning experiences as specified in the relevant Programme and Module Specifications, Handbook and electronic portfolio. It is the student’s responsibility to ensure that their electronic portfolio is kept up to date.

3.4. Sample questions from past papers are made available as formative tests during each module, block or rotation, in a similar format to the questions in the summative examination papers. These provide a formative practice exercise with feedback and
must be completed by all students.

3.5. Students who do not engage with the formative opportunities offered by the School are reported to the CMG.

3.6. **Components of Formative assessments – by Year**

3.6.1. In the Gateway Year (Phase 0), formative assessment includes clinical skills assessment, written papers and online written assignments.

3.6.2. In Year 1 (Phase 1), formative assessment includes clinical skills assessment (OSCE), an anatomy ‘spotter’ examination, written assignments, online tests and oral presentations.

3.6.3. In Year 2 (Phase 1), formative assessment includes clinical skills assessment (OSCE), written assignments, online tests and oral presentations.

3.6.4. In Years 3, 4 (Phase II) and 5 (Phase III), formative assessment includes an Objective Structured Long Examination Record (OSLER) of a minimum of one patient per rotation and online written assessments.

4. **Summative assessments**

4.1. Summative assessments are held in each year of the MB BS and MB BS with a Gateway Year programme.

4.2. Summative assessments are used to determine whether or not students have achieved the learning outcomes specified within the curriculum.

4.3. Students will receive feedback on their performance in summative assessments, but this is not the primary purpose of summative assessment.

4.4. **Components of Summative Assessment – by Year (Phase)**

4.4.1. In the Gateway Year, summative assessment consists of the following components:

   4.4.1.1. Human Biology I: Written paper of multiple-choice questions (MCQ) and extended matching questions (EMQ);
   4.4.1.2. Human Biology II: Written paper of multiple-choice questions (MCQ) and extended matching questions (EMQ);
   4.4.1.3. Study Skills: Written assignment and portfolio assessment;
   4.4.1.4. Clinical skills: Clinical and communication skills assessment;
   4.4.1.5. Professionalism and Ethics: Poster presentation and written assignment;
   4.4.1.6. Health, Society and the NHS: Group project, written assignment and presentation.

4.4.2. In Years 1 and 2 (Phase I) and Years 3 & 4 (Phase II) summative assessment consists of the following components:

   4.4.2.1. Completion of all electronic portfolio requirements, including demonstration of the required competence in clinical procedural skills (section 6);
   4.4.2.2. Scholarship and Special Interest Programme (SSIP) (section 7);
   4.4.2.3. End of year summative written papers (all years) and clinical
practical assessments (Year 2, 3, 4 only) (section 10);

4.4.3. In Year 5 (Phase III) summative assessment consists of the following components:

4.4.3.1. Completion of all electronic portfolio requirements including demonstration of the required competence in clinical procedural skills (section 6);
4.4.3.2. Elective presentation (section 8);
4.4.3.3. Portfolio assessment during the Assistantship (section 9);
4.4.3.4. End of year summative written papers and a clinical practical assessment (section 11).
4.4.3.5. National Prescribing Safety Assessment.

5. **Attendance**

5.1. Satisfactory attendance is one of the criteria for entry to the end of year summative assessments.

5.2. Attendance forms an integral part of the assessment process and may be monitored and certified by tutors and administrative staff. Clinical placements are a mandatory component of the MB BS Programme and are regarded as full time; i.e. a student should be present on placement throughout the normal working day.

6. **Electronic Portfolio**

6.1. Students will only be permitted to enter end-of-year summative assessments following satisfactory completion of all electronic portfolio elements.

6.2. Attendance, performance, and professionalism in clinical placements are subject to continuous assessments and recorded in the electronic portfolio. Satisfactory completion of all portfolio elements, including attendance, performance and clinical skills appropriate to each year of study, are required to allow a student to proceed within the Programme.

6.3. The elements of the electronic portfolio required to meet the criteria for satisfactory completion are clearly stated within the relevant Phase Handbook.

7. **Scholarship and Special Interest Programme (SSIP)**

7.1. The Scholarship and Special Interest Programme (SSIP) runs throughout Phase I and Phase II. There is no SSIP in the Gateway Year or Phase III. Full details of the organisation and assessment of the Programme can be found in the relevant Phase Handbook and SSIP Handbook.

7.2. In order to progress to the next academic year, a student must meet the criteria for an overall Pass in each Phase I/II SSIP, in each academic year.

7.3. If a student does not meet the criteria for an overall Pass in the SSIP by the end of the re-sit period in any given year, they will have their studies terminated subject to the usual routes of appeal.

7.4. Phase I
7.4.1. Students are required to complete one SSIP in each year of Phase I. Each SSIP has one summative and one formative assessment per year. Each SSIP is individually assessed and a grade awarded.

7.4.2. Students must achieve the criteria outlined in the Phase I SSIP Handbook in order to progress.

7.4.3. Students who do not achieve the required grades for the first attempt have the opportunity to undertake reassessment as a second attempt in the same format as the original submission during the summer re-sit period.

7.4.4. Summer re-sit submissions are marked by two independent markers.

7.5. Phase II

7.5.1. In Phase II, students have to complete:

7.5.1.1. one SSIP in Year 3, which consists of one summative assessment (Quality Improvement Project) and

7.5.1.2. one SSIP in Year 4, which consists of one summative assessment.

7.5.2. Each Phase II SSIP is individually assessed and a grade awarded.

7.5.3. Students must achieve the criteria outlined in the Phase II SSIP Handbook in order to progress.

7.5.4. Students who do not achieve the required grade for their submitted work are allowed one opportunity to undertake a reassessment as a second attempt

7.5.4.1. Year 3: reassessment will be in the same format as the original and take place during the summer re-sit period and students will be required to submit an essay addressing the Quality Improvement Project learning outcome;

7.5.4.2. SSIP: reassessment will involve remediation and resubmission of the same piece of work.

7.5.5. Summer re-sit submissions are marked by two independent markers.

8. Phase III Elective Presentation

8.1. Students are required to complete a presentation on their Elective experience which will be a summative assessment and a grade will be awarded according to the schedule described in the Elective Handbook.

8.2. A grade of at least Pass must be achieved in the Elective presentation.

8.3. If the submitted work does not achieve a grade of at least Pass, additional time is given to the student to remediate and re-submit their original submission as a second attempt, within the timescale specified by HYMS.

8.4. The re-submitted work is marked by two examiners.

8.5. If the resubmitted work does not achieve a grade of Pass the student will normally have their studies terminated, subject to the usual routes of appeal.

9. Phase III Portfolio of Assessment for the Assistantship
9.1. Students are required to complete a Portfolio of Assessment from the Student Assistantship which will be a summative assessment.

9.2. Completion of the Student Assistantship is a requirement of the General Medical Council (Outcomes for graduates 2018; Clinical Placements for medical students 2011; Promoting Excellence: Standards for medical education and training 1 Jan 2016). In order to graduate, students must fully engage with and participate in the Assistantship, and complete all requirements of the Portfolio of Assessment, as set out in the Phase III Handbook.

9.3. Full details of the Portfolio of Assessment for the Assistantship can be found in the Phase III Assistantship Handbook.

10. **End of Module Summative Assessments – Gateway Year**

10.1. A module is defined as a self-contained, formally structured unit of study, with a coherent and explicit set of learning outcomes and assessment criteria. The modules are listed in 4.4.1, with further information in the Gateway Year specifications and programme handbook.

10.2. Summative assessments in the Gateway Year take place within modules. These occur in terms 1, 2 and 3. These are blueprinted to the curriculum of the Gateway Year.

10.3. All students on the same module will be assessed by the same method(s) of assessment. Exceptions can be made for students requiring reasonable adjustments (as approved by a disability officer), when exceptional circumstances have been approved, or when undertaking a reassessment.

10.4. Specific modules and their assessment components are detailed in section 4.4.1. These include a range of examinations using methods which represent current best practice in respect of equity, validity, and reliability.

10.5. Written papers are comprised of MCQs and EMQs. Any individual paper may contain more than one format.

10.6. The pass mark for each assessment component is 40%.

10.7. There is no compensation across the assessment components within modules.

10.8. To be awarded the credits for a module, a student must pass each assessment component for that module.
10.9. There is no compensation across the modules.

10.10. Progression to the 5-year MB BS Programme will be on successful completion of all six individual modules.

10.11. Weighted averages will be used within each module, if the summative assessment consists of more than 1 assessment component. The relative weighting of each component is detailed in the Gateway Year module specifications.

10.12. In calculating the weighted average, each component mark shall be weighted according to the corresponding module specification and the module mark will be rounded to the nearest integer:

10.12.1. Component marks will be calculated to two decimal places;

10.12.2. Module marks will be rounded to the nearest integer as such on the module and programme reports;

10.12.3. Marks on the student transcript will be rounded to the nearest integer.

11. End of Year 1 to 5 Summative Assessments: Written Papers and Clinical Examinations

11.1. Summative assessments in Years 1 to 5 take place at the end of year.

11.2. End of year summative assessments are comprised of a series of integrated examinations using methods which represent current best practice in respect of equity, validity, and reliability.

11.3. End of year summative assessments are blueprinted to the curriculum of the appropriate year; however, material covered in earlier years may also be assessed.

11.4. Written papers are comprised of MCQs, EMQs, and/or MEQs. Any individual paper may contain more than one format.

12. End of Year 1 to 5 Summative Assessment: Written Papers and Clinical Examinations – Grades

12.1. The MB BS Board of Examiners agrees the pass mark that must be obtained in each written and clinical assessment for the student to be regarded as Excellent, Pass, or Fail. The pass mark is determined using transparent, robust and systematic standard setting methods in line with GMC guidance and sector-wide practice. Standard setting methods are reviewed on a regular basis.
12.2. For each summative assessment, students are awarded a grade as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Excellent</strong></td>
<td>The student has achieved the pass mark or higher and is normally the top 15% of the cohort (see 15.2).</td>
</tr>
<tr>
<td><strong>Pass</strong></td>
<td>The student has achieved the pass mark or higher.</td>
</tr>
<tr>
<td><strong>Fail</strong></td>
<td>The student has not achieved the pass mark.</td>
</tr>
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13. Criteria for Progression

13.1. To progress within the MB BS Programmes, a student must satisfy the requirements of the MB BS Board of Examiners which will make recommendations to the HYMS Board of Studies. The requirements are to pass all components outlined in Section 4, within a single academic year.

13.2. Progression from Gateway Year to Year 1

13.2.1. To progress from the Gateway Year to Year 1, students must pass all six modules (120 credits).

13.2.2. Criteria for progression and the need for students to re-sit an assessment are: **Pass** in each summative assessment means progress, while **Fail** in any summative assessment means re-sit each failed assessment at the next opportunity.

13.3. Progression between Years 1 to 5

13.3.1. Criteria for progression and the need for students to re-sit an assessment are shown in the following tables:

<table>
<thead>
<tr>
<th>Result by component of assessment</th>
<th>All years</th>
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<tbody>
<tr>
<td><strong>Pass</strong> in each written and clinical assessment (Applied Life Sciences; Health Society and Professionalism*; Clinical Skills and Reasoning**)</td>
<td>Progress</td>
</tr>
<tr>
<td><strong>Fail</strong> in any clinical or written assessment (Applied Life Sciences; Health Society and Professionalism*; Clinical Skills and Reasoning**)</td>
<td>Re-sit each failed assessment at the next opportunity</td>
</tr>
</tbody>
</table>

*not in Year 5  
**not in Year 1

14. Re-assessment of Gateway Year summative assessments

14.1. Any failed assessment component can be reassessed on one occasion only.

14.2. Such reassessment will take place during a re-sit period within a timescale specified by HYMS in the programme handbook. All modules, if failed, shall normally be reassessed during the same academic year. This will take place a minimum of three
weeks after the receipt of the mark and feedback.

14.3. Students who fail their reassessment attempt in a module will not progress on the programme.

15. Re-assessment of Year 1 to 5 end of year summative assessments

15.1. A student whose performance is insufficient to meet the criteria for progression as outlined in sections 12.2 and 13 will be required to re-sit.

15.2. Any student who fails to satisfy the MB BS Board of Examiners within a single academic year, but has exceptional circumstances (see Policy on Mitigating and exceptional circumstances affecting Assessment and Examination) accepted and approved by the HYMS Board of Studies, shall be offered the opportunity to register and repeat that year of the Programme in the following academic year. No previous results may be carried forward (with the exception of repeating the Elective period of study and Report). The student will be required to fulfil all formative and summative requirements and attain the criteria for progression. If the attempt has been granted as an exceptional third sit of the assessments, there is normally no in-year reassessment allowed in the case of failure to achieve the required progression standards.

15.3. Progression throughout the MB BS Programme and MB BS in Medicine with a Gateway Year is always based on the latest result from each assessment i.e. in the case of re-sit, the re-sit result always stands even if the mark/grade is lower than the original attempt.

16. Award of MB BS and MBBS with a Gateway Year

16.1. To achieve the award of MB BS a student must have satisfied the requirements of the MB BS Board of Examiners as follows:

16.1.1. Completion of Years 1 to 4 of the MBBS Programme;

16.1.2. Completion of all electronic portfolio requirements;

16.1.3. Achievement of a Pass grade in all Year 5 summative assessments;

16.1.4. Achievement of a Pass grade in the Prescribing Safety Assessment;

16.1.5. Achievement of a Pass grade in the Elective presentation;

16.1.6. Demonstration of the required competence in all clinical procedural skills;
16.1.7. Completion of the Student Assistantship period including the Portfolio of Assessment;

16.1.8. Be in good standing with the HYMS Fitness to Practise Committee.

16.2. To achieve the award of MB BS with a Gateway Year a student must have satisfied the requirements of the MB BS Board of Examiners as follows:

16.2.1. Completion of the Gateway Year;

16.2.2. Completion of Years 1 to 4 of the MBBS with a Gateway Year Programme;

16.2.3. Completion of all portfolio electronic portfolio requirements;

16.2.4. Achievement of a Pass grade in all Year 5 summative assessments;

16.2.5. Achievement of a Pass grade in the Prescribing Safety Assessment;

16.2.6. Achievement of a Pass grade in the Elective presentation;

16.2.7. Demonstration of the required competence in all clinical procedural skills;

16.2.8. Completion of the Student Assistantship period including the Portfolio of Assessment;

16.2.9. Be in good standing with the HYMS Fitness to Practise Committee.

17. Recognition of High Achievement

17.1. In the MB BS Programmes, students may be graded ‘Excellent’ in:

17.1.1. Each of the end of year summative assessments (i.e. in Applied Life Sciences, Clinical Skills and Reasoning and Health, Society and Professionalism);

17.1.2. Each part of the Scholarship and Special Interest Programme;

17.1.3. The Elective presentation.

17.2. The Excellent grade will normally be defined as the top 15% of the cohort for each assessment (see section 12). MB BS Board of Examiners will recommend, approve and record the reason for any adjustment to the award of the Excellent grade. The criteria for ‘Merit’ or ‘Distinction’ in each Phase of the MB BS Programme and the overall award of the MB BS Degree with Honours is outlined in the document “Criteria for Award of Degree of MB BS with Honours”.

17.3. Students who have Exceptional Circumstances supported will be offered an opportunity to undertake any assessment as a new first attempt. To ensure that they have equal chance for Honours, these students will be offered an opportunity of a new first attempt at all end of year summative assessments for which Exceptional Circumstances were supported regardless of their awarded grade(s). If the opportunity is accepted, the second result(s) will stand as the mark for the first attempt, even if the mark is lower than the original attempt.
18. **Exit Awards and Intended Lower Awards**

18.1. Students not satisfying the criteria for progression will normally have their MB BS Programme terminated.

18.2. Students not satisfying the criteria for progression or who are leaving the MB BS Programme early for other reasons may be eligible for one of the following exit awards. Students will be awarded the highest exit award for which the criteria have been achieved.

**Foundation Certificate in Higher Education (Pre-Medicine)**

18.2.1. Students who have successfully completed the Gateway Year but who do not successfully complete any more of the programme will be eligible for a Foundation Certificate in Higher Education (Pre-medicine).

**Certificate of Higher Education**

18.2.2. Students who have successfully completed Year 1 of their programme but do not successfully complete any more of the programme will be eligible for a Certificate of Higher Education (Medical Science) (CertHE Med Sci).

**Diploma of Higher Education**

18.2.3. Students who have successfully completed Year 2 of their programme but do not successfully complete any more of the programme will be eligible for a Diploma of Higher Education (Medical Science) (DipHE Med Sci).

**Bachelor of Medical Science (Ordinary)**

18.2.4. Students who have successfully completed Year 3 of their programme but do not successfully complete the programme will be eligible for a Bachelor of Medical Science (Ordinary).

19. **Penalties for late electronic submissions**

19.1. Gateway Year – for all submissions, penalties are as follows:

   19.1.1. From the deadline up to 2 working days late: Work graded at 40% or higher will receive a maximum of 40% (Pass) Work graded at less than 40% will not be adjusted (Fail)

   19.1.2. More than 2 working days late: Automatic award of Fail grade (0%)

19.2. MB BS summative submissions – SSIP:

   19.2.1. From the deadline up to 2 working days late: Work graded by the tutor as Excellent will be reduced to Pass. Work graded by the tutor as Fail (Phase II) will be reduced to Serious Fail (Phase II). All other tutor grades remain unchanged.
19.2.2. More than 2 working days late: Automatic award of Fail (Phase I) or Serious Fail (Phase II/III)

19.3. MB BS summative submissions – Elective:

19.3.1. If work is submitted after the deadline, the student will miss the opportunity to make their oral presentation at the first attempt and will automatically be awarded a fail grade. Students will be required to deliver the presentation in the resubmission period (only Pass or Fail grades are awardable) and must achieve a Pass grade as a requirement for graduation.

19.4. Graded formative submissions (CATs, Reflective Essays/Appraisals):

19.4.1. From the deadline up to 2 working days late: Work graded by the tutor as Excellent will be reduced to Pass. Work graded by the tutor as either Borderline Fail (Phase I) or Fail (Phase II/III) will be reduced to Fail (Phase I) or Serious Fail (Phase II/III). All other tutor grades remain unchanged.

19.4.2. More than 2 working days late: Automatic award of Fail (Phase I) or Serious Fail (Phase II/III).

19.5. Case Management Group: In any of the above cases, all late submissions will be reported to the Case Management Group via the appropriate Phase Lead.

19.6. Extensions to deadlines may be requested in line with the process documented in the Policy on Mitigating and exceptional circumstances affecting Assessment and Examination.

20. Exceptional Circumstances and Reasonable Adjustments

20.1. Where a student submits exceptional circumstances, this will be considered by the HYMS Exceptional Circumstances Sub-Committee in accordance with the Policy on Exceptional Circumstances.

20.2. Students requiring reasonable adjustments for assessments should consult the HYMS Policy on Student Welfare and Support and the Policy on Disability and Reasonable Adjustments in Assessments.

21. Leave of Absence

21.1. It is the responsibility of students to inform the HYMS Student Support Office when they are absent for any reason. Details of procedures to be followed for illness and other reasons for absence can be found in the Policy on Student Welfare and Support.

21.2. Students who require a Leave of Absence from the programme should consult the Policy on Leave of Absence for guidance details of how to make this request.

22. Role of External Examiners

The role of external examiners will be to:
22.1. Attend Board of Examiners meetings and review a

22.2. Sample of summative end of year or module assessments.

22.3. Comment and give advice on Programme content, balance and structure as reflected in the assessments.

22.4. Report on good practice they have identified.

22.5. Report on the standards of student performance in those Programmes or parts of Programmes which they have been appointed to examine, and on the comparability of the standards with those of similar Programmes or parts of Programmes in other UK Higher Education Institutions.

22.6. Report on the extent to which processes for assessment, examination, and the determination of awards are sound and have been fairly conducted, with reference to HYMS procedures and Codes of Practice. One of the external examiners (designated Chief External Examiner) will have a term of office of such duration as to afford oversight of the whole MB BS programme, normally five years.

22.7. Advise the Board of Examiners on decision-making based on summative assessments including actions regarding suspected or proven cases of academic misconduct, as required. Normally, the Chief External Examiner will fulfil this role.

22.8. Submit a written report on an annual basis to the Vice-Chancellors including commentary and judgements on the validity, reliability and integrity of the assessment process and the standards of student attainment.