

St George's, University of London

Scheme of Assessment for BSc (Hons) Healthcare Science

1. General

- 1.1 This Scheme of Assessment details the assessments for Year 3 of the BSc (Hons) Healthcare Science degree, as required under section 7 of the SGUL General Regulations for Students and Programmes of Study. The Board of Examiners for the BSc (Honours) Degree in Healthcare Science (the Board) has ultimate responsibility for the standard of the examinations and for their fair conduct.
- 1.2 The Scheme of Assessment is formulated and approved by the Undergraduate Course Committee for Healthcare Science as a supplementary document to the Programme Regulations and General Regulations. The details of assessments in this Scheme are subject to the provisions for assessment in paragraphs 8-11 of the Programme Regulations.
- 1.3 The module leaders for Year 3 modules shall act as Internal Examiners. These Examiners will co-ordinate the setting of examination papers and assessments for their module; obtain approval of the assessments from the External Examiners; arrange for the marking of assessment and oversee the conduct of assessments and report results to the Board
- 1.4 At least one External Examiner will be appointed in accordance with the constitution of the Board. The External Examiner(s) will moderate the setting of questions in examinations, moderate the marking of assessments and may choose to attend practical examinations.
- 1.5 The BSc (Hons) Healthcare Science degree programme comprises modules with an overall credit value of 360 credits (120 at level 4, 120 at level 5 and 120 at level 6).
- 1.6 The modules and the number of credits allocated for Year 3 modules are as follows:

<u>Year 3 Modules</u>	<u>Credits</u>
Professional Practice 3	15 credits

and one of the following speciality module combinations:

<u>Cardiac Physiology</u>	
Applying Cardiac Physiology to Practice	45 credits
Research Project in Cardiac Physiology	30 credits
Clinical Training 3 – Cardiac Physiology	30 credits

or

<u>Respiratory and Sleep Physiology</u>	
Applying Respiratory and Sleep Physiology to Practice	45 credits
Research Project in Respiratory or Sleep Physiology	30 credits
Clinical Training 3 – Respiratory and Sleep Physiology	30 credits

- 1.7 The successful completion of all modules for which a student is registered is required for the award of the degree.

2. Overview of Year 3 assessments

- 2.1 Each Year 3 programme module has prescribed assessment components as detailed in the following tables. All assessment components are summative unless otherwise indicated. Formative assessments are conducted to enhance the student's learning experience and provide a mechanism for providing the student with personalised feedback regarding their clinical skills. No marks are generally allocated to such assessments, but if they are, they are only to guide students and do not contribute to the calculation of the overall Year mark or the classification of honours.

YEAR 3: CORE MODULES					
Module	Credit	Assessment components	Weighting %	Timing	Achieving a pass
Professional Practice 3	15	In-course reflective essay	59%	December	Each assessment component must be passed separately in order to achieve an overall pass for this module.
		Oral presentation	39%	March	
		In-course assessment (attendance)	2%	Semesters 5 & 6	
YEAR 3: SPECIALITY MODULES					
Module	Credit	Assessment components	Weighting %	Timing	Achieving a pass
Applying Cardiac Physiology to Practice or Applying Respiratory and Sleep Physiology to Practice	45	In-course essay 4000 words	29%	February	Each assessment component must be passed separately in order to achieve an overall pass for this module.
		Written examination SBA and/or SAQ 3 hours	69%	June	
		In course assessment (attendance)	2%	Semesters 5 & 6	
Research Project in Cardiac Physiology or Research Project in Respiratory and Sleep Physiology	30	Dissertation	80%	May	Each assessment component must be passed separately in order to achieve an overall pass for this module.
		Viva	20%	June	
Clinical Training 3: Cardiac Physiology or Respiratory and Sleep Physiology	30	Satisfactory attendance at work-based placements	Pass / Fail	Completion by end of module (May/June)	Each assessment component must be passed separately in order to achieve an overall pass for this module.
		Satisfactory demonstration of specified Clinical Competencies DOPS/CBD/OCE	Pass / Fail	Completion by end of module (May/June)	
		Satisfactory demonstration of specified Professional Competencies	Pass / Fail	Completion by end of module (May/June)	
		Portfolio	Pass / Fail	Completion by end of module (May/June)	

2.2 Late submission of in-course written assessments

Students who fail to submit coursework assessments by the submission deadline without an agreed extension will incur the following penalty: work submitted within seven days of the original submission deadline will be accepted for marking but the marks awarded will be capped at 40%. Work submitted after the seven day period without an agreed extension, or students who do not submit any work will receive a mark of 0 for that attempt.

2.3 Late submission of dissertation

Students who fail to submit the research project dissertation by the submission deadline without an agreed extension will incur the following penalty: 5% will be deducted for each working day (or part day) that the deadline is exceeded. There is no maximum to this penalty and thus the mark may be reduced to zero. The penalty will be deducted as a percentage of the mark given for the project dissertation component.

2.4 Where a penalty has been applied to an assessment mark due to late submission or non-submission, the calculation of the final overall year mark will use these adjusted marks.

3. **Marking of assessments**

3.1 Year 3 assessments are marked on a percentage scale with the exception of assessments within the Clinical Training modules which are marked as pass/fail only. The pass mark for each Year 3 module is 40.00% except Clinical Training 3 for which students must achieve 'Pass' in all summative elements in order to pass.

3.2 Non-competency based examinations and in-course written assessments will be marked on a percentage scale. Assessment criteria for these assessments are appended to this Scheme.

3.3 For all supervised examinations, candidates shall be given a candidate number to ensure anonymity during marking. Written assessments shall be marked in detail by one Internal Examiner or Assessor, with a second Internal Examiner or Assessor having at least an overview of the work. Written examination components in which an objective scheme for the award of marks is pre-determined (e.g. Short Answer Questions) shall be marked by one Internal Examiner or Assessor.

3.4 Where the two marks for a candidate diverge significantly, the two examiners will discuss and agree a mark; where agreement between the two examiners cannot be reached, this shall be referred to the Chief Examiner who shall allocate the final mark.

3.5 Standard setting may be applied to computer-marked questions in order to adjust the whole cohort's marks whilst maintaining the pass mark at 40.00. This will be achieved using a recognised method selected to suit the variables of the assessment (normally Anghoff).

3.6 Mark rounding will take place for each module mark. The module mark will be determined by rounding the final mark to two decimal points.

3.7 Module mark weighting will be applied in order to calculate a year mark for each year of the programme. The mark for each of the modules pertaining to that year of the programme will be weighted according to the contribution they make to that year. The weighted scores for each module will be summed to give an overall year mark. The year mark will be rounded to the nearest whole number, with marks of .50 and above being rounded up and marks of .49 and below being rounded down.

- 3.8 In line with the recommendations of QAEC in late 2014, BSc degree awards are to be calculated using a credit enhancement. For BSc Healthcare Science students a 10-credit enhancement is calculated from the student's highest overall module mark at level 6. The 'exit velocity' enhancement will be applied to the Year 3 mark before calculating the final degree mark.

The following is given as a worked example:

Module	Credit value	Mark awarded
Applying Cardiac Physiology to Practice	45 credits	63.54
Research Project in Cardiac Physiology	30 credits	67.25
Professional Practice 3	15 credits	68.00
Exit velocity credit enhancement	10 credits	68.00
Clinical Training 3 – Cardiac Physiology	30 credits	Pass

Applying Cardiac Physiology to Practice	$(45 \times 63.54) / 100 = 28.59$
Research Project in Cardiac Physiology	$(30 \times 67.25) / 100 = 20.18$
Professional Practice 3	$(15 \times 68.00) / 100 = 10.20$
Exit velocity enhancement	$(10 \times 68.00) / 100 = 6.8$

Year 3 overall: $31.77 + 22.42 + 11.33 = 65.77 = 66\%$

4. Reassessment

- 4.1 A student will, as of right, be permitted one re-entry/resubmission for all failed examinations or assessment components.
- 4.2 A student who fails a Clinical Training module may be required to undertake a remedial reflective assignment and/or attend additional placement weeks to enable fulfilment of attendance requirements, completion of competency requirements or other work-based assessments, or to gather further evidence required for resubmission of the portfolio. The reassessment may take place outside of scheduled term dates for the programme. In some cases the student may be required to re-sit the entire placement in the following academic year. The arrangements for reassessment will be negotiated between the SGUL Work-Based Placement Co-ordinator and the NHS Work-Based Placement Supervisor according to the student's needs.
- 4.3 All re-sits of non-competency based examinations and in-course written assessments examinations and resubmission of coursework will be capped at 40.00%. Where a component of a module is re-sat or resubmitted it is the component that will be capped at 40.00% at reassessment rather than the overall module mark.
- 4.4 A student who fails at re-assessment(s) will be eligible to be considered for a discretionary third and final attempt at failed assessments, in accordance with the *Procedure for consideration for a final discretionary attempt at an assessment*, as approved by Senate. Under this procedure, Boards of Examiners will have the authority to approve a discretionary third attempt if a candidate meets programme-specific fast-track criteria. For candidates who do not satisfy the programme-specific fast-track criteria, a Discretionary Panel of Senate will consider the student's application for a discretionary third attempt.
- 4.5 The discretionary panel fast-track criteria for the BSc Healthcare Science programme will be published in the assessment section of the course Moodle pages.
- 4.6 A student granted a third and final attempt may be required to repeat that Year, or part thereof, in order to re-take the failed assessments. Where a component of a module is re-

sat or resubmitted as a third and final attempt it is the component that will be capped at 40.00% at reassessment rather than the overall module mark.

5. Progression

- 5.1 Students must pass all Year 3 modules in order to graduate from the programme with BSc (Hons).

6. Award of BSc Honours Degree

- 6.1 The BSc Honours Healthcare Science degree will be awarded by the Board of Examiners to students who have completed all the course requirements and passed all modules for which they are enrolled.
- 6.2 Marks from Year 1, Year 2 and Year 3 summative assessments will contribute to the final classification of the degree.
- 6.3 The award of honours will be calculated using the overall year mark for each year of the programme weighted according to the contribution it makes to the degree classification.
- 6.4 Year 1 contributes 10%, Year 2 contributes 30% and Year 3 contributes 60% of the total percentage marks. The weighted average scores for each year will be summed to give the final mark, rounded to a whole number.

The following is given as a worked example:

Year 1 mark	66
Year 2 mark	63
Year 3 mark	65

Weighted average score for Year 1 = $66 \times 0.10 = 6.6$

Weighted average score for Year 2 = $63 \times 0.30 = 18.9$

Weighted average score for Year 3 = $65 \times 0.60 = 39.0$

Final mark: (Yr 1) 6.6 + (Yr2) 18.9 + (Yr 3) 39.05 = 64.5 rounded up to 65%

65% Upper Second Class Honours (2i)

7. Degree classification

Mark	Degree Classification
70% and above	First Class Honours (1st)
60% - 69%	Upper Second Class Honours (2.1)
50% - 59%	Lower Second Class Honours (2.2)
40% - 49%	Third Class Honours (3rd)
39% - 0%	Fail

There is no provision for a 'pass' classification or award of the degree without Honours.

- 7.2 Candidates shall stay in the classification indicated by their overall final mark, except where the candidate falls into a borderline category as defined below, in which case the candidate may be eligible to be promoted to the next highest degree classification

Definition of borderline categories & criteria for automatic promotion of degree classification

Students who achieve BOTH of the following two requirements will automatically be promoted to the next highest degree classification. Students will be identified by the Chair of the Board of Examiners and approved by the exam board.

Boundary	Final Weighted Average	Year 3 modules totalling at least 30 credits with the following marks:
1st/2i	69	≥ 69
2i/2ii	59	≥ 59
2ii/3rd	49	≥ 49

8. Intermediate Awards

- 8.1 These awards shall only be given to students who cease to be registered on the BSc (Hons) Healthcare Science programme (that is to say, they are exit qualifications, not qualifications that students will automatically get *en route* to the BSc (Hons) Healthcare Science).
- 8.2 Students who have successfully completed all modules of the first year of the programme for BSc (Hons) Healthcare Science shall be eligible for the SGUL award of Undergraduate Certificate in Healthcare Science.
- 8.3 Students who have successfully completed all modules of the first two years of the programme for BSc (Hons) Healthcare Science shall be eligible for the SGUL award of Undergraduate Diploma in Healthcare Science.

9. Reporting of Results

- 6.1 Provisional examination and in-course assessment marks may be issued throughout the academic year. Candidates will be given formal notice of their confirmed assessment marks, module marks and end of year mark within 6 weeks of the Board of Examiners meeting.

Marking criteria for Year 3 (Level 6) non-competency based examinations and in-course written assessments

LEVEL 6	1st (70-100%)	2.1 (60-69%)	2.2 (50-59%)	3rd (40-49%)	Borderline Fail (35-39%)	Fail (0-35%)
Addressing the task	Clear comprehensive evidence of addressing the task.	Sound evidence of addressing the task	Adequate evidence of addressing the task	Limited evidence of addressing the task	Largely fails to address the task set	Fails to address the task set
Structure/ content/ focus	Clear and well structured, logical, concise, focussed, comprehensive	Clear and appropriate structure. Covers main areas. Logical, focussed in the main	Structure apparent but some inconsistencies. Covers most of the key areas	Some attempt at appropriate and relevant structure but lacks focus and clarity at times. Although the majority of key areas are included there are one or two key omissions	The structure is inconsistent but some of the key areas are introduced	Lacks structure, focus and clarity in the main. The key areas are only addressed superficially and there are a number of omissions
Use of literature	The ability to select, critically appraise and apply relevant literature is demonstrated consistently. Evidence of broad reading.	Uses a variety of relevant literature with evidence of critical appraisal but not consistently. Evidence of wide reading.	The literature included is relevant and is critically appraised in the main. Reasonable range of reading evident.	Some relevant literature is included but the range is limited as is the critique and some elements are descriptive	Although some relevant literature is used, the work is mainly descriptive. Limited range.	No literature used.
Demonstration of understanding and knowledge	Demonstrates excellent insight and awareness of a variety of ideas, contexts and frameworks.	Demonstrates good insight and awareness of a variety of ideas, contexts and frameworks.	Demonstrates some insight and awareness of key ideas, contexts and frameworks.	Limited demonstration of key ideas, contexts and frameworks.	Knowledge and/or understanding is limited and superficial.	Fails to demonstrate knowledge and understanding. Fails to acknowledge key issues.
Application	Consistent application of topic to personal, societal and/or professional practice. In-depth, evaluative, reflective and relevant.	Relevant application of topic to personal, societal and/or professional practice. Appropriate and thoughtful but lacks depth or completeness of argument at times.	Begins to demonstrate application to personal, societal and/or professional practice.	Superficial but correct application to personal, societal and/or professional practice.	Limited but relevant application to personal, societal and/or professional practice but with many omissions and inaccuracies.	Inappropriate application of topic to personal, societal and/or professional practice in the main with many omissions and inaccuracies.
Analysis	Rigorous and relevant analysis consistently applied	Good evidence of relevant analysis	Evidence of analysis but not always consistently applied	Limited evidence of analysis	Superficial analysis	No analysis demonstrated
Synthesis	Shows novel and innovative thinking, creativity, originality and the development of new concepts. Clear conclusions well-grounded in theory	Shows innovative thinking in the development of concepts. Consistent evidence of findings and conclusions well-grounded in theory and literature.	Shows some innovative thinking. Good evidence of findings and conclusions well-grounded in theory and literature but lacks depth and completeness of argument at times	Occasional innovative thinking. Superficial evidence of findings and conclusions	Limited innovative thinking. Conclusions appropriate but unsubstantiated in the main	No innovative thinking. Conclusions are mainly inaccurate/ unsubstantiated/invalid and based on anecdotes and generalisations in the main
Evaluation	Evidence of rigorous critical thought and evaluation used consistently	Evidence of critical thought and evaluation, but not applied consistently	Some evidence of critical thought and evaluation	Limited evidence of critical thought and evaluation	There is little evidence of critical thought or evaluation	No evidence of critical thought or evaluation
Referencing	Consistently accurate and appropriate	Relevant and mainly accurate	Minor inconsistencies and inaccuracies in referencing	Referencing evident but with a few omissions and some inaccuracy/ inconsistency	Limited referencing with omissions, inaccuracies and inconsistencies	Referencing very limited or non-existent
Ethics	Thorough consideration of ethical issues	Adequate consideration of ethical issues	Some consideration of ethical issues	Limited consideration of ethical issues	Cursory consideration of ethical issues	No consideration of ethical issues
Presentation	Excellent organisation and presentation.	Good organisation and presentation	Generally good organisation and presentation.	Organisation and/or presentation could be improved.	Poor organisation and /or presentation.	Very poor organisation and presentation
Numeracy	Uses correct notation and units. Figures are accurately calculated / quoted without exception	Uses correct notation and units. Figures are accurately calculated / quoted	Uses correct notation and units. Figures are generally accurately quoted / calculated.	Figures are quoted without units or with incorrect units. Values imprecise or inaccurate..	Figures are wildly out. Values are grossly inaccurate. Calculations are incorrect.	No numeric work has been done when it would be expected.

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