MANUAL OF ACADEMIC REGULATIONS AND PROCEDURES 2018-19

MEDICAL DEGREE ASSESSMENT REGULATIONS

(APPLICABLE FROM OCTOBER 2018)

Academic Standards and Quality
MARP 2018-19
CONTENTS

ASSESSMENT REGULATIONS FOR THE BACHELOR OF MEDICINE, BACHELOR OF SURGERY (MBChB) UNDERGRADUATE DEGREE ................................. 2

MD 1  STRUCTURE OF THE MBChB DEGREE PROGRAMME ................................. 2

MD 2  CRITERIA FOR AWARD .................................................................................. 2

MD 3  PENALTY FOR LATE SUBMISSION OF COURSEWORK ............................... 4

MD 4  PROGRESSION .................................................................................................. 4

MD 5  CLASSIFICATION OF AWARDS ...................................................................... 5

MD 6  REASSESSMENT ............................................................................................... 6

MD 7  INCOMPLETE ASSESSMENT AND EXCEPTIONAL CIRCUMSTANCES ........... 8

MD 8  CONSIDERATION AND CONFIRMATION OF RESULTS ............................... 11

MD 9  PUBLISHED INFORMATION ........................................................................... 12

MD 10 EXCLUSION .................................................................................................... 12

MD 11 ACADEMIC APPEALS .................................................................................... 12

MD 11.1 PRINCIPLES .................................................................................................. 12

MD 11.2 APPLICATIONS AND IMPLEMENTATION OF THE PROCEDURE ............. 14

MD 11.3 THE PROCEDURE ......................................................................................... 15

MD 11.4 THE OFFICE OF THE INDEPENDENT ADJUDICATOR ................................ 17
The MBChB programme is under continuous review both internally and by the General Medical Council. As a result, it may sometimes be necessary to amend these regulations over the course of a student’s registration to match national decisions about undergraduate medical education and to ensure continued alignment with sector standards. Changes will be made only where necessary to ensure the appropriate level of competence in graduates from the programme as they move onto their postgraduate training, and to ensure patient safety.

**MD 1 STRUCTURE OF THE MBChB DEGREE PROGRAMME**

**MD 1.1** The MBChB degree comprises learning across levels 4, 5, 6 and 7 over a five-year full-time programme. There is no stipulated credit length for each year of study as medical qualifications are not typically credit-rated.

**MD 1.2** The arrangements for the programme of study shall be published in the Courses Handbook, available online for staff and current students at: [http://www.lusi.lancaster.ac.uk/CoursesHandbook/](http://www.lusi.lancaster.ac.uk/CoursesHandbook/).

**MD 2 CRITERIA FOR AWARD**

**MD 2.1** In order to qualify for the MBChB degree, students must have attained a pass in all components of each of the five years. No condonation of failed components is permitted. The standard setting procedure described below is a requirement of the General Medical Council, as included in their assessment advice in the publication *Promoting Excellence: standards for medical education and training* (July 2015).

**MD 2.2** The pass mark for each summative component of the assessment of each year of the MBChB degree will be arrived at as follows.

(a) Written examinations in years 1-4: each examination paper will be standard-set by a panel of content experts, and according to a modified Angoff technique. The initial pass mark will be determined by the panel without prior knowledge of the students’ performance. The pass mark will then be adapted in the light of additional information such, as the analysis of the performance of test items and feedback from the students, again using the Angoff method. The Board of Examiners for each year will receive a report from the standard-setting panel (including the recommended pass marks for each of the written papers) for consideration.

(b) For students who entered the programme in 2015-16, 2016-17 and 2017-18: Practical examinations (the Objective Structured Clinical Examinations, (OSCEs) in years 1-4, and the Lancaster Clinical Assessment (LCA) in year 4): each OSCE and the LCA will be standard-set using a borderline regression approach. The marks of all students are used to determine the passing score for each station, and in order to pass overall, students must achieve the “cut score”, which is
the sum of the pass marks for each station in that examination. Students are also required to pass a minimum of 64% of stations in the OSCEs in years 1 and 2 and 71% of stations in years 3 and 4. The LCA requires students to pass 75% of stations.

For students who entered the programme from 2018-19 onwards: Practical examinations (the Objective Structured Clinical Examinations, (OSCEs) in years 1-4, and the Lancaster Clinical Assessment (LCA) in year 4): each OSCE and the LCA will be standard-set using a borderline regression approach. The marks of all students are used to determine the passing score for each station, and in order to pass overall, students must achieve the “cut score”, which is the sum of the pass marks for each station in that examination. Students are also required to pass a minimum of 70% of stations (representing 7 out of 10 stations) in the OSCEs in years 1 and 2 and 71% of stations in years 3 and 4 (representing 10 out of 14 stations). The LCA requires students to pass 75% of stations (representing 6 out of 8 stations).

(c) Special Study Modules (SSM; coursework) in years 2 and 3: standardised mark sheets are used to mark the Special Study Modules, with a pass mark of 50%. Standard-setting for SSMs is achieved via the SSM Moderating Board, made up of staff involved in the delivery of SSMs. The Board verifies that marks have been assigned correctly and can also moderate marks up or down, or provide additional marking of reports if deemed appropriate.

(d) Professional Practice, Values and Ethics coursework (year 3) – pass mark of 50%, as Special Study Modules above, and with a similar moderating process.

(e) Health, Culture and Society coursework (year 4) – pass mark of 50% as Special Study Modules above, and with a similar moderating process.

(f) Quality Improvement in the Community coursework (year 4) – pass mark of 50%, as Special Study Modules above, and with a similar moderating process.

(g) The five component clinical placement rotations of year 5 are assessed through the student’s portfolio, on a pass/fail basis; each rotation must be passed. The clinical supervisor for the rotation assesses the student using the PETA process (Professional Education and Training Appraisal); signing the final PETA form as a pass indicates that the student has attended and has acquired the appropriate skills, knowledge, and professional attitudes to proceed into their Foundation Doctor years.

(h) The ‘Preparing for Practice’ programme in year 5 must also be passed. It is made up of three elements:

- The 2 week ‘Preparing for Practice’ component at the start of the year is assessed through completion of a logbook of clinical skills and medicines management and must be passed.

- Attendance at the ‘Leadership and Management’ 1 week course is compulsory (except for students undertaking an Erasmus placement).
• The mid-year review of the student’s progress as demonstrated by their portfolio must be passed.

**MD 3 PENALTY FOR LATE SUBMISSION OF COURSEWORK**

MD 3.1 Work submitted up to three days late without an agreed extension will receive a penalty of 10 percentage points (for example a mark of 62% would become 52%) and a deduction of one ranking point. Work received after three days will receive a mark of zero (non-submission). For work submitted up to three days late, where the application of the penalty would take the mark below the pass mark of 50% the penalised mark will be recorded as 50% with no requirement to resubmit. Saturdays and Sundays are included as days in this regulation; however, where the third day falls on a Saturday or Sunday, students will have until 10.00 a.m. on Monday to hand in without receiving further penalty.

**MD 4 PROGRESSION**

MD 4.1 The progression requirements of the MBChB degree have been detailed and approved through the programmes approval process and are as follows:

<table>
<thead>
<tr>
<th>Progression</th>
<th>Required to pass with the pass marks as detailed above</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1 to 2</td>
<td>Paper 1; Paper 2; Paper 3; Study Skills Module (satisfactory attendance and completion of formative tasks); OSCE; Community course (satisfactory attendance)</td>
</tr>
<tr>
<td>Year 2 to 3</td>
<td>Paper 1; Paper 2; Paper 3; SSM2; OSCE; hospital placements (satisfactory attendance and completion of logbook); Community course (satisfactory attendance, poster and completion of lesson plan)</td>
</tr>
<tr>
<td>Year 3 to 4</td>
<td>Paper 1; Paper 2; Paper 3; SSM3; OSCE; hospital and GP placements (satisfactory attendance and completion of logbook; Professional Practice, Values and Ethics coursework</td>
</tr>
<tr>
<td>Year 4 to 5</td>
<td>Paper 1; Paper 2; Paper 3; OSCE; LCA; Quality Improvement in the Community coursework; hospital and GP placements (satisfactory attendance and completion of logbook); Health, Culture and Society coursework; satisfactory completion of Elective report</td>
</tr>
<tr>
<td>Graduation</td>
<td>Pass in all components of the “Preparing for Practice” programme. Pass in the PETA assessment of the five placement blocks (Ward Care; Acute Care-Emergency Medicine; Selectives in Advanced Medical Practice 1 and 2; Community-Orientated Medical Practice.)</td>
</tr>
</tbody>
</table>

Examination Boards will determine whether a student has successfully met the progression requirements to move to the next year of the programme and to graduation, giving full countenance to exceptional circumstances as reported from the Exceptional Circumstances Committee and reassessment opportunities as detailed below.

MD 4.2 Students are required to pass each element of the course independently, in order to progress (i.e. compensation between elements is not allowed). Opportunities to re-sit a written paper, re-take a clinical exam, resit a Special Study Module or any other piece of coursework, or retake a clinical placement block in year 5 are offered where appropriate, and are signposted for students.
MD 4.3 Students have a chronological seven-year period following registration, within which they must complete their studies. This period includes time that may be taken out to repeat a year of study, complete an intercalated degree between years 4 and 5, or suspend studies for personal reasons. If exceptional circumstances mean that a student will exceed this period, their case will be considered by the Head of the Medical School.

MD 4.4 Any student repeating a year must pass the resit year in order to progress. Students will not be permitted to repeat more than one year of study; if a student has previously resat a year, a repeat of a subsequent year is not permitted. In exceptional circumstances, the student’s case will be considered by the Head of the Medical School.

MD 5 CLASSIFICATION OF AWARDS

MD 5.1 The final award criteria for the MBChB degree have been detailed and approved through the programmes approval process. The year 5 Examination Board will determine whether a student has successfully met the final award criteria giving full countenance to exceptional circumstances as reported from the Exceptional Circumstances Committee, and reassessment opportunities as detailed below.

MD 5.2 In order to qualify for the overall award, students must have attained in full the minimum credit requirement for the programme by passing all of the components of all years.

MD 5.3 There will be three classes of MBChB degree awarded, calculated on the basis of the student’s overall ranking in the cohort. All medical schools are required to rank their students, based on their assessment performance across the programme, in preparation for their applications to the UK Foundation Programme early in year 5. Rankings are derived at the start of year 5 following the calculation of a weighted mean score (range 0 to 6.75) according to the formula shown below. Year 4 assessments receive more weight than those in years 1 to 3, as they are the final written and practical assessments.

MD 5.4 Formula for calculating an individual student’s overall performance across the course:

\[ \text{score} = \frac{2(x_1 + x_2 + x_3) + 3x_4}{4} \]

where \(x_1\) = mean score for year 1 (i.e. total points score over all assessments for year 1 \(\div\) number of assessments) and similar \(x_2, x_3, x_4\) for years 2-4.

MD 5.5 The score for an individual assessment is calculated as follows.

(a) The standard-set pass mark for an individual written exam is adjusted to a 60% pass mark by arithmetic scaling. The new mark is then banded according to the following ranges:

- 80-100% 85% Band
- 70-79% 75% Band
60-69%  65% Band  
50-59%  55% Band  
Less than 50%  45% Band  

(b) The percentage mark which the student has obtained in the OSCE and the LCA is banded according to the following ranges:

| Range                                      | Band  
|--------------------------------------------|-------
| > cut score + 2 standard deviations         | 85%   
| between >cut score + 1 s/d and cut score + 2 s/d | 75%   
| between cut score and cut score + 1 s/d     | 65%   
| Failed (below cut score and/or failed on no. of stations) | 55%   

(c) Points are then assigned to the banded marks according to the following table:

<table>
<thead>
<tr>
<th>Year of study</th>
<th>Written examinations, OSCEs and LCA</th>
<th>Coursework</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-4</td>
<td>Band 85 = 3 points</td>
<td>80% or over = 3 points</td>
</tr>
<tr>
<td></td>
<td>Band 75 = 2 points</td>
<td>65-79% = 2 points</td>
</tr>
<tr>
<td></td>
<td>Band 65 = 1 point</td>
<td>50-64% = 1 point</td>
</tr>
<tr>
<td></td>
<td>Fail (first attempt) (bands 55 and 45) = 0 points</td>
<td>Fail &lt;50% (first attempt) = 0 points</td>
</tr>
</tbody>
</table>

MD 5.6 When the rankings have been calculated, they are given to the students and passed to the North West Foundation Programme Office where they contribute to the students’ success in obtaining their choice of Foundation programme. At the final Examination Board, the rankings (which are divided into deciles) are used to classify the awards as follows.

(a) Students in the 1st decile are awarded the degree of MBChB with Honours.

(b) Students in the 2nd decile are awarded the degree of MBChB with Commendation.

(c) All other students are awarded the degree of MBChB.

MD 6 REASSESSMENT

MD 6.1 A student who fails any component of the assessment in a given year (including SSM) will be required to undertake a reassessment for that component and must pass it before they can progress to the next year or graduate. All other coursework must be passed in order to graduate (see paragraphs MD 6.4-6.6 for further details of reassessment).

MD 6.2 Students in years 1-4 will be given the opportunity to undertake reassessment within the same academic year in which they made their first attempt. If a student fails one of the rotations of year 5, they will not be able to undertake reassessment within the same academic year but will be required to repeat some or all of the final year in the following academic year, subject to discussion of the case at the year 5 Examination Board.
MD 6.3 A student undertaking reassessment of a failed Special Study Module 2 or 3 will be required to sit a new project with a new supervisor. The maximum mark permissible for the resat Special Study Module 2 or 3 is 50% (0 points).

MD 6.4 A student undertaking reassessment of a failed year 4 Quality Improvement in the Community report will be required to resubmit the report during the same academic year. The maximum mark permissible for the resubmitted report is 50% (0 points). If a student fails the resubmission they will be permitted to progress to year 5 but will be required to repeat the report in that academic year, using a new topic. The maximum mark permissible for the repeated report is 50% (0 points).

MD 6.5 A student undertaking reassessment of a failed piece of year 3 Professional Practice, Values and Ethics Case Analysis coursework will be required to resubmit the coursework during the same academic year. The maximum mark permissible for the resubmitted coursework is 50% (0 points). If the student fails at the resubmission stage, they will be permitted to progress to year 4 but will be required to repeat the Case Analysis coursework in that academic year, submitting a different case. The maximum mark permissible for the new case will be 50% (0 points).

MD 6.6 A student undertaking reassessment of a failed piece of year 4 Health, Culture and Society coursework will be required to resubmit the coursework during the same academic year. The maximum mark permissible for the resubmitted coursework is 50% (0 points). If the student fails at the resubmission stage, they will be permitted to progress to year 5 but will be required to repeat the Health, Culture and Society coursework in that academic year, submitting an essay on a different topic. The maximum mark permissible for the new case will be 50% (0 points).

MD 6.7 When all the results of reassessment are available the overall profile will then be considered following procedures detailed in Consideration and confirmation of results.

MD 6.8 The following exit awards will be available for students who leave the MBChB programme before the final year, as follows:

(a) BSc (Hons) Medical Sciences will be awarded to a student who has passed all of the components of years 1-3 of the programme but will not progress into year 4 for the following reasons:

- poor academic performance
- not wishing to continue with a career in medicine
- being found not fit to practise medicine

(b) The students’ marks for the assessments are converted to a score using the formula where \( x_1, x_2 \) and \( x_3 \) are calculated as described under MD 5.4 – MD 5.6. The scores of all students in the cohort are ranked and then divided into deciles. The BSc (Hons) degree will be classified according to the decile as:

- Deciles 1 and 2 – first class
- Deciles 3, 4, 5, 6 and 7 – upper second class
- Deciles 8 and 9 – lower second class
- Decile 10 – third class
BSc (Hons) Advanced Medical Sciences will be awarded to a student who has passed all of the components of years 1-4 of the programme but will not progress into year 5 for the following reasons:

- poor academic performance;
- not wishing to continue with a career in medicine;
- being found not fit to practise medicine.

The students’ marks for the assessments are converted to a score using the formula shown in paragraph MD 5.4. The scores of all students in the cohort are ranked and then divided into deciles. The BSc (Hons) degree will be classified according to the decile as:

- Deciles 1 and 2 – first class
- Deciles 3, 4, 5, 6 and 7 – upper second class
- Deciles 8 and 9 – lower second class
- Decile 10 – third class

**MD 7 INCOMPLETE ASSESSMENT AND EXCEPTIONAL CIRCUMSTANCES**

**MD 7.1** For the purposes of these regulations ‘exceptional circumstances’ will mean properly evidenced and approved claims from students that demonstrate good cause as to why their performance and achievements have been adversely affected by means which have not been fully addressed through extension and other available assessment procedures.

**MD 7.2** For the purposes of these regulations ‘good cause’ will mean illness or other relevant personal circumstances affecting a student and resulting in either the student’s failure to attend an examination, or submit coursework at or by the due time, or otherwise satisfy the requirements of the scheme of assessment of the MBChB programme; or, the student’s performance in examination or other instrument of assessment being manifestly prejudiced.

**MD 7.3** A chronic medical condition, for which due allowance has already been made, will not itself be considered a good cause although a short-term exacerbation of such a condition might be so judged.

**MD 7.4** ‘Evidence’ will mean a report descriptive of the medical condition or other adverse personal circumstances which are advanced by the student for consideration as amounting to good cause. Such a report should include a supporting statement from an appropriate person. Where the report refers to a medical condition of more than five days’ duration the report must be completed by an appropriate medical practitioner who would be requested to comment on how the medical condition concerned would be likely (if this were the case) to have affected the student’s ability to prepare for or carry out the assessment(s) in question.

**MD 7.5** Where an incomplete assessment may be the result of good cause, it will be the responsibility of the student concerned to make the circumstances known to Lancaster Medical School and to provide appropriate evidence. Notification later than forty-eight hours after the examination, or after the date at which submission of the work
for assessment was due, will not normally be taken into account unless acceptable circumstances have prevented the student from notifying the Medical School within this time.

MD 7.6 Lancaster Medical School will have an Exceptional Circumstances Committee whose primary responsibility it is to consider claims of good cause for the MBChB programme. Any such claims would be subject to confirmation by the Examination Boards at a later date. The Exceptional Circumstances Committee would be required to meet at least once per annum prior to the final Examination Boards, but might usefully meet to consider claims of good cause on a more frequent basis. The Exceptional Circumstances Committee will produce minutes of its meetings to be submitted to the appropriate Examination Board.

MD 7.7 Guidance on the management and operation of Exceptional Circumstances Committees can be found in General Regulations for Assessment and Award.

MD 7.8 In considering claims of good cause:

(a) the evidence provided by the student claiming good cause, and any relevant and available material submitted by him or her for assessment will be scrutinised;

(b) fairness to the individual student claiming good cause must be balanced with fairness to other students and the integrity of the assessment as a whole;

(c) in the event of the student having failed to attend an examination or examinations, or having failed to submit course material or other work for assessment at or by the due time, it will be determined whether the failure to attend or submit has been justified by good cause;

(d) in the event of the student having submitted work for assessment by examination or otherwise, it will be determined whether such work has been manifestly prejudiced by good cause. If such prejudice is established the work affected will normally be deemed not to have been submitted.

MD 7.9 Where it is determined that the evidence presented supports the student’s claim that her/his academic performance was affected by good cause during the academic year, or by circumstances which occurred during the summative examination period, the student will be automatically granted the right to take the resit examinations in August as if they were the first attempt, should she/he fail one or more components of the summative examinations. Should the student then fail the reassessment, she/he will be permitted to repeat the whole year of study. In this repeat year, she/he will sit those assessment components which were failed in the previous academic year in the summative exam period as if they were the second attempt. If the OSCE examination (and the LCA examination in the case of a year 4 student) had been previously passed, it will be taken again in order for the students’ clinical skills to be kept current.

MD 7.10 Where it is determined that the evidence presented supports the student’s claim that her/his academic performance was affected by good cause by circumstances which occurred during the resit examination period, the student will be automatically granted the right to repeat the whole year of study. In this repeat year, she/he will sit
those assessment components which were failed in the previous academic year in the summative exam period as if they were the second attempt. If the OSCE examination (and the LCA examination in the case of a year 4 student) had been previously passed, it will be taken again in order for the student’s clinical skills to be kept current.

MD 7.11 Where it is determined that the evidence presented supports the student’s claim that her/his academic performance was affected by good cause during a period of coursework such as a four-week Special Study Module, meaning that she/he was not able to complete the coursework or was awarded a fail mark, she/he will be permitted to take a further Special Study Module during the summer which will be treated as the first attempt. Should this coursework be failed, another Special Study Module will be sat during the summer as the second attempt if there are sufficient weeks available to do this. If there is insufficient time, the student will be automatically granted the right for a further attempt at the Special Study Module but will suspend studies rather than repeat the year; it is not possible for the student to progress into the next year until the Special Study Module has been passed. A student in this position will not be required to resit the OSCE examination.

MD 7.12 Repeating the whole year of study is the only option for students on the MBChB programme of study if they have not passed all of the assessments by the completion of the resit examination period. It is not possible for any failed components to be carried into the next year of study, with the exception of the year 3 Professional Practice, Values and Ethics coursework (see paragraph MD 6.5), the year 4 Health, Culture and Society coursework (see paragraph MD 6.6) and the year 4 Quality Improvement in the Community coursework (see paragraph MD 6.4).

MD 7.13 Where it is determined that the evidence presented does not support the student’s claim that her/his academic performance was affected by good cause during the academic year, or by circumstances which occurred during the examination periods, or during a period of coursework, the student’s original assessment result will stand and they will have to resit any failed assessment components as the second and final attempt for the year. If they fail at the resit stage, their studies will be terminated.

MD 7.14 A student who is permitted by Lancaster Medical School Review Committee to repeat the year will have to sit all assessments (except for coursework if previously passed), but will be granted the same number of attempts as the rest of the cohort i.e. will be permitted the August resit opportunity. For the purposes of ranking, the student will receive the points relating to their first attempt:

- 0 points for the failed components
- The first attempt marks for those components which were passed.

When taking previously passed components in the repeat year, students must pass each component again in order to progress to the next year. However, as stated above, they will receive ranking points relating to their first attempt, hence it is not possible to gain higher points in the repeat year.
MD 8 CONSIDERATION AND CONFIRMATION OF RESULTS

MD 8.1 Senate has ultimate authority to determine all results of assessment leading to Lancaster University credit and awards. It exercises its authority to make final decisions as to granting of all credit-bearing University awards, primarily through the Committee of Senate with non-standard cases considered and recommended by the Classification and Assessment Review Board.

MD 8.2 The Committee of Senate provides:

(a) formal confirmation (or not) of recommendations from Boards of Examiners for the award to individual students of the MBChB degree of a particular class;
(b) formal approval of recommendations from Boards of Examiners that students be awarded no degree with or without a further re-sit opportunity (i.e. Fails);
(c) formal ratification of first, second, third, fourth and fifth year results in the MBChB degree, including the timing and nature of re-sit opportunities for failed elements.

Further procedural details are set out in Procedures for the Committee of Senate.

MD 8.3 For each year of the MBChB programme there will be an Examination Board comprising external and internal examiners which will be responsible for the assurance of standards through the exercise of their academic judgement both directly in the assessment of students’ work and indirectly in the design of specific forms of assessment. Clinicians who are nominated by Lancaster Medical School because they have primary responsibility for part of the medical degree programme including assessment will be entitled to be members of examination boards and will be termed “internal examiners”. The constitution and terms of reference for examination bodies within the constituent elements of the University are set out in the section on Examination Boards.

MD 8.4 The Examination Boards will receive decisions from the Exceptional Circumstances Committee. Examination Boards cannot, of themselves, reconsider or change decisions of the Exceptional Circumstances Committee. Examination Boards may challenge decisions of Exceptional Circumstances Committees by referring final decisions to the Committee of Senate via the Classification and Assessment Review Board, or equivalent body.

MD 8.5 The Examination Boards for years 1-4 will consider and confirm marks derived from all assessments taken and examined in the academic year under consideration. The Year 5 Examination Board will receive the results of assessments from years 1-4 and will consider and confirm the year 5 assessments. The year 5 Examination Board will make recommendations to the Committee of Senate with non-standard cases referred for consideration and recommendation via the Classification and Assessment Review Board as to the award of the MBChB degree (and the class of degree) within the approved degree programme classification scheme. Details of the role and operation of Examination Boards can be found here.

MD 8.6 The business of the Examination Boards will be minuted and the minutes will include a record of the External Examiner’s adjudications, comments and recommendations, as well as particular decisions made by the Board. The minutes will also record the
decisions of the Exceptional Circumstances Committee for each candidate considered by that committee (although detailed discussion of circumstances should not be undertaken at the Examination Board). The minutes must include a list of attendees (together with their status as external or internal examiners or assessor). This record of the proceedings of the Board will be restricted and made available only to: the participating examiners and assessors, the Vice-Chancellor and other officers of the University as appropriate; the Committee of Senate and the Classification and Assessment Review Board; and appropriate review and appeal committees. Where the Examination Board has exercised its discretion in a particular case, as provided by these Regulations, the Committee of Senate via the Classification and Assessment Review Board will normally uphold its decision providing it had the support of the majority of the external examiners present at that Examination Board.

**MD 9 PUBLISHED INFORMATION**

**MD 9.1** The determination of results and the classification of University degrees are subject always to ratification by the Committee of Senate and will be regarded as provisional until ratified.

**MD 9.2** Immediately after the meeting of the relevant Examination Board, Lancaster Medical School may notify students of their provisional degree results.

**MD 9.3** Within forty days of the ratification of degree results, students will receive a transcript of their results together with a Higher Education Achievement Report, both of which will conform in scope and layout to principles agreed by Senate.

**MD 10 EXCLUSION**

**MD 10.1** Students who, after undertaking agreed reassessment opportunities, fail to meet the stipulated criteria for progression or final award, shall be subject to the University’s approved review and appeal procedures, after which, if the failure is confirmed, they will be excluded from the University.

**MD 11 ACADEMIC APPEALS**

**MD 11.1 PRINCIPLES**

**MD 11.1.1** Matters relating to a mark or grade for any assessment or an overall result shall be subject to the authority of the University, and agents acting on its behalf, in reaching academic judgements. The University, exercising its authority under its Statutes, acting through the decisions of boards of examiners as confirmed by the Committee of Senate, has sole authority to determine whether or not a degree, certificate or diploma should be awarded to a particular candidate and, if so awarded, the specific class or other description of attainment, appropriate to the level of the award.

**MD 11.2** However, it is recognised by the University that there are non-academic elements to assessment judgements which might have adversely affected the outcome and that there are occasions where students may wish to appeal against an assessment outcome on such grounds. The procedures set out in this section explain how this appeal process will be managed, the responsibilities of all parties, and the opportunity
for external scrutiny should students remain dissatisfied with the University’s decisions.

MD 11.1.3 These procedures apply to all current students registered on the Lancaster University MBChB programme. Students who want to appeal and feel that they have good reason to do so must declare their intention to appeal within 10 calendar days of the publication of results. Exceptions to this timescale will be determined on a case-by-case basis by the Head of the Student Registry.

MD 11.1.4 The University, through its academic staff and assessment mechanisms, ensures that proper academic judgement is used in all assessment and moderation (see the General Regulations for Assessment and Award). Academic judgement thus stands outside of these procedures and cannot be subject to appeal.

MD 11.1.5 The right of appeal is available to all students who:

(a) have failed to qualify to proceed from one stage of the degree programme to the next;
(b) have failed to qualify for the award of the degree for which they were registered;
(c) wish to challenge, on procedural grounds, the class of degree to be awarded;
(d) received a lower class of degree than would otherwise have been the case had plagiarism penalties not been applied.

MD 11.1.6 A *prima facie* case for appeal will be deemed to exist if there is evidence of one or more of the following, which for good reason, could not be brought to the attention of boards of examiners at the relevant time and which could have influenced their recommendations had the information been available at that time:

(a) material administrative error or irregularity in the conduct of assessment which adversely affected the student’s performance and results;
(b) significant extenuating circumstances which adversely affected the student’s performance and results;
(c) unfair treatment or discrimination, outwith the exercise of academic judgement.

MD 11.1.7 Students will not be hindered in making a reasonable appeal. All parties will act without bias or prejudice and in a sensitive, fair and prompt manner.

MD 11.1.8 The objective of the procedure is to establish the facts and come to a reasonable and just resolution, which is both relevant and proportionate.

MD 11.1.9 No students will be disadvantaged for making appeals in good faith, and all reasonable appeals will be taken seriously and dealt with according to the agreed procedures. However, if it is established that appeals are frivolous or spurious, then they will not be considered reasonable, and the University may take disciplinary action.

MD 11.1.10 The University will deal with all appeals confidentially so far as it is able, and expects all parties involved to honour this approach.
MD 11.1.11 All reasonable measure will be taken to ensure that no student is disadvantaged within these processes due to location, requirements associated with protected characteristics, etc. Technology will be used, as appropriate, to facilitate these procedures.

MD 11.1.12 Advice on how to use these procedures is available from the Students’ Union Education and Welfare Office or the Student Registry.

MD 11.2 APPLICATIONS AND IMPLEMENTATION OF THE PROCEDURE

MD 11.2.1 The Academic Appeals procedure only applies to appeals initiated and conducted by an individual student or group of students. A group of students wishing to appeal collectively will need to provide reasons as to why they should be considered collectively. These will be subject to consideration and judgement by the Head of the Student Registry whose decision will be final (a decision to not consider an appeal collectively does not preclude students from pursuing individual appeals). Where a collective appeal has been agreed, the group will nominate a spokesperson for communication.

MD 11.2.2 An appellant has the right to be accompanied and supported at any meeting by one person, and may be represented where the appellant expressly authorises a third party in writing to act on their behalf. Reasonable adjustment will be made in the processes as necessary to meet requirements related to protected characteristics.

MD 11.2.3 The University will make every reasonable effort to complete academic appeal procedures in a timely manner and aims to complete all aspects of the appeals process within ninety calendar days. If the University is unable to comply on reasonable grounds (for example, in factually complex matters involving a number of individuals, etc.), it will provide the appellant with an explanation and inform them of the timeframe in which the procedure will be completed.

MD 11.2.4 In this procedure any reference to named members of the University staff also includes reference to her/his nominee and named staff may delegate their responsibilities to other appropriate members of staff, including those suitably qualified in partner organisations, without invalidating the procedure. The identity of nominees or members of staff to whom responsibilities are delegated will be notified to the appellant.

MD 11.2.5 The Academic Appeals procedures, as set out, act to fulfil the University’s obligations under Ordinance 7 in relation to appeals against exclusion on academic grounds.

MD 11.2.6 The Head of the Student Registry will oversee this process and provide advice. Any evidence of breaches of the principles as set out in MD 11.1.4-MD 11.1.11 above should be brought to the attention of the Head of the Student Registry for investigation.

MD 11.2.7 Should a student wish to register a concern about the actions of the Head of the Student Registry it should be sent to the Director of Student Based Services.

MD 11.2.8 The Academic Quality and Standards Committee will receive an annual report on academic appeals and is responsible to both Council and Senate for monitoring
academic appeals and agreeing institutional actions as required. UMAG will also receive the report for information.

**MD 11.3 THE PROCEDURE**

*The University uses a two-stage procedure.*

**Stage 1 – the Formal Appeal**

**MD 11.3.1** In order for an academic appeal to be considered formally, the appellant must indicate their intention to appeal using the Academic Appeal form (available for online submission and in hard copy) and send it to the Head of the Student Registry.

**MD 11.3.2** Should the issue be immediately resolvable (for example, a simple recording error), the Head of the Student Registry will draw this to the attention of the relevant Exam Board Chair who will agree amendments by Chair’s Action. If this is not the case, the Head of the Student Registry will refer the case to the Head of Lancaster Medical School for consideration by the Medical School’s Academic Appeals Panel against the criteria set out in MD 11.1.6. Students have the right to challenge the *prima facie* decision and, in these cases, the decision will be reviewed by the Complaints Coordinator, or designated alternative nominated by the Director of Strategic Planning and Governance.

**MD 11.3.3** It is expected that the student will provide full information with accompanying evidence for consideration by the Panel. However, in exceptional cases, where appropriate, an investigation to determine the facts of the appeal can be undertaken; an academic member of staff unconnected to the appeal will do this supported by the Student Registry.

**MD 11.3.4** The Medical School’s Academic Appeal Panel will have the following membership:

- Head of Lancaster Medical School (Chair)
- Deputy Director of Medical Studies
- external representative who can be drawn from a pool of experts in medical education, clinical training or relevance to the case/s

The School Manager will also be in attendance throughout as note taker.

The date for the Academic Appeals Panel following the resit exams will be formally scheduled into the timetable of meetings, but the Panel can also be called on an ad hoc basis as necessary. In each case, the Panel shall have the right of access to detailed marks in the candidate’s units of assessment. In addition all details of cases where the board of examiners have permitted a student to be reassessed as first attempt candidates will be available to the Panel. The appellant may attend the event, although it is not required and failure to attend would not stop the proceeding. If present, the appellant will be invited to make a short personal statement to further elucidate the submitted materials. The Panel will be allowed, through the Chair, to question the appellant. It will not normally be permissible to call witnesses as part of the Panel hearing; however, the Chair may allow it at their discretion. The appellant will be given the opportunity to sum up their position. The burden of proof will be on the appellant, albeit within a recognition of the responsibilities of the University.
Following the proceeding, the Panel will deliberate in private using the balance of probability as the standard of proof, and reach a decision. A member of the Student Registry will be available to provide advice on the scope of actions/remedies available to the Panel.

MD 11.3.5 The potential options for outcomes are as follows:

(a) Exclusion
(b) Confirmation of failure
(c) Confirmation of existing degree classification
(d) Reconsideration of candidate in accordance with the regulations relating to incomplete and exceptional circumstances, as detailed in the General Regulations for Assessment and Award and the Undergraduate Assessment Regulations
(e) Agreement to allow the student to retake the entire year
(f) Agreement to temporarily exclude the student allowing a reassessment the following year
(g) Amendment to the awarded degree classification.

MD 11.3.6 The appellant will receive a written decision that addresses the points they have made and gives reasons for the conclusion reached. The letter will also advise the appellant of their right to refer the matter to Stage 2 and describe the means to do so.

Stage 2 – the Review Stage

MD 11.3.7 If the appellant feels their appeal has not been resolved under Stage 1, they may apply for a formal review to the Head of the Student Registry within two weeks of the date of the Stage 1 written decision. They should explain why they feel dissatisfied with the outcome at Stage 1 and what remedy they seek. Requests for Stage 2 consideration can only be made on the following grounds:

(a) that there exists evidence that could not reasonably have been made available at Stage 1; or
(b) that there exists evidence of a material procedural irregularity in Stage 1; or
(c) that there exists evidence that the judgement at Stage 1 did not meet the expectations of natural justice.

No new ground of appeal may be requested at Stage 2, but the appellant may submit further evidence in support of their case (subject to point (a) above) or suggest a new remedy. For those students facing exclusion this fulfils the University’s obligations under Ordinance 7.

MD 11.3.8 The Head of the Student Registry, or designated alternative nominated by the Director of Students, Education and Academic Services will consider the application and make a prima facie decision as to whether or not to instigate a review. Where a review is rejected the Head will write to the appellant explaining the reasons for the decision and providing a Completion of Procedures letter that sets out their right to refer the matter to the Office of the Independent Adjudicator and describes the means to do so.

MD 11.3.9 Where a review is deemed within the scope of the procedures a Review Panel will be convened. The panel will consist of either the Pro-Vice-Chancellor (Education) or the
Provost for Student Experience, Colleges and the Library (in the chair) and two other members of academic staff (appointed by the Vice-Chancellor). No members of the panel will have been associated with the appeal or the Faculty or equivalent institutional body of the appellant.

MD 11.3.10 The Head of the Student Registry, or nominee, will act as Clerk to the panel and will prepare the documentation. The Chair of the Medical School Academic Appeals Panel will be invited to submit a statement addressing the appellant’s submission. The appellant may submit additional material only if there are good reasons why it was not submitted at Stage 1 (see MD 11.3.8 above). Both the appellant and the Chair of the Appeal Panel will be invited to attend; however failure to attend by either party will not invalidate the proceeding, as determination can be made via the submitted documentation.

MD 11.3.11 If present, the appellant will be invited to make an opening statement as to why, in their view, the case should be subject to review. This will be restricted to consideration against the identified review grounds; the Review Panel will not rehear the original appeal. If present, the Chair of the Stage 1 Medical School Academic Appeals Panel will then be invited to present an opening statement explaining how the Stage 1 decision was determined and how, in their view, it was reasonable. If the appellant presents either new evidence or alternate remedies the Stage 1 Academic Appeal Panel Chair will also be invited to comment on these. Neither the appellant nor the Stage 1 Academic Chair will be allowed to question the other, but the members of the Review Panel, through the Chair, may question either. Both the Stage 1 Chair and the appellant will be given the opportunity to sum up their position. The burden of proof will be on the appellant, and the standard of proof will be on the balance of probability. Following the proceeding, the panel will deliberate in private and will determine their conclusions, including, as appropriate, any modifications and/or additions to the Stage 1 actions/remedies. Only in exceptional circumstances would a rehearing at Stage 1 be recommended. The Head of the Student Registry will provide advice on the scope of actions/remedies available to the Panel.

MD 11.3.12 The appellant will receive a written decision that addresses the points they have made and gives reasons for the conclusion reached. They will also receive a Completion of Procedures letter which will also advise the appellant of their right to refer the matter to the Office of the Independent Adjudicator and describe the means to do so.

MD 11.4 OFFICE OF THE INDEPENDENT ADJUDICATOR

MD 11.4.1 Once all internal procedures have been exhausted, if the student is still not satisfied they have the right to take the case to the Office of the Independent Adjudicator (OIA) for Higher Education, for further review. The application to the OIA must be made within 12 months of the issue of the Completion of Procedures letter. Information about the OIA and its processes can be found at http://www.oiahe.org.uk/.