



QUALITY ASSURANCE

Purpose

The following guidance is designed to help Medipro to effectively deliver, assess and quality assure the courses provided (including QA Level 5 Diploma in First Response Emergency and Urgency Care (QCF) and QA Level 6 Diploma in Paramedic Practice (RQF)) in line with the qualification specifications and best practice guidelines.

The Quality Assurance Strategy for these qualifications have been developed, taking into consideration each qualification and the units contained within them.

This parallel approach has made sure that:

- Qualification Developers and unit writers have identified appropriate assessment methodologies, which are cost effective and efficient for Medipro to deliver
- a range of assessment methodologies and learning preferences have been considered
- assessments are valid and reliable
- assessments are future proofed, in terms of flexible learning, e-learning and e-assessment

Scope

This Policy applies to all students/tutors with Medipro.

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Aim

The aims of this Quality Assurance Strategy are to make sure that:

- assessment is appropriate and fit for purpose in relation to:
 - the subject of each qualification
 - the content of the units contained within each qualification
 - the qualification level
- assessment is embedded within the learning and teaching
- the assessment burden is minimised
- opportunities for integration of assessment have been explored and taken
- assessment is manageable
- opportunities for various types of assessment have been explored and taken

Benefits

The benefits of having a good Quality Assurance policy include:

- making sure all staff are clear on the requirements of the qualification
- making sure delivery, assessment and quality assurance is standardised across Medipro
- making the learning experience more meaningful to students
- helping with progression to work or further study

Other potential benefits to Medipro include:

- improved retention rates on the programme
- reduction in staff and Student workload
- assists with timetabling and planning
- good for self-evaluations and other quality indicators

Points to consider

The following points were considered when developing this Quality Assurance policy.

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Purpose, objective, and tasks

- The purpose of the qualifications - The Purpose and Sub Purpose for the QA Level 5 Diploma in First Response Emergency and Urgent Care (RQF) are:
 - Purpose: D. Confirm occupational competence and/or License to Practice
 - Sub Purpose: D1. Confirm competence in an occupational role to the standards required
- The Purpose and Sub Purpose for the QA Level 6 Diploma in Paramedic Practice (RQF) are:
 - Purpose: D. Confirm occupational competence and/or License to Practice
 - Sub Purpose: D2. Confirm the ability to meet a 'licence to practice' or other legal requirements made by the relevant sector, professional or industry body
- The objective of the qualifications and how the Quality Assurance Strategy help to achieve these objectives. The objectives relate to the qualification content, specifically the units and learning outcomes contained within the qualifications, and therefore consideration was given to the context in which the clinical skills and knowledge are located.
- The types of tasks Students with the qualifications will be expected to do in a job role or study situation to which the qualification leads.

What will the end user of the qualifications, e.g. an employer, expect the student to do?

If assessment can be linked to these types of tasks, this will make the assessment and the qualification more meaningful for students, and better prepare them for work or further study.

- **Paramedics Course only:** The occupational competencies and standards set by the professional body relating to the qualifications

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- The Health and Care Professions Council (HCPC) standards of proficiency set out safe and effective practice in the related professions, which they regulate, which these qualifications fall within. They are the threshold standards considered necessary to protect members of the public. They set out what a student must know, understand and be able to do by the time they have completed their training, so that they are able to apply to register with the HCPC. Once on the Register students must meet those standards of proficiency which relate to the areas in which they work. The HCPC also expect students to keep to their standards of conduct, performance and ethics and standards for continuing professional development.

With these considerations in mind, and as both qualifications are designed to confirm occupational competence, Medipro will use portfolio-based evidence (containing valid and reliable work-based assessment methods such as observations in the workplace, witness testimonies and simulation where allowed as well as knowledge based assessments such as assignments and case studies) as the main type of assessment.

Sequencing and timing

- Assessment will be sequenced so that the work is spaced evenly throughout the course programme. Therefore, this would include consideration of:
 - the type and volume of assessment
 - which assessments can be carried out over time
 - what should be undertaken as end-of-unit assessment
- Avoid the bunching of assessment and particularly the bunching of the same type of assessment
- Consider the amount of time Students need to prepare for summative assessment
- Reassessment needs to be built into the thinking and planning of assessment

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Integration

Integration refers to the mixing of topics and/or a wider set of skills. To be meaningful the level of integration cannot be such that it makes the assessment more burdensome or difficult. Medipro will make sure that integration of delivery and assessment does not create higher levels of demand on Students than would be required for a unit or learning outcome if integration did not occur.

e-Learning and e-Assessment

e-Learning and e-Assessment can take different forms including the use of e-Learning platforms, webinars, e-testing, e-portfolios, blogs, etc.

There are many benefits to using these methods including:

- Greater flexibility in when and where learning and assessment can take place
- Increased motivation for Students using media-rich elements
- Support for preferences in different learning styles and assessment approaches
- Immediate feedback to students (depending on the type)
- Time savings for assessors through automatic marking (depending on the assessment tool)
- Assessment management is easier and quicker
- Support for students who use assistive technologies in learning and assessment
- Cost savings, quality assurance gains and improved administration

For these reasons, we will consider opportunities for e-Learning and e-Assessment for units and qualifications if Medipro wishes to develop such methods.

This does not mean every learning module and assessment can be delivered for these qualifications through e-Learning/e-Assessment, but it does mean that, where appropriate and agreed, the choice is available. For example, portfolio evidence could be collated and presented electronically.

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Process

This Quality Assurance Strategy for courses provided (including QA Level 5 Diploma in First Response Emergency and Urgency Care (QCF) and QA Level 6 Diploma in Paramedic Practice (RQF)) has been:

- devised and agreed by QA's Qualification Development Team (QDT)
- developed in collaboration with employers and other key stakeholders
- presented to the Governing Body for its validation
- confirmed by the Governing Body
- added to the QA portal for download

The qualification specification for each qualification recommends we use this strategy when planning, timetabling, and delivering the qualifications.

This Quality Assurance policy is based upon:

- a strong rationale for the delivery, assessment and quality assurance approach recommended, indicating clearly:
 - a course overview
 - the assessment strategy
 - internal and external quality assurance requirements
- evidence gained from market research, feedback from employers, views from Centre staff, etc.

It details how the strategy might work in practice. This would include the suggested sequence of assessment, timing and integration and how it might impact on learning and teaching.

Appendices that follow show:

- a deliver timeline
- the volume, type, weight and spread of assessment
- a timeline for the assessment
- recommended sampling strategy for internal quality assurance

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- recommended sampling strategy for external quality assurance

Assessment

The Quality Assurance Agency (QAA) Quality Code Chapter B6: Assessment of students and the recognition of prior learning (2013) sets out the basic requirements for all those involved in delivering education which leads to an award from or is validated by a UK higher education provider. It ensured that their assessment processes are appropriate which covers:

- Ensures the education provider meet any responsibilities of legislation or any other regulatory requirements placed upon them;
- Promoting an inclusive approach by embedding consideration of equality and diversity matters;
- The importance of assessment for the maintenance of academic standards, through, for example, the consistent application of regulations;
- Procedural matters, such as the need for assessment to be 'secure'.

The first precept is fundamental to everything which follows: that Medipro is responsible for the awards made or claimed in its name and must be able to justify what assessment is done and how. This means that as an education provider we must have robust procedures to ensure that quality and standards are maintained and we must be able to say that we 'know' and be able to show how we 'know'. This is of particular significance at the point at which a student's performance is evaluated and an award made/requested or withheld.

The function of Medipro's Assessment Policy is therefore set out:

- The over-arching aims of assessment
- The means by which quality and standards are assured
- Guidance on good practice in assessment

The aims of assessment

Assessment should:

- Provide an opportunity for students to obtain feedback on their learning to help them improve their performance

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- Measure the outcomes of students' learning, in terms of knowledge acquired, understanding developed and skills gained
- Provide the means by which students are graded, passed or fail. This forms the basis for decisions about whether a student is ready to proceed, to qualify for an award or to demonstrate competence to practice
- Provide information which, in conjunction with other feedback, will enable staff to evaluate the effectiveness of module and/or programme design as well as the teaching and learning strategy employed.

Academic standards

Medipro seeks to ensure that assessment supports academic standards through a range of processes which include:

- Programme and module approval
- Programme review
- The setting and marking of assessed work

Regulations, qualifications and level descriptors are generally determined by the awarding body. However, Medipro as a training and education provider have responsibility to set generic assessment criteria and provide robust evidence to support a claim of an award. Academic staff are responsible for setting and marking assessed work and participating in the assessment review and standardisation meetings. All assessments need to be appropriate to the academic level and support the achievement of the learning outcomes.

Learning outcomes are set at threshold level, and assessment involves grading the work submitted not only at threshold level but above this, to indicate a range of achievement in excess of the threshold requirement and below it, to indicate a range of achievement below that requirement. Assessment criteria are therefore essential to define the performance which will generate a given mark.

Good practice in assessment

Assessment is usually categorised as diagnostic, formative or summative.

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- Diagnostic assessment describes pre-test which indicate to the student gaps in their knowledge and to the assessor suitability for a course or competence. It can be used as a prerequisite or to assess prior learning.
- Formative assessments provide feedback to students on their understanding and grasp of the subject and development of skill as they progress through a course.
- Summative assessment provides a measure of achievement that is used to award credit

Information for students: the purpose, type and expectations of the assessment must be transparent to students through programme documentation. Students should be made aware of what the assessment is seeking to assess (the learning outcomes) and how this will be done. If different aspects of the assessment have different weightings, students should know this. Programme handbooks and the VLE/online portfolio site should have this information. Assessment criteria are then useful as a framework when giving feedback, as this helps to show what has been good and where improvement is required if the student is to gain a higher mark next time.

Assessment should be:

- Valid; assessment should be integral to learning and fit for purpose, particularly in relation to level, content and intended learning outcomes and be inline with national and company standards
- Equitable: assessment should be just, fair and fairly operated through consistent application, monitoring, evaluation and amendment
- Reliable; the judgements derived from assessment should be reliable, accurate, verifiable, agreed and consistent, criterion referenced and moderated
- Transparent: all parts of the assessment should be explicit and readily accessible to all parties including students, staff, internal quality assurance, assessors, moderators, placement or practice assessors and external examiners

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- **Appropriate:** the method of assessment should be a suitable measure of an intended learning outcome, effectively support the learning, be substantive but not excessive
- **Diverse:** across a programme a range of methods of assessment should be used, both to reflect the diversity of the learning outcomes and to allow students with different learning styles and prior experiences to demonstrate their learning effectively. Students with disabilities and those from a different learning culture (e.g. international students) can be particularly disadvantaged by over-reliance on one or two modes of assessment.
- **Efficient:** the assessment workload should be manageable for both students and staff. It is good practice for one assessment to assess more than one learning outcome, as this avoids assessment overload and encourages students to make links between different aspects of their learning experience

Assessment strategies should be discussed actively by subject teams from both MediPro and the awarding body to secure the relationship between the level, intended learning outcomes, assessment criteria and modes of teaching, learning and assessment. There is a variety of ways in which innovative and motivating learning and teaching strategies and assessment methods can be developed to maximise the opportunity for students to engage with learning and demonstrating their achievement of the learning outcomes. The fundamental point is that assessment should be designed into each module or course as part of the teaching and learning strategy:

- Programme aims provide an over-arching framework
- Level descriptors guide the writing of intended learning outcomes at the appropriate academic level and subject benchmarking
- Intended learning outcomes define the learning essential to pass the module and/or the programme
- A motivating and engaging teaching strategy provides the interaction and support necessary to enable students to be successful in attaining the intended learning outcomes
- An assessment strategy tests achievement of the intended learning outcomes

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- Assessment criteria build on the standard implicit in the learning outcomes and provide an incentive for higher achievement

Feedback on Assessment

If assessment is to support learning, feedback is essential to encourage feedback we should avoid the following situations:

- Students ignoring the feedback.
- Students not understanding what is written and/or how to use it.
- Feedback received too late to influence students, using this approach to their next piece of work.

Important issues in developing feedback are therefore:

- The timelines of feedback – how long students wait for the return of their work and the relationship between this and the hand-in date for the next piece of work. This includes the relationship between feedback on coursework and further summative work, particularly in the form of exams
- Whether feedback should be given on exams and, if so, how the timing of this should be managed
- Transparency in how feedback is presented: the use of clear English, and explicit links between the feedback and the assessment criteria so that students can see what a 'better' piece of work would look like
- Managing expectations: specifying the nature and extent of feedback that students can expect and being clear about any kinds of assessment on which feedback will not be given. This is also important in helping students recognise feedback when it is given. Students often overlook oral feedback, and group feedback on what was generally done well or badly
- Helping students to internalise the feedback process. This may include helping them understand the assessment criteria so that they can appreciate what the feedback relates to. Approaches to this may include asking students to:
 - mark dummy pieces of work to the published criteria and discuss it
 - estimate a mark for their own work when they submit it

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- comment in their next piece of work on the use they have made of feedback from the previous piece.

Assessment processes

The quality of assessment and the security of the assessment are supported by a range of processes and procedures:

- Writing assessment criteria
- Choosing the most appropriate method of assessment
- Marking
- Re-sits
- Moderation of assessment
- Plagiarism
- Feedback
- Off-site

Writing Assessment Criteria

Assessment criteria are a clear statement of what the student must do demonstrate effective learning at the level required for the work in question. Using clear assessment criteria aids the quality of judgement in marking, reduces subjectivity and increases the likelihood of fair and consistent marking.

Assessment criteria should be distinguished from marking distribution schemes (e.g. 10% of marks for introduction, 40% of the marks for the discussion). Marking distribution schemes tell students where the marks are distributed and not how to obtain high marks. They are a system of weighting, indicating priorities for the work which reflect the intended learning outcomes of a module or unit.

In each module the student has to demonstrate adequate knowledge and ability before credit can be awarded. Demonstrate means the production of evidence (generated by the assessment strategy), knowledge and ability are defined by the intended learning outcomes, which are at threshold level (adequate). Assessment criteria allow gradations of achievement to be identified through a mark scale. In doing this they help to:

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- clarify to students how their work will be judged and what is expected of them
- ensure consistency in the ways a module will be assessed by different tutors.

When work is marked the assessment criteria are applied in the context of the learning outcomes of the module or unit. The rationale for the mark and the feedback to students should reflect this synthesis.

The assessment criteria should indicate the balance between the various aspects of the work expected at each level of achievement – e.g. marks of 40-50% might be achieved for substantially accurate work while a mark of 50-60% might in addition put a higher priority on the evaluative quality of an argument. Assessment criteria therefore expand on the information provided in the intended learning outcomes, which are themselves at threshold level.

Criteria should not be too detailed, prescriptive or narrowly defined to allow for differences between modules within the subject area. Where necessary separate criteria may be drafted for different modes of assessment (e.g. essays, exams, performance, practical work, placements) and for work at different levels – but try to avoid having too many different sets of criteria which may confuse students.

Choosing the most appropriate method of assessment

Assessment that is fit for purpose uses the best method of assessment appropriate to the intended learning outcomes, the context, the students, the level and the subject. To help choose the most appropriate methods, here are some questions from Brown, Race and Smith, 1996 which may help to clarify the options.

If you want a written assessment instrument, which of the following should you choose from? - Consider the best uses of essays, reports, reviews, summaries, annotated bibliographies, case studies, journal articles, presentations and examinations.

Should the method be time-constrained? - Examinations, phase-tests, and in class activities might well be the most appropriate for the occasion. Time constrained test put students under pressure and in doing so assess their ability to operate without support materials to a tight timescale. They are also useful to prevent plagiarism.

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Is it important that the method you choose includes co-operative activity? - You might choose to assess students in groups, perhaps on group projects, poster displays or presentations.

Is a visual component important? - You might choose portfolios, poster displays, critique sessions or exhibitions.

Is it important that students use information technology? - Computer-based assessment can be utilised for example MCQ's, writing software, preparing databases, creating web pages.

Do you wish to try to assess innovation or creativity? - Students can demonstrate this by performances, exhibitions, poster displays, presentations, projects, student-led assessed seminars, simulations, games.

Do you want to encourage students to develop oral skills? - You might choose viva voce, presentations, audio or video tapes, assessed discussions or seminars, interviews or simulations.

Do you want to assess the ways in which students interact together? - You might assess negotiations, debates, role plays, interviews, selection panels and case studies.

Is the assessment of learning done away from Medipro important? - You may wish to assess learning in the workplace or placement so you may choose to assess learning logs, field studies, case studies, reflective journals or portfolios.

Is your aim to establish what students are able to do already? - This could involve diagnostic testing, profiles, records of achievements, portfolios, or viva voce.

Marking

Anonymous marking

Rationale: The main reason for anonymous marking is to avoid the risk of bias entering into the assessment process and thus ensure equity in the treatment of all students. This may be a positive bias – for example, because a marker knows that a student has worked hard, or has had to contend with personal difficulties – or a negative one - because a student has been difficult to deal with during the

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programme or because of prejudice against someone of a particular race or culture. Such bias may be unconscious – a background belief that a particular type of person finds this subject difficult, for example, and so will perform badly. It is important to stress that practising anonymous marking does not indicate that Medipro believes that such prejudices exist or that they influence marking. It is rather to reassure students that they cannot influence the assessment process and so to guarantee equity of treatment. In this way it actually protects academic staff against accusations of bias from students who are dissatisfied with their marks.

Process: All examinations must be marked anonymously. Students write their names on the top right-hand corner of the front page of their script, and then fold over the corner, sealing it down so that the name cannot be seen.

It is not a requirement to mark coursework anonymously. The advantages and disadvantages of this have been explored and Medipro has come to the conclusion that, on balance, the disadvantages outweigh the advantages of anonymity. This is mainly because it is difficult to give meaningful feedback which relates comments to students' previous performance when work has been marked anonymously. This is especially the case where oral feedback is given via the Virtual Learning Environment (VLE) or online portfolio. The risk of bias in assessment is addressed by moderation and double-marking practices. However this does not prevent a programme team or subject area which wishes to do so from marking coursework anonymously.

Some forms of assessment such as performance, practical work (e.g. OSCEs), some forms of visual art and placement activity, cannot be marked anonymously since it is inevitable that the marker will know the identity of the student concerned. In such cases further safeguards are needed which may include one or more of:

- marking by a team or group of staff;
- having the external examiner present at the event;
- having a second marker or moderator present at the event;
- double marking all the work;
- recording the assessment event (audio or video);
- using robust assessment criteria translated into an assessment grid on which the reasons for the mark(s) awarded are clearly recorded;

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- involving the student in the assessment process (e.g. for a placement) which may include formative feedback through the year as well as a summative decision.

Re-sits

All students will be eligible to a single re-sit of any assessment (unless stipulated by the awarding organisation that more than 1 re-sit is allowed) where the pass mark is not achieved. All re-sits, resubmissions or missed exams should occur within 20 working days from the original assessment date. Failure to achieve the required pass grade from the re-sit will result from the student being removed from the programme with constructive and objective feedback.

VIVA

A VIVA is an examination conducted by spoken communication. oral, oral exam, oral examination, viva voce. exam, examination, test - a set of questions or exercises evaluating skill or knowledge. A VIVA can be conducted when a student scores within 5% of the pass mark of their 1st assessment only. A VIVA should be recorded either video or voice recorded.

Moderation of Assessment

Rationale: Moderation of assessment is employed to ensure that the standards of marking are consistent within programme and reflect the agreed subject-specific assessment criteria. Since these are aligned to national or awarding body criteria this supports the comparability of standards across Medipro. All marking, including moderation, must take into account the relevant assessment criteria, the learning outcomes which the assessment is intended to assess, and any model answers or equivalent for the work in question.

Moderation before assignments/examinations are given to students

- There should be internal moderation of all proposed assessments – examination papers, time-constrained tests, assignments etc - for assessment at all levels. This may be carried out by an individual (who may also be the marking moderator for the module) or by a group of staff.

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- External awarding bodies and their external examiners should be consulted on all examination papers for modules which count towards the final award. They should also be consulted in general terms about coursework assessment and it is good practice for external examiners to approve coursework assignments where this is feasible.

Moderation and double marking of student work - definitions

- Moderation is the process of verifying the assessment by having a second and, on occasions, third marker cross-mark a sample of the work. Moderation is 'seen' as the mark and comments of the first marker are visible to the second marker when he/she reviews the assessment.
- Double marking is the same process undertaken for the work of all students in the cohort, not just for a sample, and is undertaken without sight of the original mark or of the previous marker's comments. This is 'blind' double marking which may be used in preference to moderation and can be useful where there is a discrepancy between the first marker and the moderator which cannot be resolved.

Moderation and double marking of student work - process

- Internal moderation by a member of Medipro staff must be undertaken for work at all levels except for that which is entirely objectively marked (e.g. multiple-choice-questions (MCQ)).
- External moderation by an external examiner applies only to work for an approved and regulated award.
- Moderation sample: the minimum sample of work for moderation (whether internal or external) is 10% (unless alternative percentages are agreed with awarding bodies). Where this raises concern about the standard or consistency of marking further sample(s) should be marked across the relevant courses(s). If necessary all work will be moderated (100% 'sample'), or all work for particular question(s), depending on the problem identified. A decision could be taken to 'double mark' some of the work 'blind' (see below).
- Moderation should be 'seen' because the moderation process is designed to verify the mark of the first marker. The work is marked by the first marker

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who enters the mark and the rationale for it on the assessment pro forma. The second marker does the same, usually (but not necessarily) using the same pro forma.

- Double marking should be 'blind' because it is a repeat of the full assessment process. The work is marked by the first marker who enters the mark and the rationale for it on the assessment pro forma. The second marker does the same, using a separate pro forma to ensure that the work is marked blind. If full (100%) second marking is carried out but is not 'blind' this is effectively 100% moderation. In some cases blind double marking cannot be undertaken, e.g. in the case of collaborative marking by a team of staff of a live performance or exhibition, although here the team itself acts as a check on the judgement of any individual.
- Resolving discrepancies: discrepancies identified by moderation or double marking are resolved if possible by discussion between the first marker and the second marker or internal moderator. If marks are to be changed this should be consistent across all work and not confined solely to the sample. If consensus cannot be reached the assessment(s) should be referred to a third internal marker or to the external examiner. If the discrepancy cannot be resolved internally it must be referred to the external examiner. The pro forma must record the judgements of any further marker involved, the final agreed mark and the rationale for this.
- Developing consistency in marking: it is good practice for module teams to meet before the marking process commences to discuss assessment criteria in greater detail, if possible with sample assignments from previous equivalent cohorts to reach a consensus on marking standards. This is particularly helpful to a new team, new members of staff or associate ('visiting') tutors and should help to refine assessment criteria and minimise discrepancies in marking.
- In the case of 'ephemeral' assessments such as performances or presentations, consideration needs to be given in advance of the arrangements for assessment being made to ensure that a process of moderation and sampling equivalent to that laid out above is achieved. This may include attendance by more than one marker, video recording, or other means which would allow for review by a moderator

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Plagiarism

Plagiarism is using, without acknowledgement, someone else's ideas or work.

If a student submits an assignment that contains work that is not their own, without clearly indicating this to the marker (fully acknowledging the sources using the rules of the specified academic referencing style), they are committing 'plagiarism' and this is academic misconduct.

This might occur in an assignment when:

- using a choice phrase or sentence that you have come across or translated from another source
- copying word-for-word directly from a text or other source
- paraphrasing or translating the words from a text or other source very closely
- using text downloaded from the internet, including that exchanged on social networks
- borrowing statistics or assembled facts from another person or source
- copying or downloading figures, photographs, pictures or diagrams without acknowledging your sources
- copying comments or notes from a tutor
- copying from the notes or essays of a fellow student
- copying from your own notes, on a text, tutorial, video or lecture, that contain direct quotations from tutors
- using text obtained from assignment writing sites, organisations or private individuals.
- paying for work from other sources and submitting it as your own

Checking for plagiarism will occur during the 10% blind double marking using Plagscan website or if suspicious are highlighted by the marker or moderator.

What happens if plagiarism is suspected:

The module/programme team will take all such matters into account when reviewing the reports from Plagscan (or other suitable software) and deciding whether a student has plagiarised.

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If there are concerns:

- The module/programme team may decide that some students need further guidance or support to develop their academic writing skills. In such cases a referral will be made to an academic support tutor.
- The module team may decide that what the reports are showing is more serious, in which case they will refer the matter to the Programme Lead or Managing Director for consideration.

Plagiarism is taken very seriously, all students will be warned and referred for additional support on their first occasion. Should this re-occur a second time, students may be withdrawn from their programme of study.

Feedback

Aim: To provide high quality, effective and timely feedback to students on assessed work that encourages engagement with feedback by students to enhance learning.

Scope: This statement applies to all training and education programmes offered by Medipro and addresses summative feedback. The accompanying good practice advice supports the statement in addressing formative assessment and feedback and methods of delivering feedback to students.

Statement

- Students will be provided with details of learning outcomes, the nature of the assessment tasks, assessment criteria, and return arrangements in the programme documentation.
- The aim of Medipro is to provide feedback within 40 working days of the assignment submission date. If this is not possible, students must be notified by module leaders when the feedback will be available, and how this can be obtained.
- Feedback will be provided to students after internal moderation processes have been completed. Internal moderation should take place within the 20 day turnaround period.
- Students will receive feedback on every piece of summatively assessed work. Coursework should be returned to students with written feedback

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through the appropriate arrangements within the education team. Students are also entitled to feedback on examinations. This will normally be in the form of generic group feedback posted on the VLE/online portfolio, and will indicate which elements of the exam were done well overall, and which elements were weak. For example, this could be presented in the form of an assessment criteria/performance matrix, and may be accompanied by model answers where appropriate. Students may, on request, view their marked scripts and have the opportunity to discuss their performance with the module leader. Marked scripts will, however, be maintained by Medipro for archiving.

- Feedback will be provided in relation to learning outcomes and assessment criteria that are linked explicitly to a specific assignment. Feedback should identify strengths and weaknesses of any assignment in relation to specific assessment criteria, and should comment on the level of attainment with respect to each learning outcome.
- Where feedback is to be given on the draft of what will be summative assessment this must be in line with the assessment strategy for the module, unit or course. Such feedback will be formative feedback.
- Written feedback must be legible, and can be either handwritten or word processed. For distance learning modules feedback must be word processed.

Principles of Good Feedback Practice: Advice and Guidance to Staff

Definitions

Feedback that is entirely formative enables students to appreciate the standards that are expected of them, restructure their understanding/ skills, develop their ideas, improve their capabilities, and monitor their own progress. It also provides information to tutors about where students are experiencing difficulties and where to focus their teaching efforts. Formative feedback may or may not include a mark or grade, but where such is offered it is normally only indicative of performance and does not contribute towards the final mark for the module or programme of study.

Summative feedback is the formal feedback on assessed work, delivered usually at the end of a period of study. The feedback will comprise a mark or grade that

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contributes to the overall summary of performance of the student, and will also normally include a commentary on the performance of the student in relation to the assessment criteria for that piece of work which may be formative in nature.

Guiding principles

This statement and advice is informed by the research literature on assessment* and is based on the following seven broad principles of good feedback practice:

- Facilitates the development of self-assessment (reflection) in learning.
- Encourages teacher and peer dialogue around learning
- Helps clarify what good performance is (goals, criteria, expected standards)
- Provides opportunities to close the gap between current and desired performance
- Delivers high quality information to students about their learning
- Encourages positive motivational beliefs and self-esteem
- Provides information to teachers that can be used to help shape teaching

Juwah,C., Macfarlane-Dick, D., Matthew,B., Nichol, D., Ross, D., and Smith,B. 2004

Advice and guidance on good practice for effective feedback

All modules or units should have a feedback strategy which explains the purpose of feedback (both formative and summative) and how and when feedback will be given. There should be a section in the module guide that explains how feedback will be given: written or oral, group or individual, via VLE/online portfolio, on feedback forms etc.

Students must be advised when to expect feedback.

‘There should be an appropriate balance of formative and summative feedback’. It is the responsibility of programme and module leads to agree the regimen of assessment that will provide the appropriate balance of formative and summative feedback. Programme teams should consider placing additional emphasis on formative assessment and feedback during the early stages of programmes and where students are making a transition between learning institutions or careers (as, for example, with ‘paramedic students’).

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'Formative feedback must be consistent with the learning outcomes and with the teaching, learning and assessment strategy for the module in question'. If feedback is given on draft summative assignments this must be part of the learning process wherever the module is taught and must enable students to improve their own work. It should never become a process by which a tutor effectively 'tell the student what to write'. The scope of feedback on drafts, including the point at which a draft may be submitted and how many drafts may be submitted, should be consistently applied.

Students should be prepared to receive feedback.

This can be done by through a variety of means, including:

- Managing students' expectations so that the purpose of feedback is clearly understood prior to assessment or evaluation. Discussion of learning outcomes and assessment criteria with the class can ensure that students properly understand what is required of them. It should be appreciated that not all students may understand the language used in criteria and assessment feedback without having the opportunity to discuss them with their class tutor.
- Identifying all channels of feedback (for example, oral in class, from peers, self-feedback through reflection, written on assignments, group feedback). Many students only consider 'feedback' to be the written comments on assessed pieces of work, and fail to fully recognise the valuable feedback that they are given on an on-going basis throughout their programmes of teaching. Regularly pointing out to classes when feedback is being given can help students appreciate and use all modes of feedback to improve their learning.
- Modelling the application of feedback using previously-marked assignments by showing students how feedback was used to improve the quality of later assignments.
- Encouraging the application of feedback by asking students to use their feedback to improve their later assignments
- Supporting processes of self-assessment by asking students to submit evaluations of their work along with their assignments.

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‘All feedback, including summative, should be designed to support students in closing the gap between current and desired performance’.

Feedback should be provided in relation to assessment criteria that are linked to programme, module or unit learning outcomes. It should identify strengths and weaknesses in relation to specific assessment criteria, and should offer corrective guidance to the learner. For example, where written feedback is provided this might be in the form of specific ‘action points’ alongside the normal feedback that identify for the learner what he/she needs to do next time to improve performance. In entirely formative situations it may involve students identifying their own action points in class, based on feedback they have received from class activities.

Many of the criticisms that students make of the feedback they receive relate to this issue - they comment that feedback is often too vague and does not help them to identify the things they need to do to improve, (for example ‘Think about your structure’ or ‘????’), or that it is too general in that they cannot identify which sections of their work need improvement.

Assessment of ‘off-site’ students

The education team at Medipro is responsible for ensuring that assessment of off-site students is secure. This includes ensuring that robust arrangements are in place for:

- transport of examination papers to the examination site;
- storage of examination papers at the off-site location until the time of the examination;
- collection of completed coursework and examination scripts and transport to the markers off-site and/or at Medipro;
- moderation of double marking;
- recording of examination marks;
- verification by external examiners of the assessment process.

The education team must ensure that, where the same assessment is to be taken by different cohorts of students on and off site, it is set at exactly the same time.

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Off-site students must have access to information about assessment equivalent to that available to on-site students.

The policies for moderation, double marking, and the use of the external examiner are the same as for on-site provision.

Assessment of students on placements

Designated assessment criteria must be designed. They must be appropriate to the placement context and the learning outcomes of the placement.

The assessment criteria must be made clear to students and to any workplace supervisors or mentors. They should be included in the placement competency book (PAD) along with other information about the placement including the support available, health and safety issues and the obligations of the student.

A strategy must be established for feedback to students on their progress within the placement. This must include regular meetings, notes of which should be kept. Where the mentor or supervisor provides feedback there must be a mechanism for keeping an appropriate member of tutor staff from Medipro (eg module leader, practice placement facilitator) informed of the student's progress. Feedback must take into account the learning outcomes of the placement and the assessment criteria.

Students must have access to a process to seek further clarification of the feedback, through supervisors in the workplace and/or Medipro staff.

The respective responsibilities of workplace supervisors and Medipro staff for the final assessment of a placement must be documented. Where workplace supervisors carry a significant responsibility for final assessment they must be given staff development to ensure that they understand the use of the Medipro's assessment criteria. In this situation it is essential that the assessment is moderated by a member of education staff from Medipro.

The policies for moderation, double marking, and the use of the external examiner are the same as for on-site provision.

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Recognition of prior learning

RPL is taken into consideration to enable students to avoid duplication of learning and assessment, for enabling the achievement of modules and qualifications to be as widely accessible as possible. There are three ways that this can be managed:

- Exemption
- Equivalency
- Full recognition of prior learning

Definitions

Exemption - The facility for a student to claim exemption from some of the achievement requirements for qualification, using evidence of certificated achievement deemed to be of equivalent level and of size, and meeting certain standards for the reliability of the assessment and validity of the award.

Equivalent Module(s) - A module from a different qualification or submitted by another recognised organisation that is deemed to be of equivalent value and so can count towards a qualification in place of designated mandatory or optional module from it.

Recognition of Prior Learning (RPL) - A method of assessment that considers whether a student can demonstrate that they can meet the assessment requirements for a module through knowledge, understanding or skills they already possess and do not need to develop through a programme of study.

Transfer of credit

Exemption is the recognition of certificated achievement, for example, qualifications achieved overseas. Exemptions are not recognised by the award of credit and appear on certificates without a credit value.

Equivalency is the transfer of credit from a module or component of a regulated qualification. To be counted as an equivalency a module must have the same credit value (or greater) and be at the same level (or higher) than the module, or modules, to be claimed. Equivalencies are not recognised by the award of credit and appear on certificates without a credit value.

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Acceptable exemptions and equivalencies will be included in the rules of combination of a qualification.

Recognition of Prior Learning (RPL) is the recognition of non-certificated learning towards a full module or qualification. The RPL process must be negotiated with Medipro and must be claimed as part of a programme not one in its entirety. Medipro is responsible for assessment and claiming credit. There is no difference between achievement of the required standards by RPL and achievement through a formal programme of study, therefore RPL appears on certificates as credit-bearing.

There are three ways of recognising prior learning which may be open to the student:

- Route 1 – Submit a portfolio of evidence based on previous relevant knowledge, skills and competences which must be assessed against the assessment criteria of the module, or modules, for which RPL is being sought to ensure that all learning outcomes have been achieved.
- Route 2 – Undertake the same assessments as learners following a formal course of learning and assessment that lead to award of the module or qualification. The assessments may be undertaken without attending teaching sessions.
- Route 3 – Assessment through a summative assessment against a module or full qualification, covering all relevant learning outcomes.

It is important to note that RPL is an alternative route to achievement and not an easy option or shortcut. Evidence must be produced for RPL which is subject to the same assessment and quality assurance requirements as applied to evidence produced as part of a programme.

Currency

Prior learning and achievement must be current to be used by the student, which will normally be within the last five years (this excludes functional skills or other equivalents). For exemptions and equivalencies, this means five years start from the date of the original award to the point at which the student registers with Medipro on the programme for which the claim will be made. Credit awarded as part

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of exemption, equivalency or RPL cannot be carried forward beyond five years from the original award.

Restrictions on recognition

The following requirements will be applied to the rules of combination for a qualification to restrict recognition of prior learning and achievement:

- For exemption and equivalency: A maximum of 50% of a qualification can normally be achieved through exemption or equivalency. At least 50% should be gained through new learning. Rules of Combination specifying the percentage of units for a qualification which must be at the level of the qualification or above must be observed about achievements on which exemptions or equivalencies are based.
- For RPL: RPL can be used to claim full modules and qualifications. However, Medipro reserves the right to exclude the use of RPL in cases such as:
 - License to practice.
 - Health and safety requirements.
 - Regulated professions.
 - Work placements.

Additionally, RPL cannot be used where modules and qualifications are subject to external assessment by an organisation outside of Medipro.

Procedure for RPL

The process of RPL involves students from the moment they consider making a claim and supports them through to the result of the assessment.

Information, advice and guidance

Medipro makes available advice and guidance to students on the following points:

- The process of claiming credit through RPL.
- Where to obtain support and guidance.
- The administrative processes for RPL applications
- Timelines, appeals processes and any fees.

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Pre-assessment: Gathering evidence

An individual may decide to make their learning visible and to claim credit. This stage is vital to ensure that the candidate is fully informed of the RPL process and has sufficient support to make a viable claim and to make decisions about evidence collection and presentation for assessment.

During this stage, the student will carry out the evidence collection and develop an assessment plan. The evidence required for the award of credit will depend on the purpose, learning outcomes and assessment criteria for the relevant module(s).

Assessment: Documenting evidence

Assessment as part of RPL is a structured process for gathering and reviewing evidence and making judgments about a student's prior learning and experience in relation to module standards. Assessment must be valid and reliable to ensure the integrity of modules and qualifications and the RPL system. The assessment process for RPL must be subject to the same quality-assurance processes as any other part of the assessment process.

Award of credit

Medipro is responsible for claiming for the award. The procedure is the same as for other forms of assessment.

Appeal

If claimants wish to appeal against a decision made about their claim for credit they would need to follow Medipro's appeals procedure.

Notification

Medipro will keep records including evidence underpinning an RPL claim for five years.

Procedure for Exemptions and Equivalencies

Claims for credit are made through the usual Recommendation for the Award of Credit process.

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Academic submissions

This section has three specific objectives:

- To provide a framework designed to ensure consistent and equitable arrangements for the submission, recording and confirmed receipt of summative assessment.
- To ensure that students and staff have a clear recognition of the importance of assessment deadlines, while also making sure that students and tutors are aware of the methods by which extensions can be granted.
- To provide clear guidance on how Medipro would handle the recording and marking of late submissions.

Submission Procedures

Medipro will set specific and firm deadlines, naming the date and time of submission, for all summative coursework assessments. These deadlines can be closing dates or specified hand-in dates; it is possible that early submissions would be allowed in the case of the former. Where students are required to submit work in both hard copy and electronic format, the normal expectation would be that both versions would be submitted before the deadline. However, Medipro may use discretion in determining whether one or both versions must be submitted by the deadline to be considered “on time.” The versions submitted in hard copy and electronic format should be identical; if they are not, Medipro will use discretion in determining which version is most reflective of the student’s work in advance of the deadline.

The schedule of deadlines and examination dates/times will be coordinated by the Clinical Director before the start of the academic year to prevent conflicts or congestion in the office. Submission deadlines will not be set for closure days or Bank Holidays. It is acceptable to have submission deadlines during the assessment period, although individual Faculties may decide that such deadlines will not be permitted. All deadlines should consider feedback turnaround times

All deadlines will be clearly communicated to staff and students within or before the second week of teaching each academic term/semester. A central schedule or calendar will be held in the Admin Office and made available to academic and

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administrative staff. In addition, it is good practice to inform students of the dates by which assessment guidelines and instructions will be set and of the deadlines for the return of feedback.

Medipro will record the date and time of the submission of assessed work and provide evidence of submission times/dates when requested. The date and time of physical submissions to the Admin office or to the tutor will be recorded and a physical receipt, email or electronic receipts issued to students by the Admin office. Students are to be aware that FutureQuals (Future (Awards & Qualifications) Ltd) courses must be submitted within 24 months of the course start date.

Submission procedures will, whenever possible, facilitate anonymous marking. Physical submissions will include student numbers alongside or in place of personal names, and Medipro will take care to preserve or secure anonymity when circulating assessments to markers (e.g. removing or obscuring student names).

Extension Requests

Requests for extensions must be managed through the Clinical Director and not through tutor discretion, to encourage uniformity and equitability across Medipro. Students will be informed of the application procedure well in advance of any submission deadlines. This information be drawn to students' attention at the beginning of each module and reinforced when assignment details are circulated.

The normal maximum allowable extension is two weeks for all full-time students, with proportionate allowance for part-time taught students. The length of extension granted will vary according to individual circumstances, and in exceptional circumstances, beyond these guidelines. A revised submission date can fall within closure or holiday periods, if alternative arrangements are in place to secure recording of submission.

Medipro will keep a central record of all applications received and extensions granted; Boards of Studies are responsible for reviewing these records annually to monitor consistency and develop effective practice.

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Late Submissions

Medipro will record any summative assessment submitted after the published deadline as late (unless an extension has been granted or alternative procedures have been set and announced for that assessment). No flexibility is allowed on either the date or time of submission, and deadlines will be regarded as firm to ensure consistency and fairness. Distance learners must meet the date and time of the submission deadline in line with UK time and not in their local time zone. Medipro will not reject late submissions entirely, but rather ensure that they are recorded and marked as late. A problem with an individual student's computer or transport is not considered to be an acceptable excuse for late submission; however, discretion should be used when Medipro systems are at fault (e.g., a system-wide computer outage).

If a student fails to submit work by an agreed extension date/time, this will be recorded as late. The CD has authority to extend agreed upon extensions if there are valid reasons presented.

If a student fails to submit a re-sit assessment by an established re-sit deadline, without an approved extension, he/she must receive a mark of fail.

In marking late submissions, markers are required to note for internal records the mark that would have been achieved had the work been submitted on time. In the clear majority of cases, it is unlikely that the CD would routinely take uncapped marks into account as late submissions should, in fairness to other students, be penalised; however, when a candidate is borderline, the CD may wish to take into account the ability evidenced by the uncapped mark. This evidence would be one of a number of factors that Medipro may consider supporting the award. Feedback to students should be given and should include reference to the level of mark that would have been achieved had the submission been on time. In the case of submissions that are more than seven days late and receive a mark of zero, tutors will exercise discretion as to the amount and type of feedback given.

Monitoring

The Admin Officer will maintain internal evidence of deadline dates and how staff and students are notified of them as well as of the times/dates of submissions

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(including late submissions), as stated above. The CD is responsible for reviewing these records annually to monitor the consistency and equitability of practice.

Annual Monitoring and Review (AMR) processes will examine the internal evidence listed above, and External examiners will assess the handling of late submissions and examine module evaluations to test adherence to core requirements as well as equitability of practice.

Feedback

Aim: To provide high quality, effective and timely feedback to students on assessed work that encourages engagement with feedback by students to enhance learning.

Scope: This statement applies to all training and education programmes offered by Medipro and addresses summative feedback. The accompanying good practice advice supports the statement in addressing formative assessment and feedback and methods of delivering feedback to students.

Statement

- Students will be provided with details of learning outcomes, the nature of the assessment tasks, assessment criteria, and return arrangements in the programme documentation.
- The aim of Medipro is to provide feedback within 7 working days of the assignment submission date. If this is not possible, students must be notified by module leaders when the feedback will be available, and how this can be obtained.
- Feedback will be provided to students after internal moderation processes have been completed. Internal moderation should take place within the 7 day turnaround period.
- Students will receive feedback on every piece of summatively assessed work. Coursework should be returned to students with written feedback through the appropriate arrangements within the education team. Students are also entitled to feedback on examinations. This will normally be in the form of generic group feedback posted on the VLE, and will indicate which elements of the exam were done well overall, and which elements were weak. For example, this could be presented in the form of an assessment

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4. Provides opportunities to close the gap between current and desired performance
5. Delivers high quality information to students about their learning
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Feedback should be provided in relation to assessment criteria that are linked to programme, module or unit learning outcomes. It should identify strengths and

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Many of the criticisms that students make of the feedback they receive relate to this issue - they comment that feedback is often too vague and does not help them to identify the things they need to do to improve, (for example 'Think about your structure' or '????'), or that it is too general in that they cannot identify which sections of their work need improvement.

Aegrotat and special consideration

This section sets out the regulations and procedures for applying for aegrotat consideration in cases of impaired performance, or special considerations for cases where performance may potentially be impaired.

A student prevented from completing any major item or items of work for assessment in a course, or who considers that his or her performance in completing any major item or items of work for assessment in a course has been, or potentially will be impaired by illness, or injury, or bereavement, or any other critical circumstance, may apply for aegrotat consideration for the course. A student may apply on the basis that disrupted revision through one of these causes has resulted or may result, in impaired performance.

Statement

A student prevented, or potentially prevented, from completing any major item or items of work for assessment in a course, or who considers that his or her performance in completing any major item or items of work for assessment in a course has been, or will be impaired by illness, injury or bereavement or any other critical circumstance may apply for aegrotat consideration for the course.

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A student may apply on the basis that disrupted revision through one of these causes has resulted or may result in impaired performance.

Note: Aegrotat consideration is not available where results have been affected by impairment to a student's ability to learn the material for the course(s) concerned. The aegrotat and special considerations provisions are intended to assist students who have covered the work of a course but have been prevented by illness or other critical circumstance from demonstrating their mastery of the material or skills at the time of assessment.

The application must be made to the Tutor/Module Lead on or within seven days after the due date for submission of the work concerned, or on or within seven days after the date of a test or examination. If applying for special considerations then the applications should be as soon as possible. In a special case, the Programme Lead may approve a late application, and in the case of a student making multiple applications for the same examination or test period, the Programme Lead may approve a consolidated application which should normally be submitted within seven days after the last test or examination concerned.

The application must be supported by satisfactory evidence:

- In the case of illness or injury to the student, satisfactory evidence must be a sick note from a GP, registered dental surgeon, registered midwife or a counsellor approved by Medipro, and relate to a consultation which normally has taken place shortly before or within 24 hours after the due date for the required work or the date of the test or examination. In exceptional cases, the Programme Lead may extend this time provided that the consultation has taken place at such a time as to permit the practitioner to make a sound evaluation of the applicant's condition at the time of the assessment. The report must state the nature of the illness or injury and an opinion about its effect on the student's ability to complete the required work or to sit the test or examination.
- In the case of bereavement, appropriate evidence may be a death notice from a newspaper or a letter from a medical practitioner, Police or other approved source. Where the notice or letter does not indicate the relationship

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of the deceased to the applicant, the applicant should attach a letter stating the relationship or connection.

- In cases of other critical circumstances, supporting evidence will depend on the nature of the circumstances, some independent supporting evidence should be provided where possible, and this might include police reports, medical certificates or letters from others concerned in the situation.

The tutor/Module Lead shall forward the application and supporting evidence in confidence to the Programme Lead. The applicant will be informed within fourteen days if the grounds for the application are accepted or not accepted, in the former case by the Programme Lead and in the latter case by the Module Lead.

If the application is accepted, the Programme Lead may, in the case of assessed work other than tests or examinations, offer a specified extension of time without penalty to complete the work. Where an offer of extension is not appropriate or accepted, and in the case of tests and examinations, the aegrotat for the course will be considered at the completion of the course and after the final item of assessment has been marked. After consultation with the examiners, the Programme Lead shall determine whether an aegrotat pass or grade shall be awarded. A Programme Lead's determination shall be based on the work done throughout the course in items of assessment that are appropriate, and may consider other relevant work done in the course and in any other related courses undertaken at the same time or earlier. An aegrotat pass or grade shall be recommended only if the Programme Lead is satisfied that the student would in the absence of the impairment have attained at least a pass or that grade. An aegrotat grade or pass may be awarded only where the student has been able to complete a substantial part of the course and a substantial part of the assessment for that course at a satisfactory level.

If applying for special considerations, then there is a wider scope of factors that may be put forward as being an obstacle to progress. Each situation will be considered by the Programme Lead on each case. Typically, the consideration granted will be an extension of time to complete the course and assignments. A student should apply for these considerations before their progress begins to be affected in a substantial way.

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NOTES:

The module lead should inform students of any items of assessment in a course that are not appropriate in terms of this regulation.

Students may request information from Medipro on their policy in relation to these regulations as to what constitutes a substantial part of a course and a substantial part of the assessment, and as to what is a satisfactory level.

Where a student has missed a final examination, or has a substantially impaired performance, in circumstances that justify an aegrotat application but where Medipro is unable - because of insufficient information/assessment - to make an aegrotat assessment, a Programme Lead after consultation with the relevant examiners may make provision for a "special assessment" to be implemented if this is considered appropriate. Medipro are not obliged to conduct special assessments.

Procedures

Applications

Aegrotat consideration is available only for major items of work. Major items are examinations, tests and other work worth not less than 10% of the total assessment.

Absence

Aegrotat regulations allow for two distinct circumstances: those which prevent performance and those which seriously impair performance. Impairment is not of itself considered adequate grounds for not sitting a test or examination or completing the item of work by the due date. Unless students are prevented by their condition or other critical circumstance from carrying out the item of assessment (and have a medical certificate to that effect) they are expected to undertake the item of assessment, using special facilities, if necessary, and to submit an aegrotat application on the grounds of impaired performance.

Special Facilities

Subject to the provision of a medical certificate, special facilities can be provided for candidates unable to sit under normal examination/test conditions. These include

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arrangements for candidates to leave examination rooms under supervision for short periods or, if necessary, individual supervision in a separate room; supervision off-Medipro grounds for candidates in hospital or convalescing, provision of special seating and other facilities including use of a reader/writer for the seriously injured or disabled; extension of time for writing the examination/test.

To the Student

You are expected to discuss with your doctor or dentist whether you could use the special facilities described above. It is your responsibility to ensure that this is brought to the attention of your doctor, counsellor or dentist promptly.

To the Practitioner

Practitioners should note that applications for aegrotat consideration may be assessed by the Programme Lead. Adequate evidence, specifically addressed to the due date for the item of assessment must be supplied. Where there is adequate evidence, or doubt that the illness or injury described supports the failure to sit the examination/test or perform the work, the application may be declined. Retrospective documentation of an illness or disability may also be declined. It is the student's responsibility to secure the necessary documentation and meet the costs involved.

Please forward the completed certificate as soon as possible directly to the Programme Co-ordinator.

Special considerations

In certain circumstances, special considerations may be considered. This may be where a student is finding it difficult to complete the placements, within the given time-frame and would like to extend the hours over a longer period. This situation could be a result of illness, financial, family/personal issues etc, and would be subject to sufficient notice and proof of the situation being submitted to the Programme Lead.

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Placements

During placement, should a student fail or defer their competencies during their allocated hours, due to certain circumstances, this will be taken into consideration. For the following action maybe taken for the student to fulfil their course requirements:

- Placement extension
- Alternative placement offered
- Competency simulation
- A combination of the above

Pregnancy

In terms of pregnancy the student must inform Medipro a minimum of 15 weeks before the expected week of childbirth. However, it is advised they should notify their module lead at the earliest opportunity. This is particularly important if her course is likely to involve manual handling or possible exposure to biological or chemical hazards.

There will then be a responsibility for Medipro to carry out a risk assessment for all pregnant students (FA028). This may involve a joint assessment for identified staff groups, individual risk assessment and/or seeking a medical opinion from Occupational Health (OH) and/or placement providers on whether students should undertake alternative duties or whether or not the student will be safe enough to continue the course for the duration of her pregnancy.

When considering individual risks, the risk assessment should take account of any medical advice received by the student's General Practitioner and/or midwife.

Resubmission and re-examination

There will be occasions where a student has failed to attain the overall pass mark for a module then, a student maybe permitted to enter for a subsequent examination or submit a revised dissertation on one occasion only".

If a student has been awarded an overall module mark of between 0 and 39 for a module then:

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- the student will need to re-submit the failed work; or
- in consultation with the External Examiner, will require the student to undertake some other form of re-examination.

If for any module or modules the overall module mark or marks are fails of between 0 and 39, then there is NO possibility of the student being considered for a Pass overall on the programme of study and they will Fail the course. If such a fail mark or marks have been awarded for the first attempt at the module or modules, then the student must resubmit work or be re-examined if they wish to attempt to redeem the failed module or modules. In order for the student to be considered for a Pass overall on the programme of study, the resubmission or re-examination must result in an overall module mark of 40 or above being awarded for the module or modules.

If a student has been awarded an overall module mark of between 40 and 49 for a module then:

- Medipro may require the student to re-submit the failed work; or
- in consultation with the External Examiner, may require the student to undertake some other form of re-examination.

If for any module or modules the overall module mark or marks are fails of between 40 and 49, then the Examiners may in their discretion still consider the student for a Pass overall on the programme of study.

Decisions regarding the exercise of discretion in recommending the award of a qualification are made by the Examiners. Whilst it is up to a student who has failed any modules to review their situation and decide which, if any, failed modules they will request to resubmit/be re-examined in, Medipro advises students to request to resubmit/be re-examined in all modules that they have failed.

Procedures relating to Re-submission and Re-examination

After the examinations, the Administrator will send to any student who has failed one or more modules, a letter confirming this, together with instructions about how to apply to resit modules.

The letter will include a deadline, by which students must request to resit modules (students should note that re-examination fees are payable in all cases of re-

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submission or re-examination). This deadline is set after the end of semester so that students should know the results of all their taught modules and thus know how many credits in total they have been awarded up to that point.

The deadline for submission of all re-submitted or re-examined work will be given in the letter.

Students are advised to contact their tutor for the failed module well in advance of this deadline to discuss the form of re-submission or re-examination. It is expected that students will normally complete the work for re-submission or re-examination before the deadline stated, but students wishing to re-submit work earlier in the academic year may do so. Procedures for handing in resubmitted work should be agreed with the tutor, examiner with the approval of the Clinical Director.

Where re-submission or re-examination takes place, the overall module mark awarded cannot result in a mark any higher than 50, i.e. a bare pass.

A candidate who fails an examination for a module may be allowed to resit that examination on the next occasion that the module is taught. Candidates may resit the Examination for a module only once, and a resit fee will be charged by MediPro. Where overseas candidates are unable to attend resit examinations this may involve an examiner travelling to the student's country in order to conduct the examination. The candidate will be liable for the costs incurred and the arrangements will be made by MediPro.

Internal quality assurance

MediPro is committed to ensuring that the systems, policies and procedures in place for the design, delivery and award of qualifications are continually monitored and reviewed.

This section makes sure all individuals involved in the delivery and assessment of its qualifications can be confident of their continued quality and suitability. In this way, we promote public confidence, maintain the national standards and protect the interests of Students.

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Quality assurance processes

Our requirements for quality assurance are designed to make sure that over time all Tutors, qualifications, units, assessments and venues are quality assured. In this way, all individuals involved in the delivery, assessment and award of qualifications can be assured of their consistency, validity and reliability.

All tutorial staff are responsible for making sure that adequate quality assurance is carried out in line with this document and the specific quality assurance guidance for each qualification.

Each will have a risk rating that fully reflects their knowledge, experience and record of quality assurance to date. The risk rating assigned will help determine the quality assurance activity to be carried out for each tutor and the frequency this should be undertaken.

Note: if a tutor is responsible for delivering more than one suite of qualifications they will be assigned a risk rating per suite.

All internal quality assurance activity will be recorded and be made available for review on request, e.g. External Examiners and External Quality Assurers (EQAs).

Internal quality assurers

Medipro will appoint an Internal Quality Assurer (IQA). IQAs have specific responsibilities and will work closely with the Tutors to make sure standards for the delivery and assessment of qualifications are consistent and maintained across the organisation.

The role of the IQA is integral to Medipro, promoting the continual professional development of Tutors and demonstrating our commitment to quality.

The minimum staffing requirement for each qualification suite we deliver:

- Tutors - Responsible for the delivery and assessment of qualifications
- Internal Quality Assurer - Responsible for verifying the delivery, assessment and award of qualifications

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During times of minimum staffing, one person could perform multiple roles. If suitably qualified individuals are also able to work across qualification suites.

Note: individuals will not be permitted to carry out quality assurance on a qualification/assessment where they were involved in the process of delivery or assessment.

Medipro will ensure they have sufficient resources to deliver objective and impartial quality assurance always. “Reciprocal” IQA activity (two IQAs quality assuring one another) will be avoided wherever possible in order to maximise objectivity.

Qualifications, knowledge and experience

IQAs will be suitably competent, experienced and qualified to quality assure specific qualifications.

Roles and responsibilities

The IQA will undertake specific quality assurance activities:

- Tutors risk ratings (including rationale)
- Desk based reviews
- Tutor observations
- Action plans
- Sampling

Overall, the IQA should:

- Maintain up to date knowledge of policies and procedures
- Review qualification delivery and assessment practices, providing guidance and support to staff as required
- Ensure quality and consistency of qualification delivery, assessment and administration across all staff and qualifications
- Maintain adequate records of their quality assurance
- Review the quality of venues and equipment and make appropriate recommendations
- Follow up on the progress/resolution of action plans

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- Provide feedback to regulating authorities and work with their External Examiners

Tutors risk ratings

Tutors risk rating guidance for the relevant qualification suite will gain a risk rating of high, medium or low considering the following:

- Tutors experience and skill level
- Tutors record of quality assurance
- Any major or minor concerns that have been identified

Medipro will regularly review tutors risk ratings and make sure they are kept up to date based on continued quality assurance activity. Each time a Tutor risk rating is updated a rationale for the decision will be provided and kept on the tutors Personal file.

Desk based reviews

Desk based reviews provide your IQA with the opportunity to sample and evaluate the quality and reliability of documentation completed during the delivery and assessment of a qualification. IQAs will confirm the quality of record keeping, the authenticity of Student evidence and accuracy and consistency across assessment decisions.

Tutor observations

During Tutor assessment methods. Observing qualification and assessment delivery allows IQAs to produce evidence that confirms that Students are meeting all the learning outcomes for a qualification and that Student results accurately reflect their ability.

IQAs must follow the below process to complete a Tutor observation:

- Collect a Tutor Observation Form from the Administrator and answer all the questions on the form.
- Records of completed forms will be stored securely via the Administrator.

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Action plans

IQAs are responsible for providing staff with feedback on the results of their quality assurance activities across qualifications.

IQAs will determine whether Tutors require further support and/or training. If so, the IQA will develop an action plan that outlines the issue raised and the detail of any recommendations, outlining the issue raised and recommendations for remedial action. The IQA will consider appropriate timescales and responsibility for resolution, record evidence of the action plan and completion rationales.

Sampling

Medipro will develop a plan for quality assurance to ensure that over time an adequate sample of qualifications and assessments for Tutors are reviewed. IQAs will regularly review course documentation and delivery across all:

- Qualifications
- Units/modules
- Assessments

In addition to reviewing:

- Tutor qualifications/portfolios
- Venues
- Equipment

Record keeping

Medipro will retain records for a minimum of six years (as per IGA guidance). Records will be made available to External Examiners, it's representatives or regulators on request. External Examiners may request documentation for review as part of ongoing monitoring and quality assurance activities. This includes:

- Course documentation including Student Registers, student evidence (e.g. Answer Papers), records of assessment decisions and feedback forms
- Internal quality assurance documentation including Desk based review forms, Tutor observation forms and details of any action plans.

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- Records of reasonable adjustments/special considerations and any supporting evidence
- Records of appeals, enquires and complaints.

Working with External Examiners

External Examiners are an important part of our quality assurance programme and have the overall purpose of maintaining national standards of qualifications and assessment practices.

With specialist knowledge and experience of qualifications, requirements and processes, External Examiners are in a position to provide valuable guidance and support with the administration, delivery and assessment of regulated qualifications.

External Examiners will ideally make their visit when a training course is scheduled with the IQA present (annually) and may want to review a selection of record, details of which will be provided to Medipro prior to the visit.

During visits:

- Meet and speak with key staff involved in the administration, delivery and assessment of qualifications.
- Confirm the understanding of processes and procedures and review the quality assurance arrangements (including the internal quality assurance policy)
- Observe the delivery of qualifications and assessments
- Review the delivery and administration of assessments to ensure they are carried out in line with requirements.

After the visit, the External Examiner will send us a completed report about the visit, which will include:

- Detail of the individuals met, records reviewed, and any teaching or assessments observed.
- Identified areas of good practice
- Any recommendations or action plans

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- Feedback from Medipro about qualifications, assessments, policies, procedures and systems.

The External Examiners feedback along with any recommendations and/or action plans will be communicated to all relevant staff. We will be responsible for following up on any recommendations and action plans issued to us.

External Examiners

External Examiners play a crucial role in the quality assurance of courses. One or more External Examiners will be appointed to any provision that leads to a Medipro award. For interpreting the scope of this policy, the term “External Examiner” should be taken to mean a suitably qualified individual from an organisation external to Medipro.

Requirements of External Examiners

To carry out their responsibilities, External Examiners will be:

- Able to judge student impartially based on the work submitted for assessment, without being influenced by previous association with the modules or programmes, the staff or any of the students.
- Able to compare the performance of students with that of their peers on comparable courses elsewhere.
- Competent in assessing students’ knowledge, skills and professionalism at the required level.
- Expert in the field of study concerned.
- Impartial in judgement.
- Properly briefed on the requirements of the programmes.
- Expected to maintain confidentiality in relation to proceedings and about any information obtained because of their role as an External Examiner.

Appointment of External Examiners

External Examiners are appointed by Medipro.

Medipro must be satisfied that there are mechanisms in the Faculty to compare and ensure parity of External Examiner workload based on numbers of students, scripts

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or modules/components of assessment, and that remuneration reflects the workload. External Examiners should be informed of their workload at the start of the year, or earlier if practicable.

External Examiners will not normally act as consultants to a programme team or programme design or be members of any panel/s established to review the module/s and/or programme/s they examine. However, in certain circumstances they may act concurrently as External Examiner and adviser to programme approval and review panels. In addition, External Examiners may also volunteer, or be requested to provide feedback and suggestions as to module/programme design through their annual reports.

Information on External Examiners (name, position, and institution) should be published in programme handbooks/module guides. This can be by listing in programme handbooks all External Examiners involved with the modules for a subject area e.g. safeguarding. Where the External Examiners is appointed to fulfil a role on behalf of a Professional, Statutory or Regulatory Body (PSRB), this should be stated.

Criteria for Appointment

External Examiners should be drawn from a variety of institutions/professional contexts so that the programme benefits from appropriate external scrutiny. They will be appointed by Medipro. External Examiners should demonstrate:

- Knowledge and understanding of UK sector agreed reference points for the maintenance of academic standards and assurance and enhancement of quality.
- Competence and experience in the fields covered by the programme/module/subject to be examined.
- Relevant academic and/or professional qualifications above the level of the qualification being externally examined, and/or extensive practitioner experience where appropriate.
- Competence and experience relating to the design and operation of a variety of assessment tasks appropriate to the subject, and sufficient recent examining/assessment experience preferably as an External Examiner.

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- Sufficient standing, credibility and breadth of experience within the subject to be able to command the respect of academic peers and, where appropriate, professional peers.
- Familiarity with the standard expected of students to achieve the award that is to be examined.
- Fluency in English.
- That they can meet the applicable criteria set by the professional organisation. i.e. by a Health and Care Professions Council (HCPC) Registered Paramedic.
- Awareness of current developments in the design and delivery of relevant curricula.
- Competence and experience relating to the enhancement of the student learning experience.

Conflicts of Interest

As External Examiners should be impartial in making judgement and not have previous close involvement with MediPro, which might compromise their objectivity, an External Examiner will not be appointed in the following categories or circumstances:

- A member of a governing body or committee of the company, or a current employee of MediPro.
- Anyone with a close professional, contractual or personal relationship with a member of staff or student involved with programme/module to be examined.
- Anyone required to assess colleagues who are recruited as students to the programme/module to be examined.
- Anyone who is, or knows they will be, in a position to influence significantly the future of students on the programme/module to be examined.
- Anyone significantly involved in current or recent substantive collaborative research activities with a member of staff closely involved in the delivery, management or assessment of the programme/module to be examined.
- Former staff or students of MediPro unless a period of five years has elapsed, and all students taught by or with the External Examiner have completed their programme/s.

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- A reciprocal arrangement involving similar programmes at another institution.
- The succession of an External Examiner from an institution by a colleague from the same subject area in the same institution within a five-year period.
- A former External Examiner for the company in the previous five years.

New External Examiners

A nominee without direct experience of acting as an External Examiner should only be appointed if suitable mentoring arrangements can be put in place to support them during their first year.

Premature Termination of Appointment

Under certain circumstances, the appointment of an External Examiner may be terminated before the completion of his/her period of office. Premature termination may occur in the following instances:

- Serious illness.
- Resignation of the External Examiner.
- Changes in module/programme or programme structure which renders the appointment no longer applicable.
- A conflict of interest arising during the term of office.
- Non-fulfilment of External Examiner's duties, such as failure to provide annual reports or persistent non-attendance at examination boards.
- Unprofessional conduct.
- Irretrievable breakdown of relationship with module/programme teaching teams such as to disadvantage students on the module/programme.

It is expected that the External Examiner give suitable notice of intention to resign to allow sufficient time for a suitable replacement to be found.

Monitoring and evaluation

This section provides the framework to oversee the review, monitoring and evaluation of the MediPro's education programs and teaching performance.

These are to be conducted taking account of the policies and strategic directions of the company, with reference, to relevant comparative data derived from key

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accountability measures for teaching and learning, and the views of staff, students, employers and other relevant stakeholders.

Objectives

- assess the ongoing value, viability and sustainability of a course or topic, and its relevance within program.
- assess the overall quality of the teaching and learning environment and achievement of educational aims and learning outcomes.
- ensure the course(s) are fit for purpose and meet the needs of the student, employers and other key stakeholders.
- enhance staff understanding about teaching and learning and enable them to improve and develop their teaching approaches and practices, based on information about student perceptions of their individual performance and through reflection upon their teaching skills.
- inform discussion between management and staff in appraisals and assist staff with planning their own professional development during this process.
- identify areas where performance needs to be improved, thus assisting MediPro to achieve and maintain high standards of instruction.
- inform decision-making in respect of staff appointment; confirmation of continuing appointment; conversion to continuing posts; and other relevant human resources policies and processes.

Course Reviews

Annual review of quality assurance measures

Courses and significant course components are monitored annually, in accordance with procedures and requirements identified by the Clinical Director. Clinical tutors will ensure that information derived from the annual quality assurance process is referred to the Clinical Director for management of the course and other relevant considerations.

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Yearly reviews

A review of each course will be conducted by a review committee every year. A schedule of course reviews will be established by the Clinical Tutor team and reported in their annual quality assurance reports.

If a course is subject to a review as part of an external accreditation process the report of the external accreditation panel will be submitted to the Clinical Director. An internal review process will also be undertaken as required under this policy. The terms of reference of the internal review may be limited to consider matters covered in the external review process.

The Clinical Director will arrange for administrative support to be provided for yearly reviews through the collection of core data in the areas of admissions, enrolments, student progress, student satisfaction and employment.

Terms of reference

The terms of reference of a course review will be approved by the Clinical Director. The Clinical Director, together with the Managing Director will publish guidelines on the range of matters to be included in the terms of reference.

Composition of review committees

The composition of a course review committee will be subject to approval by the Managing Director. The review committee should consist of some or all the following:

- Appropriate clinical tutor
- Appropriate clinical assessor
- Appropriate student representative
- Appropriate patient representative
- Other appropriate person(s) which may include:
 - Employer representatives
 - Awarding organisation
 - Practice Placement Facilitator

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Reporting

On completion of a review, a report from the Review Committee will, in the first instance, be submitted to the Clinical Director. The Clinical Director will then forward the report, with comments, as appropriate, to the Managing Director.

The Managing Director will:

- provide the report to relevant Clinical Tutor staff and arrange for the preparation of a response to the report's recommendations.
- forward the response to the recommendations to the Clinical Director.
- arrange for the preparation of an implementation plan.

Review Committee will report on the outcomes of each yearly course review as part of the annual review of quality assurance measures.

The Clinical Director will report regularly to the Managing Director on course reviews and implementation plans, as part of the quality assurance reporting process.

The Clinical Director will ensure that the course review schedules, reports and implementation plans are published circulated to the committee panel.

Topic Evaluation

Clinical Tutors are responsible for ensuring the regular monitoring of the content and quality of topics and topic delivery, having regard to the aims and learning outcomes of the course(s) in which they are offered.

Clinical Tutors should also monitor topics, where necessary, based on risk, arising from such processes as:

- External Quality Assurance considerations and recommendations;
- Periodic consideration of student attrition and completion rates;
- External course accreditation processes where applicable;
- Sources of research and best practice;
- Student Evaluation of Teaching responses.

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A summary of topic monitoring processes and outcomes will be submitted to related course reviews.

Course Feedback

Medipro acknowledges the importance to its quality assurance processes of gaining information about student perceptions of teaching as well as information from employers regarding the suitability of the courses Medipro delivers.

The Training Co-Ordinator will ensure that there is a program of regular evaluation of teaching using the Course Evaluation.

All Clinical Tutor staff will participate in this process per course taught.

Along with the employer annual review process, there will also be the Course Evaluation form. This will be handed out to all students on the understanding that it will need to be completed at the end of their course and handed in anonymously.

Information derived from course evaluations will be retained for historical reference and used for the following purposes:

- to assist staff members to develop and evaluate the topic by gaining feedback from students about the topic structure, content and resources;
- to assist Medipro with the annual evaluations of topics;
- to inform course level monitoring of course performance;
- to assist staff to evaluate their teaching approaches and practices by gaining feedback from students;
- as a basis for discussion between management and staff in appraisals;
- Support the regular standardisation meeting content;
- for CPD by the staff.

The Training Co-ordinator will provide a management report annually to the Clinical Director on completion of student evaluations of learning and teaching.

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Feedback to Students

Clinical Director will be responsible for providing information to students about changes made to courses, teaching methods and assessments because of the processes of review, monitoring and evaluation.

Staff are encouraged to make known to students any improvements that are to be implemented in the teaching and learning environment in response to feedback derived from course evaluations.

Management of results

Medipro aims to ensure effective management of teaching staff are accountable to the Clinical Director, through the appraisal system, for the quality of their teaching performance.

Due care will be taken to ensure that information derived from evaluations of learning and teaching is used in an appropriate manner, and that actions are taken, as appropriate, to protect the anonymity of individual.

Where the Clinical Director considers that the results derived from an evaluation reveal that there may be a significant problem with a staff member's teaching, the following actions will be taken:

- The Clinical Director will discuss the results with the staff member and agree a course of action aimed at improving students' perceptions of teaching in the topic. Such action may include monitoring aspects of future evaluations, undertaking an evaluation of the staff member's teaching, identifying a program of staff development, undertaking a review of the curriculum, clarifying teaching and learning objectives and expectations, or changing other practices.
- If the Clinical Director and the staff member disagree materially about the interpretation of results, the Managing Director will make an informed decision on the meaning of the results.

Staff are entitled to request that their written comments be attached to any official copies of their individual survey results.

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Evaluation of Teaching

Medipro acknowledges evaluation as a useful source of information that can be used to improve and enhance the quality of the whole teaching and learning experience.

All Clinical Tutors will participate in evaluation of teaching by one or more peer(s) trained in the evaluation process at least annually.

A summary of evaluation outcomes, as agreed between the staff member and evaluator(s), will be provided to management. The detailed records and reports from an evaluation will remain confidential except where the staff member chooses otherwise.

Staff being evaluated will have discretion to:

- reasonably exclude a particular evaluator;
- select at least one teaching session for evaluation;
- present reports of evaluation as evidence of effective teaching for appraisals.
- The evaluator(s) and staff member being evaluated will:
 - discuss the context and outcomes of the evaluation;
 - agree on the selection of appropriate instruments to facilitate the process;
 - agree the nature, format and extent of feedback to be provided;
 - agree the summary of evaluation outcomes to be provided to the staff member's line manager.

Responsibilities

Medipro is responsible for the provision of training and resources, including provision of a selection of instruments to support evaluators and the process of evaluation.

Human Resources & Compliance Manager is responsible for:

- Collating an annual evaluation report for the Clinical Director, on the basis of reports received.

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Clinical Director is responsible for:

- Encouraging inexperienced staff to participate in evaluation in their first few months of teaching;
- dealing sensitively and carefully with staff concerns about evaluation;
- internal quality assurance processes and functions;
- the design and implementation of evaluation within MediPro, including:
- the development of appropriate mechanisms and consistent information to inform staff about the purpose, principles and processes of evaluation;
- the development of clear processes for the training of staff as evaluators/assessors;
- initiating the evaluation process in each individual case; and
- recognition of workload allocations for evaluators/assessors in MediPro;
- reporting annually to the Managing Director to confirm completion of evaluation of staff members identified for evaluation that year.

Evaluators/assessors are responsible for:

- ensuring that they provide constructive usable feedback to the staff member;
- notifying management of the staff member who has been evaluated that the evaluation has taken place;
- providing a summary of the evaluation outcomes.

Student Appeal

Medipro has procedures in place for students who wish to request a review of a decision affecting them and their progression or completion of an academic award or qualification.

The objective of this section is to ensure rigorous quality assurance of the academic decision-making processes, by providing students with a fair, transparent and formal process. A process which ensures that academic decisions are fully considered, all required procedures and processes are followed, and the consideration of any valid extenuating circumstances is made.

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The Procedures mean that:

- Students can be assured that their academic performance is subject to robust procedures and decision making processes;
- Academic staff benefit by being assured that quality assurance mechanisms are being adhered to;
- Professional staff benefit by being assured that administrative processes are quality checked.

Students must have the opportunity to raise matters of concern without fear of disadvantage and in the knowledge that their privacy and confidentiality will be respected as well as that of members of staff. Disclosure to others about an academic appeal and the release of relevant information relating to an academic appeal, other than to those with responsibility for considering or supporting an academic appeal or providing information on an academic appeal, will only take place as far as it is

necessary for dealing with that appeal. Where disclosure to individuals other than those referred to above is necessary, the Student who is appealing will be notified prior to any disclosure being made to check that he or she wishes to proceed on this basis.

The Procedures ensure that students can invoke a fair and transparent process which treats academic appeals consistently, objectively and effectively whilst maintaining academic standards and fairness.

Procedures

These Procedures on student academic appeals reflect the provisions of Regulation 36: Student Academic Appeals and good practice contained in the QAA's UK Quality Code for Higher Education, endorsed by the higher education community. The purpose of the Procedures is to provide clear and concise information for students and staff on all aspects of the appeals process.

Introduction and Preliminary Information

A Student who makes an appeal is, for the purposes of these Procedures, referred to as an 'appellant'.

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The Programme Leader will oversee the student academic appeals process. They will appoint members of staff as Assessors of Student Academic Appeals at the second stage consideration (hereafter referred to as “Assessors”) who shall have the duties as set out in Regulation 36: Student Academic Appeals.

Students may wish to contact the Administration Department to seek advice, support and assistance. If such assistance is sought it remains the responsibility of the Student to prepare and submit an academic appeal for consideration and to liaise directly with the relevant company authorities.

A Student appealing against an award to be conferred by Medipro will not be entitled to receive the award until the process of the academic appeal has been concluded or the Student withdraws the appeal in writing and thereby agrees to accept the award.

The term 'Board of Examiners' is used throughout the Procedures to refer to Assessment Boards, Award Boards and Progression Boards for taught programmes, appropriate boards/individuals with responsibility for making decisions on the progression of students, or Examiners and/or Supervisors.

Medipro will make every reasonable effort to meet the time limits set out in the Procedures. Where they are not met, an explanation will be formally offered. Students should be aware that timescales may need to be extended to ensure proper consideration of the matter in hand. Students should be aware that the academic appeals process is investigative in nature, and that this can impact on the length of time it takes for the outcome of an academic appeal to be determined.

In accordance with normal practice in the education sector, students do not have the right to legal representation under these Procedures.

The contact details provided by the appellant on the Appeal Form shall be used in all correspondence related to an academic appeal. An appellant is responsible for ensuring that contact details are kept up to date.

In the absence from Medipro of any person holding a post identified in these procedures, a nominated member of the staff appointed by the Programme Leader will deputise.

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Medipro embraces a positive attitude towards the promotion of equality and diversity. The Procedures apply equally to all students irrespective of age, disability, race, ethnic origin or national identity, religious belief, sex or sexual orientation.

Where circumstances allow, international students studying under the UKVI (or any successor body) immigration regulations will be permitted to progress with their studies pending the outcome of the appeal within the period of their current visa. Medipro will endeavour to resolve any academic appeal from an international Student before the end of the Student's current visa expiry date; however, this may not always be possible.

In line with guidance from the QAA, Medipro monitors and evaluates the effectiveness of its academic appeals procedures annually, to ensure that they are fair and functioning as intended, and that appropriate arrangements are in place for learning from cases irrespective of the outcome of an individual case. An anonymous summary of academic appeals and their outcomes is compiled and reported on an annual basis.

Definition of an Academic Appeal

An academic appeal is a formal request by a Student for the review of a decision affecting him or her that has been made by an academic body or officer with authority for making decisions on student progression, assessment and academic awards in Medipro, in accordance with grounds set out in the section on 'Grounds for an Academic Appeal'.

For the purposes of these Procedures, and other than where specifically provided, Medipro takes the term 'student' to include current students registered to study for a Medipro qualification or academic credits whether at Medipro, studying at an Approved Learning Partner, or studying by distance learning. Procedures for academic appeals for students studying on programmes offered with collaborative partners or validated by the company vary depending upon the agreement between the partners. Such arrangement details can be gained from the Administrative Department.

A complaint is different from an academic appeal and is defined as any specific concern a Student might have relating to Medipro including a concern about the

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provision of a programme of study or academic related service or facility provided by the company. Medipro's procedures for considering complaints can be obtained from the Administrative Department. Where clarification is required in an individual case, the Quality Team shall determine whether a case should be classified and considered as an academic appeal or a complaint.

Preparing an Academic Appeal: Grounds and Limitations

The Subject of an Academic Appeal:

Academic appeals may be formally requested by a Student with respect to the following:

- A decision by the Board of Examiners about transfer or progression within a programme or from one programme leading to one award to a programme leading to another award;
- A decision by the Board of Examiners to award what a Student believes to be incorrect marks or an incorrect degree classification or award: an academic appeal cannot be submitted on a matter of academic judgement;
- A decision by Medipro to penalise a Student (including terminating his or her registration as a student of Medipro) for failure to make progress;
- A decision by Medipro, under circumstances where they would need to consider the Aegrotat Qualifications, Compassionate & Considerations Policy (these circumstances should be reported to the Administrative Department, if they wish them to be brought to the attention of a Board of Examiners);
- Where there have been procedural, organisational or other material irregularities in the conduct of an examination or assessment, or supervision which may have had an adverse effect on progress.

Academic Judgement:

Students may not appeal against:

- Decisions of academic judgement;
- The marking standards of academic staff;
- The content or learning outcomes associated with courses or programmes that have been approved;

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- The merits of work submitted for assessment;
- The research methodology used by a Student.

Academic judgment is professional and scholarly knowledge and expertise which members of Medipro staff and Examiners draw upon in reaching an academic decision. Academic judgment therefore includes, but is not restricted to, decisions about the academic standards attained by students, marks and grades to be awarded for individual pieces of work or courses, and award classifications to be awarded, or not.

Robust mechanisms exist within Medipro to ensure that marking standards are fair and appropriate. Students who are uncertain why they received a particular outcome or mark should discuss this with their Module Leader in the first instance.

Grounds for an Academic Appeal:

Medipro considers that an academic appeal may be made where there is evidence to show:

- That the Student's performance was affected by mitigating circumstances that he or she could not report at the time for valid reasons, and that mitigating circumstances have not been taken into account in making the relevant academic decision or before the deliberations of the relevant Board of Examiners;
- That staff or bodies have not followed approved regulations and procedures;
- There has been a material lack of clarity on the part of Medipro which has affected the performance of the Student;
- Staff or bodies have not acted fairly towards a student by showing bias in the way they have made the relevant academic decision.

Aspects Considered During Consideration of Academic Appeals:

- Whether the original decision was procedurally correct;
- Whether the assessment was undertaken in accordance with Regulations, policies or procedures on the part of the Examiners;
- Whether there is any new information that has a bearing on the case, and if so, whether there is an acceptable reason it was not available previously.

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Invalid Grounds for Academic Appeals:

Medipro will not consider an academic appeal where it can be shown at any stage that:

- The academic decision against which the appeal is directed has yet to be made or, if made, has yet to be confirmed;
- The Student did not understand or was not aware of the published assessment regulations and procedures for a course or programme, as relevant to the case;
- The Student was not aware of the published procedures for presenting mitigating circumstances to the Board of Examiners which is available to all students from the Administrative Department;
- The academic appeal has been made on the grounds of mitigating circumstances without there being any relevant written medical or other evidence to show why it should be considered (e.g. medical or death certificates, counsellor's letter, crime report); Evidence from parents or friends is not considered to be independent, and may not be deemed sufficient to verify the circumstances claimed;
- The academic appeal is based on evidence that relates to alleged ill-health or other mitigating circumstances that could have been reported to the company at the time they occurred, but were not, and the Student is unable to provide a valid reason for not having provided the evidence at the time; Circumstances that would not normally be considered grounds for appeal include:
 - holidays or other events that were planned or could have reasonably been expected to coincide with assessments;
 - assessments that were scheduled close together or on the same day, or that clash due to incorrect enrolment by the Student;
 - misreading the timetable for examinations or otherwise misunderstanding the requirements for assessment;
 - inadequate planning or time management;
 - last-minute or careless travel arrangements;
 - consequences of paid employment;

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- examination stress or panic attacks not supported by medical evidence;
- grounds of an unspecific or general nature or uncorroborated nature such as no medical evidence being presented;

Students are instructed to bring evidence of mitigating circumstances to the attention of the Module Leader prior to assessment in relation to the relevant course or programme. To establish mitigating circumstances as grounds for an academic appeal there must be a compelling and substantiated reason why the Student had been unable to comply with this procedure:

- The Student, when claiming he or she suffered disturbance or illness during an examination, did not report the circumstances to their tutor before leaving the examination hall, nor did he or she report the circumstances in writing before the meeting of the Board of Examiners;
- The academic appeal is a disagreement with the academic judgement of a Board of Examiners in assessing the merits of academic work, or in reaching a decision on progression, or on the final classification for an award, which has been reached in accordance with the published regulations and procedures;
- The academic appeal is because the provision of teaching or guidance affected academic performance. In such circumstances a Student must submit a complaint in accordance with the Complaints Policy and Procedures;
- Grounds considered at a subsequent stage in the process differ from those submitted at the first stage or the same case is raised again at the first stage with different grounds, unless the grounds relate to procedural irregularities in the conduct of the appeal at a previous stage;
- Evidence put forward to support the appeal can be shown to have been dishonestly acquired or is itself dishonest;
- The substance of the academic appeal can be shown to relate to a matter that is in progress or has already been the subject of an academic appeal by the Student;
- The academic appeal is received after the deadline, as specified in this document, without good cause. An academic appeal which is rejected on the

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grounds that it was received after the deadline may not then be escalated to the next stage of appeal. Failure on the part of a Student to keep Medipro informed of address details, thereby causing delay or failure in the delivery of examination results, does not constitute grounds for academic appeal;

- The academic appeal is not submitted on the relevant Academic Appeal Form;
- The academic appeal is vexatious or frivolous. In such cases the company will provide reasons in writing to the Student as to why the academic appeal is considered an abuse of the process but will not enter lengthy correspondence about such cases. Any academic appeal considered vexatious or frivolous may lead to disciplinary action being taken by Medipro.

Standard of Proof:

In considering appeals the standard of proof required by Medipro is that it is more likely than not that something is or is not the case on the 'balance of probability' rather than 'beyond all reasonable doubt'. In making an academic appeal it is for the Student to show that there are grounds to appeal.

Student Obligations

It is the obligation of each student to:

- Attend timetabled assessments and to submit work for assessment within the notified time-limit and in accordance with the conditions for the programme being undertaken;
- Abide by Medipro's procedures and to notify relevant staff members of any mitigating circumstances which may adversely affect their academic performance;
- Ensure that Boards of Examiners are in possession of the facts pertaining to all mitigating circumstances in advance of decisions being made about academic classifications or academic progression or transfer.

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Procedures for Submitting an Academic Appeal

Informal Resolution:

Medipro will normally seek to resolve matters of concern as closely as possible to the level at which they arise. Before making a formal academic appeal, an appellant should make every effort to contact his or her Module Leader or other relevant member of staff to discuss the issue and ascertain if it can be clarified or resolved without resorting to formal procedures. Medipro may be able to advise the appellant on how a decision in the individual's case was determined.

Submission:

Academic Appeals should be submitted on the correct Academic Appeal Form to the Administrative Department of Medipro, within the required timescale. The Academic Appeal Form requests specific information to assist the company in the consideration of the academic appeal, therefore it is essential that all mandatory sections of the Academic Appeal Form are completed. Academic Appeals that are not submitted in the correct format, on the correct Academic Appeal Form, or where mandatory fields are not completed, will not be considered, and will be returned to the appellant with an explanation. Those received out with the required timescale will be rejected. All mandatory sections of the Academic Appeal Form should be completed and all appropriate supporting evidence should be submitted. All documentation should be written in English. Evidence submitted in a language other than English must include a certified translation in English. The academic appeal must be submitted by the appellant. The appellant may seek the assistance of a third party. Medipro will only deal with a third party providing assistance to the appellant where there is written and signed authorisation by the appellant to allow this to happen. The appellant remains the responsible person with respect to the academic appeal and will be required to liaise directly with Medipro. The appellant is not permitted to appoint someone to act on his or her behalf.

The academic appeal must set out in full the reasons for making the academic appeal and this will be treated as the definitive statement of the appellant's grounds for appeal.

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Collective academic appeals will be managed on a case-by-case basis depending on the nature of the academic appeal. Each individual member of the collective academic appeal must provide their individual details and signature as required on the Academic Appeal Form, together with independent confirmation of their support for the academic appeal, and willingness to engage in the academic appeal process. A collective academic appeal will be managed in the same way as an individual academic appeal, in accordance with the Procedures.

The QAA's UK Quality Code for Education recommends that a process must be in place for dealing with academic appeals involving legal referral by an appellant. Legal advice is that if a Student raises legal proceedings about an academic appeal before submitting the academic appeal for consideration under the company's academic appeals procedures, the procedures shall not be initiated until legal proceedings have been concluded. If an appellant raises legal proceedings about an academic appeal whilst an academic appeal is under consideration by the company, the academic appeal procedures will be suspended until the legal proceedings have been concluded.

Stage 1 Academic Appeal (Appendix C)

Academic Appeals must be submitted in the first instance to the Administrative Department, once complete, this will be passed to the Programme Leader. The Academic Appeal Form must be submitted by the appellant not later than 10 working days after receipt of the information which forms the basis of the academic appeal coming to the appellant's knowledge.

The Programme Leader is responsible for conducting the investigation of the academic appeal and for communicating with the appellant throughout the academic appeal process, providing information and advising on the outcome of the academic appeal.

The Programme Leader may delegate authority for conducting the consideration of the academic appeal to a member of Staff of Medipro with appropriate experience. For the purposes of these Procedures the person conducting the consideration of the academic appeal shall be referred to as the Investigator. It is envisaged that such authority would be delegated to one or two individuals.

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If the Programme Leader has had a previous involvement in the matter that is the subject of an academic appeal being made this shall be disclosed and he or she shall appoint an Investigator from within Medipro, with the appropriate experience to conduct the consideration of the appeal, ensuring that such a member of staff has had no previous involvement in the appeal.

The outcome of an academic appeal to the Investigator shall normally be determined within 30 working days of receipt of the academic appeal and all required supporting documentation by the Investigator . Every reasonable effort will be made to meet this time limit. Where it is not met, the Investigator will provide an explanation for the delay to the appellant. Students should be aware that timescales may need to be extended to ensure proper consideration of the matter in hand. Students should be aware that the academic appeals process is investigative in nature, and that this can impact on the length of time it takes for the outcome of an academic appeal to be determined.

The Investigator will acknowledge receipt of the academic appeal in writing within 10 working days. If the appellant has not received an acknowledgement within this time he or she should contact the Investigator.

The Investigator shall have the following powers:

- On behalf of the Board of Examiners, on consideration, reject the academic appeal in whole or in part with or without referring the case to the Board of Examiners;
- Refer the academic appeal to the Board of Examiners for consideration;
- Dismiss the academic appeal as vexatious or frivolous.

If considered necessary by the Investigator, he or she may consult the Medipro Board of Directors before reaching a final decision on an academic appeal.

If the Investigator decides that the academic appeal should be referred to the Board of Examiners he or she will request that the Board of Examiners considers the grounds for appeal and reconsiders its decision.

The appellant is entitled, on request, to receive copies of the Board of Examiners' reports and relevant extracts from the minutes of meetings . The appellant should

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submit a Subject Access Request Form for such requests. The Form is available from the Administration Department and reports will be disclosed in accordance with the guidance therein and subject to any exemptions which apply under the Freedom of Information Act.

At the conclusion of his or her consideration of the academic appeal the Investigator should ensure that the Academic Appeal Response Form is fully completed including the reasons for the decision reached in respect of the academic appeal. The appellant will be advised, in writing, of the outcome and the reasons for the judgement, any remedial action to be taken, and the subsequent right of further appeal if the academic appeal is rejected by the Investigator. The appellant will normally be notified of the outcome within ten working days of the decision on the outcome being made.

The Investigator will keep a record of all academic appeals considered and submit an annual report.

Stage 2 Academic Appeal (Appendix D)

If an appellant considers that his or her Stage 1 academic appeal has not been dealt with satisfactorily, and feels that the matter should be taken further, he or she may appeal to the Medipro Board of Directors. The Board of Directors will appoint an Assessor to consider a Stage 2 Academic Appeal. Assessors, will be members of Academic Staff who will undertake the review of Stage 2 Academic Appeals. An assigned member of staff shall have the delegated authority of the Board of Directors to assign Stage 2 Academic Appeals to an appointed Assessor. An appellant wishing to submit an academic appeal to the Board of Directors should complete the appropriate Academic Appeal Form and submit it to the HR Dept. The Academic Appeal Form must be submitted not later than twenty working days after confirmation of the outcome of the Stage 1 academic appeal has been issued to the appellant. The HR & Compliance Manager will assign a member of staff of the Administration Department to be responsible for supporting the process of appeal to the Board of Directors. An acknowledgement of receipt of an academic appeal will be sent to the appellant within ten days of receipt of the academic appeal.

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If the Assessor has had a previous involvement in any matter relating to the appeal being made this shall be disclosed and the Board of Directors shall appoint - a replacement Assessor, with no previous involvement in the appeal, to act in the place of the appointed Assessor. An assigned member of the Administration Department shall have the delegated authority of the Board of Directors to appoint a replacement Assessor.

The outcome of an appeal to the Board of Directors shall normally be determined within 30 working days of receipt of the appeal and all required supporting documentation by the Assessor who will undertake the review of a Stage 2 Academic Appeal. Every reasonable effort will be made to meet this time limit. Where it is not met the Assessor will provide an explanation for the delay to the appellant. Students should be aware that timescales may need to be extended in order to ensure proper consideration of the matter in hand. Students should be aware that the academic appeals process is investigative in nature, and that this can impact on the length of time it takes for the outcome of an academic appeal to be determined.

The Assessor shall have the following powers:

- To refer the academic appeal back to the Board of Directors. The Assessor shall refer the academic appeal to the Board of Directors with recommendations for resolving the academic appeal;
- To determine that the academic appeal be upheld or partially upheld;
- To determine that there is a 'prima facie' case or that the complexity of the case requires further investigation. The Assessor may choose to establish an academic appeal committee of enquiry to consider the academic appeal;
- To determine that valid academic appeal submission grounds do not exist for the academic appeal to be considered and that there is no requirement for further investigation;
- To dismiss the academic appeal as vexatious or frivolous.

In each case the Assessor shall complete an Assessor Academic Appeal Response Form outlining the reasons for the decision. The appellant will be advised, in writing, of the outcome and the reasons for the judgement. Where a case is to be referred to an academic appeal committee, the appellant will be informed in writing. Where

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appropriate, the appellant will be advised that Medipro's appeals procedures have been exhausted and the right to appeal to the appropriate Awarding Organisation.

The Assessor, supported by the member of the Administration Department, will not be expected to conduct his or her own investigations, but will rely largely upon the appellant's submitted documentation, seeking clarification at his or her discretion, from the appellant and relevant departments of the company.

The Administration Department will keep a record of all academic appeals considered by the Assessor.

Procedures for Academic Appeal Hearing

If an academic appeal committee is to consider the appeal, the Board of Directors (on the recommendation of the Assessor) shall approve the members of the committee who will not normally be drawn from the same course as the appellant. Members of the committee must have had no previous involvement in the case. The panel will normally comprise the following:

- The Assessor who shall be the Chair;
- A member of staff;
- A student representative.

A member of staff will be appointed to support the academic appeal as the Clerk to the committee.

The academic appeal committee shall meet to consider the documentation submitted by the appellant. The academic appeal committee may provide relevant members of staff and, where appropriate, the Board of Examiners or any other person required to attend the hearing who is not a member of staff, with copies of the documentation and any further information deemed to be relevant and invite their written comments.

Having considered the academic appeal and any comments the academic appeal committee shall agree one of following courses of action:

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- Determine that based on the academic appeal submission grounds there is no requirement for further investigation and that the academic appeal should not be upheld;
- Determine that the academic appeal be upheld or partially upheld;
- Exceptionally determine that the appellant should be invited to attend a hearing. The academic appeal committee should determine the reasons why a hearing is required.

The appellant shall be given notice of at least ten working days of the hearing of the academic appeal committee. Such notice shall state:

- The membership of the academic appeal committee and the date, time and place of the hearing;
- The names of any witnesses or any person considered beneficial in providing advice to the hearing (e.g. registered medical practitioner, interpreter, or other suitably qualified person) to be called to attend the hearing by Medipro. Such advisers will not be entitled to participate in committee decisions, but can give advice to, or address the committee at the invitation of the Chair;
- That he or she has the right to be heard at the hearing accompanied, if he or she so wishes, by one other individual who is a student of Medipro or a member of staff. The Clerk should be informed at least five working days prior to the hearing of whether the appellant will be accompanied and the name of the person accompanying him or her, and in what capacity;
- That he or she has the right to submit a written statement or written evidence for the consideration of the academic appeal committee. Where an appellant wishes to submit medical reports to support his or her case, he or she will be responsible for obtaining such reports and paying any fee that may be charged;
- That written evidence submitted to the hearing may be disclosed to all relevant parties and that when comments are sought from third parties they will be advised that their comments may be disclosed to the appellant;
- The Clerk shall invite to the hearing any witnesses that the appellant has indicated he or she wishes to attend. The Clerk should be informed at least

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five working days prior to the hearing of the witnesses the appellant proposes to call;

- That the appellant is expected to acknowledge receipt of the notification and that any objection to the place, time or membership of the academic appeal committee must be lodged immediately stating the grounds of the objection, but that any change will be solely at the discretion of the Chair of the academic appeal committee;
- A warning that if the appellant fails to attend the hearing, the meeting of the academic appeal committee will normally proceed in his or her absence.

An appellant who is undertaking a programme of study overseas will not normally be expected to attend a hearing and arrangements may be made for a hearing to be conducted using video conferencing or conference call facilities where this is practicable. Any appellant who attends a hearing will be liable for payment of their own travel and any other personal costs.

The Assessor and the academic appeal committee respectively have the authority to make decisions without reference to the senior management.

The decision of the Board of Examiners on any academic appeal referred to it by the Investigator, the Assessor or an academic appeals committee, where any such decision affects a result already reported to higher management, will be subject to confirmation by that body.

Conduct of the Hearing

The Clerk to the academic appeal committee shall keep a record of the proceedings.

The suggested procedure for the hearing is as follows. The Chair may amend the procedures for the hearing to take account of each appellant's case.

Evidence shall be taken in the following order:

1. The appellant;
2. Witnesses in support of the appellant;
3. Witnesses for the company.

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The academic appeal committee will meet in private prior to the hearing to agree the issues to be addressed and the details of how the hearing will be conducted. Members of the academic appeal committee shall have the right to put questions to any persons attending the hearing.

Throughout the main part of the hearing all parties will be present to promote a full and open discussion of all points that are raised with the committee. Witnesses will be present during relevant parts of the hearing.

The papers of the academic appeal committee will be strictly confidential to the participants in the hearing, save in exceptional circumstances where the academic appeal committee, with the agreement of the appellant, decides otherwise.

At the start of the hearing the Chair will explain the powers of the panel and summarise the process to date, the procedures for the hearing, the evidence received and indicate that all submissions have been shared with all the members present. When a submitted item has not been shared due to issues of confidentiality, this will be intimated at this stage.

The Chair will explain that wherever possible the academic appeal committee will wish to hear directly from the appellant.

The Chair will invite the appellant or the person accompanying him or her to make a statement in response to the opening remarks in relation to the procedures that will be followed or to seek clarification on matters of procedure.

The appellant or the person accompanying him or her will be invited to make a statement on anything he or she may wish to add to the written submissions.

The Chair will invite witnesses and any other person(s) called upon to attend the hearing to make a brief statement, and will then invite the academic appeal committee to ask questions.

At each stage the Chair has the discretion to allow questioning, through the Chair, of the appellant or witnesses by members of the Committee, or of witnesses by the appellant or the person accompanying him or her.

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Once the Chair is satisfied that the academic appeal committee has completed its questioning and the appellant or the person accompanying him or her has had a full opportunity to convey the information to the academic appeal committee, the Chair will invite closing statements from the appellant or the person accompanying him or her. The Chair will ask everyone but the academic appeal committee and the Clerk to withdraw.

The academic appeal committee shall sit in private to discuss the case and make its decision. The Clerk shall be present. The Chair shall have a deliberative and a casting vote.

At any stage the Chair may adjourn, continue or postpone a hearing for an appropriate period when there is good reason.

Where the appellant does not appear at the hearing, the academic appeals committee may proceed to deal with the appeal in his or her absence; provided that the academic appeals committee is satisfied that the appellant has been properly notified of the hearing of the academic appeals committee in accordance with the procedures described above.

The academic appeal committee may take one of the following decisions:

- Reject the academic appeal and confirm the original decision which shall be final;
- Request a Board of Examiners or other relevant persons to consider the original decision in the light of new evidence disclosed in the course of the academic appeal;
- Uphold the academic appeal, in whole or in part, with or without conditions.

The academic appeal committee shall inform the appellant, if he or she is present, of its decision at the end of the hearing, within ten working days of the decision the Clerk shall provide written confirmation of the decision for the appellant and all other parties concerned. The appellant will be advised that the company's appeal processes have been exhausted.

A brief report of the proceedings of the academic appeal committee will be compiled and approved by the academic appeal committee.

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The Clerk will keep a record of all academic appeals considered and submit an annual report to the Administrative Department.

Independent Review

At the point when the internal appeal procedures have been completed there remains no further recourse to action through the internal company procedures. However, there is an opportunity for independent consideration of an appeal which the appellant considers has not been satisfactorily resolved and where the appellant remains dissatisfied. An appellant will be advised, at the appropriate stage in the appeal process, of their right to appeal to the Awarding Organisation. To get in contact with the specific Awarding Organisation for the programme, the appellant should contact the Administrative Department who will supply the address and contact details for that body.

Records and Reports

Full notes should be taken of all proceedings and responsibility for recording proceedings shall be as follows:

- Academic Appeals to the Investigator;
- Academic Appeals to the Board of Directors.

With regard to the nature of reports on proceedings, the following should be observed:

- Reports should be sufficiently full to reflect the reasoning by which conclusions and recommendations have been reached;
- Reports should be sufficiently comprehensive to allow the staff member of MediPro or a committee, depending upon the stage of academic appeal, to use them as a basis for the review of a case;
- Reports should be compiled with all due regard for confidentiality.

The Clerk to an academic appeal committee must ensure that minutes and reports on meetings of a committee are agreed by the members of the committee.

Reports on academic appeals for submission to the Administrative Department shall be made in a approved format. An annual report will be submitted.

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All academic appeals should be recorded at every stage on the student administration system (information for staff on the process for recording academic appeals on the system will be provided).

The Programme Coordinator must be informed of all students submitting academic appeals against award decisions and the outcome of such academic appeals once an academic appeal has been concluded. This is to ensure that an appellant is not eligible to graduate until an academic appeal has been concluded.

Conflict of interest

A conflict of interest exists when the decision making or conduct of an individual or organisation could be affected by practices/interests external to their responsibilities to Qualsafe Awards (QA) and the delivery/assessment and quality assurance of its qualifications.

This section contains guidance about how to identify and manage existing or potential conflicts of interest.

This section applies to:

- Support staff
- Trainers, Assessors and Internal Quality Assurers (IQAs)
- Third parties, including companies that provide services or goods to Medipro or approved Centres.

Definition of Conflict of Interest

A conflict of interest exists in relation to an awarding organisation where:

- its interests in any activity undertaken by it, on its behalf, or by a member of Medipro have the potential to lead it to act contrary to its interests in the development, delivery and award of qualifications in accordance with its Conditions of Recognition,
- a person who is connected to the development, delivery, or award of qualifications by the awarding organisation has interests in any other activity which have the potential to lead that person to act contrary to his or her

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interests in that development, delivery or award in accordance with the awarding organisation's Conditions of Recognition, or

- an informed and reasonable observer would conclude that either of these situations was the case

Identifying Conflicts of Interest

Staff must identify and monitor:

- all conflicts of interest which relate to it, and
- any scenario in which it is reasonably foreseeable that any such conflict of interest will arise in the future.

Managing Conflicts of Interest

Staff must take all reasonable steps to ensure that no conflict of interest which relates to it has an Adverse Effect.

Where such a conflict of interest has had an Adverse Effect, staff must take all reasonable steps to mitigate the Adverse Effect as far as possible and correct it.

Interests in Assessment

All staff must take all reasonable steps to avoid any part of the assessment of a student (including by way of Moderation) being undertaken by any person who has a personal interest in the result of the assessment.

Where, having taken all such reasonable steps, an assessment by such a person cannot be avoided, the awarding organisation must make arrangements for the relevant part of the assessment to be subject to scrutiny by another person.

Responsibilities

With respect to conflicts of interest, Medipro staff must do the following to ensure ongoing compliance with QA and regulatory requirements:

- Staff understand what constitutes a potential and/or actual conflict of interest and are aware how to identify and mitigate conflicts of interest – SMT must ensure that all staff or third parties such as Trainers/Assessors/IQAs involved

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in the delivery or administration of QA qualifications must be able to identify any existing or potential conflicts of interest as and when they arise.

- Take steps to avoid or mitigate any existing or potential conflicts of interest – line management must manage working arrangements to avoid identified conflicts of interest as much as possible. For example, if a student is undertaking assessment and two out of three Trainer/Assessors are related to the student, then the examination should be assessed by the unrelated Trainer/Assessor.

Where the identified conflict of interest is unavoidable, it is important to ensure that independent scrutiny occurs to mitigate the conflict (e.g. an IQA could be present during the assessment process).

- Declare all identified (potential and/or actual) conflicts of interest – Medipro is required to declare all identified conflicts of interest which will have an impact on the delivery of QA qualifications. To do this, a Conflict of Interest Disclosure Form must be completed by an SMT member and submitted to QA. The details on any forms submitted will be reviewed by QA staff to ensure that the declared conflict has been managed appropriately. If this is not considered to be the case, QA staff will contact Medipro to discuss the scenario and ensure that the appropriate actions are taken to avoid or mitigate the conflict.
- Maintain an up to date record of conflicts of interest – Course admins must maintain an accurate record of all existing and potential conflicts of interest, including details of all mitigating actions taken.
- Update records if there is a change in circumstances and notify QA – SMT must inform QA if there are any changes in circumstances relating to previously declared conflicts of interest.
- Ensure independent scrutiny takes place if a conflict of interest cannot be avoided when delivering QA qualifications - There may be instances when conflicts of interest cannot be avoided. In such cases, SMT must ensure that some form of independent scrutiny takes place with respect to course delivery/student assessment.
- Ensure that actions assigned by QA relating to conflicts of interest are carried out - If Medipro has been assigned an action by QA through the course of

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any monitoring activity with respect to conflict of interest management, this action must be carried out with a view to maintaining ongoing compliance.

Using technology

Staff may also use technology to mitigate conflicts of interest. For example, Trainer observations carried out by an IQA at approved Centres may be filmed/recorded as opposed to this activity being carried out solely by an IQA that has a clear conflict of interest with the Trainer in question. This recorded evidence can then subsequently be externally quality assured by QA to ensure any conflict has been appropriately mitigated (Centres filming/recording for this purpose must ensure that all those involved are fully informed they are being recorded and have given permission for this to occur).

Reasonable adjustments

Staff must refer to the QA qualification specification and assessment guidance in full to ascertain whether there are any minimum standard requirements a student must meet during their assessment for a particular qualification.

We should take all reasonable steps to identify and support any specific assessment needs before the student takes an assessment. QA can be consulted in the event of confusion for support.

Management must complete and submit the forms available on the QA Customer Portal to record and provide full details of the reasonable adjustments or special consideration required by Learners.

Reasonable adjustments

All staff must be able to identify when a reasonable adjustment is required for a student and should take all reasonable steps to support students to achieve any qualification. Therefore, staff must be aware of the definition of disability as included in the Equality Act 2010 and ensure that reasonable adjustments are considered and requested (where appropriate) for students who meet this definition.

To assess whether or not a reasonable adjustment should be made, management should consider:

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- Any minimum standard requirements students must meet when being assessed (detailed in the relevant qualification specification or assessment guidance). E.g. to achieve a first aid qualification a student must be able to demonstrate competency performing CPR on a manikin on the floor
- If the integrity of an assessment, and therefore the reliability and validity of the outcome, would be compromised or undermined
- The individual needs of the student
- The impact on the student and any other students
- The cost incurred of making an adjustment

When a reasonable adjustment is required, management must complete the Reasonable Adjustment Form and send it to QA with any relevant supporting evidence. Admin should retain a copy of this form for their own records and quality assurance purposes. QA will review the details of the proposed adjustment to ensure that it is appropriate and fit for purpose.

Management have a responsibility to identify any reasonable adjustments required prior to any course commencing and must request approval from QA at least 5 working days in advance. However, QA permits Medipro to make the following straightforward adjustments without initial approval, with the required Reasonable Adjustment Form being submitted retrospectively:

- Verbal Multiple Choice Question (MCQ) assessments
- 25% additional time to complete an assessment
- Use of coloured overlays and rulers (for Dyslexic Learners)

Special consideration

Tutors should always aim to reschedule an assessment for a student in the first instance. Applying a special consideration should be a last resort and must not compromise the integrity of an assessment or the reliability and validity of its outcome. QA may consider extending the registration period for the qualification to allow time for assessments to be completed.

If a student is unable to attend alternative assessment sessions due to specific circumstances, a special consideration may be applicable.

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A Special Consideration Request Form should be completed and sent to QA for consideration along with supporting evidence prior to implementation. Special Consideration Request Forms must be sent to QA within five working days of students assessment taking place.

Language Translation Requests

Medipro may have students attending courses that do not have English as their first language or who have a need for some language translation through training delivery and assessment. Any tutor that would like to request the translation of qualification or assessment documentation into a language other than English to facilitate training delivery and student assessment must do so through the Language Translation Request process detailed in the QA Language Policy.

The exceptions to this are requests received for training delivery and student assessment to be carried out in another language:

- for students who have been identified by Medipro as meeting the definition of disabled (as per the Equality Act 2010)
- when that language is British Sign Language (BSL)

Any such requests must be made through the reasonable adjustment process outlined in this policy.

Record keeping

Admins must retain student records for a minimum of three years. Records must be made available to QA, its representatives, or regulators on request. QA may request documentation for review as part of ongoing monitoring, quality assurance activities or compliance investigations.

Complaints and appeals

If a student is dissatisfied with a decision regarding reasonable adjustments made or special consideration given by Medipro see QA:

- Customer Complaints Policy
- Appeals Policy

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Malpractice and Maladministration

This section of the Quality Assurance policy highlights the practices that constitute malpractice and maladministration and sets out the procedures that should be followed to manage and mitigate suspected occurrences.

It sets out the process to be followed when reporting suspected or actual cases of malpractice and/or maladministration and who is responsible for dealing with such cases.

Malpractice

Malpractice is defined by any act or activity of improper practice and includes maladministration, misconduct, plagiarism and collusion whether deliberate or unintentional. Malpractice is any activity, practice or omission which deliberately contravenes regulations and compromises the:

- Integrity of a regulated qualification.
- Internal assessment process.
- External assessment and examination process.
- Validity of results or certificates.
- Reputation of Medipro.

The categories listed below are examples of centre and learner malpractice, these examples are not exhaustive and are guidance:

- Contravention of our centre and qualification approval conditions.
- Failure to satisfactorily implement conditions of approval within stated timelines.
- Inadequate centre procedures for the induction of staff or any contracted person involved in the delivery of qualifications.
- Failure to provide learners and staff, including contractors, with the knowledge of their responsibilities through policies and procedures that includes the possible consequences of non-compliance, how malpractice can occur and be prevented.
- Failure to review systems, policies, and procedures to ensure they remain fit for purpose.

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- Centre postponement of visits by our governing bodies for more than 6 months.
- Denial of access to resources (premises, records, information, learners and staff) by any authorised representative and/or qualifications regulators.
- Failure to carry out delivery, internal assessment, internal moderation or IQA in accordance with requirements.
- Failure to conduct assessments or other external assessment according to governing body procedures or regulations.
- Inaccurate recording of learner assessment decisions leading to invalid claims for certification.
- Fraudulent claim for certificates.
- Submission of false information to gain a qualification.
- Intentional withholding of information from us which is critical to maintaining the rigour of quality assurance.
- Deliberate misuse of our logo and other trademarks.
- Deliberate falsification, fabrication or forgery of assessment evidence, records or authentication statements by centres or learners.
- Failure to retain accurate learner assessment decision for the specified timescale.
- Plagiarism of any nature by learners.
- Any form of impersonation or cheating to gain an improper advantage.
- Collusion by learners i.e. allowing another learner to copy work or the unsanctioned collaboration between a learner or another individual in the production of work that would be submitted.
- Deliberate destruction of another's work.
- Obtaining examination or assessment material without authorisation.
- Introduction of unauthorised material into an exam room, for example notes, study guides, own blank paper, personal stereos, mobile phones and other similar electronic devices.
- Obtaining, receiving, exchanging or passing on information during an examination (or the attempt to) by means of talking, using written notes, electronic devices or non-verbal communication.

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- Copying from another learner, or knowingly allowing another student to copy from their own work.
- Failure to follow Medipro's own malpractice and maladministration policy and/or report occurrences to governing body.
- Tampering with learner's scripts or assessed work after collection.
- Improper assistance to learners in the production of assessed work.
- Poor invigilation of learners during online, paper based or controlled assessments including tests and assessments.
- Failing to keep assessment or test papers secure prior to assessment.

Maladministration

Maladministration is defined as any persistent activity, practice or omission which results in centre or learner non-compliance with regulations and requirements. It includes cases of persistent mistakes or poor administration within a centre resulting in the failure to keep appropriate learner assessment records.

Process

The following process should be followed as per each step, to deal with malpractice and maladministration:

1. Informed of incident.
2. Reporting incident to governing body.
3. Medipro to investigate incident (with clearance to do so from the governing body).
4. Submit finished report to governing body for consideration.
5. Act on instructions from governing body.

Medipro is required to take reasonable steps to prevent the occurrence of malpractice and maladministration. We will act on all reports (this could include any disciplinary action needed), instructions and allegations of suspected or actual malpractice incidents received which may affect the integrity of our qualifications and quality assurance.

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Notification

Anyone involved in the assessment process that has had an instance of alleged malpractice or maladministration brought to their attention or anyone that suspects malpractice or maladministration has occurred, must report it immediately to the relevant governing body.

A record on the Medipro Tracker will be kept and assigned a case number.

Sanctions can be imposed whilst the investigation is carried out to protect both learners and the integrity of our qualifications. This may include restrictions on centres registering and/or certificating learners.

Investigation Process

Once we have been given clearance to carry out an internal investigation, we will:

- Ensure that staff leading the investigation are independent of the staff/learners/function being investigated, preferably from MCS.
- Inform those who are suspected of malpractice/maladministration that they are entitled to know the necessary details of the case and possible outcomes.
- Submit the report and findings of the investigation to the governing body within ten working days of being given permission to carry out the investigation. The investigation report should be submitted with an action plan to deal with the situation and ensure that it does not recur.

During any type of investigation (both internal by Medipro and external by our governing body) we will need to always cooperate with our governing body and be on hand to assist.

Whistle-blowers (Protected Disclosure) are protected by legislation which confirms that they are protected against unfair or damaging treatment regardless of whether the allegation is unfounded.

Allegations Involving Staff, Associates, Consultants or Contractors

Medipro is to take steps to limit and avoid malpractice by its staff and any third party it contracts or consults with as part of the design, development, delivery and award

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of its qualifications. A multifaceted approach is taken, for example with secure administrative systems, employment and contractual procedures, our conflicts of interest process (Page 82) and through regular training and standardisation events.

Where allegations of malpractice and/or maladministration cases relate to a member of staff, the investigation will be undertaken by an independent IO from MCS.

Action following an investigation

All decisions about the outcome of any investigation will be determined by the Head of Education. Should the Head of Education not be available, a suitable replacement from the Senior Management Team will be sought.

The following considerations should be considered:

- Establish whether the proper, correct process and procedure have been undertaken during the investigation.
- Any individual involved has been provided the opportunity to make a written statement.
- Determine if malpractice has occurred and who is to blame.

No-one that that has been involved directly in an investigation, that has an actual or potential conflict of interest or that declares an interest in the outcome of the investigation may be involved in the decision-making process.

When reviewing the investigation report and supporting evidence, the HoE will consider whether there is sufficient evidence to establish if malpractice has occurred, if measures need to be put in place to ensure the integrity of an examination or assessment and to prevent a reoccurrence. The HoE will also consider whether a disciplinary procedure should be initiated.

Should the investigation report and supporting evidence not be acceptable or adequate, the HoE will appoint an independent lead investigator to carry out the investigation, ensuring:

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- Investigators are impartial; have no conflict of interest with the person that raised the allegation or with anyone involved in the allegation and have not been involved in the occurrence/allegation at an earlier stage.
- their aim is to action and resolve all investigations within thirty working days from the date the investigation report that was deemed not acceptable. Please note that in some cases the investigation may take longer; on these occasions we will advise all parties concerned of the likely revised timescale.
- Once the investigation has taken place, the investigator will produce a draft report for relevant parties to check for factual accuracy and any to agree any necessary amendments.
- The HoE will review the additional investigation report and supporting evidence.

If the decision reached is that malpractice has occurred, the HoE will assign the appropriate action(s) need to be taken to protect the integrity of a test or assessment and prevent reoccurrence. The level applied will be appropriate to the findings of the investigation and the significance of the issues raised.

To conclude this action, the governing body will be informed of the action taken.

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Name and Role of Author: Paul Ashfield, HR Lead
Name and Role of Responsible Person: Paul Ashfield, HR Lead
Ratified by: Kevin Scorer, Head of Education

Signed: 

Date Ratified: 30th March 2021

Version Control

This policy and procedure will be reviewed 3 yearly or as changes in legislation dictate.

Version Number	Date	Reason for Update
2	30/10/2020	To streamline policies and due to version 1 being out of date.

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Appendix A
dated 30 Oct 20

QA LEVEL 5 DIPLOMA IN FIRST RESPONSE EMERGENCY AND URGENT CARE (RQF)

The following examples are recommended but there is no set way of delivering, assessing and quality assuring the QA Level 5 Diploma in First Response Emergency and Urgent Care (RQF) qualification.

Units in the qualification

Mandatory (85 credits)

- Unit 1 Understanding the principles of clinical practice
- Unit 2 Understanding anatomy, physiology and pathophysiology in clinical practice
- Unit 3 Providing emergency and urgent care to patients with specific needs
- Unit 4 Emergency and urgent care in the prehospital care environment

Recommended strategy

This qualification is at RQF level 5 and is designed to equip students with an advanced level of theoretical knowledge and clinical skills needed to deal with a range of prehospital emergency and urgent situations. The qualification is designed to act as proof the student has undergone a programme of learning and assessment to demonstrate competency in prehospital care to gain employment.

The design of this qualification and the assessment strategy strongly reflect the views and recommendations of:

- Resuscitation Council (UK)
- Skills for Health Assessment Principles Assessment Principles for Qualifications that Assess Occupational Competence
- The Royal College of Surgeons of Edinburgh – Faculty of Pre-Hospital Care PHEM Skills Framework

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- The Health and Care Professions Council (HCPC) standards of proficiency, which set out what a student must know, understand and be able to do by the time they have completed their training, so that they are able to apply to register with the HCPC.

The assessment strategy also supports those who wish to progress to further study as it introduces the student to the type of assessment that will be used in qualifications at RQF level 6, and to which this qualification has been aligned for progression. At the same time, for students progressing from RQF level 4 qualifications, it will expand their assessment experience by introducing more integrated assessment and assessment tools that will help them in their development as independent Students.

e-Learning and e-Assessment can be used for units 1 and 2, as the assessment for these units can be carried out using theoretical/knowledge tests.

Assessment Methods

Qualsafe Awards have devised assessment tools to make sure students gain the required knowledge, skills and understanding, as detailed in the learning outcomes and assessment criteria. Centres should download all assessment papers from the Customer Portal in advance of the course. For each unit, there are:

- Practical assessments/skills tests – observed by the tutor throughout the course, with the results of each learning outcome recorded on the practical assessment paperwork
- Formative assessments – a range of informal assessment procedures employed by the Tutor/Assessor during the learning process to measure each student’s knowledge, skills and understanding related to the assessment criteria
- Theory assessment/Workbooks/Case
- Summative assessments - used to evaluate student learning, skill acquisition and achievement at the conclusion of a defined instructional period—typically at the end of a project, unit, course, semester or programme

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Tutors are expected to make a professional judgement as to whether that students has achieved all the assessment criteria. Tutors should use all assessment evidence available, including formative and practical assessments, to reach this judgement.

This will make sure that the assessment reflects the practical context of the qualification and will make sure students have the knowledge and skills to enable them to access work or further study. The assessment strategy has a strong focus on clinical procedures, which provides opportunities to integrate some of the practical aspects of the qualification. There are also opportunities to integrate theory and practical units, e.g. by applying theoretical understanding when carrying out clinical assessments and performing clinical procedures.

Quality assurance

Internal quality assurance

Medipro is required to sample a reasonable amount of assessments as part of the quality of the qualification. This standardisation of assessment across students and tutors is to make sure there is fairness and consistency in assessment practices. The arrangements for this should be included in the Centre's approved internal quality assurance policy.

Centres must retain all student documents and records for a period of 3 years and make sure these are available for review by QA or their representatives, e.g. External Quality Assurers (EQAs), on request.

Qualsafe Awards external quality assurance

Qualsafe Awards operates a system of ongoing monitoring, support and feedback for approved Centres across the United Kingdom.

Centres are required to inform Qualsafe Awards (via email to: qualityassurance@qualsafeawards.org) of the first course date, prior to delivery, to enable implementation of the EQA strategy for this qualification.

A Centre's approval status for this qualification is dependent upon a successful EQA visits and sampling of Student portfolios on the first course. A minimum of 1 EQA visit must be carried out annually thereafter.

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Further details of the Qualsafe Awards' external quality assurance programme are available in the QA Centre Quality Assurance Guidance.

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Mandatory Units

Unit	Tasks for each Unit	Integration with other Units	Assessment	Comments on possible delivery and assessment
Unit 1 Understanding the principles of clinical practice	Summarise key legislation relevant to prehospital care practice. Analyse a range of communication methods to provide service users and others with information. Conduct a review of a prehospital care incident. Carry out research for an aspect of prehospital care practice.	Integrate with Units 3 and 4	Workbook	This would be introduced at the beginning of the programme to allow Students to understand their scope of practice.
Unit 2 Understanding anatomy, physiology and pathophysiology in clinical practice	Explain human anatomy and physiology and the effects of diseases and disorders. Demonstrate how to assess and manage a range of medical conditions.	Integrate with Units 1, 3 and 4	Workbook and Practical	This would be introduced at the beginning of the programme to allow Students to make links between how the body works and the clinical procedures they will learn to carry out.

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QUALITY ASSURANCE

Assessment timeline based on a three semester, 36-week programme

Mandatory Units

	Semester 1												Semester 2												Semester 3											
Units	1				6						12					18						24					30					36				
1					X	X																														
2																																				
3																																				
4																																				
CP																																				

- | |
|--|
| |
|--|

 = Ongoing delivery and assessment/preparation for assessment
- | |
|----|
| CP |
|----|

 = Clinical practice – for which Students are required to evidence 750hrs worth
- | |
|---|
| X |
|---|

 = Completion of assessment/assessment submission

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QUALITY ASSURANCE

Appendix B
dated 30 Oct 20

QA LEVEL 6 DIPLOMA IN PARAMEDIC PRACTICE (RQF)

The following programme must be adopted when delivering, assessing and quality assuring the QA Level 6 Diploma in Paramedic Practice (RQF) qualification.

Units in the qualification

Mandatory (150 credits)

- Unit 1 Bioscience for Paramedics
- Unit 2 Paramedic clinical assessment and treatment skills
- Unit 3 Advanced life support
- Unit 4 Obstetrics and gynaecology for Paramedic practice
- Unit 5 Paramedic practice in relation to patients across the life cycle
- Unit 6 Understand requirements for Paramedic practice
- Unit 7 Preparing for Paramedic practice

Recommended strategy

This qualification is at RQF level 6 and is designed to equip students with an advanced level of theoretical knowledge and clinical skills needed to deal with a range of emergency and urgent situations as a Paramedic. The qualification is designed to act as proof the student has undergone a programme of learning and assessment to demonstrate competency in the area of prehospital care to gain employment.

The design of this qualification and the assessment strategy strongly reflect the views and recommendations of:

- Resuscitation Council (UK)
- Skills for Health Assessment Principles Assessment Principles for Qualifications that Assess Occupational Competence
- The Royal College of Surgeons of Edinburgh – Faculty of Pre-Hospital Care
- The Health and Care Professions Council (HCPC) standards of proficiency, which set out what a student must know, understand and be able to do by

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the time they have completed their training, so that they are able to apply to register with the HCPC.

The assessment strategy also supports those who wish to progress to further study as it introduces the student to the type of assessment that will be used in qualifications at a higher academic level, and to which this qualification has been aligned for progression. At the same time, for students progressing from RQF level 5 qualifications, it will expand their assessment experience by introducing more integrated assessment and assessment tools that will help them in their development as independent students.

e-Learning and e-Assessment can be used throughout all units, as the assessment for these units can be carried out using a combination of theoretical/knowledge tests and practical assessments.

Assessment Methods

Qualsafe Awards has devised assessment tools to make sure students gain the required knowledge, skills and understanding, as detailed in the learning outcomes and assessment criteria. Centres should download all assessment papers from the Customer Portal in advance of the course. For each unit, there are:

- Practical assessments/skills tests – observed by the tutor throughout the course (both simulated and in a real working environment), with the results of each learning outcome recorded on the practical assessment paperwork
- Formative assessments – a range of informal assessment procedures employed by the tutor/assessor during the learning process to measure each student's knowledge, skills and understanding related to the assessment criteria
- Assignments/Case studies
- Summative assessments - used to evaluate student learning, skill acquisition and achievement at the conclusion of a defined instructional period—typically at the end of a project, unit, course, semester or programme

Tutors are expected to make a professional judgement as to whether that student has achieved all the assessment criteria. Tutors should use all assessment evidence available, including formative and practical assessments, to reach this judgement.

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This will make sure that the assessment reflects the practical context of the qualification and will make sure students have the knowledge and skills to enable them to perform as a qualified Paramedic and/or prepare for further study. The assessment strategy has a strong focus on performing clinical procedures, in a real working environment, which provides opportunities to integrate some of the practical aspects of the qualification. There are also opportunities to integrate theory and practical units, e.g. by applying theoretical understanding when carrying out clinical assessments and performing clinical procedures.

Internal quality assurance

Medipro is required to sample a reasonable amount of assessments as part of the quality of the qualification. This standardisation of assessment across students and Tutors is to make sure there is fairness and consistency in assessment practices. The arrangements for this should be included in the Centre's approved internal quality assurance policy.

Centres must retain all Student documents and records for a period of 3 years and make sure these are available for review by QA or their representatives, e.g. External Quality Assurers (EQAs), on request.

Qualsafe Awards external quality assurance

Qualsafe Awards operates a system of ongoing monitoring, support and feedback for approved Centres across the United Kingdom.

Centres are required to inform Qualsafe Awards (via email to: qualityassurance@qualsafeawards.org) of the first course date, prior to delivery, to enable implementation of the EQA strategy for this qualification.

A Centre's approval status for this qualification is dependent upon a successful EQA visits and sampling of students portfolios on the first course. A minimum of 1 EQA visit must be carried out annually thereafter.

Further details of the Qualsafe Awards' external quality assurance programme are available in the QA Centre Quality Assurance Guidance.

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Mandatory Units

Unit	Tasks for each Unit	Integration with other Units	Assessment	Comments on possible delivery and assessment
Unit 1 Bioscience for Paramedics	Explain the structure and function of the human body.	Integrate with all Units	Assignment and Case studies	This would be introduced at the beginning of the programme to allow Students to understand the fundamentals of Bioscience underpinning paramedic practice
Unit 2 Paramedic clinical assessment and treatment skills	Be able to perform a range of clinical examinations.	Integrate with Units 1, 3 and 4	Assignment, Case study, work products and Observation of practice in a real working environment	This would be introduced at the beginning of the programme to allow Students to make links between how the body works and the clinical procedures they will learn to carry out.

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Unit 3 Advanced life support	Explain safe systems of paramedic practice to minimise risk at incidents.	Integrate with Units 1, 2, 4, 5 and 6	Assignment, Case study, work products and Observation of practice in a real working environment	This unit would be introduced about a third of the way through the programme once Students were familiar with the principles of prehospital care practice to be able to apply their knowledge.
Unit 4 Obstetrics and gynaecology for Paramedic practice	Explain how to manage gynaecological and obstetrics as a paramedic.	Integrate with Units 1, 2, 3, 5 and 6	Assignment, Case study, work products and Observation of practice in a real working environment	This unit would be introduced about a third of the way through the programme once Students were familiar with the principles of paramedic practice to be able to apply their knowledge.

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<p>Unit 5 Paramedic practice in relation to patients across the life cycle</p>	<p>Explain anatomical, physiological, pathological and psychological development.</p>	<p>Integrate with Units 1, 2, 3, 4 and 6</p>	<p>Assignment, Case study, work products and Observation of practice in a real working environment</p>	<p>This unit would be introduced about half way through the programme once Students were familiar with the principles of paramedic practice to be able to apply their knowledge.</p>
<p>Unit 6 Understand requirements for Paramedic practice</p>	<p>Explain and demonstrate personal and professional conduct and competence. Use a range of research methods to review evidence in order to inform best practice.</p>	<p>Integrate with all Units</p>	<p>Assignment, Case study, work products and Observation of practice in a real working environment</p>	<p>This unit would be introduced about half way through the programme once Students were familiar with the principles of paramedic practice to be able to apply their knowledge.</p>

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Unit 7 Preparing for Paramedic practice	Explain career long learning, development and education for Paramedics.		Assignment and Case studies	This unit would be introduced about two thirds of way through the programme once Students were familiar with the principles of paramedic practice.
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Based on a 12-month programme

	1	2	3	4	5	6	7	8	9	10	11	12
Unit 1	Delivery		Gathering Info		Portfolio							
Unit 2	Delivery		Gathering Info		Portfolio							
Unit 3			Delivery		Gathering Info		Portfolio					
Unit 4				Delivery		Gathering Info		Portfolio				
Unit 5							Delivery		Gathering Info		Portfolio	
Unit 6							Delivery		Gathering Info		Portfolio	
Unit 7								Delivery		Gathering Info		Portfolio
CP	Portfolio											

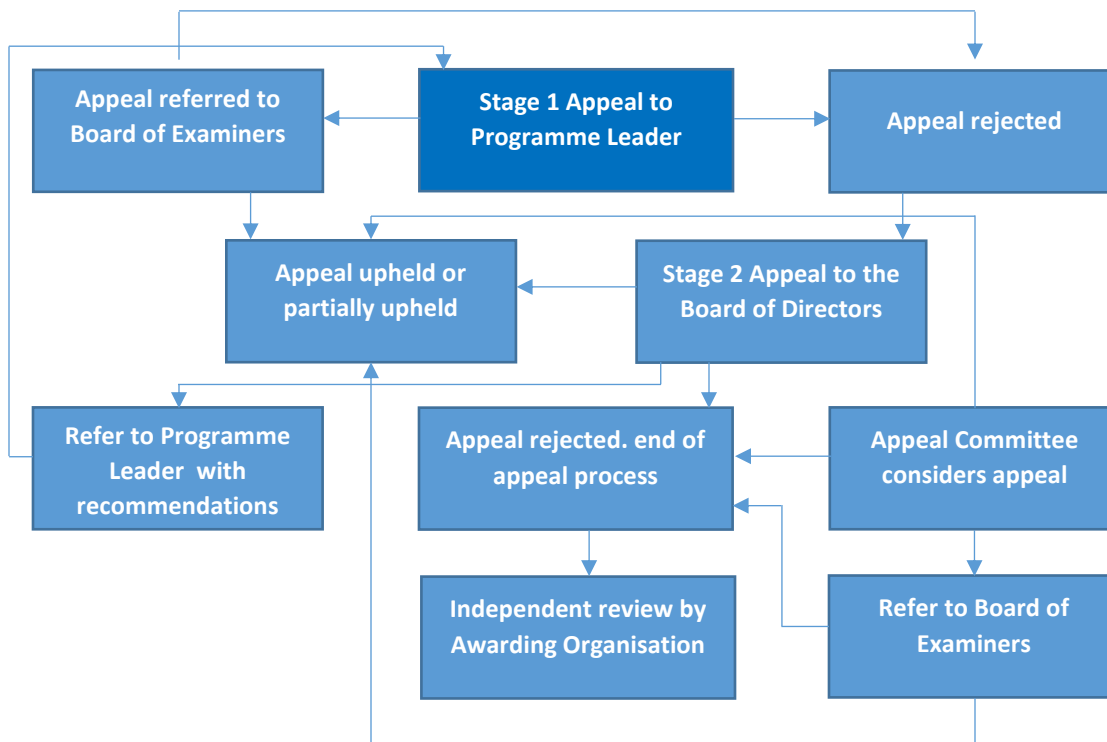
	=	Delivery
	=	Gathering Info
	=	Portfolio
CP	=	Clinical practice

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Appendix C
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OVERVIEW OF FULL STUDENT ACADEMIC APPEALS PROCEDURE

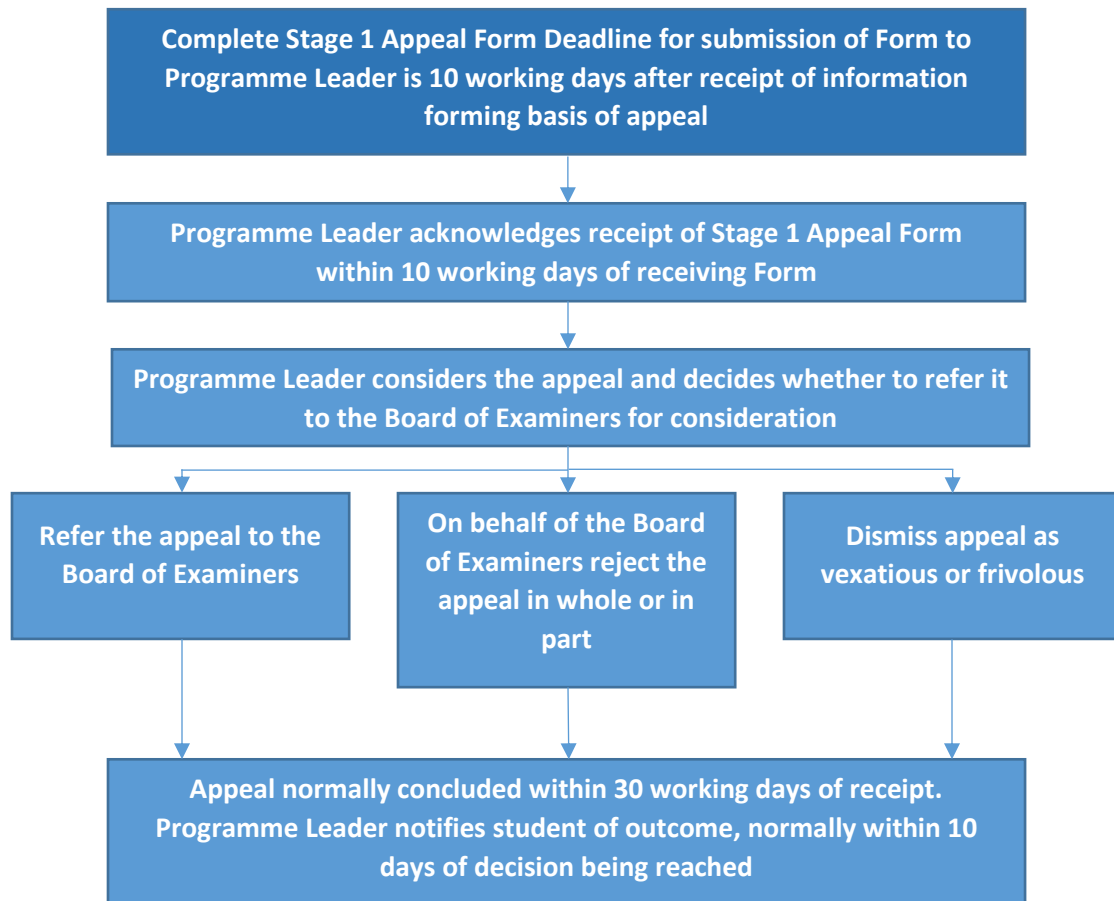


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Appendix D
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ACADEMIC APPEALS PROCEDURES: STAGE 1 (APPEAL TO PROGRAMME LEADER)

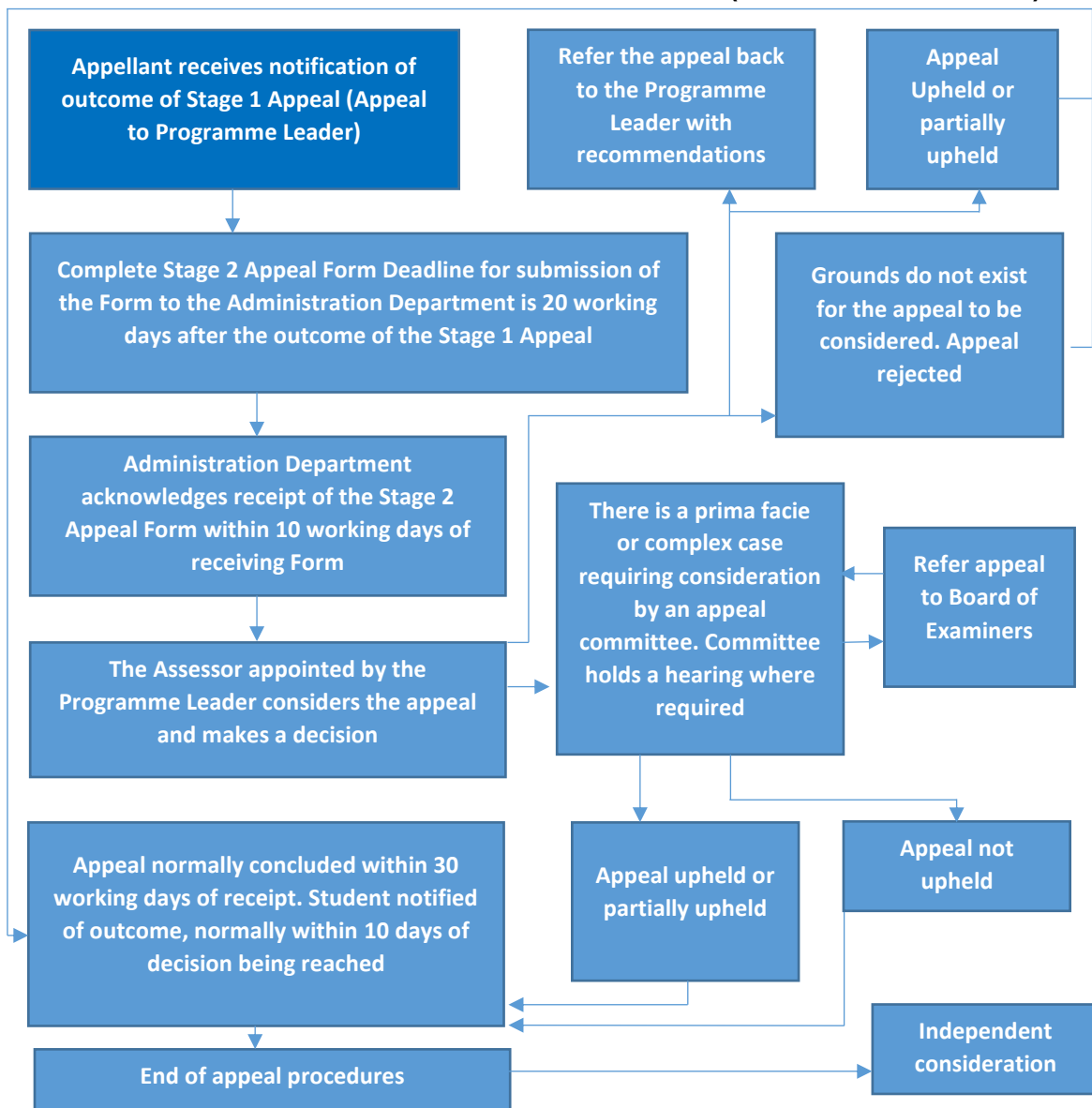


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ACADEMIC APPEALS PROCEDURES: STAGE 2 (APPEAL TO THE MD)



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