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Guidance notes are available to support the completion of this Report via the Cardiff University Intranet [here](#) and from ExternalExaminers@cardiff.ac.uk.

	For completion by External Examiner:		
Name of External Examiner:	Professor Chris LANGLEY		
Home Institution / Employer of External Examiner:	Aston University		
Programme and / or Modules Covered by this Report	Pharmacy (MPharm)		
Academic Year / Period Covered by this Report:	2018-2019	Date of Report:	26 th June 2019

Please complete all information in the spaces provided and submit within **six weeks** of the Examining Board (the dissertation stage Examining Board in the case of postgraduate Master's programmes).

Please note this form will be published online and should not make any reference to any individual students or members of staff in accordance with the General Data Protection Regulation (2018).

Please extend spaces where necessary.

1. Programme Structure (curriculum design, programme structure and level, methods of teaching and learning)

This is now my fourth and final visit to Cardiff School of Pharmacy as an External Examiner. As I have discussed in previous years, from what I have seen of the programme structure and assessment, and the development of the programme over the time I have been visiting as an external examiner, I am happy that the MPharm programme is based around a well-designed curriculum which should meet the requirements of the accrediting body (the General Pharmaceutical Council). Every year has given me the opportunity to contribute my views on a different aspect of programme development. While the new developments have, at times, required some minor readjustment, I commend the sustained approach the programme team have to developing the MPharm programme on a year-by-year basis.

2. Academic Standards (comparability with other UK HEIs, achievement of students, any PSRB requirements)

It continues to be evident that the programme is maintaining the threshold academic standards in accordance with the QAA Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies. In addition, the academic standards and the achievements of students are comparable with

those in other UK higher education institutions of which I am familiar. I was able to look at all the relevant examination papers in advance of the examinations taking place and in the majority of cases it was evident that changes had been made based on my suggestions (although please see below).

3. The Assessment Process (enabling achievement of aims and learning outcomes; stretch of assessment; comparability of standards between modules of the same level)

I undertook specific reviews of assessment material from the following modules.

PH2110 PoP Assessment – I reviewed the PH2110 assessment papers sent to me in advance of my visit to Cardiff. This assessment was new for 2018-2019 and required students to undertake eight exercises arranged into three stations.

The three labels which required production at the labelling station were all relatively straightforward and from the scripts I reviewed most students were able to pass this station with relative ease. Of the few fails, it was clear in each case why the student had failed, and I agreed entirely with the marking. While some students were failing for straightforward omissions, in an exercise such as this that is entirely appropriate because it is a measure of the student's accuracy in relation to medication supply. In relation to this particular exercise, so long as suitable feedback is provided, I would expect most students to pass any reassessment.

The second station, the prescription checking station, contain two relatively routine prescriptions which the students were required to identify any potential issues. Both exercises were ones I would expect to be relatively straightforward for students at this level, and those students who were failing were clearly failing for identified important reasons. As with the previous exercise, I would expect most students to be able to do better in any reassessment following suitable feedback. What is of a little surprise is the number of students who are failing this station, but that said they are making relatively straightforward mistakes that warrants the marking penalties that have been applied. From reviewing the students work, it would appear that while some students are achieving marks on both exercises, and a few are achieving no marks on each exercise, most fails are down to students doing badly on one or other exercise, possibly to the extent of losing all marks for the station.

Moving to the third station, this requires students to undertake an accuracy check on previously dispense medication. Most students picked up a majority of the points, however a significant number also missed key red flag omissions and therefore failed the station. Most of the fails were down to one particular omission from prescription one. As with the other stations, this exercise is measuring accuracy of medication supply and I agree that the red flagged items identified by the program team are indeed ones in which students should fail the exercise if they fail to identify. There are other mistakes that students can make where they do not accrue marks but will not necessarily fail the exercise, and this in my view is fair and balanced.

However, when the marks from the three stations are put together, with the high stakes marking of an assessment such as this, it does mean that there are significant number of students who are failing this assessment. On one hand, this is identifying that students who are failing or missing key accuracy points in more

than one exercise and therefore the assessment is accurately identifying those who may require further tuition or support before being able to move onto the next stage of the program. However, on the other hand, it was worthy of note that although there are multiple exercises, the assessment only has three stations, and this does mean that the likelihood of error by a student leading to a fail of the entire assessment is much greater than have there been more stations.

I think the potential point for consideration here is the difference between exercises, stations and assessment. Essentially, there are three labelling exercises, two prescription checking exercises and three accuracy checking exercises; a total of eight exercises. However, they are divided into three stations and a red flag fail in any exercise leads to the failure of all the exercises in that station. Furthermore, if that fail is in a labelling exercise, it leads to failure of the station and the assessment. That is fine as far as it goes, but as the eight exercises are grouped into only three stations, this massively increases the pass requirements following a single red flag failure. Breaking it down, one red flag failure in the prescription checking exercises means that to pass a candidate need to pass all the labelling exercises and score at least nine out of ten for the accuracy checking exercises. Alternatively, one red flag failure in the accuracy checking exercises means that to pass a candidate need to pass the labelling exercises and score at least nine out of thirteen for the prescription checking exercises. Therefore, while the red flag errors are entirely reasonable to be classified as such, the resultant action is to fail the exercise, station, and either the assessment (for a red flag error in the labelling exercises) or make the requirement to pass near perfect performance in the other exercises. This is why the fail rate is so high.

During my visit, I discussed these points with the relevant members of the programme team, and the wider Board of Examiners, and it was agreed that the way the marks from the individual stations are aggregated to produce an overall pass or fail will be reviewed again prior to the results being published. I am happy with this approach and would encourage the programme team to review this assessment's structure again before the 2019-2020 academic year. In addition, I would recommend that this review ensures that there is an appropriate balance between the need for accuracy (and appropriate assessment methodology to assess this skill), alongside the need to develop independent practitioners who are able to think independently and are able to learn from errors.

PH2110 Examination Paper – There was good evidence that the comments I made on the draft examination paper had been taken into consideration. The marking is accurate, and follows the sufficiently detailed mark scheme, and it is clear where marks have been awarded. The samples of examination scripts supplied show a clear distinction between the lowest, mid-range and highest marks.

PH2110 OSCEs – Individual cases seem appropriate for exercises at this level. Relatively low numbers of fails. Unlike the PoP assessment, failure in one station doesn't lead to almost certain failure in the assessment.

PH3110 OSCEs – Individual cases seem appropriate for exercises at this level. Low numbers of fails.

PH3110 CD Test – As with the PH2110 PoP Assessment, exercises are grouped together in stations and red flag failure of an exercises results in failure of the station. However, performance overall seems better and I wonder if this is partially down to having four, rather than just three, stations, making it slightly easier for students to redeem any red flag failure in one station. The assessment contained a nice set of exercises and the marking is clear and accurate. I have looked at the fails and agree with the marking. Nevertheless, I would encourage the programme team to review this assessment's structure at the same time as the one for PH2110.

PH3110 Written Examination – Although almost all minor, there was no evidence that any of the suggested amendments to the examination paper were made; was the version supplied to me with the exemplar scripts a copy of the final version (I ask, because I identified what I believe to be an unintentional error with one prescription which left uncorrected, would have been identified by all the students; however, no students commented on the error which makes me think it was corrected in the final version)? The marking was clear and there was evidence of the mark scheme being refined post-sitting, which is good.

PH4110 Written Examination – There was good evidence that the comments I made on the draft examination paper had been taken into consideration. The marking is accurate, and follows the sufficiently detailed mark scheme, and it is clear where marks have been awarded. The samples of examination scripts supplied show a clear distinction between the lowest, mid-range and highest marks.

PH4110 OSCEs – Individual cases seem appropriate for exercises at this level. Low numbers of fails.

4. **Examination of Master's Dissertations (if applicable)** (sample of dissertations received, appropriateness of marking schemes, standard of internal marking, classification of awards)

N/A.

5. Year-on-Year Comments

[Previous External Examiner Reports are available from the Cardiff University Website [here](#).]

I am pleased to see how the programme team are keen to make year-on-year improvements to the programme and are keen to highlight areas to me, as external examiner, where they would value my input to the developments. I would encourage this practice to continue as a new external examiner takes my place.

6. **Preparation for the role of External Examiner (for new External Examiners only)** (appropriateness of briefing provided by the programme team and supporting information, visits to School, ability to meet with students, arrangements for accessing work to review)

N/A.

7. **Noteworthy Practice and Enhancement** (good and innovative practice in learning, teaching and assessment; opportunities for enhancement of learning opportunities)

As discussed in previous reports, the methodology employed to annotate the examination scripts clearly where marks have and have not been awarded, alongside the reasons (using codes) where marks have not been awarded is very good. This makes it clear for the external examiner to review the marking and for students to see clearly where marks were and were not awarded.

8. Appointment Overview (for retiring External Examiners only) (significant changes in standards, programme/discipline developments, implementation of recommendations, further areas of work)

As highlighted in other parts of this report, the MPharm programme at Cardiff is continually developing and improving on an annual basis. I would like to thank the programme support team in providing me with all the necessary information in advance of my visits to ensure that I am fully-prepared well in advance.

9. Annual Report Checklist

Please include appropriate comments within Sections 1-7 above for any answer of 'No'.

		Yes (Y)	No (N)	N/A (N/A)
Programme/Course information				
9.1	Did you receive sufficient information about the Programme and its contents, learning outcomes and assessments?	✓		
9.2	Were you asked to comment on any changes to the assessment of the Programme?	✓		
Commenting on draft examination question papers				
9.3	Were you asked to approve all examination papers contributing to the final award?	✓		
9.4	Were the nature, spread and level of the questions appropriate?	✓		
9.5	Were suitable arrangements made to consider your comments?	✓		
Examination scripts				
9.6	Did you receive a sufficient number of scripts to be able to assess whether the internal marking and classifications were appropriate and consistent?	✓		
9.7	Was the general standard and consistency of marking appropriate?	✓		
9.8	Were the scripts marked in such a way as to enable you to see the reasons for the award of given marks?	✓		
9.9	Were you satisfied with the standard and consistency of marking applied by the internal examiners?	✓		
9.10	In your judgement, did you have the opportunity to examine a sufficient cross-section of candidates' work contributing to the final assessment?	✓		
Coursework and practical assessments				
9.11	Was the choice of subjects for coursework and / or practical assessments appropriate?	✓		
9.12	Were you afforded access to an appropriate sample of coursework and / or practical assessments?	✓		
9.13	Was the method and general standard of assessment appropriate?	✓		
9.14	Is sufficient feedback provided to students on their assessed work?	✓		
Clinical examinations (if applicable)				
9.15	Were satisfactory arrangements made for the conduct of clinical assessments?	✓		
Sampling of work				
9.16	Were you afforded sufficient time to consider samples of assessed work?	✓		
Examining board meeting				
9.17	Were you able to attend the Examining Board meeting?	✓		

9.18	Was the Examining Board conducted properly, in accordance with established procedures and to your satisfaction?	✓		
9.19	Cardiff University recognises the productive contribution of External Examiners to the assessment process and, in particular, to the work of the Examining Board. Have you had adequate opportunities to discuss the Programme and any outstanding concerns with the Examining Board or its officers?	✓		
Joint examining board meeting (if applicable)				
9.20	Did you attend a Composite Examining Board, i.e. one convened to consider the award of Joint Honours degrees?			✓
9.21	If so, were you made aware of the procedures and conventions for the award of Joint Honours degrees?			✓
9.22	Was the Composite Examining Board conducted according to its rules?			✓

Please return this Report, in a **Microsoft Word format**, by email to:
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