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Sent by email to [c.z.chung@dundee.ac.uk](mailto:c.z.chung@dundee.ac.uk)

**28 January 2020**

Dear Dr Chung,

**Re: Institutional Response: External Examiner Annual Report 2018/19**

I am writing further to the receipt of your report for MBBCh Phase 2.

Your report has been considered by colleagues in the School and is the basis of this Institutional Response on behalf of the Vice-Chancellor. The School will also use its contents to help inform their [Annual Review and Enhancement](#) process and where appropriate, [Periodic Review](#).

**The University is pleased to note your positive comments including:**

1. Your positive indications regarding the programme structure, academic standards and assessment process.
2. The aim to put a clinical focus on the teaching from year 1 and early clinical contact is laudable.
3. Progress assessments, which are tests of knowledge, are now spaced across the academic year.
4. The progress test questions have a space to the writer to make notes about the question and justification. This is good practice and should be encouraged for all future question writing.
5. Overall the Integrated Structured Clinical Examination (ISCE) process is very successful, being comprehensive and covering a wide range of areas.
6. Peer review of examiners during ISCEs is used which provides an additional quality assurance mechanism, that I've not seen this in other Medical schools.
7. The Year 4 ISCE handbook is very comprehensive and clear with examples of questions and format, including how standards are set.



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8. In ISCE's Simulated / actual patient gives formative feedback on the iPad. This seems to work very well and an excellent idea to help increase the involvement of the simulated / actual patient as well as providing useful feedback to students.
9. Examining of clinical reasoning in ISCE's is a particular strong point. The format of the questions allows the students to clearly demonstrate their reasoning behind diagnoses, investigations and management, tailored to the particular case.
10. The complexities of running a consistent and fair clinical exam for 300+ students over 3 days are immense. Overall, the assessment team has done a phenomenal job to ensure the process was smooth, for all involved.
11. External examiner briefings, and information provided gave the impression of genuine transparency and openness to improvement.
12. Teaching of Clinical examination skills in the community is an excellent idea.
13. The learning disability focus in the curriculum and especially communication skills is to be commended and an excellent addition, fulfilling several requirements from Outcome for Graduates.
14. New longitudinal clerkships are a great development.
15. One particular highlight of note is that the remediation for those who do not pass and have to resit examinations or repeat the year is excellent.

#### **Issues highlighted in your report and response provided by the School:**

1. ***Programme Structure:*** *The spiral curriculum of scholarship seems well thought out and a good progressive grounding in this area for the students. I suspect this could be even more ambitious and aim for a proportion of students (eg 10%) to present at least one piece of work in an external conference / forum / journal.*

We are pleased that Dr Chung comments on the fact that our scholarship theme is well thought out. We welcome his comment regarding students presenting at external conferences. We do encourage this, and a significant number do indeed present and have their work recognised externally and anecdotally this may well hit 10% for the year 3 and 4 SSC. We have not however formally quantified this, but this suggestion is welcome and something which we will endeavour to do

2. ***Programme Structure:*** *The format seems have significant self-directed learning. It is important to ensure that there is sufficient support for those students who need help to develop these skills especially in the first 2 years.*

Students in the first 2 years learn in case groups of approximately 10-12 students. This allows the facilitators to spot and signpost any students, who may be struggling, to appropriate support. Students in the earlier years have dedicated mid-term reviews with their facilitator, where these issues are openly discussed.

During the last 3 years, students are assigned an educational supervisor at each clinical placement. These meetings are open meetings, where their clinical portfolio is reviewed. This allows supervisors to signpost students to appropriate support and targeted remediation based on performance in the workplace.

All students also have access to a supportive personal tutor who are also aware of their individual student's needs and can signpost as necessary.

3. **Assessment Process:** *Support should be given to encourage and reward those who take part in the vital process of standard setting.*

For 2019/20 we are developing a comprehensive Standard Setting training module to be delivered both face to face and electronically. This will include the following content areas:

- Introduction to our assessments & the GMC Medical Licencing Assessment (being introduced in 2023/4).
- Introduction to Single Best Answer questions as a form of knowledge assessment.
- Introduction to standard setting- purpose, different methods, with examples of pros & cons & rationale for each used in MEDIC.
- Example SBAs to provide an exercise in standard setting, with previously standard set questions to assist calibration of standard setters.

Dr Saadia Tayyaba, psychometrician, is developing bespoke feedback for individual standard setters, with the aim of providing meaningful feedback to individuals annually- to inform on their level and consistency compared to peers and actual performance by students.

In addition, we are developing a core bank of standard setters & exploring options for CPD points to accredit time taken by individuals undertaking this valuable role.

4. **Assessment Process:** *It is appropriate to include numeracy in the knowledge assessment – it is worth reviewing if this has any positive effect on prescribing (PSA) exams.*

We have just received the annual PSA data and will be discussing student performance at our Knowledge Group meeting on 5<sup>th</sup> November 2019. Dr Tayyaba will be undertaking an analysis to identify whether inclusion of numeracy within the Progress Tests has any positive correlation with performance in the PSA.

5. ***Noteworthy Practice and Enhancement:*** Consider if initial double marking SSCs with newer supervisors may be useful for the newer supervisors and benchmarking.

At present all SSC tutors in year's 3 and 4 are offered face to face training with the SSC lead. The emphasis in these sessions is on assessment. We undertake a mock assessment in groups looking at SSC reports that fall into different standards. We then use the outcome of these mock assessments to feedback to the participants and to benchmark assessment standards of these participants. Whilst attendance at these sessions is not compulsory for tutors, it is a particularly useful forum for newer tutors.

In addition, we also produce a short video which takes tutors through the assessment process with explicit advice on what constitutes a fail or pass. This is also reiterated in the assessment itself. Furthermore, tutors are also met with who wish to understand the assessment standards in more detail.

Offering second marking to newer tutors is a potentially innovative addition to our assessment process; however, we are mindful that we potentially risk undertaking differential assessment of a subset of students based on the experience of the tutor and whether this might place some students at an unfair advantage or disadvantage

6. ***Noteworthy Practice and Enhancement:*** Consider having students defined a goal or objective for their elective.

As part of the elective placement approval process our students have to create and share three learning objectives and submit these for approval. We do collate these into a spread sheet, which we can share with Dr Chung when he visits during the next academic year.

7. ***Noteworthy Practice and Enhancement:*** Consider if there is room for an online reporting form for positive professional behaviour or role modelling.

We have introduced this this year and we do encourage all teachers to fill these in. These are then fed back to the students and are also posted on our Facebook page as notable achievements. We hope that this practice increases as teachers become more aware of the process

8. ***Noteworthy Practice and Enhancement:*** Ensure students are aware of peer reviewer of examiners in ISCEs so they are not mistaken for double examiners of students.

Students are informed throughout the year about the ISCEs, via face to face teaching, formative ISCEs and written documentation on Learning Central. One area covered in their briefing information is that of Examiners.

Extract from Year 2/4 ISCE student information booklet:

*Examiner conduct is monitored by the University through a combination of peer review, psychometric performance monitoring and by External Examiners, present during clinical assessments. Each examiner marks objectively, stays within the station and marks the same station all the way through the circuit. External examiners may also be present during the examination, ensuring fair process. Examiners in training may also be present observing the stations.*

Extract from Yr 2 ISCE lecture 22 10 19:

*One examiner per station awarding marks however there will be examiners in training present.*

*External examiners may also be present and circulating- to observe how the exam is organised and ensure the examiners are fair.*

From 2019/20 we can emphasise that in addition to observing/ external/ training examiners, the peer review examiners are also rotating the exam itself.

9. ***Noteworthy Practice and Enhancement:*** Review the description in the examiners briefing of a borderline student used in standard setting the ISCE.

Dr Metcalf has contacted Dr Chung to discuss his suggested improvement of this description in order to inform our future examiner training and calibration for the ISCE.

10. ***Noteworthy Practice and Enhancement:*** It is important to continue to actively support the team in the logistics of the ISCE exam as well as trying changes that may improve the overall complexity and burden of organisation.

We understand the ISCE, particularly in Year 4, is a significant undertaking for the School of Medicine- with nearly 4000 x 15 minutes stations being assessed across 3 days.

We are currently in the process of scoping alternative venues that might enable us to reduce the exam to be delivered across 2 days. We will also be undertaking further psychometric analysis to see whether the number of stations can be reduced from the existing 12 stations.

We hope that you will find this response satisfactory and thank you for your continued support of the programme.

In order to meet the expectations of the [QAA Quality Code](#), both the External Examiner Annual Report and this Institutional Response will be published on the University's [Public Information website](#) and will be available to all students and staff.

We are most grateful for your comments and for your support in this matter.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'S Wright', with a stylized flourish at the end.

Mr Simon Wright  
Academic Registrar