

Academic & Student Support Services  
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*Simon Wright LLB*



Sent by email to [emyr.benbow@manchester.ac.uk](mailto:emyr.benbow@manchester.ac.uk)

12 August 2015

Dear Dr Benbow,

**Re: Institutional Response: External Examiner Annual Report 2014 – 2015**

I am writing further to the receipt of your External Examiner's Report for the MBBCh (Year 3).

Your Report has been considered by the School in accordance with our approved procedures. I am, therefore, now in a position to respond on behalf of the Vice-Chancellor to the main points you had raised.

**Issue(s) Highlighted:**

1. Your comments highlighting that some questions can be answered with rote-learned information, without any demonstration of understanding;
2. The range of comments regarding the set up and management of OSCE's;
3. Your observations that there were two stations that attracted particular comments from examiners, which you confirmed by personal observation;

**The following response has been provided on behalf of the School:**

1. We believe this relates to 'Paper C' (the Single Best Answer question paper) where we intend all questions to test application of knowledge and not just recall. The questions from this assessment are sourced from both the Cardiff Question Writing Bank and the UK Medical Schools resource. They are all based on the interpretation of a clinical scenario. We apply a rigorous quality assurance process for every question – each paper is reviewed by academics and FY doctors at a scrutiny meeting and they are then seen by external examiners. Questions are then amended or substituted for others based on these reviews. After the exam, there is extensive psychometric analysis of every question to see how it has performed. Any poorly functioning question is labelled that way and not used for future exams. This comment will be fed back to the assessment leads who will be formulating the Progress Tests which will replace paper C in 2015-16.
2. These specific observations and suggestions are helpful and have been discussed with the lead for our OSCE's. From 2015-16, this assessment will cease in Year 3 and is replaced by an 'ISCE' in Year 2 and a further 'ISCE' at the end of year 4 in the new programme.

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It is important to recognise that this is the first summative OSCE that this cohort of students will have done which may explain some of the views that Dr Benbow heard from our students. We do brief the students at numerous times during the academic year about the content of all assessments. There are lectures that focus specifically on the content of the SBA paper and OSCE as well as an advertised document which details all the potential OSCE stations. There are also formative opportunities with practice SBA and Data Interpretation papers as well as a practice OSCE. We also provide face to face as well as online training for examiners; they are also given a briefing just prior to the exam.

We will review the information provided to students and examiners in the future for our clinical exams as some of the comments highlight some examiner behaviour that we would not expect. We will also remind staff that when the OSCEs are delivered away from Cardiff that all the practical arrangements are identical and that each centre has to follow the standard protocol e.g., regarding the standard power point presentation to students. Comments provided in this report will be directly included in our future examiner briefings. There will also be an enhanced policy for mobile phones that is being formulated for all exams in 2015-16.

3. ***Incorrect dose calculations for drug administration*** - We share the concerns raised. We provide clinical skills teaching during Year 3 with online and classroom based resources that have a specific focus on drug calculations. It is also covered in training sessions for the National Prescribing Safety Assessment. All the students who made this error during the Year 3 OSCE had a 'yellow card' (safety alert) and were subsequently invited to tailored remediation sessions to highlight the significance of their error and to try to address their numeracy skills.

***The same incorrect interpretation of clinical signs by a several students*** - It is difficult to be sure why this specific episode occurred. It is possible that students are confused about their understanding of cardiology and pathophysiology. We have no other evidence of any form of collusion at the exam and so it is not possible to take this further. Please see previous comments re: mobile phone policy.

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

1. Your positive indications regarding the programme structure, academic standards and assessment process;
2. Your commendation that high numbers of real patients are recruited for the OSCE's;
3. Your positive comments regarding the use of projected documents, and how this ensured that all present could be engaged with the critical issues under discussion.

I hope that you will find this response satisfactory and thank you for your continued support of the programme. As this is your final year as External Examiner, we would like to thank you for your service as External Examiner and we are most grateful for your valuable input into this process.

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 Student Intranet and will be available to all students and staff.

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The University's provision of the formal Institutional Response is not intended to constrain direct communication between schools and their External Examiners. Schools are encouraged to discuss with their External Examiners any matters of detail raised in their Reports and, more widely, any issues impacting on the quality and standards of awards, including possible changes to programmes.

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

Yours sincerely,



Mr Simon Wright  
Academic Registrar