

St George's, University of London  
Scheme of Assessment  
MBBS Transition Year (T Year) 2023-24

## Overview

1. The third year of the MBBS 5-year stream and second year of the MBBS 4-year stream shall be known as the Transition Year (T Year). During this year the students on both streams will undertake identical assessments. This Scheme of Assessment specifically relates to the Transition Year.
2. In accordance with the GMC assessment guidance, assessment in the MBBS programme will be across three domains, namely:
  - Professional Knowledge (PK)
  - Professional Skills (PS)
  - Becoming a Doctor (BD)
3. A student may only have **ONE** discretionary 3rd attempt during the entire MBBS Programme. Under the *procedure for consideration for a final discretionary attempt at an assessment*, Boards of Examiners will have the authority to approve a discretionary third attempt if a candidate meets programme-specific fast-track criteria. For candidates who do not satisfy the programme-specific fast-track criteria, a Discretionary Panel of Senate will consider the student's application for a discretionary third attempt. Detailed information about the fast-track criteria, procedure and timescales is published on the Student Conduct and Compliance section of the St George's website ([www.sgul.ac.uk](http://www.sgul.ac.uk))

## Definitions

4. An **Assessment** may be comprised of a written exam, practical assessment or portfolio of assessed work. This section refers only to assessments in the Professional Skills (clinical competency assessments, CCA [previously called objective structured clinical examination, OSCE]) and Professional Knowledge (written exams such as year-specific knowledge tests, YSKT) domains.
5. A **Sitting** refers to the set of linked assessments that are administered within a period commencing at the time of the first assessment within that set and concluding at the time of the final assessment within that set. The Scheme of Assessment indicates the linkage between assessments, and by extension defines the sittings within the course.
6. An **Attempt** is defined by any of:
  - 6.1. Full completion of the set of assessments within a sitting (or split between two sittings, if approved under the mitigating circumstances or appeals procedures), irrespective of outcome.
  - 6.2. Partial unsuccessful completion of any of the assessments within a sitting, regardless of how much of each assessment is completed.
  - 6.3. Non-completion of any of the assessments within a sitting, if this is not formally approved through the mitigating circumstances procedures or by discounting of an assessment attempt through the SGUL appeals process.
  - 6.4. Inability to complete an assessment within a sitting due to late arrival.

All attempts will stand unless the attempt is subsequently discounted following a formal decision reached through the appeals procedure.

### **Split attempts**

7. Candidates entering a sitting are required to undertake all assessments within that sitting. In exceptional circumstances (for example, an approved mitigating circumstances request due to acute illness arising within a sitting), a candidate may undertake some but not all assessment elements within the sitting. The candidate may then undertake the remaining assessment(s) at the next available opportunity, and this will be regarded as a single attempt at the sitting (split across two sitting periods). If the candidate is unsuccessful in any assessment within the split attempt, they may resit the assessment(s) in which they were unsuccessful at the next opportunity or repeat the year (subject to the provisions set out in the Scheme of Assessment). In either case, irrespective of whether any assessments within the previous split attempt were graded Acceptable, entry to the subsequent sitting will be a new (second or third) attempt.

For the avoidance of doubt, a candidate cannot have a different number of attempts for different assessments within a sitting. For example

- In Clinical Science years, a student who fails PPS but passes BCS within the same sitting, has failed their first attempt at that domain.
  - In T, P or F years, candidates cannot be on second attempt at the YSKT but only first attempt at the CCA within the same sitting. It is the number of prior attempts at the *sitting* of the set of linked assessments (as defined above) that is used to determine the attempt number.
8. The final decision on the number of attempts taken will be ratified by the Board of Examiners for each sitting.

### **Some examples:**

- i. A candidate sits the YSKT in T year at first attempt in the first sitting but has an acute illness precluding them doing the CCA in the same sitting. The candidate passes the YSKT and, following approval of a mitigating circumstance application, the candidate is allowed to take the CCA at the next sitting. As they have passed the YSKT element in the first sitting, and mitigating circumstances were approved in respect of their non-attendance at the CCA, their completion of the CCA in the next sitting would be regarded as a single (split) attempt at this set of assessments.
- ii. A candidate sits the YSKT in T year at first attempt in the first sitting but has an acute illness precluding them doing the clinical assessment in the same sitting. The candidate fails the YSKT and is therefore required to repeat the YSKT at the next sitting, together with the CCA that they have not yet undertaken. As their partial unsuccessful attempt in the first sitting constituted an attempt as defined by criterion 6.2, above, they will be entering the next sitting at second attempt for both assessments.

### **Mitigating circumstances and deferral**

9. The ability to undertake an assessment is based upon candidate self-declaration of being fit to sit. If a candidate commences an assessment, they are deemed to have undertaken that assessment for the purposes of defining an attempt (section 6).
10. If a candidate submits a mitigating circumstances application in advance of an assessment, and that application is approved, the candidate can be withdrawn from the assessment (and other assessments within the sitting, as applicable), unless they request to sit but have their circumstances taken into consideration should they fail and need a 3<sup>rd</sup> Discretionary attempt.

11. Once withdrawn, a candidate will not be able to re-enter the same assessment (or sitting, as applicable). Approved withdrawal from a whole sitting will not constitute an attempt at that sitting. Candidates who have unforeseen circumstances develop during the assessment (e.g. acute illness) that they believe may have affected their performance, should submit mitigating circumstances within 7 days of taking the exam, before results are released. The attempt will count, but if approved, the circumstances will be taken into consideration should they fail and need a 3<sup>rd</sup> discretionary attempt.

### **Summative Assessment**

12. The Professional Knowledge (PK) domain is tested using a written examination and will assess knowledge and application of knowledge. The content examined will include teaching from PBL blocks, teaching and clinical attachments.
13. The Professional Skills (PS) domain is tested using a clinical competency assessment (CCA) and will assess clinical communication and clinical skills. The content examined will be synoptic and will include teaching from earlier years, T Year and skills acquired during attachments.
14. The Becoming a Doctor (BD) domain will assess whether students are developing the ability to apply knowledge in the clinical workplace as well as the behaviours and skills required by medical professionals. Feedback will be provided across four main elements: attendance, other professional behaviour, the clinical workplace portfolio and student selected component (SSC)/projects.

### **The Professional Knowledge (PK) (written examination)**

15. The written examination will normally consist of SBAs and will comprise of no less than 120 items. Other question types (e.g. SAQs) may be used if deemed appropriate.
16. The length and format of the written examination will be announced in advance of the assessment by the Year/Domain Lead. In addition, the Year/Domain Lead will provide information about computer-marked versus free-text question styles.

### **Written Examination Marking Arrangements and Standard Setting**

17. The pass standard for the written examination shall be determined using an internationally recognised standard setting method and the percentage value shall be rounded to one decimal place. This will normally be determined by the Angoff method (see paragraph 18).
18. In regard to the standard setting method referred to in the above paragraph, it may not be statistically reliable to choose the methods listed, given the variables (e.g. cohort size) of the particular assessment in question. In these cases an alternative, recognised, method would be selected to suit the variables of the assessment.
19. Marks for candidates shall be rounded to one decimal place when being compared with the pass mark (e.g. 51.15 will be rounded up to 51.2 and 51.14 will be rounded down to 51.1).

## Written Examination Progression Requirements

20. Candidates *at the end of the written examination* will be graded one of the following categories:

- **A (Acceptable):** competent – attain the numerical passmark or above
- **U (Unacceptable):** not yet competent–below the numerical passmark

21. A candidate, whose grade in the written examination is **Acceptable** shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they also meet the requirements of paragraphs 34-36 and 45-52.

22. A candidate, whose grade in the written examination is **Unacceptable at first attempt** may choose to repeat the Transition Year or may opt to enter the re-sit written examination in the re-sit period.

## Written Resit Examination

23. The written re-sit examination will normally take place within one month of publication of results.

24. A candidate, whose grade in the written re-sit examination is **Acceptable** shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they also meet the requirements of paragraphs 38 and 56.

25. A candidate whose grade at the written resit examination is **Unacceptable** is deemed to have failed the domain and therefore the programme. Such students may be eligible for a 3rd discretionary attempt, in accordance with the **procedure for consideration for a final discretionary attempt at an assessment** (see paragraph 3).

26. Candidates granted a final 3rd attempt will be required to repeat the Transition Year and sit all domains of assessment, regardless of whether they have passed the domain in a previous academic year.

## The Professional Skills (PS) (CCA)

27. The CCA will normally be comprised of no fewer than 10 stations. Each station will be between 5 and 15 minutes in duration but in total will normally summate to no less than 120 minutes testing time.

28. The length and number of stations will be announced in advance of the assessment by the Year/Domain Lead.

## CCA marking arrangements and standard setting

29. The pass mark for the CCA shall be determined using an internationally recognised standard setting method. The pass standard will normally be determined by the borderline regression method.

30. In regard to the standard setting method referred to in the above paragraph, it may not be statistically reliable to choose the method listed, given the variables (e.g. cohort size) of the particular assessment in question. In these cases an alternative, recognised, method would be selected to suit the variables of the assessment.

31. The resulting pass mark for each station (out of 100) will be rounded to one decimal place. These marks will be added together and converted to a percentage to give the overall numerical passmark for the CCA, which is then calculated to one decimal place.
32. Candidates will be given a mark out of 100 for each station, calculated to one decimal place. These marks will be added together and converted to a percentage to give the overall numerical mark for the CCA, which is then calculated to one decimal place.
33. In order to attain the pass standard, candidates are required to achieve the numerical passmark for the examination **and** pass at least 65% of stations (rounded to the nearest whole number). For a 12 station CCA, students must pass at least 8 (rounded from 7.8) stations. For example, if, after applying the percentage calculation, the resulting number of stations is 7.49 then this will be rounded down to 7, and if the resulting number of stations is 7.50 this will be rounded up to 8.

### CCA Progression Requirements

34. Candidates **at the end of the CCA** will be graded one of the following categories:
  - **A (Acceptable):** competent – attain the numerical passmark or above **and** pass at least 65% of stations
  - **U (Unacceptable):** not yet competent – below the numerical passmark **and/or** fail more than 35% of stations
35. A candidate, whose grade in the CCA is **Acceptable** shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they also meet the requirements of paragraphs 20-22 and 45-52.
36. A candidate, whose grade in the CCA is **Unacceptable at first attempt** may choose to repeat the Transition Year or may opt to enter the re-sit CCA in the re-sit period.

### CCA Re-sit Examination

37. The re-sit examination for the CCA will normally take place within one month of publication of results.
38. A candidate, whose grade in the CCA re-sit is **Acceptable** shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they also meet the requirements of paragraphs 24 and 56.
39. A candidate, whose grade at the CCA re-sit is **Unacceptable** is deemed to have failed the domain and therefore the programme. Such students may be eligible for a 3rd discretionary attempt, in accordance with the *procedure for consideration for a final discretionary attempt at an assessment* (see paragraph 3).
40. Candidates granted a final 3rd attempt will be required to repeat the Transition Year and complete all domains of assessment, regardless of whether they have passed the domain in a previous academic year.

### The Becoming a Doctor (BD)

41. Candidates will be considered across four main elements: attendance, other professional behaviour, the clinical workplace portfolio and SSC/projects. These are assessed during the attachments in T Year, the PBL blocks and the SSC and project (namely Case Analysis Project).

42. Individual requirements for each element will be published in advance by the Year/Domain Lead.

### The Becoming a Doctor (BD) Marking Arrangements and Standard Setting

43. The assessments within this domain will be assessed by the relevant Educational Supervisor.

44. The Becoming a Doctor (BD) Grading Committee will meet twice yearly to discuss students displaying poor professional behaviour (including attendance). The Becoming a Doctor (BD) Grading Committee will allocate grades for the 'other professional behaviour' element and report to the Board of Examiners any unsatisfactory performance within the domain via the allocation of an overall domain grade for all students. The Becoming a Doctor (BD) Grading Committee may consider any evidence regarding professional behaviour (including attendance) in T year in the context of previous grades for Professional Behaviour as assessed assimilated from the point of entry to the MBBS programme.

### The Becoming a Doctor (BD) Progression Requirements

45. Candidates at the end of the Becoming a Doctor (BD) domain will be graded as one of the following:

- **A (Acceptable)**
- **B (Borderline)**
- **C (Cause for concern)**
- **U (Unacceptable)**

Attendance Element	Other Professional Behaviour Element	Clinical Workplace Portfolio Element	SSC and Projects Element	Overall T Year BD Grade
<b>A, C, U</b>	<b>A, C, U</b>	<b>A, C, U</b>	<b>E, A, U</b>	← <b>Available grades</b>
<b>A</b>	<b>A</b>	<b>A</b>	<b>E</b>	<b>A</b>
A	A	A	A	A
A	C	A	A	B/A *
C (If small Groups)	A	A	A	B/A *
C (If Clinical Practice)	A	A	A	C
A	A	C	A	C
A	C	C	A	C
C (If small Groups)	C	A	A	B/A *
C (If Clinical Practice)	C	A	A	C
C	A	C	A	C
A	A	A	U	C
A	C	C	U	C
C	C	A	U	C
C	A	C	U	C
A	C	A	U	C
C	A	A	U	C
A	A	C	U	C
C	C	C	A	C
C	C	C	U	C
Any U in attendance, other professional behaviours or portfolio will result in overall grade of U				
U	A/C	A	A	U
A	U	A	A	U
A	A	U	A	U

\* A grade of C in attendance relating to small group teaching only will usually result in a B overall. Final grade to be determined by the Becoming a Doctor grading committee.

46. The SSC T-Year will be undertaken during T-Year but will be assessed within the P Year Becoming a Doctor (BD) domain, under the P-Year Scheme of Assessment for that year.
47. A candidate, whose grade in the Becoming a Doctor (BD) domain at the end of the year is **Acceptable** (see final column in table above) shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they also meet the requirements of paragraphs 20-22 and 34-36.
48. Students awarded a **Borderline** in T Year, will be automatically considered at the Grading Committee at the end of P-Year.
49. A candidate, whose grade in the Becoming a Doctor (BD) domain is **Cause for Concern** at the end of the year at first attempt (see final column in table above) may choose to repeat the Transition Year or may opt to enter the resit assessments during the resit period.
50. Candidates may only receive one **Borderline** grade during the MBBS programme. A candidate whose grade in the Becoming a Doctor Domain is Borderline and who has not previously received a grade of Borderline shall have passed the Transition year. A candidate whose grade in Becoming a Doctor for Transition year is Borderline, but who has received a Borderline grade in any previous year, shall be deemed to have failed the Domain and be awarded an Unacceptable grade for the domain overall.
51. A candidate whose grade in the Becoming a Doctor Domain during a repeat of Penultimate year is Borderline will be deemed to have failed the domain and be awarded an Unacceptable grade for the Domain overall.
52. A candidate, whose grade in the Becoming a Doctor (BD) domain is **Unacceptable** will be required to repeat the Transition Year; completing all domains of assessment, regardless of whether they have passed the domain in a previous academic year. If student who receives a borderline grade at the Becoming a Doctor Committee in T year meets any of the following criteria, a student with a previous borderline grade, a student repeating the year shall be considered to have achieved an Unacceptable grade and may not progress.

### **The Becoming a Doctor (BD) Resit Period**

53. The resit period for the Becoming a Doctor (BD) domain will normally take place within one month of publication of results.
54. The requirements for the resit period (e.g. clinical attachment, attendance) will be determined on a case-by-case basis, by the Academic Year Lead and the Becoming a Doctor (BD) Domain Lead or their nominee(s).
55. Candidates who are required to re-sit the domain will be reviewed at the Resit Professionalism Grading Committee and may have their grade capped at **Borderline**.
56. A candidate, whose grade in the Becoming a Doctor (BD) resit period is **Borderline** shall have passed the Transition Year and may proceed to the Penultimate Year of the MBBS programme, provided that they have not previously received a grade of **Borderline** and also meet the requirements of paragraphs 24 and 38.
57. Candidates may only receive one Borderline grade during the MBBS programme. A second Borderline grade, at any attempt in any academic year, will result in an Unacceptable grade for the Becoming a Doctor domain.

58. A candidate, whose grade in the Becoming a Doctor (BD) resit period is **Cause for Concern or Unacceptable** is deemed to have failed the domain and therefore the programme. Such students may be eligible for a 3rd discretionary attempt, in accordance with the *procedure for consideration for a final discretionary attempt at an assessment* (see paragraph 3).
59. Candidates granted a 3rd final attempt will be required to repeat the Transition Year and sit all domains of assessment, regardless of whether they have passed the domain in a previous academic year.

### **Interruption of Studies (IOS) and Becoming a Doctor (BD)**

60. If a candidate is on IOS or takes an IOS between the end of year BD grading committee and the associated Board of Examiners (BoE) they will not receive a formal BD grade and it will not count as a BD assessment attempt.
61. If a candidate is on IOS at the time of a grading committee for their end of year assessment, their BD components will be discussed at the grading committee, and formative feedback given to the candidate with an indicative grade of what would have been awarded if they had continued.
62. If a candidate is on IOS, all elements of a candidate's BD portfolio may be carried over to the subsequent grading committee for the academic year they return to study – this will be determined on a case-by-case basis.
63. The formal BD grading will be determined by the BD grading committee for the academic year they return to study from IOS.
64. Ratification of BD results will only occur at the BoE when candidates have returned from IOS and taken all other required assessments.

### **Merits and Distinctions**

65. Candidates who pass the Final Year and are awarded the MBBS degree will be eligible to be considered for the award of a St George's Mark of Merit or a University Distinction, in the following four disciplines:

- Medical Sciences (on the basis of performance in the Clinical Science year/s)
- Clinical Science (on the basis of performance in the Transition Year)
- Clinical Specialties (on the basis of performance in the Penultimate Year)
- Clinical Practice (on the basis of performance in the Final Year)

A candidate awarded a Distinction in a discipline cannot also be awarded a Merit in that discipline. Merits and Distinctions are only awarded to those completing the degree. For the sole purpose of calculating Merits and Distinctions, a final mark for the Transition Year shall be determined, using the weightings specified in the table below:

	<b>T Year (Clinical Science)</b>
Written examination percentage mark	50
CCA percentage mark	50
<b>TOTAL</b>	<b>100</b>



66. A Distinction in Clinical Science will be awarded to candidates in the top 10%, i.e. the 1st decile, of the cohort in the Transition Year. This will be based on the final accumulated weighted percentage mark, rounded to one decimal place (see paragraph 19). Candidates must pass at 1st attempt in order to be eligible for a distinction. Candidates must also achieve a grade of Acceptable in the Becoming a Doctor (BD) domain at first attempt.
67. A Merit in Clinical Science will be awarded to candidates in the 2nd decile of the cohort in the Transition Year. This will be based on the final accumulated weighted percentage mark rounded to one decimal place. Candidates must pass at 1st attempt in order to be eligible for a merit. Candidates must also achieve a grade of Acceptable in the Becoming a Doctor (BD) domain at first attempt.
68. Candidates who defer entry to an examination and sit their first attempt with the resit cohort will be ranked alongside first attempt candidates from the main cohort and then awarded a Merit or Distinction according to where they rank with the main cohort (i.e. 1st or 2nd decile). A candidate who defers entry to an examination more than once, will be ranked alongside the most recent main cohort.

### **Deferred Entry Candidates**

69. Candidates who defer entry to one or more examinations due to approved mitigating circumstances will have their future examination arrangements considered on a case-by-case basis.

### **Requirements for a Repeat of the Transition Year**

#### **Repeat of the T Year as a second attempt**

70. Candidates repeating the Transition Year after no more than one prior unsuccessful attempt at all Transition Year assessment domain(s) will be required to complete T Year in full and achieve a grade of **Acceptable** in all assessment domains. This will be considered a second attempt at all assessment domains, regardless of whether they have passed these (or any element) in a previous academic year.
71. A candidate whose grade in either the CCA or YSKT (not both) assessment domain is **Unacceptable** at second attempt will be eligible for a fast-track Discretionary Panel for a third and final attempt. If the discretionary attempt is granted at fast track the candidate will be eligible to enter the resit examination for the relevant domain(s) in the T Year resit testing period or may choose to repeat T Year in full at third attempt and sit all domains of assessment, regardless of whether they had passed them at second attempt.
72. A candidate whose grade in Becoming A Doctor at second attempt is **Borderline or Cause for concern** is deemed to have failed the domain and shall receive the grade of Unacceptable overall for the domain. (See paragraph 52)
73. A candidate whose grade in any assessment domain is **Unacceptable** at third and final attempt is deemed to have failed the domain and therefore the programme.

#### **Repeat of the Transition Year as a third and final attempt**

74. Candidates repeating T Year as a third and final attempt at any assessment domain(s) will be required to complete T Year in full and achieve a grade of **Acceptable** in all assessment domains. This will be considered a third and final attempt at all assessment domains, regardless of whether they have passed these (or any element) in a previous academic year.

75. When repeating T Year, candidates will be required to select a new topic for the SSC T.
76. A candidate whose grade in any assessment domain is **Unacceptable** at third and final attempt or **Borderline or Cause for Concern** in the Becoming a Doctor domain is deemed to have failed the domain and therefore the programme.

**Students re-enrolling/re-joining a year of a programme following an approved period of absence OR students who are required/have elected to repeat a year**

77. Any candidate re-enrolling/re-joining a year of a programme following an approved absence (e.g. interruption of studies), will be examined in accordance with the scheme of assessment in place in the academic year in which the re-enrolment/re-joining takes place.
78. Any candidate required to repeat a year or any candidate who elected to repeat a year, will be examined in accordance with the scheme of assessment in place in the academic year in which the repeat year takes place.
79. Procedural workplace based assessments (DOPs) will have a valid life-span of 2 academic years from the Board of Examiners at which they were ratified (regardless of reason for interruption of studies) to protect against skill fade and changes to clinical practice – students who return from an approved period of absence where their most recent procedural assessments are more than 2 academic years from when they re-join will be required to repeat all mandatory DOPs for the year of study in which they return.
80. Any candidate returning from an approved absence (e.g. interruption of studies) part way through an academic year will have their assessment requirements (i.e. the assessments in which they will be formatively and summatively examined) determined on a case-by-case basis by the academic decision of the Interruption of Studies panel. See section 79 regarding workplace-based assessments.

**Board of Examiners**

81. There shall be an MBBS Board of Examiners constituted in accordance with the General Regulations for Students and Programmes of Study and the MBBS Programme Regulations.
82. The Board of Examiners has ultimate responsibility for the standard of the examinations and their fair and proper conduct.
83. A Sub-Board of Examiners will determine progression from the Transition to Penultimate Year.

**External Examiners**

84. There is a detailed job description for External Examiners, available separately.
85. External Examiners will be invited to attend the meeting of the Board of Examiners and if required, the CCA and the Becoming a Doctor (BD) Grading Committee.

**Annual Reports**

86. The Chief Examiner shall co-ordinate production of an annual report on the conduct and standard of the examinations to the Chair of the Board of Examiners and the Course Committees.