SECTION 25: PROCEDURES RELATING TO PASSING AND FAILING CLINICAL REPORTS AND THE SERVICE RELATED RESEARCH REPORT

Submission deadlines

Deadlines for submission will be published on the Course website at the start of each academic year. **All work must be submitted by 10 a.m. on the date required.** Coursework submitted after the deadline will be deemed to have failed and a new piece of work will need to be submitted in place of the original.

Requesting an extension

Under exceptional circumstances, an extension to the date by which work must be handed in can be negotiated. This should be requested in advance by discussion with the Course Tutor.

The usual grounds for an extension would be serious illness or major life-events - extensions are not granted because of pressure of work or minor ailments. Requests will also be considered when problems arise on the placement that are beyond the trainee’s control and make it impossible to submit a clinical report in time to meet the deadline. Late claims for extenuating circumstances will be considered where the reasons for mitigation themselves prevented submission of the claim in advance.

It is critical that any requests for extensions are accompanied by appropriate forms of evidence that make clear how the circumstances in question relate to the request for extension. In most cases this will involve medical evidence (e.g., a doctor’s letter), which sets out the relevant medical condition, and describes how it has impacted on the trainee’s ability to complete the relevant work on time. When an extension is requested because of practical barriers occurring on placement, a signed letter from the supervisor will normally be required.

**Extensions up to one week:**
These are negotiated through discussion with the Course Tutor, who will then notify the Chair of the Board of Examiners, setting out:

a) the new submission date

b) the reasons for this request (usually a circumstance beyond the trainee’s control, such as illness or significant life events).

Once they have heard back from the Chair, the tutor will email the trainee to advise them of the new submission date (it is not sufficient to do this verbally, as there needs to be evidence that the trainee has been given the new submission date.

**Extensions longer than one week:**
Trainees need to make the request in writing using the Extenuating Circumstances form (downloaded from the ‘useful forms’ section of the course website). Requests for longer extensions are also negotiated with the Course Tutor, but the Tutor needs to pass the request to the Chair of the Board of Examiners.

For cases where the circumstances are related to practical matters on placement, the Chair of the Board will notify the trainee directly of the decision. For cases involving medical or personal circumstances, the Chair will pass the Extenuating Circumstances Form, along with relevant
medical evidence, to the Faculty Extenuating Circumstances panel for review. The panel will notify the trainee of their decision.

**Procedure for submitting reports**

Clinical reports should be submitted as a *Word file* in the appropriate Moodle folder (e.g. ‘Assignments: Clinical Report 3’).

We will only require electronic submission via Moodle; no paper copy is required.

The Clinical Report should include a front sheet, stating:

- The type of report (e.g. “Clinical Report 1: Assessment Report”, or “Clinical Report 3: Service Related Project”, etc.)
- The title of the report
- The word count
- The date
- Your Clinical Report number (e.g. W13)
- A formal statement regarding confidentiality, as follows: “all names used in the report have been changed in order to preserve confidentiality”
- A statement indicating whether or not client consent was sought/obtained for the report, and (if consent was not sought), a brief indication of the reasons for this.

To ensure that the markers can blind mark, **please make absolutely sure that you name is not included in either the file name or the saved document** instead make sure that you name the file with your Clinical Report number (e.g. T30_CR5).

**Using “Turnitin”**

As is the practice in many institutions, the course uses *Turnitin* (a plagiarism-detection programme) for clinical report submission. Trainees should read the student guide on using Turnitin - it contains further explanations of plagiarism, and instructions on how to use the programme: [https://wiki.uel.ac.uk/display/ELearningStudentSupport/Turnitin](https://wiki.uel.ac.uk/display/ELearningStudentSupport/Turnitin)

**Naming files:** When uploading your report the filename inserted into the ‘Submission Title’ field is simply your examination number and the type of report. You must not include your name (because this would identify you to the markers. Examples of acceptable filenames are:

- P23 Assessment report
- P23 Service-related report
- P23 Transcript-based report

**Checking for plagiarism:** Turnitin is being used to encourage good academic practice and referencing, not to catch trainees out. For this reason the system has been set such that trainees can submit their clinical report, look at the Turnitin report to identify any sections where they may be at risk having inadvertently plagiarised, delete the submission and submit a revised report.

Resubmissions can be made up to the 10am deadline on the day reports are due. However, it is important to allow for the fact that Turnitin only allows one submission every 24 hours. This means that trainees will need to factor this in to any plans for checking and resubmission.

Turnitin will give each report an originality score: this identifies text matches with other documents, including (for example) any quotations. There is no target score that needs to be
achieved - the critical point is to ensure that ideas and quotations are properly referenced in an appropriate academic style, not to aim for a particular unoriginality score. As such trainees should use their own judgment to decide whether higher scores are legitimate (for example, because Turnitin has picked up a properly cited quotation). In this regard trainees will find it helpful to refer to the excellent guidance on UCL's website (http://www.ucl.ac.uk/current-students/guidelines/plagiarism), which is also included as Section 23 of the Training Handbook. The Academic Manual also contains information relevant to this issue (www.ucl.ac.uk/srs/academic-manual/c4/irregularities-plagiarism/principles).

Because Moodle and Turnitin submission can be rather slow trainees should not leave submitting their work until the last minute, since this will not leave enough time to run a test submission and check for inadvertent plagiarism.

Please address any queries relating to Clinical Report submission to the Clinical Placements Administrator, or (in their absence) to the Academic Administrator.

**Checking that the report has been submitted**

If the report has been successfully submitted Turnitin will issue a receipt with the date and time of submission. If this receipt is not issued trainees should assume that the report has not been submitted (i.e. there has been some sort of malfunction). If attempts to resubmit are not successful the Placement Administrator should be contacted so that the course is aware of the difficulty.

**Procedure for marking reports**

Each report is marked by two markers, neither of whom know the candidate’s identity. The second marker moderates the first marker’s mark and adds comments, as appropriate. If there is a discrepancy in their marks, both markers confer and agree a final mark. If they cannot agree a joint mark, a third marker is usually assigned by the Chair of the Board of Examiners. In rare cases where no agreement can be reached, the work is referred to an External Examiner, and the decision of the Board of Examiners will be final.

**Marking categories**

The criteria for each type of clinical report are set out in the guidelines for clinical reports (see Section 21 of this handbook). There are three possible marking categories:

- **Pass**
- **Referred for (major) revision (2 months)**
- **Fail**
The criteria for assignment to these categories are as follows:

**Pass**

The report meets the requirements of the particular assignment as it stands. This does not necessarily mean that it is “perfect” (though it may be). Feedback and suggestions for improvement provided by the markers are intended as learning points, and trainees are advised to take notice of these, including in preparing future reports.

**(Major) Revision**

A trainee may be asked to make revisions to a report when there are major concerns which need to be addressed before the report can be of a pass standard. Often this will concern the way in which the clinical presentation and/or work is conceptualized, understood and reported, or the report’s fit with a particular clinical report format. As such, many or most areas of the report would need to be re-thought and re-drafted.

**Fail**

This category is used when the report as a whole falls seriously short of expected standards. This would be the case where the clinical work being described does not meet the usual professional standards in essential ways or the report falls significantly below the academic standards expected of doctoral level work. Specific problems could include work that raises major ethical problems, a clearly inappropriate clinical approach to the work, or a highly confused or incoherent report.

A failed report will lead to referral to the Examination Board. A new report, usually based on a different piece of clinical work, will need to be submitted. If this is not of a satisfactory standard the Board will consider whether the trainee can continue on the Course.

**Feedback on the report**

Feedback will be returned on a standard sheet, normally five weeks after submission. This will show the final agreed mark, along with feedback which combines the comments of both the first and second marker.

Trainees can expect to receive reasonably detailed feedback from the markers, indicating both the strengths and the limitations of their reports. In circumstances where, after careful consideration, the trainee is unclear about the feedback and revisions they have been asked to make, they may seek clarification from the first marker. Where the trainee understands the feedback but, after careful consideration, is unsure how to make required revisions, they should discuss this with their course tutor. It is the trainee’s responsibility to decide how the specified changes can be made (for example, deciding which parts of the report to edit in order to accommodate additional issues raised by markers).

**Procedures for resubmission**

Where a trainee was asked to make revisions to a report, the revised report should be submitted through Moodle (there will be a dedicated link, for example, “Clinical Report 1: Revisions”).

The submission should include:

- A written statement which provides a clear account of all the changes which have been made, cross-referring to the points on the marker sheet, ensuring that all points on the mark sheet are addressed. This should be included at the beginning of the revised report, so that you are only uploading one document.
- The revised report, showing changes from the original in ‘track changes’ (so that the marker can see where changes from the original have been made)
As above, the written statement and revised report should be uploaded as ONE document, as Moodle cannot accept multiple uploads from the same candidate.

The first marker of your report will mark the resubmission. If it is judged to reach passing standard, no other marker will be involved. If there are still problems with the work, the second marker will also assess it. You will receive a revised mark sheet showing the mark and giving any relevant feedback.

Where revisions set out in the original marking have not been addressed or new major concerns are raised that mean the revised report is not of a pass standard, the resubmitted report will be given a fail. As noted above, a failed report will lead to referral to the Examination Board. A new report, usually based on a different piece of clinical work, will need to be submitted. If this is not of a satisfactory standard the Board will consider whether the trainee can continue on the Course.

**Complaints**

Trainees with concerns about the procedures which have been followed in marking their report should initially raise this with their Course Tutor. In cases where there appears to be legitimate concern the matter can be raised with the Chair of the Examination Board, who will consider appropriate courses of action, which might include upholding of the original decision, or requesting re-marking. It should be noted that complaints are based solely on procedural grounds and simply disagreeing with the decisions of the marker will not be considered. Trainees whose report has been failed can invoke the same procedure. It should be noted that complaints are based solely on procedural grounds and simply disagreeing with the decision of the marker will not be considered. Trainees whose report has been failed can invoke the same procedure.

If trainees are not satisfied by the outcome of this internal procedure they can invoke the UCL student complaints procedure. This is outlined at:

www.ucl.ac.uk/srs/academic-manual/c5/professional-doctorate/student-complaints

There are two relevant documents in this section of the Academic Manual; one sets out the complaint procedure and the other is the form used to make a complaint. Both can be accessed here: