

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 am on the date required**. Coursework submitted after the deadline, and without an approved extenuating circumstances claim, will be deemed to have failed and a new piece of work will need to be submitted in place of the original.

Extensions relating to a Summary of Reasonable Adjustments (SoRA)

You can find detailed guidance relating to adjustments to submission deadlines under a SoRA in UCL's [disability support pages](#) and in the [Academic Manual](#). Trainees with SoRAs are automatically eligible for a **one-week extension for all clinical reports**, and a **two-week extension for the Service-Related Project** but should [e-mail Sharinjeet](#) to declare their intention to use the SoRA to receive this extension so that the deadline can be updated on the system. Extensions will not be applied unless an e-mail request is received.

Trainees who have a SoRA and require a further extension due to extenuating circumstances should in addition follow the procedure below.

Extensions relating to Extenuating Circumstances

Extenuating circumstances (EC) may mean an extension can be negotiated for the date by which work must be handed in – this may be the first submission date, or the date for stipulated revisions. EC are defined by UCL as “events which are sudden, unexpected, significantly disruptive and beyond your control and which may affect your performance at summative assessment.” All claims must be submitted through UCL’s formal mitigation process [via Portico](#). The [relevant UCL webpages](#) and the [assessment section](#) of the course website contain further information on this.

Common examples of EC include serious illness or major life events, and extensions are not granted due to pressure of work or minor ailments. In the case of clinical reports, another example of reasonable grounds for an extension would be unavoidable practical impediments on placement that cause delay (eg. where a crucial session for a report has been postponed until after the submission deadline).

Extensions of up to one week (Clinical Reports) or two weeks (Service-Related Project):

These can be “[self-certified](#)” (i.e. submitted without supporting evidence such as a medical certificate). Self-certifying mitigation requests do not need to be discussed with course tutors, and must be submitted prior to the date at which the work is due to be handed in. Reasons for self-certifying requests **must** meet the criteria outlined above – pressures of work or minor ailments are not sufficient grounds for approval. Each individual extension can only be up to one week in length in the case of Clinical Reports, or two weeks in length in the case of the Service-Related Project.

You can self-certify for up to two separate periods of up to two weeks (ten working days) within an academic session (i.e., an academic year). If you have received two self-certified extensions within an academic year, any subsequent extension requests within that year must be accompanied by supporting evidence.

Extensions longer than one week (Clinical Reports) or two weeks (Service-Related Project):

These need to be accompanied by [supporting evidence](#), and should be discussed in advance with course tutors at the earliest opportunity. Tutors will be able to advise on the types of mitigation available and required supporting evidence. Trainees who have already received

two self-certified extensions within an academic year must also provide supporting evidence for any subsequent extension requests within that academic year.

Retrospective requests: In certain exceptional circumstances, it may be possible for mitigation to be applied [retrospectively](#) after a deadline has passed. Any such request should be discussed with the course tutor, and usually submitted no later than one week after the deadline. All retrospective EC requests **must** be accompanied by supporting evidence.

Trainees with a Statement of Reasonable Adjustments (SoRA): You can find detailed guidance relating to adjustments to submission deadlines under a SoRA in UCL's [disability support pages](#) and in the [Academic Manual](#). Trainees can receive EC-related extensions in addition to those already conferred by the SoRA. For this, they must follow the relevant procedures above using the Portico system. In the case of Clinical Reports, this would result in an overall two-week maximum self-certified extension (one week for SoRA and one week for EC). In the case of the Service-Related Project, this would result in an overall four week maximum self-certified extension (two weeks for SoRA and two weeks for EC).

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://library-guides.ucl.ac.uk/referencing-plagiarism/turnitin>

Naming files: When uploading your report, the filename inserted into the 'Submission Title' field is the Clinical Report submission and your designated Clinical Report code, for example, CR1_P23. You must not include your name because this would identify you to the markers.

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 Sharinjeet Dhiman (s.dhiman@ucl.ac.uk).

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

A marking guidance document is appended to this chapter. Trainees and markers are advised to consult this document alongside the more detailed and specific guidance in handbook Chapters 21 and 25.

Clinical Reports are marked using a “sampled second-marking” system. This system is in line with UCL assessment regulations (more information available [here](#)).

Each report is marked by a single marker, who does not know the candidate's identity. A sample of at least 10% of reports is reviewed by a moderating marker, to ensure fairness and consistency in the way marks have been applied. This sample contains:

1. All failed reports
2. A selection of examples of “typical” passes and stipulated revisions
3. A selection of “borderline” marking cases (for example, stipulated revisions that were close to being awarded a pass, or vice versa).

In any rare instances where the moderating marker considered that there is a problem with the way marks have been applied, they will liaise with the Deputy Chair of the Board of Examiners who will give direction on appropriate action to be taken. Similarly, if the moderating marker first-marks any reports and assigns them a “fail” mark, they will liaise with the Deputy Chair of the Board of Examiners to arrange moderation.

Moderating markers will not add additional comments to any reports they have reviewed, and all candidates will receive marks and feedback from their marker only.

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
- Stipulated revisions (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” (although it may be). Feedback and suggestions for improvement provided by the marker is intended as learning points, and trainees are advised to take notice of these, including in preparing future reports.

Stipulated revisions

A trainee may be asked to make revisions to a report where there are issues or concerns that need to be addressed before the report can be of a passing standard. Often these will relate to the way in which the clinical presentation and/or work is conceptualised, understood and reported, or the report’s fit with a particular clinical report format. As such, multiple areas of the report will likely need to be re-considered and/or re-written. Examples of stipulated revisions are included in the marking guidance document appended to this chapter.

Fail

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

A failed report will be reviewed by the moderating marker, and will also go for moderation to the Chair or Deputy Chair of the Exam Board. If the fail would lead to failure of the course, then the Chair or Deputy Chair of the Exam Board may also consult with the Exam Board. All failed reports are reviewed by external examiners in the scheduled Exam Board meetings.

Feedback on the report

Feedback will be returned on a standard sheet, normally five weeks **after submission**. This will show the final mark, along with feedback from the marker.

Trainees can expect to receive reasonably detailed feedback from their marker, indicating both the strengths and limitations of their report. In circumstances where, after careful consideration, the trainee is unclear about the feedback and/or stipulated revisions, they may seek clarification from the marker. Where the trainee understands the feedback but, after careful consideration, is unsure how to make stipulated 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 the marker).

There is further guidance on how feedback should be delivered in the marking guidance document appended to this chapter.

Procedures for resubmission following stipulated revisions

Where revisions to a report were stipulated, trainees should submit the revised report through Moodle. There will be a dedicated link, e.g. 'Clinical Report 1: Stipulated Revisions'.

The submission **must** include:

- A written statement that provides a clear account of all the changes that have been made, cross-referencing the points on the marker sheet. All points on the mark sheet should be addressed. The written statement should be included at the beginning of the revised report, so that only one document is uploaded.
- 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.

Trainees' original report markers will mark the resubmission. If it is judged to reach passing standard, trainees 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 satisfactorily addressed, or new concerns are raised that mean the report is not of a passing standard, the resubmitted report will be given a fail. At this point, the report will be reviewed by the moderating marker, as all reports receiving a fail require moderation. If both the original and moderating markers agree the report should fail, trainees will receive a mark sheet reflecting this and giving any relevant feedback. As noted above, a failed report will be reviewed by the Chair or Deputy Chair of the Exam Board. A new report, usually based on a different piece of clinical work, will need to be submitted. If a failed report would lead to failure of the course, then the Chair or Deputy Chair of the Exam Board may also consult with the Exam Board.

Complaints

Trainees with concerns about the procedures that 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 – these might include upholding the original decision, or requesting re-marking.

It should be noted that complaints can be based solely on procedural grounds, and simply disagreeing with the decisions of the marker will not be considered. Trainees whose reports have 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 [here](#).