



## Assessment and Marking Policy & Procedure

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# South East Coast Ambulance Service **NHS**

## Statement of Aims and Objectives

NHS Foundation Trust

- 1.1. South East Coast Ambulance Service NHS Foundation Trust (the Trust) is committed to providing and promoting learning and recognises that effective marking, assessment and feedback has a significant impact on raising learner achievement.
- 1.2. This policy and procedure is applicable to all educators in the Trust to evaluate, measure, and document the academic readiness, learning progress, skill acquisition, or educational needs of learners.
- 1.3. Assessment and marking are a vital part of the learning and teaching process. This policy and procedure provides a framework to ensure the highest quality in assessment and marking which will meet the needs of all learners.
- 1.4. The purpose of this policy is to ensure that learners and educators have clear and consistent guidance on the way assessment will be carried out within the Trust.
- 1.5. This policy & procedure applies to all learners who are required to submit work products for assessment, provide evidence of prior attainment or undertake any form of assessment in order to achieve an award. This policy also applies to all staff responsible for the delivery, assessment and management of learning programmes.

## **2 Principles**

- 2.1. Assessment will be reliable. Assessment must be accurate and repeatable. This requires clear and consistent processes for the setting, marking, grading and quality assurance.
- 2.2. Assessors will hold a suitable assessing qualification in line with the requirements of the awarding body for the qualification being assessed.
- 2.3. Assessment will be valid. Validity ensures that assessment tasks and associated criteria will effectively measure student attainment of the intended learning outcomes.
- 2.4. Information about assessment will be explicit and accessible. Clear, accurate, consistent and timely information on assessment tasks and procedures should be made available to learners, educators and other external assessors or examiners.
- 2.5. Inclusive and equitable assessment. The Trust will continuously strive to ensure that assessment tasks and procedures are designed to be inclusive and do not disadvantage any group or individual (for example students with disabilities, students with varied cultural backgrounds). An equality impact assessment should be carried out at the programme planning stage and should explicitly cover assessment.



Assessment will address all of the programme/level aims and outcomes. Assessment tasks will primarily reflect learning progress against the programme specification. It should also promote the learners to develop a range of skills, particularly English and Maths.

- 2.7. The amount of assessed work required will be appropriate for the qualification. The scheduling of assignments and the amount of assessed work required will provide a reliable and valid profile of achievement without overloading staff or students.
- 2.8. Formative and summative assessment will be included in accredited programmes of learning at each level of study. This is to ensure that the criteria of assessment is adequately addressed. Many programmes will also wish to include diagnostic assessment.
- 2.9. Feedback must be an integral part of the assessment process. Learners are entitled to feedback on all (submitted) formative and/or summative assessment tasks for accredited learning programmes. The nature, extent and timing of feedback for each assessment task should be clear to learners in advance. Guidance relating to the 7 Principles Feedback principles can be found in Appendix 1.
- 2.10. Each programme/level will include a variety of assessment types. Variety in assessment (including computer aided, and self and peer assessment) promotes effective learning and allows a range of intended learning outcomes to be appropriately assessed. Additionally, varied assessment tasks support a range of approaches to learning and ensure that inclusivity is planned for and addressed. To provide evidence of competence learners will undertake assessment in in some or all of the following dependent on the programme / level they are working towards: Written Assessments (WA), Objective Structured Clinical Examination (OSCE) and E-Portfolio Completion. Procedures for conducting each of these assessment types can be found in Appendix 3.
- 2.11. Assessment tasks will be designed to minimise opportunities for plagiarism. While the primary responsibility for good academic practice lies with learners, plagiarism can also be minimised through careful task and process design, explicit education and appropriate monitoring of academic misconduct.
- 2.12. Internal quality assurance is key to ensuring that the assessment of evidence for components is of a consistent and appropriate quality. Assessment must be monitored for consistency, reliability, inclusiveness, transparency and validity over time.
- 2.13. Assessors will hold a suitable assessing qualification in line with the requirements of the awarding body for the qualification being assessed
- 2.14. Assessors employed within the Trust must be both currently, occupationally knowledgeable and occupationally competent to assess components and qualifications for which they have the expertise.



- 2.15. Use the Main Heading format (as in headings 1 & 2 above) to set out the different elements of the policy under sub-headings which the reader will then be able to access from the Contents page.

### **3 Assessment Methods**

#### **3.1. Marking**

- 3.1.1. It is essential that marking, including error analysis, includes: • regular, accurate and consistent feedback to learners; • the correction of spelling, punctuation and grammatical errors; • written guidance on what learners have to do to improve their skills and knowledge; • clear written feedback that is understood by learners; and • regular checks and reviews on progress and improvement of skills.

- 3.1.2. All evidence submitted must fulfil the following criteria:

- 3.1.2.1. Valid – the work is relevant to the assessment criteria.

- 3.1.2.2. Authentic or Attributable – the work has been produced solely by the learner.

- 3.1.2.3. Current – the work is still relevant at the time of assessment.

- 3.1.2.4. Sufficient – the work covers all the assessment criteria.

### **4 Appeal**

- 4.1. Learners who wish to appeal against a decision made should follow the Appeals & Complaints Policy and Procedure.

### **5 Definitions**

- 5.1. Learner: An individual on a recognised programme of learning within the Trust (including Preceptorship), recognising that the principles can equally be applied to colleagues undertaken career-long learning.

- 5.2. Academic Transcript: Documentation of a student's permanent academic record, which usually means all courses taken, all grades received, all honours received, and degrees conferred to a student.

- 5.3. Quality Assurance: refers to mechanisms that ensure that the desired level of quality in a service or learning programme is maintained, especially by means of attention to every stage of the process of delivery or production.



Command term: Command words are the words and phrases used in exams, assessment tasks and programme specifications that advise learners and teaching staff how learners should answer or meet the learning outcome. Analyse, discuss, outline and demonstrate are some common examples.

- 5.5. Job specification: A statement of employee characteristics and qualifications required for satisfactory performance of defined duties and tasks comprising a specific job or function.
- 5.6. Professional discussion: Professional discussion is a planned, in-depth, two-way conversation between assessor and learner. It is an effective way of assessing complex understanding and knowledge.
- 5.7. RPCL: RPCL is where credit is awarded for learning which has already been assessed and formally recognised with a certificate, as part of a completed or partly completed programme of study or qualification (involving academic, professional or vocational courses).
- 5.8. RPEL: RPEL is used to award credit for learning gained through any life experience including paid or unpaid work.

## **6 Responsibilities**

- 6.1. The Chief Executive Officer (CEO) is ultimately responsible for this policy and procedure.
- 6.2. The Medical Director and the Head of Clinical Education maintain strategic responsibility for this procedure.
- 6.3. Senior Education Managers are responsible for:
  - 6.4. Overseeing reports and communicating pertinent information to the department head.
  - 6.5. Supporting the Course Lead and Teaching staff in the meaningful application of RPL.
  - 6.6. Consistently reviewing applications for RPL and ensuring information is handled in accordance with GDPR regulations.
  - 6.7. Reviewing RPL appeals as per the Appeals procedure.
  - 6.8. Supporting the development of a tailored learning programme where applications for RPL have been successful.
  - 6.9. Providing feedback to individuals where applications for RPL have been unsuccessful.
- 6.10. All employees & Apprentices are responsible for:



Completing a RPL portfolio of evidence and submitting an application as per the RPL guidance document.

- 6.12. Providing accurate and truthful information alongside reliable evidence as part of their application.
- 6.13. Assessors are responsible for
  - 6.13.1. Ensuring that all assessment decisions are in line with the principles within this procedure.
  - 6.13.2. Ensuring that any actual or potential conflicts of interest are highlighted to the Senior Education Manager at the earliest opportunity.
  - 6.13.3. Providing appropriate written feedback to support assessment decisions made.

## **7 Monitoring compliance**

- 7.1. Internal Quality Assurance (IQA) principles for assessments and marking are applied to all learning programmes. Accredited programmes of learning are also Externally Quality Assured (EQA) by the respective Awarding Body.
- 7.2. All staff involved in the RPL process should:
- 7.3. Possess or be in the process of completing a recognised vocational assessment qualification or equivalent.
- 7.4. Understand the importance of RPL and continuously seek to participate in relevant professional development opportunities to improve practice.
- 7.5. Learners should seek advice from teaching staff if information and computer technology (ICT) training is required for application or appeal submissions.

## **8 Audit and Review (evaluating effectiveness)**

- 8.1. This procedure will have its effectiveness audited by the responsible Management Group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 8.2. Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).
- 8.3. This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.



All changes made to this policy and procedure will go through the governance route for development and approval as set out in the Policy on Policies.

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## 9 References

- 9.1. [Education inspection framework \(EIF\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/362822/EIF-2019-2024.pdf)
- 9.2. [Assessment of learning \(nsw.gov.au\)](https://www.nsw.gov.au/assessment-of-learning)
- 9.3. [National curriculum assessments: guidance for local authorities - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/362822/NCA-Guidance-for-Local-Authorities-2019-2024.pdf)



## Appendix 1: 7 Principles of Feedback in Assessment

### 1. Timing Is Key:

Feedback is always most effective when given as soon as possible after the behaviour has occurred. The immediacy helps to reinforce a correct behaviour and make it more likely to happen again. At the very least, it is highly desirable to give corrective feedback before the situation occurs again.

### 2. Seeking Self-Feedback:

By asking the person for self-assessment involves them in the feedback. It promotes an open atmosphere and dialogue where feedback is the norm. The person is almost always aware of his or her own strengths and weaknesses, so it is far more effective to allow the person to voice opinions before providing your own assessment. By seeking self assessment, the person will more readily assume responsibility for his or her own abilities and performance.

### 3. Be Specific:

When you focus on a specific correct or incorrect behaviour, you remove the feedback from the sphere of personality differences and the other person will be more willing and able to change.

### 4. Focus On What Matters:

Identify one or two critical areas and help the person address them one at a time. It is too hard to examine and try to change many aspects of behaviour at one time. Restrict feedback to one or two important points so that you do not overwhelm the other person with too many things to consider.

### 5. Provide More Praise:

Positive reinforcement is one of the strongest factors in bringing about change. Unfortunately a lot of people always focus on what goes wrong! When you give corrective feedback, remember to point out corrective behaviours first. This is as important as pointing out mistakes and areas that need improvement. And always end the conversation on a positive.

### 6. Recognise The Expected:

People deserve to be praised for behaving to the expected level. However, too many people take the expected level for granted. Remember that praising anyone who meets established standards is as important as praising the exceptional performer.

### 7. Encourage Change:

Work together to identify the desired change and how it can be achieved. Decide together when the changes will be accomplished.





## **Appendix 2: Procedure for examinations and written assessments**

All written assessments must be invigilated, in line with the Awarding Body Instructions for Conducting Controlled Assessment, which can be found in the Quality Folder and referenced in the Assessment Invigilator Pack.

The assessment invigilator must follow and complete the Assessment Invigilator Pack when invigilating any written assessment.

All written assessments carry a pass mark percentage in line with the Awarding Body requirements.

A qualified assessor will assess all written assessments. In the event, a qualified assessor is unavailable; a member of the Clinical Education team, undertaking a recognised assessor qualification will undertake the assessment process, in line with the Awarding Body Assessment Principles for Assessors (Appendix 2).

All written assessments will be marked against the relevant written assessment answer paper. These can be found on SharePoint. The written paper for each module can be found under the Module heading.



### Appendix 3: Procedure for Practical Assessments NHS Foundation Trust

Various practical assessments will take place during programmes of learning, using either the OSCE or OSPE methods. All students will be assessed as per the Awarding Body assessment criteria. Practical assessment grading sheets can be found on SharePoint. The assessment sheets can then be found under the relevant qualification and module heading.

All assessments will be conducted in line with the Awarding Body Instructions for Conducting Controlled Assessments.

A qualified assessor will assess all practical assessments. In the event, a qualified assessor is unavailable; a member of the Clinical Education team, undertaking a recognised assessor qualification will undertake the assessment process, in line with the Awarding Body Assessment Principles.

All practical assessments carry a pass mark percentage. However, specific practical assessments will contain critical fail elements which must be demonstrated in full to pass, regardless of the demonstration of additional elements.

Students will not be informed of their assessment results immediately following their assessment. This is to allow for a cooling off period to take place.

Where possible, assessment results will be released during the individual's end of module tutorial. However, assessment results will only be released after any student not meeting the required standards have been individually informed by the Clinical Education Lead or Lead Tutor.



## Appendix 4: Portfolio Completion

Learners will provide evidence against each assessment criteria using an online e-portfolio platform.

Learners must provide evidence against all assessment criteria set by the awarding body.

Learners will be given access to this account within Module 1 of the programme.

All learners will be shown how to use the platform, including how to submit evidence, how to re-submit evidence, how to read feedback and how to access more information.

Learners can begin to submit evidence as soon as they have access to their portfolio management accounts.

All learners will receive feedback on their submissions using this platform

Only assessors working to the Awarding Body assessment guidance may assess portfolio submissions.

Submissions will be made to a central learner account, whereby assessors will assess the submissions in date order – the oldest outstanding submission first.

Feedback and improvement suggestions will be made directly to the learner. However, concerns surrounding submission quality, quantity or any other concerns, will be raised by the assessor, to the Clinical Education Lead at the earliest opportunity.

Should any concerns be raised by an assessor regarding the above, an agreed action plan will be put in place for support.

Portfolio completion will be discussed between the Course Director and the learner, at regular intervals, usually during a tutorial.

Learners must submit their completed portfolio for review on day one of the final module.

The Clinical Education team will review portfolios during the programme and offer final advice on completion, 1 week prior to the completion date.