



CENTRE FOR CHILD &
ADOLESCENT HEALTH

BSc. (Hons) in Global Health

2013-2014 Programme Handbook

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1. Introduction

1.1 Welcome to the Global Health BSc intercalating degree. This is an exciting opportunity for you to extend your knowledge and understanding of some of the impacts increasing globalisation has on health and disease. The practice of medicine in the UK requires an awareness of international health issues, of different disease pathologies and different cultural responses to disease. Many doctors spend part of their training abroad, and international collaboration is a pre-requisite of the highest quality medical research. This course reflects the extensive international reputation of Bristol University and you will meet an exciting range of academics and teachers who represent the international face of health.

This handbook is intended as a helpful reference point for all students. It is important that you read it very carefully, especially the sections relating to University Rules and Regulations. The programme is based in the Centre for Child and Adolescent Health within the School of Community and Social Medicine in partnership with the School for Policy Studies and School of Law. Teachers are also drawn from other Departments such as Politics, Economics and Clinical Medicine.

2. Departmental Information

The University of Bristol Medical School website www.medici.bris.ac.uk provides a wide range of information for current and prospective medical students. In particular, the Faculty Office link contains Faculty policies, news and forms for current students. *It is important that you become familiar with these.*

2.1 The Centre for Child and Adolescent Health

The Centre for Child and Adolescent Health www.bris.ac.uk/ccah is located in Oakfield House and is part of the School of Community and Social Medicine <http://www.bris.ac.uk/social-community-medicine/> in the Faculty of Medicine and Dentistry. CCAH is a multidisciplinary academic centre funded by the Universities of Bristol and the West of England, and NHS partners.

The Centre is staffed by a multi-professional team committed to integrate research with teaching in child health and has several collaborative projects with other universities. Current research themes (lead by Centre staff) are as follows:

Child Development and Disability
Nutrition and Development
Childhood Injury and Safeguarding
Children with Complex Health Needs

Collaborative international research projects involving Centre based investigators include

WHO Child and Adolescent Injury Strategy (Bangladesh, Nepal and Ghana)
Outcome of low birth weight at term (Brazil)
Perinatal Care Project (Bangladesh)
Childhood Injury Prevention (Bangladesh and Nepal)
Child Survival (Uganda)
Child Development in Low Income Settings (Pakistan and India)

Courses on the following subjects are run by the Centre:

Undergraduate:

Community Orientated Medical Practice (COMP)

Early Childhood Studies

Inter-professional Learning workshops

Intercalated BSc in Global Health

The School for Social and Community Medicine runs a wide variety of short courses
<http://www.bris.ac.uk/social-community-medicine/shortcourse>

2.2 The School for Policy Studies

The School for Policy studies has a strong tradition of linking policy and practice in a multidisciplinary, research-intensive environment. The School's research programme, organised around four specialist centres has been consistently judged to be of international standard. The research Centres within the School for Policy Studies include:

- [Centre for Family Policy & Child Welfare](#)
- [Centre for Gender and Violence Research](#)
- [Centre for Health & Social Care](#) including [Cochrane Developmental Psychosocial and Learning Problems Group](#)
- [Centre for the Study of Poverty & Social Justice](#) including [Townsend Centre for International Poverty Research](#)
- [Norah Fry Research Centre](#) aiming at the inclusion of people with impairments including learning disabilities
- [Centre for Exercise, Nutrition and Health Sciences](#)

2.3 Department of Economics

The Economics Department covers teaching and research in theoretical and applied economics and econometrics. Within the department, the [Centre for Market and Public Organisation](#) (or CMPO) studies the intersection between the public and private sectors of the economy.

2.4 The School of Law

The [School of Law](#) is one of the United Kingdom's leading University Law Schools. Highly-rated for both teaching and research, and enjoying excellent links with the legal profession, the School has over 40 members of academic staff and an internationally-mixed body of students, comprising more than 600 undergraduates and over 250 postgraduates.

2.5 Information for Global Health Students

Most teaching will be held in BG10, the ground floor seminar room in the Centre for Child and Adolescent Health, Oakfield House or Room G12 on the ground floor of Canynge Hall both . There is a 'no smoking' policy and mobile phones should be switched off in the building.

There is a resource cupboard of multimedia and grey literature available for loan to students in BG10 (keys and loan register available on request to Sally Sterland).

All students will be expected to use the University's Blackboard facility www.ole.bris.ac.uk – a centrally supported virtual learning environment, where you will be able to access online tutorials, information about lectures and many other links to help with your studies. You will need to log in regularly to this facility to check for announcements regarding the course. External students will be given a username and password.

Student representatives will be invited to attend programme meetings, which will be arranged at the end of each teaching block (see section 3).

3. Academic Calendar

Teaching is divided into two semesters, known as Teaching Blocks 1 & 2. Week one will consist of induction and introductory sessions, and formal teaching will commence in week 2. Most taught sessions will take place in the Lecture Room G12 in Canynge Hall.

Registration: on-line

TB1: 30 September to 20 December 2014

Autumn Term: 23 September to 20 December 2014

Christmas 2013 and New Year 2014 bank holidays and University closure days: 24, 25, 26, 27, 30, 31 December, 1, 2 January 2014

TB2: 27 January to 9 May

Spring Term: 13 January to 4 April 2014

Easter 2014 bank holidays and University closure days: 18, 21, 22 April 2014

Summer Term: 28 April to 13 June 2014

Spring 2014 bank holidays: 5, 26 May,

Deadlines for the submission of assessed written work dates will be given in the individual Unit Handbooks.

4. Programme Information – Course Director [Dr Matthew Ellis](#)

The overall aims of the Global Health programme are to

- Raise awareness of the importance of global health issues to medical practice both in the UK and abroad
- Provide students with appropriate knowledge of global health issues
- Promote skills of critical evaluation and strategic thinking in global health
- Enable students to undertake relevant postgraduate study

Useful introductory texts include

Global Health 101 (2011) Skolnik R published by Jones and Bartlett

ISBN 13: 9780763797515; ISBN 10: 0763797510

Global Health: an Introductory Textbook (2006) Lindstrand A., Bergstrom S., Rosling H. et al published by Studentlitteratur ISBN: 9789144021980.

Turning the World Upside Down – the search for global health in the 21st Century (2010)

Nigel Crisp: Royal Society of Medicine, London

ISBN 978-1-85315-933-6

The new open access Lancet published [Global Health](#) provides invaluable access to current issues.

The programme consists of three core Units (20 credit units) in Teaching Block 1, with a mix of more specialist units (10 and 20 credit units) in Teaching Block 2 building upto the dissertation (20 credit units) which allows the student to apply their learning to a topic of the students choice. During the course we aim to build the students understanding of the three vertical themes that run throughout the programme: *ethics*, *gender* and *participation*. All units are compulsory. You will be given a Unit Handbook with more detailed information at the beginning of each unit.

Teaching and learning approaches will be student-centred. Self directed learning is an integral part of the course and forms the majority of learning in each week. Students will be expected to undertake preparatory work for each session. Each session will be seminar based, with some didactic teaching but predominantly students will be expected to work in small groups and contribute to the session via presentation or discussion.

4.1 Health policy in an International Context – Unit Organiser [Professor Sarah Payne](#)

20 credit unit

Objectives

This unit aims to develop an understanding of the role of health policy in shaping health experience and the distribution of health, diversity within health systems, and the ways in which globalisation and international agencies including both transnational companies and NGOs impact on health policy and health outcomes.

Learning outcomes

The key learning outcomes are as follows. Students are expected to develop an understanding of:

- the meaning of global health policy and the various ways in which health services are delivered around the world
- the meaning of global health governance
- the role of various global organisations in shaping health experience
- the relationship between changing patterns of health and illness and wider processes of global restructuring
- the major determinants shaping health care in different parts of the world
- different theoretical perspectives in discussion and critique of global health and global health governance

Assessment:

Formative: One 1500-2000 word essay from a list of titles to be given at the start of the unit, in the unit outline.

Summative: One 3000 word essay from a list of titles to be given in week 5.

Key reading (other reading will be listed in the unit outline)

Global Health Watch (2012) Global Health Watch 3: An Alternative World Health Report
<http://www.ghwatch.org/sites/www.ghwatch.org/files/global%20health%20watch%203.pdf>

Kent B, Hein, W and Drager, N. (eds) (2009) Making sense of global health governance : a policy perspective Basingstoke: Palgrave Macmillan

Key watching

Some of the Ted talks are useful, for example:

http://www.ted.com/talks/ellen_gustafson_obesity_hunger_1_global_food_issue.html

4.2 Global Burden of Disease – Unit Organiser Dr Matthew Ellis

20 credit unit

This unit aims to develop the student's knowledge, interest and understanding of global patterns of disease, associated health interventions and the importance of the social and cultural context for public health planning.

Learning outcomes:

On completion of this unit students will be able to:

- understand approaches to the measurement of health and disease
- know sources of data for global disease patterns
- be able to discuss comparisons and trends in the global burden of disease
- be aware of the cultural determinants of disease recognition and health seeking behaviour
- be aware of approaches to behaviour change
- be able to discuss approaches to appropriate service provision in medically plural contexts.
- understand approaches to the control of infectious diseases with high global mortality including acute respiratory infections, diarrhoeal diseases, HIV/AIDS, malaria and tuberculosis
- appreciate the global importance of and approaches to mental health
- understand emerging non-communicable disease threats
- be able to review progress towards the Millenium Development Goals for a particular population

Assessment:

Formative assessment: Student presentations in workshops of allotted papers

Summative assessment:

70% Examination

Data Interpretation questions based on recent global health published studies

30%. Group Presentation: Population Based Case Study

Aim: To describe progress made towards the Millennium Development Goals (relating to health) and critically review current strategies for a selected population.

Indicative reading

Merson M., Black R.E., Mills A.J., 3rd ed. (2012) *Global Public Health: Disease, Programs, Systems, and Policies*, Jones and Bartlett

Essentials of Global Health (2008) Skolnik R. Jones and Bartlett

Lee K and Collin J (2005): *Global Change and Health* (Open University Press)

Landon M (2005) *Environment, Health and Sustainable Development* (Open University Press)

Cook G, Zumla A (2002) *Manson's Tropical Disease*: (Saunders)

Lucas JO, Gilles HM 4th edition (2004): *Short Textbook of Public Health Medicine for the Tropics* (Arnold)

4.3. Inequalities in Health –Unit Organisers [Val Williams](#) and [Demi Patsios](#)

20 Credit Unit

This unit aims to develop an understanding of global patterns of poverty and inequality and the relationship between poverty, social exclusion and inequality and ill health. The analysis will use disciplinary tools from economics, politics, social policy, disability studies, development studies, epidemiology and statistics.

Learning Outcomes

On completion of the unit, students will:

- Be well informed on the academic and policy debate on poverty, exclusion and inequalities in health.
- Have a clear understanding of the concepts of poverty, development and inequalities in health, including gender, disability and age inequalities.
- Be able to discuss different definitions and meanings of 'poverty', 'inequality' and 'exclusion' both in a UK and in a global context.
- Be able to identify and discuss key data on patterns of global poverty and inequalities in resources and health.
- Be familiar with theoretical and empirical analysis of the causal pathways running, in both directions, between health and material living standards (wealth, inequality).
- Have a clear understanding of the right to health care and the rationing of scarce resources, and the impact of both on global inequalities in health.

Formative assessment:

Students will be assessed on two practical sessions. One will be a computer-based exercise using global health data software. In the other, students will be asked to work in small groups to produce a scientific poster on a relevant topic which has been agreed in advance with the course tutor. Groups will be given 10-15 minutes to present their poster. Peer-reviewed assessment will be based on two criteria: (1) how well the poster and the student communicate information (2) the quality of the poster. For advice on producing a poster, see <http://colinpurrington.com/tips/academic/posterdesign>. The poster MUST be A1 size and MUST be produced as a PDF or PowerPoint file and sent by e-mail to the course administrator Pauline.Lowrey@Bristol.ac.uk by 12.00pm on **Tuesday 29 October 2013**.

Summative assessment: One 3,000 word essay from a list of titles to be given out in Week 5 (essay due: **27 January 2014**).

Indicative readings

- Commission on Social Determinants of Health (2008) *Final Report: Closing the gap in a generation: Health equity through action on the social determinants of health*. Geneva, WHO. Available at: http://www.who.int/social_determinants/final_report/en/index.html
- Development Policy Forum (2011) *Creating a global health policy worthy of the name*. Brussels: Friends of Europe. Available at: http://www.friendsofeurope.org/Portals/13/Documents/Reports/DPF_Report_Global_Health_11.2010.pdf
- Graham H. (2005) Intellectual disabilities and socioeconomic inequalities in health: an overview of research. *Journal of Applied Research in Intellectual Disabilities*, 18: 101-11.
- Gostin LO (2010) Redressing the Unconscionable Health Gap: A Global Plan for Justice. *The Harvard Law & Policy Review*, 4(2): 271-294. Available at: http://hlpronline.com/wp-content/uploads/2010/06/gostin_justice.pdf.
- Hofrichter R (Ed) (2003) *Health and Social Justice: politics, ideology and inequality in the distribution of disease*. San Francisco: John Wiley & Sons.
- Leon D and Walt G (2001) *Poverty, Inequality and Health: an international perspective*. Oxford University Press.
- Townsend P & Gordon D (2002) *World poverty: New policies to defeat an old enemy*. Bristol: Policy Press.
- UN (July 2011) *Millennium Development Goals Report 2011*. New York: UN. Available at: http://www.un.org/millenniumgoals/11_MDG%20Report_EN.pdf
- UNDP (2011) *Human Development Report 2011, Sustainability and Equity: A Better Future for All*. New York: UNDP. Available at: http://hdr.undp.org/en/media/HDR_2011_EN_Complete.pdf
- UNDP (2013) *Human Development Report 2013, The Rise of the South: Human Progress in a Diverse World*. New York: UNDP. Available at: http://hdr.undp.org/en/media/HDR_2013_EN_complete.pdf
- World Bank (2011) *World Development Report 2012: Gender Equality and Development*. Washington, DC: The World Bank. Available at: <http://econ.worldbank.org/WBSITE/EXTERNAL/EXTDEC/EXTRESEARCH/EXTWDRS/EXTWDR2012/0,contentMDK:23004468~pagePK:64167689~piPK:64167673~theSitePK:7778063,00.html>
- WHO (2010) *The World Health Report: Health systems financing: the path to universal coverage*. Berlin: WHO. Available at: http://whqlibdoc.who.int/whr/2010/9789241564021_eng.pdf
- WHO (2011) *World Report on Disability*. Geneva: WHO. Available at: http://whqlibdoc.who.int/publications/2011/9789240685215_eng.pdf

4.4 Conflict, Migration and Health Unit Organiser - [Natasha Price](#)

20 credit unit

This unit aims to develop the student's interest in and knowledge and understanding of

- Global patterns of migration and conflict
- The impact of migration on the health of individuals and groups
- The health implications of conflict, violence and natural disasters
- Legal and human rights dimensions of migration and violence

Learning Outcomes:

On completion of the unit, students will:

- Understand current trends in migration and patterns of conflict and their links to globalisation
- Be able to analyse the links between population movement, conflict and patterns of health and illness
- Comprehend the existing framework of international human rights and humanitarian law
- Be aware of key issues in the management of public health in the context of conflict, violence and disasters

Formative assessment: Presentations and literature reviews

Summative assessment: 3000 word essay

Indicative reading

Gruskin S, Grodin M, Annas G, Marks S (2005) *Health and Human Rights* London: Routledge
World Health Organisation (2002) *World Report on Violence and Health* Geneva: WHO
Allotey P (2003) *The Health of Refugees: public health from crisis to settlement* Oxford : Oxford University Press

4.5 Anthropology and Global Health— Unit Organiser [Dr Helen Lambert](#) and [Dr Isabelle de Salis](#)

10 Credit Unit

This unit aims to develop knowledge and understanding of the roles of culture, social structure and political economy in shaping global health problems and interventions by introducing students to anthropological approaches to global health and bioethics.

Learning outcomes:

On completion of the unit, students will

- Appreciate the importance of taking local and organizational culture, social structure and social processes into account in the design and appraisal of health interventions and in the interpretation of evidence concerning their effectiveness
- Understand the value of involving local communities to facilitate effective health-related behavioural and social change
- Recognise the role of medical pluralism and non-biomedical practices in health care provision
- Be aware of ethical considerations in undertaking clinical trials and other types of health research in resource-poor settings
- To consider diverse perspectives when planning or delivering health interventions in a culturally sensitive manner

Indicative reading

Robert A Hahn and Marcia Inborn (2009) *Anthropology and Public Health*. Oxford University Press 978-0-19-537464-3
Robert Pool and Wenzler Geissler (2005) *Medical Anthropology*. Open University Press 9780335218509

Formative assessment: Group presentations in week 5 based on allotted readings (30% of total mark allocation)

Summative assessment: 3000 word individual essay (70% of total mark allocation)

4.6 Child Health – Unit Organiser [Dr Dan Magnus](#)

10 credit unit

This unit aims to develop students' interest in, as well as knowledge and understanding of:

- Conditions of global importance affecting children's health
- The global burden and causes of child morbidity and mortality
- Impact of programmes designed to reduce inequalities in child health

A number of important overarching issues related to child health in a global setting, including

Learning Outcomes

On completion of this unit students will be able to:

1. Give examples of the practicalities of good perinatal care in poor-income-settings including challenges in HIV prevention
2. Explain the importance of injury in childhood as a cause of mortality and morbidity and discuss the efficacy of accident reduction programmes
3. Discuss the importance and causes of childhood disability in developing countries
4. Appreciate principles underpinning the Rights of the Child
5. Describe global programmes to improve child health such as the Integrated Management of Childhood Illness (IMCI)
6. Understand the importance of nutrition on child health

Assessment:

1.5 hr examination – 100% (exam length 3 hours total for two modules)

All students will complete a group presentation during the unit and the summative exam assessment at the end of the unit.

Indicative reading

Lancet series - child survival (2003): Vol. 361, pp 2172, 2226-2234, Vol. 362, pp 65-71, 159-164, 233-241, 262 and 323-327

Lancet series - neonatal mortality (2005): Vol. 365, pp 821-822, 822-825, 891-900, 977-988, 1087-1098 and 1189-1197

Doyal L, Sex, gender and health: the need for a new approach *BMJ* 2001;323:1061-1063 (3 November) (<http://www.bmj.com/cgi/reprint/bmj%3b323/7320/1061>)

Lancet: Special series on sexual and reproductive health (http://www.who.int/reproductive-health/publications/srh_lancetseries.pdf)

Management of the Child with a Serious Infection or Severe Malnutrition (2002): WHO

Kennedy J (2003) HIV pregnancy and Childbirth (Elsevier Health)

4.7 Dissertation – Unit organiser [Dr Clare Sheahan](#)

This unit aims to give students an opportunity to gain in depth knowledge and understanding of a topic that particularly interests them and to encourage the development of independent critical judgement and analytical thought.

Learning outcomes

On completion of this unit students will be able to:

- Demonstrate intellectual rigour in the presentation of a coherent discussion of the relevant literature and evidence
- Understand the importance of clear conceptualisation of the research issues
- Show ability to critically appraise the relevant evidence
- Be able to draw up relevant conclusions backed-up by firm evidence

Formative assessment will take place during workshops during TB2, when students will be asked to make short presentations about their topic

Summative Assessment will be on the basis of a 10 000 word written report

Indicative reading

Becker H (1986) *Writing for social scientists*, University of Chicago Press, Chicago
Cuba L and Cocking J (1997) *How to write about the social sciences* Longman, New York
Turabian KL et al (1996) *A manual for writers of term papers, theses and dissertations*, 6th edition University of Chicago press, Chicago
Woods P (1999) *Successful writing for qualitative researchers*, Routledge, London
Levin P (2005) *Excellent Dissertations*, Open University Press
Hek, G, Moule, P, Judd, M., *Making Sense of Research*, London, Sage
Previous Dissertations can be accessed via the course administrator in Oakfield House

5. Personal Tutors

Incoming students are strongly advised to keep in touch with their personal tutor in their home University; they will also be linked with the Student Advisor based in the Centre for Medical Education. Current Bristol Undergraduates should continue with their current Tutor arrangements. The course director is always happy to provide advice should personal difficulties arise during the programme.

6. Disability

Any student wishing to alert the Department to any disability / special need / medical condition, etc, should specify details in the section provided on the Registration form at the beginning of the academic year. All information will be treated in strict confidence, and in compliance with the Data Protection Act 1998. Students with dyslexia who have not had their condition certified are advised to see the University Access Unit for an initial assessment. The [Access Unit](#) for Deaf and Disabled Students offers a range of services to ensure that students receive appropriate and accessible support.

Telephone: 0117-954-5727;

Textphone: 0117-954-5728.

Fax:

0117-923-8546.

E-mail: access-unit-students@bristol.ac.uk

7. IT and Library Facilities

The University's [Computing Service](#) is situated next to the Arts and Social Science Library in Tyndall Avenue. It provides computing facilities, instruction courses, information and advice for the whole University. It also produces some useful documents which are all accessible on the web. The **Help-Desk** on the first floor will answer queries from students and staff concerning hardware, software and computing practices. The Centre also contains a Computer Laboratory on the first floor, with 24 PC stations; students must produce their student card to gain access to this facility. In addition, the Arts Faculty has two computer laboratories for student use, one in the basement of 17 Woodland Road - access through an entrance on the left-hand side of the building, and the other in the basement of 13 Woodland Road - access at the front left-hand side of the building.

The [medical library](#) is situated in the School of Medicine, University Walk. It stocks a wide range of medical books and journals, as well as archived material in the stack room.

[The University Arts and Social Sciences Library](#) on Tyndall Avenue has a stock of over a million books, and over 6,000 periodicals. Every year it adds about 25,000 books and bound periodicals to its shelves. It is situated in Tyndall Avenue, about five minutes' walk from the Department.

There are extensive online learning resources and bookable student courses available through the University [Training and Learning Department](#).

8. Teaching and Assessment

Formative and summative assessment takes a variety of forms. The guidelines for submitting your assessments, marking schemes, attendance and factors that may affect your progress are very detailed but nonetheless you should read the following sections very carefully. Each Unit specifies the criteria for the Unit assessment in the Unit handbook.

8.1 Exams

Students are advised to read the [University's Examination Regulations](#) and the Medical School [Rules, Policies and Procedures](#). All examinations will adhere to these rules and it is important that you understand what is expected of you during an examination, what to do if you are unwell etc. Copies of the regulations are also available from Mrs Sally Sterland, the Unit Administrator.

8.2 Written work

Referencing – All written work must be referenced using the Harvard system. Please make sure that you look at this and other useful links about finding and using information for academic work provided by the library.

Plagiarism - It is important that you read and adhere to the University's regulations on [plagiarism](#). The University's [Examination Regulations](#) contain details of the procedures to be followed in cases of suspected plagiarism. Section 3.2 states:

"Passages quoted or closely paraphrased from other authors must be identified as quotations or paraphrases, and the sources of the quoted or paraphrased materials must be acknowledged. Use of unacknowledged sources may be construed as plagiarism. Departments may give further advice on plagiarism within particular disciplines."

All written submissions will be electronically screened for plagiarism using a sophisticated software programme which will detect previously published material. Where you intentionally quote from published material you must indicate this clearly using standard quotation marks and clear referencing of the published source. The Secretary's Office advise on the legal and disciplinary aspects of plagiarism.

Submission – By **5pm on the day of the deadline** [see your Unit handbook for the confirmed dates] you must submit **one** word processed copy, on A4, double spaced and single sided to Mrs Sally Sterland, Programme Administrator, in the main office of the Centre for Child & Adolescent health. You must also submit **one** electronic copy via email or Blackboard (your Unit tutor will specify) to Pauline.Lowrey@bristol.ac.uk

Penalties for late submission of written work

If you submit any assessed written work late, the following penalties will apply:

- *Up to 24 hours late without a valid reason:* 5 percentage point reduction in marks (ie original mark of 57% becomes 52%)
- *After 24 hours and up to 10 working days late without a valid reason:* 15 percentage point reduction in marks (ie original mark of 57% becomes 42%)

If you submit your work more than ten (10) working days late then you will receive an automatic 0% mark. The assignment will be marked and this mark will be returned to you for feedback purposes.

If you wish to have extenuating circumstances considered for any late submission, you will need to complete a 'Late Submission Form' and hand this in with your assignment - setting out (with evidence) your extenuating circumstances. A copy of this form is in **Appendix 2** and the forms are also available from the Programme Administrator, Mrs Sally Sterland.

It is your responsibility to ensure that you can hand in your written work on time and do not leave work until the last minute. The following sorts of events will not normally be considered as extenuating circumstances for late submission –failure to back up work on your pc, work commitments (University or external), a car breaking down, a computer or printer failing. Acceptable extenuating circumstances will normally involve significant illness or acute personal problems.

Handling of marks when students have failed due to late submission

If you receive a fail (under 50%) mark as a result of late submission penalty, but would otherwise have passed on the basis of your original mark, you will receive that fail mark for that piece of work but be given an automatic 50% pass as a 're-sit at second attempt'.

8.2 Word Limit

You must adhere to the word count specified in your Unit handbook. There are also penalties for over length. These are shown in the following table:

Words over length	Penalty
0-200	1% off original mark
201-500	2% off original mark
501-1000	4% off original mark
1001-2000	5% off original mark
2000 plus	10% off original mark

8.4 Extenuating circumstances affecting performance

If there are circumstances that you feel might affect your performance during the programme, you should complete and submit an extenuating circumstances form to the Faculty Office (please see **Appendix 2 & 3**). Examples of situations that might be considered extenuating circumstances are illness or personal problems during revision and preparation for an exam or written piece of work, where the student sits the examination or submits the written piece of work at the same time as the rest of the students. The circumstances should be supported by appropriate evidence and you are encouraged to alert the Unit Organiser or Programme Director as soon as you can if difficulties arise.

8.5 Marking Schemes

As the BSc is an honours degree, assessed work is marked in percentage terms on a scale of 0-100 in accordance with the following convention. Further details are in *Appendix 4*.

First Class	70-100
Upper Second Class	60-69
Lower Second Class	50-59
Third Class	40-49
Fail	0-39

The final mark is the mean mark of the unit marks, weighted according to their credit values, calculated to one decimal place. The overall final programme mark is rounded to the nearest integer (up if 0.5 and above or down if below). Where the final summative programme mark is 2% below the next/higher classification (for example 58% or 59%) it falls within the range of the classification boundary and the Board of Examiners will apply the 'secondary rule' as described in the [University Regulations for Taught Programmes](#) which states '*If the final summative programme mark falls within the range of one of the classification boundaries, as set out in 26.12, the higher degree classification will only be awarded if 50% or more of the recorded individual unit marks, weighted by credit point value and year of study, which contribute to the degree classification are achieved at the higher class, otherwise the lower class will be awarded*'.

9. Progress and Discipline

All matters concerning progress and discipline can be found in the Medical School [Rules, Policies and Procedures](#). You are advised to read this very carefully and be aware of the rules and regulations.

10. Code of Good Practice in Teaching and Learning

All students should be aware of the [University's Rules and Regulations](#) that set out student rights and responsibilities. We also have responsibilities to make sure that your time with us is enjoyable and productive and we are committed to maintaining the highest quality of teaching and learning. The programme consists of six units, each with a designated Unit Organiser. It is the responsibility of the Unit Organisers to monitor the student experience during their Unit and the Unit Organisers are the first points of contact for unit specific queries. Throughout the programme you will receive formative feedback to enable you to monitor your own progress and to help you understand what is expected of you. We adhere to the principles of providing feedback to students as set out by the [Higher Education Authority](#)

10.2. Internal Quality Monitoring

We collect feedback from our students and from our teachers about the programme. This is collated and reported annually to the Programme Steering Group and to the Faculty Medical Education Committee. The report will be available on the Centre's website at the end of each academic year. All the teachers on the programme participate in the University's Peer Review of Teaching scheme.

10.3 External Quality Monitoring

The programme is reviewed by the Faculty Quality Assurance Team on a three yearly basis. This review mirrors the QAA review procedure but will also pick up on more local concerns. The University is also involved in external quality assurance procedures and the Departments in which this programme sits may be involved in external reviews. There is in addition an external examiner who provides the faculty with quality advice, this is currently Professor [Therese Hesketh](#), Professor in Global Health, UCL.

One of the most important external bodies for quality assurance is the [Quality Assurance Agency for Higher Education](#). However departments are also visited by [professional and statutory bodies](#).

11. Student Input

11.1 Attendance

It is important that you understand the level of commitment expected of you. Attendance at all seminars is compulsory and attendance at 80% is the minimum requirement for gaining your credits for that Unit.

The University guidelines state that one credit point is broadly equivalent to 10 hours of total student input. This includes teaching, private study, revision and assessments. Therefore a 20 credit point unit will normally require 200 hours of student input. Students are expected to undertake self-directed learning for a greater proportion of the course and you will be given information about pre-reading and preparatory work in each of the Unit Handbooks.

The University wishes to ensure that paid work does not adversely affect the academic progress of its students, while understanding the need to work in order to earn money. It therefore advises that, for full time students, up to fifteen hours a week paid work would be reasonable over the course of the academic year.

11.2 Student Feedback

We value student feedback about the programme. At the beginning of the year students will be asked to elect two student representatives to sit on the Programme Steering Committee. This meets twice in the year. This committee reviews the progress of the programme and recommends any changes that are to be taken forward.

You are expected to complete a brief evaluation of each workshop session. The Unit Organiser will collate your evaluation and feed this into the Annual Programme Review meeting at the end of each academic year. Student representatives will be invited to attend and to contribute to this meeting. The Programme Director will report annually to the Faculty Medical Education Committee.

12. Study and Transferrable Skills

The School for Policy Studies has a useful [study skills manual](#) for students available on line. This contains a wealth of information and should help with essay writing and research. All students may

also find it useful to refer to other resources aimed at enhancing their academic performance and future employability including:

The Student Development Unit, based within the [Student Union](#) which offers a range of free services designed to develop the skills and abilities of students through activities and skills workshops. The [Student Skills Directory](#) which enables students to search for and book on to skills courses in addition to those courses run by the Department.

[Personal Development Planning Made Easy](#)! A downloadable guide for students on learning from experience, enhancing learning through reflection, skills development and goal setting to enhance their future employability. [Information Services and the Computing Centre](#) which includes useful information on Library services, as well as self-help learning. [The Careers Advisory Service](#) (CAS), which provides career-orientated workshops, practice interviews and personal guidance as well as a variety of courses to help develop student skills

13. Help for Students

Details of useful contacts and numbers can be found in the Faculty Undergraduate Handbook. You should also visit the [University Student Help](#) site, for answers to frequently asked questions and links to support and advice.

14. Financial Support

Access to any particular endowments, hardship funds, alumni bursaries or other specific sources of funding, any eligibility criteria, is detailed in the Departmental Handbooks. There is different and specific information in each

Any students experiencing financial difficulties should contact the Student Finance Office for advice and should be directed to their website at <http://www.bris.ac.uk/studentfinance/> for further information and contact details.

15. Additional Costs

No additional costs are anticipated for this programme. However, you may need to purchase some materials, for example, stationery, photocopying or printing cards and unit texts. Overseas field visits to inform the dissertation project may be undertaken in April upon request but must be approved by the Programme Director. Unfortunately there are no funds available within the department to support such fieldwork. The resources available for medical student electives Help with references and such like will of course be available should students wish to explore voluntary sector sources of support.

As part of the University's bursary package, UK undergraduate students in receipt of a full or partial government grant receive a cash contribution of £500 per annum towards the additional expenses of their programme of study. If you are unsure whether you are eligible for such a bursary, the Student Finance Office can provide guidance.

Any students experiencing financial difficulties in meeting essential programme expenses should seek advice from their personal tutor, and/or from the Student Finance Office. The Student Finance Office is available to offer advice and help to all undergraduate students with financial issues.

16. Computers and Software

Students are not required to purchase a computer as part of their study, although many decide to do so. Advice and information on purchasing a computer can be found on the ResNet website. Prices for both laptop and desktop computers start from under £500. The ResNet site also provides information on the ResNet service, which allows students in University residences to access the University network and the Internet from their rooms (currently priced at £55 per academic year). There are a number of [computer centres](#) available around the University precinct, some of which are open on a 24-hour basis.

17. Printing and Photocopying

There are no photocopying facilities available to students in the Centre. All of the University's branch libraries offer photocopying facilities, and it is likely that you will need to do some photocopying as part of your programme. The nearest photocopiers are situated in the Arts & Social Sciences library in Tyndall Avenue. Printing facilities are also available at branch libraries, at the Computer Centre and at many other locations around the precinct. Both printing and photocopying services start from 5p per page. [Further information on printing including locations and charges can be found online.](#)

18. Books and Other Course Resources

All Units offer students a reading list and Unit Leads will advise students wishing to purchase reading materials. Whilst you may wish to undertake some background reading prior to arrival at University, you do not need to buy any books or texts prior to your arrival - unless you have specifically been advised otherwise for a particular unit. Copies of most texts are available at the University's branch libraries.

DVDs, videos, CDs grey literature and other learning resources are all available to students for self-directed learning in the Centre's student resource room. These materials should remain in the resource room to ensure their equal access to all students at all times.

Volunteering

[Refugee Action in Bristol](#) offer opportunities to work alongside refugee volunteers helping support persons who have sought refuge in Bristol. This can be a powerful experience for UK students trying to understand the issues which affect less advantaged fellow global citizens.

19. Prizes

Two prizes are awarded annually, The David Baum Prize for the student with the best performance and the Elizabeth Williams Prize for the student who has contributed most to the course. The prizes are given in the form of books chosen by the students.

Appendix 1 - Useful Contacts for Students

Information on study skills is available from the Open Learning Centre in the Library and from the Students' Union, <http://www.ubu.org.uk/main/activities/StudentDevelopment>

Useful publications include the Student Services Guide
<http://www.bris.ac.uk/currentstudents/ss-booklet.pdf>

- Access Unit (0117) 954 5727 (providing support for Disabled Students)
<http://www.bris.ac.uk/Depts/AccessUnit>
- Accommodation Office: (0117) 954 5740, <http://www.bris.ac.uk/accom>
- Careers Advisory Service: (0117) 928 8221, <http://www.bris.ac.uk/cas>
- Chaplaincy: (0117) 954 6600, <http://www.bris.ac.uk/Depts/Chap>
- International Centre: (0117) 954 5834, <http://www.bris.ac.uk/Depts/IC>
- Nightline: Phone numbers are on students' cards. The web address is
<http://www.bristol.ac.uk/nightline>
- Student Counselling Service: (0117) 954 6655,
<http://www.bris.ac.uk/Depts/StudentCounselling>
- JobShop: (0117) 954 5880, <http://www.bris.ac.uk/cas/jobs>
- Student Finance office: (0117) 954 5887, <http://www.bris.ac.uk/Depts/StdFin>
- Student Health Service: (0117) 973 7716,
<http://www.bris.ac.uk/Depts/StudentHealthService>
- Student Union Advice Centre: (0117) 954 5889, <http://www.ubu.org.uk/support>
- University Day Nursery: (0117) 927 6077, <http://www.bris.ac.uk/Depts/Nursery>

Note: Tutors are encouraged to seek advice from any of the above sources when appropriate. In addition, they are able to consult their Senior Tutor, or equivalent (Pre-Clinical Dean or Clinical Dean in the Faculty of Medicine).

Tutors can also contact the Student Complaints Officer in the Office of the Secretary for advice on matters relating to student complaints.

Appendix 2 – late submission form



Faculty of Medicine & Dentistry

BSc Global Health

Late Submission Form

To be completed, signed, and returned in a *sealed envelope* with student name on the reverse to Miss Pauline Lowrey, Centre for Child and Adolescent Health

All late submission forms will be treated as strictly confidential

**Student
Name:**

**Student
Number:**

Unit Name (Please Indicate below)

**Name of Unit
Lead**

Due Date:

Academic Year:
(e.g 2005/06)

Submitted
Date:

Please explain your reason for late submission (please specify the dates where possible)

(Please include an additional sheet if necessary)

Evidence attached: ☐ Doctors note
☐ 3rd Party letter
☐ Other relevant evidence

Signature of student:

Date:

**Date received by
Programme Office:**

Appendix 3 – extenuating circumstances procedure

Faculty of Medicine and Dentistry Extenuating Circumstances Procedure

The University Examination Regulations require students to disclose any relevant information they wish to be considered as having an impact on their ability to study. The relevant regulation is section 10 of the Examination Regulations, available online:

www.bristol.ac.uk/secretary/studentrulesregs/examregs.html#info

In line with this regulation, the following Extenuating Circumstances Procedure will apply to all students in the Faculty of Medicine and Dentistry:

You must report any personal, family or health problems that you consider have had an adverse affect on your performance to the Faculty Examination Board if you wish these to be taken into consideration.

This procedure applies to events that have affected your performance:

- in a particular assessment or throughout the year,
- caused you to miss an examination, or to fail to submit work

You must also use this procedure to inform the Faculty Examination Board of problems outside of your control that may have occurred during a particular examination which you feel affected your performance. This does not apply however, to events that affect the whole cohort (such as an unexpected interruption in an exam room) as these will be considered by the Faculty Examination Board in the normal course of its discussions.

You must submit your Extenuating Circumstances details by completing the Extenuating Circumstances Form, which is available from the Faculty Office website, www.bristol.ac.uk/fmd. The form must be completed in full and supporting corroborative evidence must be attached. Please note that extenuating circumstances can be rejected on the grounds of a lack of evidence. It is your responsibility to obtain the necessary evidence. Writing “more evidence is available from my doctor” instead of including a doctor’s note is not acceptable.

Examples of documentary evidence include:

- A medical report
- Death certificate
- Letter from a third party (for example a parent, close family member or friend) – for personal problems only

The completed form and evidence must be submitted to the Faculty Office in a sealed envelope marked with your name, year of study and “Confidential - For the attention of the Chair of the Extenuating Circumstances Panel”.

If you are posting your extenuating circumstances submission, you must keep proof of postage and a copy of the submission. If your submission is not received and you are unable to produce the proof of postage, it will not be considered retrospectively.

An Extenuating Circumstances submission may be made in advance of an assessment. It must always be made as soon as possible and **no later than five working days after the assessment(s) concerned and before the sitting of the Faculty Examination Board, whichever is soonest.**

If your extenuating circumstances are ongoing and in your view affect another examination sitting, you must make a new submission for each subsequent sitting. This could simply confirm that earlier circumstances have continued, but it must be accompanied by corroborative evidence

covering the new period. If there is no evidence provided, you will be considered not to have extenuating circumstances for that exam sitting.

Extenuating Circumstances submissions made after the meeting of the Faculty Examination Board will not be considered. Extenuating circumstances that could have been raised before the meeting of the board, but without a valid reason were not raised, will not be considered in the event of an appeal.

Extenuating Circumstances forms are only opened in the event of an exam failure. Otherwise submissions made in sealed envelopes remain sealed. A small Extenuating Circumstances Panel will review the submissions for students who have failed and will make a recommendation to the Faculty Examination Board; no personal details are made known to the Board.

Upon reviewing a submission, the Extenuating Circumstances Panel can decide on the following recommendations to the Exam Board, based on their view of the likely impact the circumstances had on the student's ability to study:

- a) Reject the extenuating circumstances
- b) Reject the extenuating circumstances due to lack of evidence
- c) Acknowledge the extenuating circumstances but to take no further action
- d) Accept the extenuating circumstances and to uncap the student's resit mark – i.e. allow the resit to be treated as a first attempt so the mark is not restricted to 50%
- e) Allow the student a further attempt at assessment (normally only after the resit opportunity)
- f) To request, by Chair's Action, further information from a relevant member of staff (for example unit tutor)
- g) For Final Year Students only – that a student's Extenuating Circumstances are relevant and severe enough to be taken into account when deciding if a student's performance is satisfactory for the award of the BDS. Therefore the Board of Examiners will not allow a student to graduate regardless of Extenuating Circumstances if there are any questions as to the student's competence to practice.

Please note that even if extenuating circumstances have been submitted and are considered as valid, the Board of Examiners does not have the discretion to alter marks agreed by the Internal Examination Board. The possible options of what can happen are listed as a-g above.

REMEMBER:

- An extenuating circumstances submission made after the Faculty Examination Board will not be considered, and any circumstances that could have been raised before the meeting of the Faculty Examination Board, but without a valid reason were not raised, will not be considered in the event of an appeal. Therefore, if you fail and are asked to withdraw from the programme, you may decide to appeal against this decision. If during the appeal process, you are prepared to disclose information about your personal or family problems to explain that failure, the Faculty Examination Board will question why you could not have declared that information through the Extenuating Circumstances process.
- You will find that apart from very exceptional cases, there are very few valid reasons for not formally declaring your extenuating circumstances. Being unaware of the extenuating circumstances procedure, or deciding that you did not wish to, or need to, declare your problems using this procedure, will not be considered a valid reason.
- If you have informed a member of staff (such as a personal tutor, a clinician or any other University staff member) of extenuating circumstances you may be experiencing, you must

still complete an Extenuating Circumstances form and submitted it as described above if you wish the issues to be taken into account by the Faculty Examination Board.

- If you are posting your extenuating circumstances submission, you must keep proof of postage and a copy of your submission.
- You should expect a rigorous approach by the Faculty in the application of the rules of the procedure.

If you are uncertain about any aspects of this procedure and how it applies to you, please contact the Course Director. If unresolved, the Faculty Head of Academic Administration in the Faculty Office.

Appendix 4 –



Extenuating Circumstances Form MB ChB Programme

Important Notes (please read before completing the form):

1. The purpose of this form is to enable you to inform the Board of Examiners of your programme of any extenuating circumstance(s) that may have affected your ability to fulfil the criteria for the award of credit points or to perform to the best of your ability in assessment. Your evidence will be considered by a Special Circumstances Committee and, if relevant, presented to the Board of Examiners in anonymised form. If you do not wish even the Special Circumstances Committee to be aware of the detail of your circumstances, you should speak to your Faculty Office who will make arrangements for you to meet with the Undergraduate or Graduate Dean.
2. If you have already been granted extra time to a deadline for the submission of work or alternative arrangements for examinations, you only need to submit this form if you consider the extenuating circumstances to have had a further adverse effect requiring consideration by the Board of Examiners.
3. Please hand in the completed form to your School / Faculty Office within TWO days (excluding weekends and bank holidays) from the day of your final assessment or examination in the assessment / examination period, though you should notify your school as soon as possible of any circumstance which has impacted upon your learning during the year.
4. All data is collected, processed and disclosed in accordance with the Data Protection Act 1998.

1) Personal Details

Full Name	
Student Number	
Degree Programme	
Faculty	
Year of Study	1 2 3 4 5 <i>(please delete as appropriate)</i>
Email Address	

2) Have you spoken with a relevant member of staff about the circumstances?

YES/NO

Please name one of the following: Faculty Student Advisor, Pre-Clinical Programme Director, Director of Student Affairs or Academy Dean	
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3) I certify that the information provided here is correct to the best of my knowledge.

Student's signature and date	
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4) Nature of Extenuating Circumstance

Please attach any relevant evidence and be as concise as possible.

Certification (in English) from an appropriately qualified medical practitioner should be submitted in support of any medical extenuating circumstance.

5) Nature of impact upon work

Please include details of any lectures, tutorials, labs, private study and other learning activities, together with the details of the assessment(s), such as the type and date of the assessment, which has been affected by your extenuating circumstance.

6) Medical/Other Evidence Attached:

YES / NO (please delete as appropriate)

This form should be returned marked for the attention of **Global Health BSc Course Administrator, Centre for Child and Adolescent Health, School of social and Community Medicine, UoB, Oakfield House, Oakfield Grove, BS26 2BN.**

Appendix 5 - classification

The assessment marks are on a scale 0-100, in accordance with the following convention:

First class	70-100
Second class (i)	60-69
Second class (ii)	50-59
Third class	40-49
Fail	0-39

There are several criteria by which examiners judge the classification appropriate to a candidate's examination script and to continuously-assessed work, and these are set out below. The extent to which these various criteria are satisfied varies between individual candidates: examiners should allow a candidate's strengths in one area to offset shortcomings in another.

First class

Shows sound, thorough understanding and knowledge of the subject, in both breadth and depth. Shows evidence of insight and original thought, with initiative in answering non-routine questions. Displays excellent critical judgement in exposition or in advocating a viewpoint, with a high quality of structure and expression, and with well-chosen illustrative examples. Demonstrates a high level of technical competence, with very few mistakes of any kind.

Second class (i)

Shows sound, thorough understanding and knowledge of the fundamental aspects of the subject, but lacking the breadth or depth exhibited in a first-class paper. Shows evidence of clear thinking, and is able to make a good attempt in answering non-routine questions. Displays good critical judgement in exposition or in advocating a viewpoint, with a good quality of structure and expression, and with relevant illustrative examples, but lacking the focus of a first-class paper. Demonstrates technical competence, perhaps with some shortcomings.

Second class (ii)

Shows understanding and knowledge of most of the fundamental aspects of the subject, but with evidence of only superficial understanding or limited knowledge, perhaps with some misconceptions. Has difficulties in answering non-routine questions. Displays some critical judgement in exposition or in advocating a viewpoint, with an acceptable quality of structure and expression, and with illustrative examples, but with significant deficiencies in some or all of these aspects. Demonstrates some technical competence, but with shortcomings in significant areas of the subject.

Third class

Shows knowledge of some of the fundamental aspects of the subject, but with evidence of little understanding. Has difficulties in starting to answer non-routine questions. Displays little critical judgement in exposition or in advocating a viewpoint, with a poor quality of structure and expression; in general, a poor grasp of the issues involved. Demonstrates limited technical competence, with major shortcomings in significant areas of the subject.

Fail

Shows inadequate understanding and knowledge of the fundamental aspects of the subject. Is unable to answer even routine questions properly. Displays a lack of critical judgement in exposition or in advocating a viewpoint, with an unacceptably poor quality of structure and expression; in general, little grasp of the issues involved. On the evidence of the paper, the candidate would be unable to study the subject at a more advanced level.

Fail (with less than 30)

Shows serious lack of understanding and knowledge of the fundamental aspects of the subject. Is able to answer few routine questions. Displays an absence of critical judgement in exposition or in advocating a viewpoint, with a deplorable quality of structure and expression; in general, scarcely any grasp of the issues involved. Demonstrates little technical competence, with unacceptable

shortcomings in most of the substantial areas of the subject. On the evidence of the paper, the candidate has assimilated little of the subject.

In all cases, the advice and judgement of an external examiner must be fully considered by Boards of Examiners in the Faculty.

Appendix 6 – appeals procedure

Faculty of Medicine and Dentistry Appeals Procedure

Any student considering an appeal must follow the University's procedure for an appeal against a Faculty Examination Board decision as specified in the University's Examination Regulations. These can be found on the following website:

www.bristol.ac.uk/secretary/studentrulesregs/examregs.html#appeal.

Please also note the following:

1. Grounds for Appeal

You must be aware that an appeal cannot be based on either of the following:

- a) disagreement with academic judgement which has been properly applied;
- b) extenuating circumstances that could have been raised before the meeting of the Faculty Examination Board, but without a valid reason, were not raised. Please also see the Faculty Extenuating Circumstances procedure in this Handbook.

Submitting an appeal can be very demanding. It will require a substantial commitment of time and effort so please ensure that you are certain that there is a basis for your appeal. An appeal that only expresses dissatisfaction with the examiners' decision or is based on factors already discussed by the Faculty Examination Board, is very unlikely to be successful.

2. The appeals procedure

The University Examination Regulations (see link above) explain the process for appealing a decision. These must be read thoroughly before submitting an appeal as failure to adhere to these is sufficient grounds for your appeal to be rejected forthwith.

There are two stages to an appeal, the 'local' stage and the 'formal' stage. You should familiarise yourself with these. Advice on the process is available from the Student Complaints Officer in the Secretary's Office. See www.bristol.ac.uk/secretary/grievances for contact details.

Letters should be addressed to the Faculty Dean and sent in hard copy to the Faculty Office, 69 St. Michael's Hill. You are advised to use registered post if you don't deliver the documents in person as failure to submit within time without proof of posting will not be considered as a valid reason.

Your appeal letter must state the following:

- a. The exact permissible grounds (referring to the Examination Regulations)
- b. The outcome sought
- c. Your contact details

Your letter should be accompanied by:

- a. A copy of the letter notifying you of the decision of the Faculty Examination Board
- b. Any documentary evidence you wish the Dean to consider. Note that the Dean will not have had sight of any other documents relating to your progress other than the material you provide. It is your responsibility to provide whatever documentation you wish to be considered; time will not be spent searching for documents you refer to in your appeal letter.

Receipt of your appeal will usually be acknowledged by email.

The majority of appeals are dealt with by correspondence. The Dean may nominate a colleague to undertake the investigation of your appeal. You should not request a meeting with the Dean to discuss your appeal; if the Dean believes it would be useful for the purposes of the investigation, you will be invited to a meeting.

It may take a considerable period of time to investigate your appeal, particularly if there are a number of others received around the same time. Appeal outcome letters are usually sent by post.