



UKMC Assessment Policy

Date	Author	Summary of Changes	Version	Authorised
2025	Head of Assessment Office	Iterations in line with awarding partners	1	Academic Board
26/09/2025	Dr. Zubair Ahmad	Institution-wide standards for taught assessment and Boards of Examiners	2	Academic Board September 2025
Policy Owner	The policy is overseen by the Academic Board. Day-to-day implementation and communication responsibilities are delegated to the Assessment Office.			
Additional Responsible Parties	Everyone governed by this framework must engage with and comply with its provisions.			
Assessment	Relevant Details			
Equality Analysis	1. Completed in June 2025, aligned with UKMC, Equality, Diversity, and Inclusion Policy			
Legal	2. Not Applicable			
Information Governance	3. Reviewed for compliance with UKMC data protection and confidentiality practices			
Consultation	Relevant Contributions			
Relevant External Stakeholders	Input aligned with current validating partners (as listed in Annex A) Assessment policies and procedures, QAA and OfS guidance			
Other (if applicable)	QAA UK Quality Code; Subject Benchmark Statements (as applicable); Frameworks for Higher Education Qualifications (FHEQ).			
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Document Access and Communication				

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Dissemination Plan	The policy will be distributed via communication bulletins, academic team briefings, Course Directors, Course Coordination Committee meetings, Student Success Tutor training sessions, and relevant faculty meetings and events.

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Introduction

This document is UKMC's institutional Assessment Policy. It sets UKMC-wide minimum standards and processes for assessment design, delivery, marking, moderation, feedback, academic integrity, security, and record-keeping across all UKMC-delivered provision. Where a programme is validated or franchised by a partner university (e.g., Canterbury Christ Church University or the University of Wolverhampton), the partner's academic regulations and award rules govern the making of awards and any matters they explicitly cover; in all other respects, UKMC's standards in this policy apply. Any agreed departures for a specific partner are listed in Annex A (Partner University Register), and UKMC will not change assessment type, weighting, timing, or mode on partner-validated provision except via the partner's change-control process. This policy applies to all staff and students involved in assessment at UKMC and should be read alongside the Student Handbook, Academic Integrity Policy, and Records Retention Schedule.

1 Purpose

This policy sets UKMC's institution-wide standards for assessment so that all assessment is fair, consistent, valid, inclusive, and supportive of learning across all UKMC-delivered provision. This Policy must be read alongside the UKMC Academic Regulations. In the event of conflict, the Academic Regulations take precedence. It provides a single point of reference for staff and students, regardless of delivery mode or validating partner.

Specifically, it aims to:

- align assessment with programme and module learning outcomes;
- ensure reliable marking, timely and developmental feedback, and transparent criteria;
- require standardisation and moderation to secure comparability of standards;
- protect academic integrity and assessment security;
- define roles, responsibilities, and escalation routes for assessment decisions;
- provide the basis for monitoring, data-driven enhancement, and compliance with external quality expectations (e.g., OfS, QAA), with partner-specific regulations recorded in Annex A.

2 Scope

2.1 General

This policy applies to all summative assessment on UKMC-delivered modules and programmes, including provision delivered under validation, franchise, or other collaborative arrangements with partner universities.

2.2 Assessment methods in scope

This policy applies to credit-bearing assessment methods including coursework

(essays, reports, case studies), examinations (on-campus or computer-based), in-class tests, practicals/labs, portfolios, vivas/orals, performances, presentations, projects/dissertations, group assessments, placement/work-based assessments, and capstone/major projects.

2.3 Formative assessment

This policy applies to formative assessment where UKMC or a partner specifies timing and/or feedback standards (e.g., required drafts, scheduled practice tasks, feed-forward activities).

2.4 Delivery modes and locations

This policy applies irrespective of delivery mode (on-campus, blended, online, distance), location (UK or overseas), delivery pattern (semester, block, accelerated), timetable pattern (day/evening/weekend), and assessment timing (in-term or formal assessment periods).

2.5 Levels and award types

This policy applies to all taught credit-bearing provision delivered by UKMC (foundation, undergraduate, taught postgraduate), including micro-credentials and short awards where credit is awarded and recorded.

2.6 Collaborative and third-party delivery

Where assessment is delivered on UKMC's behalf by a third party or delivery partner, this policy applies and any partner-specific variations listed in Annex A must also be followed.

2.7 Professional, statutory and regulatory bodies (PSRBs)

Where a PSRB sets additional assessment requirements, those apply alongside this policy. Any PSRB requirements must be documented at programme level and reported through validation/approval processes, and where relevant, noted in Annex A.

2.8 Recognition of Prior Learning (RPL/APL)

This policy applies to the assessment of RPL/APL claims in respect of evaluating evidence and providing feedback. Detailed rules and maximum allowances are defined in the UKMC Academic Regulations.

2.9 People and roles

This policy applies to all staff and associates involved in assessment and to all students registered on UKMC-delivered modules, including visiting students where UKMC delivers the assessment.

2.10 Out of scope

This policy does not apply to non-credit-bearing short courses unless explicitly brought into scope by programme approval or validation documents; admissions or diagnostic tests used for entry or placement; informal practice quizzes with no specified timing/feedback standard; staff development and internal training not leading to academic credit; and research degree examination processes unless stated otherwise.

2.11 Effective date

This policy applies to assessments with submission or examination dates on or after the effective date approved by Academic Board. Where a cohort has been briefed under earlier arrangements, a proportionate transition plan may be approved and recorded by the Programme Lead and Assessment Office.

2.12 Variations and derogations

Any variation from this policy for a programme or module must be justified and approved through the appropriate governance route. Partner-specific variations are recorded in Annex A. Where a partner is silent, this policy applies.

3 Definitions

For the purposes of this policy, capitalised terms have the meanings set out in the table below (the “Definitions”). In the event of a conflict between a UKMC definition and a definition contained in a partner university’s regulations for a partner-validated award, the partner definition prevails for that award. Where a term is not defined, it has its ordinary academic meaning in context.

Term	Meaning at UKMC
Assessment	Any activity used to judge student achievement of learning outcomes.
Summative assessment	Assessment that contributes to a module or programme result.
Formative assessment	Assessment that does not contribute to a result but provides feedback to support learning.
Assessment method	The task type (e.g., essay, report, exam, presentation, portfolio, viva, project, practical/lab, placement).
Assessment mode	How/where the task is delivered (written/oral/practical; on-campus/online/computer-based).
Assessment brief	Document given to students setting out the task, rationale, mapping to learning outcomes, criteria/rubric, word/time limits and tolerance, permitted tools (including AI), submission method, integrity statement, and feedback due date.
Learning outcomes	What a student should know, understand, and be able to do on successful completion of a module or programme.
Criteria/rubric	The published standards used to judge performance against learning outcomes and to determine marks.

Standardisation	Pre-delivery activity to align markers' understanding and application of criteria and standards.
Internal moderation	Post-marking review (sample or second marking) to check consistency and fairness; recorded in a moderation log.
Double marking / second marking	Two independent markers assess the same work with reconciliation of marks; normally used for major projects/dissertations as specified.
Anonymous marking	Marking in which the marker does not know the student's identity, where practicable.
Academic integrity	Students submit their own work and acknowledge sources; breaches constitute academic misconduct.
Assessment security	Measures to protect assessment materials and processes from unauthorised access, tampering, impersonation, or loss.
Extenuating circumstances (EC)	Documented circumstances outside a student's control that significantly affect their ability to submit or perform.
Extension	An approved change to an individual student's submission deadline, normally for short-term circumstances.
Late penalty	A reduction applied to work submitted after the deadline without an approved extension/EC, as specified in the brief/regs.
Word/time limit tolerance	The allowed variance from stated limits (e.g., $\pm 10\%$) where specified.
Learning Support Plan (LSP)	Record of approved reasonable adjustments for a student.
Reasonable adjustments	Changes that enable a student to demonstrate learning without changing learning outcomes or academic standards.
Board of Examiners	Formal partner (or UKMC, where applicable) body that considers and ratifies student results and awards.
Pre-Board of Examiners evidence pack	Documents UKMC collates before results are considered (marksheets, moderation logs, EC/extension outcomes, academic conduct decisions, sample scripts, analyses)
Partner university	A university that validates or franchises UKMC-delivered provision and whose regulations apply to the award.

Partner University Register	Annex listing validating partner universities and providing links to their academic regulations and policies where they differ from UKMC's defaults.
PSRB	Professional, statutory or regulatory body that sets additional requirements for specified programmes or assessments, which take precedence where applicable.
Recognition of Prior Learning (RPL/APL)	Process to assess learning achieved outside the current programme for credit or exemption. Detailed rules are set out in the UKMC Academic Regulations.
Working day	Monday to Friday, excluding UKMC public holidays and published closure days (used for turnaround/deadlines).
Term	Teaching block or equivalent period as defined in the UKMC academic calendar.
Management information (MI)	Quantitative data/reports used to monitor assessment operations (e.g., turnaround, moderation completion, grade distributions).
Similarity screening	Use of originality-checking software (e.g., Turnitin) to support integrity checks; results are indicative, not determinative.
AI/tools (for assessment purposes)	Digital tools, including generative AI; permitted or restricted use must be stated on the assessment brief.

4 Principles

UKMC applies the following principles to all assessment. These principles are binding and inform the detailed standards that follow.

4.1 Alignment and validity

Assessments must demonstrably test the stated learning outcomes at the appropriate level and use methods suited to those outcomes.

4.2 Reliability and fairness

Marking must be criterion-referenced, consistent across cohorts and markers, and secured through standardisation, internal moderation, and external examining.

4.3 Inclusivity and reasonable adjustments

Assessment is designed to be accessible from the outset. Approved adjustments are implemented without lowering academic standards.

4.4 Academic integrity and authenticity

Students must submit their own work and acknowledge sources. Any use of AI/tools or third-party services must comply with the permissions set out in each brief.

4.5 Transparency and predictability

Students receive clear briefs, criteria, deadlines, and feedback timelines in good time. Any changes follow approved change-control procedures and are communicated promptly.

4.6 Proportionality and workload balance

Assessment load must be coherent across a programme and avoid deadline bunching; tasks must be feasible within credit/time expectations.

4.7 Timely, developmental feedback

Feedback must be returned within the published turnaround and provide specific, actionable guidance linked to criteria.

4.8 Security and integrity of processes

Assessment materials and processes are protected against unauthorised access, tampering, impersonation, or loss; identities are verified where required.

4.9 Accurate records and data protection

Assessment records are complete, accurate, retained per the Records Retention Schedule, and processed lawfully.

4.10 Continuous enhancement

Assessment practice is monitored using management information, external examiner input, student feedback, and internal audit, with actions tracked to closure in line with UK quality assurance expectations.

5 Roles and governance

UKMC keeps roles simple: Academic Board sets policy and oversight; Quality and Assessment Offices run assurance and operations; programme/module teams deliver; specialist roles secure exams and integrity; students follow briefs and rules. Escalation routes are clear and time-bound. A detailed RACI sits in Annex B.

Role	Core responsibilities	Decision rights (examples)

Academic Board	Owns this policy; receives termly assessment MI and risk reports; mandates improvements.	Approves policy/derogations; requires corrective actions.
Quality Office	Audits briefs, moderation, feedback; collates external examiner input; monitors action plans.	Flags non-compliance; signs off closure of actions; reports to Academic Board.
Assessment Office	Runs assessment calendar/trackers; coordinates standardisation; monitors turnaround; compiles pre-Board pack; manages records/retention.	Escalates late marks/feedback; halts progression to pre-Board if evidence is incomplete.
Programme Committee & Programme Lead	Balance assessment load; confirm mapping to outcomes; ensure standardisation and moderation are completed.	Approve programme assessment calendars; sign off pre-Board evidence for the programme.
Module Leader	Write/update briefs; deliver assessment; ensure integrity checks; return feedback on time; complete moderation log.	Propose assessment changes (via change-control); confirm module marks ready for pre-Board.
Markers & Moderators	Apply criteria consistently; provide actionable feedback; moderate required samples/double-mark where specified.	Recommend mark changes with rationale in moderation log.
Exams/Assessments Officer & Invigilators	Secure materials; manage identity checks and invigilation; log incidents.	Implement exam procedures; escalate breaches immediately.
Academic Conduct Officer/Panel	Investigate suspected misconduct and record outcomes in accordance with the Academic Integrity and Misconduct Policy.	Determine misconduct outcomes before pre-Board.

EC/Extensions Coordination & Disability Support	Process extensions/ECs in line with the Extenuating Circumstances Policy; issue Learning Support Plans and advise on adjustments in accordance with the Reasonable Adjustments and Inclusive Practice Policy.	Approve extensions/record EC outcomes; require format-equivalent adjustments.
Students	Engage with briefs; submit on time; uphold integrity; act on feedback; follow exam/assessment rules.	Request ECs/adjustments with evidence.

Escalation and pre-Board check

The Assessment Office escalates missing marks, overdue feedback, or incomplete moderation to the Programme Lead. If unresolved within five working days, it escalates to the Quality Office and then Academic Board. An internal pre-Board of Examiners compliance check confirms moderation completion, integrity/EC outcomes applied, and data accuracy before results are referred to the partner Board of Examiners. A detailed RACI for Sections 6–16 is provided in Annex B.

6 Assessment design and approval

6.1 Minimum design standards

Every summative assessment must have an approved assessment brief that includes: task and rationale; mapping to learning outcomes; criteria/rubric; word/time limits and any tolerance; permitted resources/tools (including any AI conditions and disclosure); submission method and file format; academic integrity statement (e.g., similarity screening); feedback method and due date; late penalties and rules on extensions/ECs (as defined in the Extenuating Circumstances and Extensions Policy); accessibility notes where relevant.

6.2 Approval and change-control

Module Leaders draft briefs; Course Directors approve them before release. Any change to assessment type, weighting, timing, criteria, or mode requires documented approval. For partner-validated awards, partner change-control must be followed and approval recorded before implementation. UKMC approval is via Programme Committee/Course Director; Academic Board (or a delegated committee) approves only material changes that alter academic standards or student contractual terms.

6.3 Inclusivity and adjustments by design

Assessments must be designed to be accessible from the outset. Where a Learning Support Plan applies, the brief and delivery must provide an equivalent way for the student to demonstrate the same learning outcomes without lowering standards.

6.4 Security and version control

Drafts and finals of briefs/exam papers must be versioned, stored securely, and released only to authorised staff/students on the stated date. Any reissue or correction must be clearly dated and communicated.

6.5 Publication and briefing

Approved briefs must be published to students at least two teaching weeks before submission or the first teaching activity that relies on the brief, unless a validating partner specifies a different timeline. Students must be briefed on criteria, integrity expectations, permitted tools, and feedback timelines. Material changes will be communicated in line with UK consumer-law expectations (clarity, timeliness, and impact explanation).

6.6 Documentation

Each module keeps a simple assessment file containing the approved brief, rubric, exemplars (where used), standardisation notes, and any approved variations. The Assessment Office holds the current templates and retains final versions per the Records Retention Schedule. These records must be available for external examiners and, where required, external reviewers (e.g., QAA, OfS).

7 Scheduling and workload

7.1 Calendar

The Assessment Office, with Course Directors and Module Leaders, must publish an assessment calendar for each cohort by Week 1 of the term. It shows all summative deadlines, in-class tests, and exams.

7.2 Avoid bunching

Deadlines must be spaced so students are not overloaded. As a working standard, no cohort should have more than two major submissions/exams within any 7-day period. Any exception must be justified and approved by the Assessment Office.

7.3 Minimum notice

In-class tests and timed online assessments must be announced at least 7 calendar days in advance (10 working days is recommended for major in-class tasks).

7.4 Alignment with partner exam periods

Exam dates must align with partner timetables where required. The Exams/Assessments Officer issues a clash-free timetable and resolves any conflicts.

7.5 Changes after publication

Any change to a published deadline or exam time requires documented approval and student notification. At least 5 working days' notice must be given unless there is an emergency; the assessment calendar must be updated the same day.

7.6 Proportionate assessment load

Assessment volume must be proportionate to credit value and level. As a guide, a 20-credit module normally has one or two summative components. Where more than two are proposed, a brief written rationale must be recorded and approved by the Course Director.

7.7 Turnaround and Board timelines

Schedule deadlines so the marking/moderation can be completed and feedback returned within the published turnaround, and final marks are ready for the pre-Board compliance check and partner Board of Examiners.

7.8 Group work milestones

For group assessments, set clear milestones and any individual components or reflections with dates on the calendar.

7.9 Modes, locations, and time zones

Times are stated in the local time of the delivery site. For online timed tasks, give the window and time zone clearly; provide reasonable alternatives where adjustments apply.

7.10 Resits and deferrals

Resit/deferral assessments run in the published windows, following the rules of the validating partner. UKMC publishes dates within 10 working days of results release and updates the calendar accordingly.

7.11 Escalation

Scheduling clashes, late additions, or capacity issues are escalated by the Assessment Office to the Course Director. If unresolved within 5 working days, they are escalated to the Quality Office and, if needed, to Academic Board or the Registrar for decision.

8 Marking standards and turnaround

8.1 Standards

Marking must be criterion-referenced against published learning outcomes and rubrics. Grade/mark descriptors used must be the approved UKMC/partner descriptors for the level of study.

8.2 Rubrics and calibration

Each assessment uses a rubric or clear criteria. Markers must participate in pre-delivery standardisation to align interpretation of standards.

8.3 Evidence of marking

Markers record marks on the approved marksheet, annotate scripts where feasible, and file any marking schemes/model answers. These form part of the module assessment file.

8.4 Feedback quality

Feedback must: (a) reference the criteria, (b) identify strengths, (c) specify improvements, and (d) give forward actions. Audio/video feedback may be used.

Generic cohort feedback is encouraged in addition to individual feedback. Feedback must be timely, developmental, and useful for future assessments.

8.5 Turnaround (coursework)

Individual feedback and provisional marks must be returned within 15 working days of the submission deadline, unless a different timescale is mandated by a partner (see Annex A) or an alternative timescale is approved by Academic Board.

8.6 Turnaround (exams and in-class tests)

Provisional results are released in line with the published timetable and any partner requirements. Where scripts require moderation or second marking, scheduling must allow for this.

8.7 Extensions and ECs

Approved extensions/ECs (as defined in the Extenuating Circumstances Policy) do not automatically reset cohort turnaround. Where individual turnaround will differ materially, the Module Leader informs the student of the expected date.

8.8 Provisional status

All marks provided to students before the partner Board of Examiners are provisional and subject to moderation and Board ratification. This statement must accompany releases on the VLE.

8.9 Consistency checks

Before release, Module Leaders check for internal consistency (criteria applied, arithmetic, transcription). Any changes after release must be logged with rationale.

8.10 Records and retention

Marking records, feedback files, and marksheets are retained per the Records Retention Schedule and made available for moderation, external examiner review, and pre-Board checks.

9 Moderation and standardisation

9.1 Purpose

Standardisation and moderation secure fairness and consistency of marking across markers, cohorts, sites, and time.

9.2 Standardisation (before delivery)

- a) Every assessment must have a short standardisation activity (meeting or asynchronous pack) using the brief, rubric, and at least two annotated exemplars at different grade bands.
- b) Attendees: all assessors. Output: a one-page Standardisation Record (date, attendees, issues agreed, exemplar notes) filed in the module assessment file.

9.3 Internal moderation (after marking, before feedback release)

- a) Complete moderation before feedback is released and before the pre-Board of Examiners check.
- b) Preserve anonymity during moderation where practicable.

9.4 Minimum moderation model (default)

- a) Sample at least 10% of submissions per assessment and Include: all fails, all **firsts/distinctions** (or highest band), a spread across middle bands, and a small sample around the pass boundary (e.g., 40–45, 50–55) where applicable.
- b) If multiple markers are used, sample from each marker.
- c) Small cohorts (≤ 10 submissions): moderate all.
- d) New marker (first two assessments at UKMC) or performance concerns: increase sample to 20% (minimum 10 scripts if available).
- e) Major projects/dissertations: second-mark (double-mark) with reconciliation.

9.5 What moderators do

Check application of criteria, consistency across markers, arithmetic/transcription, feedback quality (criterion-linked, actionable), alignment to learning outcomes, and consistency with approved marking descriptors and any partner requirements. Note decisions on the Moderation Log.

9.6 Outcomes and mark changes

- a) If the moderator agrees with standards, sign off.
- b) If there is systematic leniency/harshness, expand the sample or apply proportionate mark adjustments with clear rationale.
- c) All mark changes require a short written rationale in the Moderation Log and Module Leader sign-off (and Course Director sign-off for global adjustments).
- d) Any changes after students have seen marks/feedback must be communicated to affected students and logged.

9.7 Disagreement route

Where the marker and moderator cannot agree, the Course Director appoints an

independent second moderator. The Course Director records the final decision and rationale.

9.8 Cross-site and parity checks

Where the same assessment runs across sites or cohorts, moderators review a combined sample. Use brief grade-distribution comparisons with prior cohorts (where available) to flag anomalies; statistics inform judgement, they do not replace it.

9.9 Panels for non-anonymous tasks

Presentations, performances, vivas: use panel marking (normally ≥ 2 assessors) with brief notes against criteria. Where reasonable adjustments apply, equivalent arrangements must be documented. Sample moderation still applies to written artefacts/reflections.

9.10 Resits/deferrals

Apply the same model. Small resit cohorts (≤ 10): moderate all. If an assessment design has materially changed, repeat standardisation.

9.11 Timelines

- a) Standardisation completed before students start the task.
- b) Moderation completed within the marking window so that feedback/marks meet the Section 8 turnaround.
- c) Moderation Log and sample scripts are filed before the internal pre-Board of Examiners check.

9.12 Records (kept in the module assessment file)

- Standardisation Record and exemplars (or links)
- Moderation Log (who/what/when/findings/changes)
- Any global adjustment rationale and approvals
- A copy of the marksheets used for the moderated sample

Records must be available for external examiners and Academic Board review.

Note: If a partner prescribes a different moderation model, that variation is listed in Annex A and followed for that award.

10 Anonymous marking

10.1 Default

Written coursework must be marked anonymously wherever practicable.

10.2 Where anonymity is not practicable

Methods such as presentations, performances, vivas, supervision-based projects, and certain practice-based assessments are exempt. In these cases UKMC must mitigate bias through panel marking, second marking, and/or an expanded moderation sample

stated on the brief, and the chosen mitigation must be documented in the module assessment file.

10.3 Operational controls

- a) Submissions use student ID only; names must not appear in file names or on coversheets.
- b) Briefs must instruct students to remove personal identifiers from document properties/metadata.
- c) Marker and moderator access to identities is restricted until marks are ratified by the Board of Examiners, except where necessary for academic conduct investigations or approved adjustments.

10.4 Feedback and enquiries

Feedback is returned without revealing identity to individual markers prior to ratification. Student enquiries are routed via admin/Module Leader until marks are ratified.

10.5 Exceptions and recording

Any exception to anonymity must be approved by the Course Director and recorded in the module assessment file with the chosen bias-mitigation approach.

10.6 Partner variations

Where a partner prescribes a different scope or method for anonymous marking, that variation is listed in Annex A and followed for that award.

11 Late submission, word count, extensions and extenuating circumstances (ECs)

11.1 Late submission (default UKMC rule)

- a) Where a partner has a stated late-penalty rule, that rule applies (see Annex A).
- b) Where a partner is silent, UKMC's default applies: work submitted up to 7 calendar days after the published deadline is accepted but capped at the module pass mark for the award; after 7 calendar days it is recorded as a non-submission.
- c) The submission time is the official timestamp on the VLE/e-submission system. If an approved alternative route is used (e.g., due to outage), the received-time recorded by the Assessment Office applies.

11.2 Technical issues

Students must allow time for upload/formatting. Personal IT problems are not grounds for waiver. Only system-verified platform outages or documented accessibility issues are accepted. Where an outage occurs, the Assessment Office will confirm the alternative submission route and any revised deadline.

11.3 Group assessments

The published deadline applies to the group submission unless the brief specifies

individual components. If a group is late, the late rule applies to the whole group unless the brief provides an individual-component arrangement.

11.4 Word/time limits and tolerance

- a) Unless the brief says otherwise, a $\pm 10\%$ tolerance applies.
- b) Unless stated otherwise, the word count includes all text in the main body (headings, in-text citations, tables/figure captions) and excludes the title page, contents page, reference list/bibliography, appendices, and raw data tables located in appendices.
- c) Over-length: where no explicit penalty is stated on the brief, markers will only consider content up to the stated limit (plus tolerance); content beyond may be disregarded. If the brief states a penalty, that penalty applies.
- d) Under-length: markers apply the published criteria; insufficient coverage may affect marks.

11.5 Extensions (short-term)

Short extensions (normally up to 5 working days) may be granted for short-term circumstances in line with the Extenuating Circumstances and Extensions Policy. Decisions are recorded by the Assessment Office and communicated in writing with a new due date.

11.6 Extenuating circumstances (ECs)

- a) ECs are significant, unforeseeable circumstances outside a student's control that materially affect their ability to submit or perform.
- b) Students may submit an EC claim with evidence via the published route. UKMC records and notifies outcomes; detailed procedures are set out in the Extenuating Circumstances and Extensions Policy. Partner rules apply where specified in Annex A.

11.7 Exams and in-class assessments

- a) Conduct is governed by the UKMC Examination Regulations. Late arrival, absence, or illness is managed under ECs and invigilation rules; partner variations are listed in Annex A.
- b) Any resit/deferral assessments are scheduled in the published windows; UKMC will publish dates within 10 working days of results release.

11.8 Interaction with turnaround

Extensions/ECs do not automatically reset the cohort feedback turnaround (see Section 8). Module Leaders inform affected students of the expected feedback return for individually deferred work where it will differ materially.

11.9 Communication and records

All late, extension and EC decisions are confirmed in writing to the student, logged by the Assessment Office, and filed in the module assessment file. The Assessment Office monitors volumes and patterns and reports termly MI.

11.10 Partner variations

Where a partner prescribes different late penalties, word-count rules, extension/EC processes or outcomes, those take precedence for that award and are listed in Annex A. Where a partner is silent, UKMC defaults in this section apply.

12 Academic integrity and use of AI/tools

12.1 Principle

Students must submit their own work and acknowledge all sources. Using unpermitted assistance, presenting others' work (human or machine) as one's own, or attempting to gain unfair advantage is academic misconduct.

12.2 Examples of misconduct (not exhaustive)

- a) Plagiarism (including self-plagiarism without permission).
- b) Collusion (unauthorised collaboration) or contract cheating (commissioning work).
- c) Fabrication or falsification of data/evidence.
- d) Using generative AI or other tools contrary to the assessment brief, or failing to disclose required AI use.
- e) Unauthorised materials/devices in exams or in-class tests; impersonation.
- f) Interference with assessment systems or records.

12.3 Similarity screening and indicators

- a) UKMC uses similarity screening (e.g., Turnitin) to support investigations. Reports are indicative and not determinative.
- b) Indicators for AI/third-party authorship (e.g., style inconsistency, untraceable references, metadata anomalies) may trigger an investigation but are not, on their own, proof.
- c) Where needed, a short viva/oral verification may be used to establish authorship.

12.4 Use of AI/tools — brief-level rules

- a) Each assessment brief must specify one of these statuses:

- *Prohibited* — No AI/tools beyond standard utilities (spell/grammar check) are allowed.
- *Permitted with declaration* — Specified AI/tools may be used for defined stages (e.g., idea generation, coding scaffolds, data cleaning) and must be declared.
- *Permitted* — Use is allowed within the task design (e.g., prompt-engineering assignments), with any required transparency noted on the brief.

- b) If the brief is silent, the default is Permitted with declaration for low-risk support (planning, outlining, debugging, basic language editing) and Prohibited for full-text generation or content substitution.

c) Where required, the AI/Tools declaration must appear immediately before the reference list or in the front matter as specified on the brief.

12.5 Investigations and outcomes

Investigations and outcomes follow the UKMC Academic Integrity and Misconduct Policy. In summary: suspected cases are referred to the Academic Conduct Officer, students are given a right to respond, and outcomes are determined on the balance of probabilities. Outcomes range from advice/warning to mark penalties or zero marks, depending on severity. Partner regulations take precedence where specified (see Annex A).

12.6 Designing for integrity (minimum requirements)

- a) Assessment briefs must be specific to the module context (datasets, cases, live briefs, reflective components) to reduce opportunities for third-party authorship.
- b) For higher-risk tasks, include an authorship checkpoint (e.g., short viva, in-class element, process log, versioned drafts).
- c) Where AI use is permitted, require transparency and assess judgement/interpretation, not tool output alone.

12.7 Exams and invigilated assessments

Conduct of exams and in-class assessments is governed by the UKMC Examination Regulations. Identity is verified; prohibited materials/devices are controlled; incidents are logged. Online proctoring, where used, must be proportionate and compliant with data protection requirements; students are informed of what is captured and why. Any adjustments required by a Learning Support Plan must be implemented in equivalent form.

12.8 Education and support

- a) Students receive guidance on citation, collaboration, ethical use of AI/tools, and assessment expectations early each term.
- b) Staff receive periodic training on integrity, permissible tool use, designing low-risk assessments, and fair investigation practice.

12.9 Partner variations

Where a partner university prescribes different integrity procedures or sanctions, those take precedence for that award and are listed in Annex A. Where a partner is silent, UKMC standards in this section apply.

13 Assessment security and examinations

13.1 Scope

This section applies to all invigilated assessments (on-campus and online) and to any timed, controlled assessments delivered via digital systems.

13.2 Secure materials

- Exam/assessment papers and briefs must be version-controlled, watermarked (where feasible), and stored in a restricted location.
- Drafts/finals are released only to authorised staff on a need-to-know basis.
- Printing uses secure print or sealed packets; collection/return is logged.

13.3 Access control

- Named owners: Exams/Assessments Officer (operational), Course Director (academic content).
- Access rights are reviewed before each assessment period and removed immediately after use.

13.4 Identity, seating, and attendance

- Photo ID is checked; seating plans and attendance registers are kept with incident logs.
- Late arrivals follow published rules; no entry after the first 30 minutes, unless explicitly permitted by the UKMC Examination Regulations or stated on the brief.

13.5 Invigilation

- Invigilators are briefed on rules, adjustments, and emergency procedures.
- Ratios must be appropriate to venue and risk (as a guide: 1:30; high-risk or multiple rooms: 1:20).
- Walk-throughs are continuous; incidents are recorded in real time.

13.6 Permitted materials and devices

- The brief/instructions list permitted materials (e.g., calculators, statute books). Everything else is prohibited.
- Bags/phones/smart devices are powered off and stored as instructed. Any breach is logged.

13.7 Digital/online exams (CBA)

- Systems are tested; backups, timekeeping, and identity checks are in place.
- Where used, lockdown browsers/whitelists are configured; remote proctoring (if applicable) is proportionate and privacy-compliant, with clear student notices and compliance with the UKMC Data Protection Policy.
- If a platform outage occurs, the Exams Officer implements the fallback (pause/resume, alternative window, or paper substitute) and records decisions.

13.8 Reasonable adjustments

- Adjustments in Learning Support Plans (e.g., extra time, rest breaks, separate room, assistive tech) are implemented in equivalent form and documented on the seating/adjustments sheet.

13.9 Incidents and academic conduct

- Suspected misconduct (unauthorised materials, impersonation, collusion) is documented and referred to the Academic Conduct Officer the same day with evidence.
- Health/safety incidents trigger the emergency script-sealing protocol and, if interrupted, a decision on resit/deferral is made in accordance with Section 11 (Late submission, extensions and ECs).

13.10 Script and data handling

- Collection is silent and orderly; scripts are counted against registers, packaged, and transferred with chain-of-custody records.
- Marked scripts and digital responses are stored securely; access is limited to markers/moderators and audits.
- Retention follows the Records Retention Schedule.

13.11 Post-exam review

- The Exams Officer reports key metrics (attendance, incidents, adjustments delivered, timing issues).
- Any paper errors or systemic issues are logged with corrective actions for the next cycle and reported to the Academic Board (or delegated committee).

13.12 Partner variations

Where a partner prescribes different examination conduct or security standards, those take precedence for that award and are listed in Annex A. Where a partner is silent, UKMC standards in this section apply.

14 Reasonable adjustments

14.1 Principle

UKMC provides reasonable adjustments so disabled students and those with specific learning differences can demonstrate the same learning outcomes without lowering academic standards or changing what is being assessed.

14.2 Learning Support Plan (LSP)

The UKMC Student Support Service (Disability and Learning Support) issues an LSP that sets out approved adjustments and any evidence requirements. LSPs should be shared with the Assessment Office, Course Director, Module Leaders and Exams/Assessments Officer on a need-to-know basis.

14.3 Implementation timescales

Adjustments must be implemented within 10 working days of UKMC receiving the LSP (or sooner where an assessment/exam falls within that window), in compliance with the Equality Act 2010 duty to make reasonable adjustments without undue delay. Where a

timescale cannot be met, the Assessment Office agrees an interim arrangement and records the reason.

14.4 Typical adjustments (illustrative, not exhaustive)

Examples include extra time, rest breaks, separate/quiet rooms, use of assistive technologies, accessible formats, alternative submission formats, and invigilation accommodations. Adjustments change how a student completes or presents work, not what is assessed.

14.5 Alternative assessment arrangements

Where the standard method is not accessible, Module Leaders propose an equivalent method that assesses the same outcomes. The Course Director approves; if a change affects type/weighting/mode on a partner-validated award, partner change-control must be followed before implementation.

14.6 Exams and timed tasks

Exam adjustments (e.g., extra time, assistive tech, separate room) are scheduled by the Exams/Assessments Officer in line with the LSP and recorded on the seating/adjustments sheet. Online/timed tasks must state any adjusted window or settings.

14.7 Student responsibilities

Students should disclose needs early, provide required evidence, and check arrangements before each assessment/exam. UKMC will not penalise students for late disclosure where needs were not reasonably identifiable earlier. Changes during the term must be communicated promptly to Learning Support and the Assessment Office. Where needs were not reasonably identifiable at the time, outcomes are managed via Extenuating Circumstances rather than retroactive adjustments.

14.8 Staff responsibilities

Module Leaders ensure briefs and materials are accessible and that agreed adjustments are in place; the Exams/Assessments Officer implements exam adjustments; the Assessment Office tracks implementation; the Course Director oversees resolution of any issues and reports unresolved cases to the Quality Office for Academic Board oversight.

14.9 Confidentiality and data protection

Adjustment information is shared strictly on a need-to-know basis and stored in line with data-protection requirements. Adjustments should not be identifiable on submitted work or feedback unless necessary.

14.10 Review and effectiveness

Adjustments may be reviewed during the year (e.g., after the first assessment) to confirm effectiveness. Any changes are documented and communicated. Where needs

were not reasonably identifiable at the time, outcomes are managed via Extenuating Circumstances rather than retroactive adjustments.

14.11 Professional/partner requirements

Where a PSRB or partner university prescribes different or additional requirements, those apply for that award and are listed in Annex A. Where a partner is silent, UKMC standards in this section apply.

15 Results, records and retention

15.1 Status of results

All marks released to students before the partner Board of Examiners are provisional and may change following moderation and Board ratification. This status must be stated on the VLE/result notice.

15.2 Internal pre-Board check (UKMC)

Before results go to the partner Board of Examiners, the Assessment Office coordinates a pre-Board check confirming:

- marking completed and logged;
- moderation/second-marking completed with logs and any global adjustments recorded;
- EC/extension outcomes applied;
- academic conduct outcomes applied;
- data accuracy (arithmetic, transcription, module totals);
- required samples and documents present in the assessment file.

The Course Director signs off the module pack; the Assessment Office compiles the overall pre-Board evidence pack and confirms completion to the Quality Office.

15.3 Release to students

Provisional marks/feedback are released within the published turnaround (Section 8).

Final, ratified results are released after the partner Board of Examiners to the timetable set by the partner (see Annex A).

15.4 Queries, corrections and appeals

- Queries/corrections (provisional stage): Students raise factual errors (e.g., missing component) via the Module Leader within 5 working days of release; corrections are logged by the Assessment Office.
- Academic judgement: Requests to “re-mark” are not considered outside the moderation process.
- Appeals after ratification are processed under the UKMC Academic Appeals Policy and partner regulations (see Annex A).
- Complaints: Processed under UKMC’s complaints procedure; academic judgement is not revisited via complaints.

15.5 Access to scripts and feedback

Students may view their own feedback and, where permitted, their scripts. Where the partner prescribes a script access policy, that policy applies (Annex A). Any sharing respects confidentiality and data protection.

15.6 Data integrity and security

Marks are entered once into the approved system, with an auditable trail of any amendments (who/what/when/why). Backups follow IT policy; access is role-based (need-to-know) and removed when no longer required.

15.7 Records kept (module assessment file)

The Module Leader maintains: approved brief and rubric; standardisation record/exemplars; marksheet; moderation log and any global-adjustment rationale; sample scripts/artefacts; cohort feedback; EC/extension outcomes list (IDs only); academic conduct outcomes (IDs only). The Assessment Office holds the pre-Board evidence pack.

15.8 Retention

Assessment records are retained in line with the UKMC Records Management and Retention Schedule. As a guide (unless a partner/PSRB specifies differently):

- scripts/artefacts and feedback: 1 year after ratification;
- moderation logs and marksheets: 3 years;
- pre-Board packs and Board records: 6 years.

Where a partner or PSRB mandates a longer period, that takes precedence (Annex A). Destruction must be secure and recorded.

15.9 Data protection and confidentiality

Assessment data are processed lawfully and proportionately. Personal data in assessment records are shared only on a need-to-know basis. Subject access and information requests are handled through UKMC's data protection procedures.

15.10 Amendments after release

If an error is identified after provisional release or after ratification, it is corrected promptly, the change is logged with rationale, and affected students are notified in writing. Material errors are reported to the Assessment Office, Quality Office, the partner, and the Board of Examiners. Minor post-board corrections may be approved by the Chair's action and reported at the next board, to avoid recalling a full board for typographical errors.

15.11 Partner variations

Where a partner prescribes different processes for results release, script access, record types, or retention periods, those take precedence for that award and are listed in Annex A. Where a partner is silent, UKMC standards in this section apply.

16 Monitoring, data and enhancement

16.1 Purpose

UKMC uses management information (MI) and evidence to monitor assessment quality, identify risks, and drive continuous improvement.

16.2 Core MI indicators

The Assessment Office maintains a standard MI set for all cohorts and modules:

Indicator	Definition	Source/Owner
Turnaround compliance	% of assessments where feedback returned within the published turnaround	Assessment Office (from VLE logs); Module Leader confirms
Moderation completion	% of assessments with moderation complete and logged before pre-Board	Assessment Office; Module Leader
Grade distributions	Band profile vs prior cohorts/sites; flags for anomalies	Assessment Office; Course Director reviews
Late submissions	Volume and rate; by module and cohort	Assessment Office
ECs/extensions	Volumes, outcomes, time to decision	Assessment Office; EC coordination
Academic conduct	Case volumes, types, outcomes, time to conclusion	Academic Conduct Officer
Adjustments delivered	LSP adjustments implemented on time	Exams/Assessments Officer; Learning Support
Student queries/complaints	Themes and response times (assessment-related)	Assessment Office; Complaints Lead
External examiner actions	Open/closed actions and deadlines	Quality Office
Equality indicators	Differential outcomes (where data available)	Quality Office (with data protection controls)

16.3 Reporting cadence and responsibilities

a) *Module level:* Module Leaders review MI after each assessment and at the end of term, recording actions in the module assessment file.

- b) *Course level*: Course Directors review termly MI with Module Leaders, confirm actions, and sign off readiness for the pre-Board stage.
- c) *Institutional*: The Assessment Office compiles a termly report to Programme Committees and Academic Board, including risks, trends, and required actions. The Quality Office adds audit findings and external examiner updates.

16.4 Enhancement actions

Actions must be specific, time-bound, and owned. The Assessment Office tracks action status; the Quality Office verifies closure. Where actions affect assessment design or mode on partner-validated awards, change-control is followed before implementation.

16.5 External examiners

External examiner comments and recommendations (received via partners) are logged by the Quality Office, assigned to Course Directors/Module Leaders, and tracked to closure. Progress is reported termly and through annual monitoring.

16.6 Student voice

Student feedback (module evaluations, focus groups, SSLCs, complaints themes) is considered alongside MI. Course Directors summarise changes made “in response to student feedback” on the VLE or in the next assessment brief where relevant.

16.7 Risk management

Assessment risks (e.g., systemic late turnaround, recurrent integrity issues, high EC rates, equipment/system failures) are recorded on the Academic Risk Register with mitigations and owners. Material risks are escalated to Academic Board.

16.8 Audit and assurance

The Quality Office conducts periodic audits of assessment briefs, feedback samples, moderation logs, and pre-Board packs. Findings are graded (e.g., compliant/minor issues/material issues) with deadlines for remediation.

16.9 Annual monitoring

At year end, Course Directors produce a concise assessment summary (key MI, external examiner actions, student feedback themes, equality considerations, improvements made/planned). The Quality Office synthesises these into the institutional annual monitoring report for Academic Board and partners as required.

16.10 Partner variations

Where a partner prescribes additional monitoring requirements or formats, these are listed in Annex A and followed for that award. Where a partner is silent, UKMC standards in this section apply.

17 Equality Impact and Data Protection

17.1 Principle

Assessment must be fair, inclusive and compliant with data protection law. UKMC designs and operates assessment in ways that avoid unnecessary disadvantage and protect personal data.

17.2 Equality impact

Before introducing or materially changing assessments (including systems or proctoring), the Course Director considers equality impacts (protected characteristics, digital access, caring/working patterns) and records mitigations. For high-impact changes, the Quality Office may require a short Equality Impact Assessment note, reviewed by the Academic Board.

17.3 Inclusive design

Assessments are designed to be accessible from the outset (clear language, alternative formats where relevant, varied methods across programmes). Reasonable adjustments are provided per Section 14.

17.4 Data protection basics

Assessment data are processed lawfully, fairly and transparently in line with UKMC's Data Protection Policy and privacy notices. The lawful basis is normally contract (student-institution), but may also include legal obligation (e.g., statutory returns), legitimate interests (e.g., academic integrity), or public task (where applicable).

17.5 Special category data

Where assessment involves special category data (e.g., disability evidence for adjustments; health evidence for ECs), an appropriate Article 9 condition is identified, access is strictly need-to-know, and records are kept separately with additional safeguards.

17.6 Third parties and processors

Where assessment uses third-party systems (e.g., VLE, similarity checking, e-assessment, remote proctoring), UKMC ensures contracts and data protection terms are in place, including purpose, security, retention, and sub-processor controls. Students are informed via privacy notices.

17.7 Security measures

Role-based access, strong authentication, encryption in transit and at rest (where supported), audit logs for amendments, and secure storage/transfer of scripts and marks are required. Access is removed when no longer needed.

17.8 Retention and rights

Retention follows the Records Retention Schedule (Section 15). Students' data rights (access, rectification, restriction, objection, and where applicable portability/erasure)

are respected; some rights may be limited where necessary to maintain academic records or integrity. Requests are handled through UKMC's data protection process.

17.9 DPIA triggers

A Data Protection Impact Assessment is completed (or reviewed) for higher-risk processing, including new remote proctoring, biometric/ID verification tools, extensive learning analytics, or new AI-based assessment systems.

17.10 International transfers

If assessment data are transferred outside the UK, appropriate safeguards (e.g., UK IDTA/approved SCCs) are used and reflected in vendor contracts and privacy notices.

17.11 Documentation and oversight

The Assessment Office documents assessment data flows (what, why, where, who). The Quality Office and Data Protection Officer (or equivalent role) oversee compliance and advise on EIAs/DPIAs. Compliance reports are reviewed annually by the Academic Board as part of the institutional monitoring cycle.

17.12 Partner/PSRB variations

Where a partner university or PSRB mandates additional equality or data protection requirements for an award, those apply and are recorded in Annex A. Where a partner is silent, UKMC standards in this section apply.

18 Policy ownership, review and version control

18.1 Ownership and leadership

Owner: Academic Board (overall oversight and external reporting). Operational lead: Assessment Office. Quality assurance: Quality Office.

18.2 Approval and effective date

This policy takes effect from the date approved by Academic Board and applies to assessments with submission/exam dates on or after that date (see Section 2.11).

18.3 Review cycle

Reviewed annually in July (or sooner if regulations, partner requirements, or PSRB rules change). Proposed changes are drafted by the Assessment Office, consulted with Course Directors, Quality Office, and student representatives (via Academic Voice/SSLCs), and approved by Academic Board.

18.4 Interpretation and queries

The Assessment Office provides authoritative guidance on interpreting this policy and maintains templates and SOPs in the Quality & Assessment shared folder.

18.5 Deviations and derogations

Any deviation must be justified, approved via the appropriate governance route, and

recorded: partner-specific variations in Annex A; programme/module-specific derogations in programme documentation.

18.6 Version control and change log

A version table is maintained and published at the end of the document (Version, Date, Summary of changes, Approved by, Effective from, Supersedes)

19 Related documents

This Assessment Policy should be read in conjunction with the following UKMC and partner documents. All documents are approved by Academic Board (unless otherwise stated) and published on the UKMC website and student portal.

UKMC Core Policies

- UKMC Academic Regulations
- UKMC Assessment Policy (this document)
- Academic Integrity and Misconduct Policy (with Academic Conduct Procedures)
- Extenuating Circumstances and Extensions Policy
- Academic Appeals Policy
- Student Complaints Policy
- Learning Support and Reasonable Adjustments Policy
- Student Conduct and Disciplinary Policy
- External Examiners Policy
- Boards of Examiners Code of Practice / Terms of Reference
- Records Management and Retention Schedule
- Data Protection Policy and Privacy Notices (assessment systems)
- Equality, Diversity and Inclusion Policy

Student-facing documents

- UKMC Student Handbook (assessment section)
- Examination and Assessment Conduct Regulations
- VLE/e-submission user guides (staff and students)

Operational tools and templates

- Assessment brief template

- Rubric template
- Standardisation record template
- Moderation log template
- Pre-Board checklist

Partner documents

- Canterbury Christ Church University (CCCU) Academic Regulations and Student Handbook
- University of Wolverhampton (UoW) Academic Regulations and Student Handbook
- [Additional partner documents as new partners are approved; links updated accordingly]

Annexes to this Policy

- Annex A: Partner University Register
- Annex B: Roles & Responsibilities (RACI)
- Annex C — Assessment SOP Pack (Pointer): The operational SOP Pack (assessment briefs, moderation, extensions/ECs, academic integrity investigations, examinations, records, and pre-Board) is maintained by the Assessment Office in the Quality & Assessment shared folder. SOPs are operational documents and may be updated without re-issuing this policy; the policy remains the authoritative standard.

20 Annex A: Partner University Register

For all validated and franchised awards delivered by UKMC on behalf of partner universities, the awarding university's academic regulations and associated frameworks apply. UKMC ensures that students and staff are directed to the relevant documents.

1. Current Partner Universities
2. Canterbury Christ Church University (CCCU)
 - *Academic Framework and Regulations*
 - Available at: <https://www.canterbury.ac.uk/quality-and-standards/academic-framework>
3. University of Wolverhampton (UoW)
 - *University Academic Regulations*

- Available at: <https://www.wlv.ac.uk/about-us/governance/legal-information/academic-regulations/>

4. Future Partners

Where UKMC enters into further partnerships, the awarding university's academic regulations will be added to this register with the relevant link.

5. Relationship with UKMC Policies

- For UKMC-delivered programmes that are not validated by a partner, the UKMC Academic Regulations and Assessment Policy apply in full.
- For partner-validated awards, the awarding university's regulations take precedence in case of conflict.
- UKMC specialist policies (e.g., Academic Integrity, Extenuating Circumstances, Appeals) will reference and link to the equivalent partner policy for students enrolled on those awards.

21 Annex B: Roles and RACI

Legend:

- **R** = Responsible (does the work)
- **A** = Accountable (final decision/owns outcome)
- **C** = Consulted (two-way input) **I** = Informed (kept up to date)

This RACI sets out the distribution of roles for UKMC assessment operations, ensuring clear accountability, escalation, and compliance.

22 Annex C : Informative Crosswalk to OfS B-conditions (Non-normative)

Status. This annex is informative. It does not create additional obligations and does not replace the OfS Regulatory Framework. It shows where this Assessment Policy supports compliance with the OfS B-conditions most relevant to assessment (notably B1, B2, B4).

How to use. UKMC maintains primary evidence in programme documentation, Academic Regulations, partner regulations (Annex A), and operational records. This crosswalk simply provides line-of-sight to sections of this Policy.

B1 — Academic experience

Students receive a high-quality academic experience and resources to succeed.

- Clear information and predictability (briefs, criteria, deadlines, change-control): 6.1–6.6, 7.1–7.11, 8.4, 15.1, 15.3
- Inclusive assessment by design; reasonable adjustments: 4.3, 6.3, 14
- Assessment security and orderly conduct (reducing detriment): 13
- Timely, developmental feedback: 4.7, 8.5–8.6
- Student voice and responsiveness (evaluation themes, changes communicated): 16.6
- Transparent handling of extensions/ECs: 11.5–11.7, 11.9–11.10

B2 — Quality

Courses are well-designed, delivered effectively, and quality is maintained/enhanced.

- Governance of assessment quality (roles, responsibilities, escalation, RACI): 5, Annex B
- Assessment design aligned to learning outcomes; approval & change-control: 6.1–6.6
- Reliability and consistency (standardisation, internal moderation, second-marking): 4.2, 9.1–9.11
- Data integrity, records, retention for audit and Boards: 15.6–15.8, 15.10
- Monitoring & enhancement (MI set, reporting cadence, audits, annual monitoring): 16.1–16.10
- External examiner engagement and action tracking: 16.5
- Equality, diversity & data protection controls: 17.1–17.12

B4 — Assessment and awards

Assessment is effective, valid, reliable; awards are credible and standards are secure.

- Validity & alignment to outcomes; use of descriptors and rubrics: 4.1, 6.1–6.3, 8.1–8.3
- Reliability controls (standardisation, sampling incl. fails/highest bands and parity checks; double-mark where specified; moderation logs): 9.2–9.6, 9.8–9.11
- Academic integrity & authenticity (AI/tool rules, investigations): 4.4, 12.1–12.9
- Assessment security (exam materials, invigilation, identity checks, digital exams, chain of custody): 13.2–13.11
- Boards of Examiners processes (provisional status, pre-Board evidence pack, release of ratified results, corrections): 15.1–15.4, 15.10
- Partner awarding-body regulations (where applicable) and UKMC Academic Regulations referenced: Annex A, Section 19

Assurance note. Evidence for this crosswalk includes approved assessment briefs/rubrics (6), standardisation records and moderation logs (9, 15.7), MI reports and audit findings (16), exam incident logs and chain-of-custody records (13, 15), Board papers and outcomes (15), and equality/data-protection documentation (14, 17).

Review. This annex is updated alongside the policy review cycle (18.3) or sooner if OfS requirements or UKMC processes change.