

MDM158 Acute and Emergency Paediatrics

Module Handbook

Monday 13 – Friday 17 June 2022

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Introduction

The overall aim of this module is to equip students with an advanced level of understanding of challenging paediatric conditions and their organisational and service delivery contexts. This will include elements of state of the art, evidence-based clinical practice with aspects of service design. This module aims to be multi-professional, innovative and transformational whilst furthering knowledge in acute and emergency paediatrics.

Aims

This module aims to equip students with an advanced level of clinical knowledge blended within the organisational/service delivery context of acute paediatric care. It aims to:

- Encourage students to consider and apply multi-professional working
- Deliver a blend of clinical material with that of service delivery

Learning Outcomes

Upon successful completion of the module, students should be able to:

- Demonstrate a comprehensive knowledge of why children die in the UK
- Critically evaluate the assessment and management of life-threatening emergencies
- Apply knowledge and skills to design an appropriate management plan for an acute Paediatric issue
- Demonstrate systematic understanding of different models of care in acute paediatrics
- Articulate awareness of the complex and unpredictable issues involved in the provision of high dependency Paediatric care
- Present in-depth working knowledge of the issues involved in patient safety and human factors

Module Structure and Timetable

MDM158 Acute and emergency Paediatrics

We are fortunate to have a broad range of experienced Multi-disciplinary team lecturers from throughout Surrey, Sussex and Hampshire covering a broad range of disciplines and specialties. They have each provided references and supporting materials to help broaden your understanding which will also be available through My Studies. The module lead, Dr Glenday and course principal Dr Patel will be available throughout the week to help ensure the program runs smoothly and to stimulate engagement.

Please note: the timetable is subject to change. For the most up to date version of the timetable and module handbook, please refer to the MDM158 module area on My Studies.

Day one: Monday 13 June 2022

Day one: *Monday 13 June 2022*

Time	Session title	Speaker
09:15- 09:30	Welcome and module introduction	Dr Ellie Glenday
09:30 – 10:30	Challenges of Paediatric Intensive Care (PICU) in the UK	Dr Andrea Cooper
11:30 – 12:30	Diabetic Ketoacidosis (DKA) Discussion	Dr Shankar Kanumakala
12:30- 13:00	Q&A on Shock/Paediatric Emergency Medicine	Dr Fran Blackburn
13:00 – 14:00	Lunch	
14:30 - 16:00	Designing mental health services for Young People	Dr Lucy Allsopp
16:00 – 16:30	Evaluation and summary	Faculty Team

Day two: Tuesday 14 June 2022

Time	Session title	Speaker
09:00- 10:00	Stroke- Acute and Emergency Paediatrics	Dr Luigi D'Argenzio
10:00 – 10:30	Break	
10:30 – 11:30	Group work on modifiable factors in Paediatric emergencies – how to design care around these. Dr E Glenday & Dr K Patel	Dr E Glenday & Dr K Patel
11:30 – 12:00	Debrief	
12:00 – 13:00	Lunch	
13:00 – 14:45	Group work: creating information resources for YP and their families on meningitis/traumatic brain injury/status epilepticus	
14:45 – 15:00	Break	
15:00 – 16:00	How to provide eating disorder services in acute Paediatrics	Dr Jon Rabbs
16:00 – 16:30	Evaluation and summary	Faculty Team

Day three: Wednesday 15 June 2022

Time	Session title	Speaker
09:30 – 10:00	Assignment discussion	Dr E Glenday & Dr K Patel
10:00 – 11:00	Human Factors	Dr Katy Barnes and Dr Cassie Lawn
11:00 – 11:15	Break	
11: 15 – 13:00	Workshop on Human Factors	Dr E Glenday & Dr K Patel
13:00 – 14:00	Lunch	
14:00 – 14:30	Q&A on Intracranial complications of ENT issues	Dr Alice Lording
14:30 – 15:00	Break	
15:00 – 16:00	NIV Workshop	David Phillips
16:00 – 16:30	Evaluation and summary	Faculty Team

Day four: Thursday 16 June 2022

Time	Session title	Speaker
09:30 – 11:00	Workshop on holistic care: Group work on business cases for adapting acute paediatric services to deliver holistic care	Dr Ellie Glenday
11:00 – 11:30	Break	
11:30 – 12:30	Debriefing in acute Paediatrics & WORKSHOP	Dr Ellie Glenday
12:30 – 13:30	Lunch	
13:30 – 15:00	QI projects	Dr Oli Rahman
15:00 – 16:00	Workshop: Designing a QI project	Dr Ellie Glenday
16:00 – 16:30	Evaluation and summary	Faculty Team

Day five: Friday 17 June 2022

Time	Session title	Speaker
09:00 – 10:00	Discussion on RCA/London Protocol	Dr Iain Macintosh
10:00 - 11:30	Discussion: patient safety	Jo Habben
11:30 – 12:00	Break	
12:00 – 13:00	WORKSHOP: How to design team and working environment to manage Paediatric resuscitation in context of human factors.	Dr Eleanor Glenday
13:00 – 14:00	Lunch	
15:15 – 16:00	Final workshop	Faculty Team
16:00 – 16:30	Evaluation and summary	Faculty Team

Teaching Staff

Name	Title
ALLSOPP, Dr Lucy	CAMHS Consultant, Sussex Partnership NHS Foundation Trust
BARNES, Dr Katy	Consultant Neonatologist, Trevor Mann Baby Unit, Brighton, University Hospitals Sussex
BLACKBURN, Dr Fran	Paediatric Consultant with emergency medicine, Worthing Hospital, University Hospitals Sussex
BUCKLEY, Dr Ann-Marie	Consultant Paediatrician with special interest in epilepsy, St Richards Hospital, Chichester, University Hospitals Sussex
COOPER, Dr Andrea	Paediatric Intensive Care (PICU) consultant at Birmingham Children's Hospital
D'Argenzio, Dr Luigi	Consultant Paediatric Neurologist at St George's Hospital, London
EDMONSON, Amy C.	Novartis Professor of Leadership and Management, Harvard Business School
GLENDAY, Dr Eleanor	MDM158 Acute & Emergency Paediatrics Module Lead Paediatric Consultant with special interest in epilepsy, Worthing Hospital, University Hospitals Sussex
HABBEN, Jo	Head of Clinical Governance and Patient Safety, University Hospitals Sussex
KANUMAKALA, Dr Shankar	Paediatric Consultant, Royal Alexandra Children's Hospital, University Hospitals Sussex
LAWN, Dr Cassie	Consultant Neonatologist, Trevor Mann Baby Unit, Brighton, University Hospitals Sussex
LORDING, Dr Alice	Consultant Paediatric Neurologist, Southampton General Hospital
MACINTOSH, Dr Iain	Paediatric Intensive Care Unit (PICU) Consultant, Southampton General hospital
PATEL, Dr Kamal	MSc Paediatrics & Child Health Course Lead Paediatric Consultant, Royal Alexandra Children's Hospital, UHS
PHILLIPS, David	non-invasive ventilation (NIV) therapy
RABBS, Dr Jonathan	Consultant Paediatrician, Lead for Eating Disorders, Worthing hospital, University Hospitals Sussex
RAHMAN, Dr Oli	Paediatric Consultant, Royal Alexandra Children's Hospital, UHS

Teaching and Learning Strategies

Teaching methods will encompass:

- Pre-recorded lectures
- Interactive live group online Microsoft Teams sessions
- Group Discussion
- Workshops
- Individual project work
- Self-directed learning
- Reflection
- Audio-visual and e-learning
- “TED” talks

Students will be expected to support their learning by the use and critical appraisal of primary sources of information such as peer-reviewed research articles and appropriate websites.

Course materials, including recorded lectures and reading lists will be [available on My Studies \(Student Central\)](#).

Study Support

Assistance with essay writing is available from Royal Literary Fund (RLF) fellows. These writers offer 1-2-1 writing support sessions on how to improve writing skills. To book an appointment with an RLF fellow, [please visit the University of Sussex Skills Hub](#) page.

Alternatively, the [Royal Literary Fund website](#) offers useful information and resources on essay writing.

Academic skills for students at University of Sussex

For practical help on academic English language skills, reading, research and study techniques, the University of Sussex offers workshops, tutorials and events. For more information and to book a place, [please visit the University of Sussex Skills Hub](#) page.

Writing and Advisory Skills

The University of Brighton offers an online Writing Advisory Service that provides personalised feedback on written work. Details can be found via the [Study Skills at The Library](#) page.

Library Services

BSMS students have access to the University of Sussex Library as well as the University of Brighton Falmer Library, where key textbooks for the course will be held - here is the [BSMS Library Link](#). You will be registered to use the Universities' computing facilities and receive a library card. A username and password will provide you with access to online resources to the University of Brighton – [My Studies](#). To access Sussex Library online resources and certain reading list items follow instructions [here](#).

BSMS librarians offer training on finding and retrieving information, literature searching, online referencing, and can purchase books for your specific research area where possible. For further information please see the library [induction video](#). Please contact us via the email below if you have any issues with accessing online library resources. To make an appointment or for general enquiries, email BSMS Librarians, Katie Street and Annemarie Frank on: bsmslibrary@bsms.ac.uk.

The BSMS library catalogue SABRE can be accessed via My Studies. See also Online Resources which link to databases and authoritative websites in the fields of medicine, pharmacy, nursing and other subject areas.

My Studies will be the main method of communication for any changes to course location or timetable. Please check the site on a regular basis. Examples of assignments that achieved a distinction will be available for you to read on My Studies.

Reading List

You will be expected to access the considerable stock of journals held by University and Hospital Libraries. You may also use the University Computer Centre to access information on the Internet. Reading for the assignment will be covered in specialist journals related to the students' fields of study as well as texts relating to research methods. Examples of key texts can be [found under the Reading List section within the My Studies MDM158 module area](#).

Module Assessment

The assessment comprises of two components:

1. **Essay Component** (up to 2,500 words) – you are to present two case issues drawn from the module content. One of these will focus on the clinical management of an acute paediatric issue, whilst the second will include a discussion of the organisation and provision of services within an acute paediatric situation (**75% weighting**). Essays are to be **submitted electronically via the Turnitin portal on My Studies**.
2. **Video Component** – you are to submit a 10-minute video where you will need to describe an advancement in acute paediatrics in the last 5 years which has changed your practice (**25% weighting**). Videos are to **submitted via the My Studies video portal on My Studies**.

The deadline for submitting both components is Tuesday 6 September 2022 by 4:30pm.

Anonymous Marking

The essay will be marked anonymously in line with University regulations, in place since academic year 2019/20. To ensure the robustness of this process, please do not include your name or student number anywhere in the document (including the file name). You should save your work with the title **MDM158**. Turnitin identifies your submission with a submission ID (not by name or student number).

Essay

We ask that before starting any assignment you read and familiarise yourself with the marking criteria, which can be found on the following pages. All University of Brighton Written assessments are marked online against the criteria.

The total word count for the essay is up to 2,500 words and must not be exceeded. Work will be marked up to the specified word limit; any words beyond this limit will not be marked. Tables and figures are not included in the main word count, but should have a maximum of 500 words in total and words beyond this limit will not be marked.

Referencing, bibliography and appendices are not included in the word count. Please show your word count on the front cover. As above, please do not include your name or student number anywhere in the document (including the file name).

Marking Grades for Assignment

The following schema is an indicative framework for the assessment of assignments. Course participants will be given a percentage mark, but the Division places great emphasis on individual written feedback, often supplemented by face-to face discussion of the work with the course tutor. Assignments are internally moderated and a sample sent to the external examiner for quality assurance purposes. **Please note the pass mark for all modules is 50%.**

Indicative percentage mark	0 – 39%	40 – 49%	50 – 59%	60 – 69%	70 – 79%	80 – 100%
University Standard	Fail	Fail / Refer	Pass	Merit	Distinction	High Distinction
Learning Outcomes & Assessment Criteria	Most have not been met	One or more have not been met	All met	All met fully at a good or very good standard	Achieved to a high standard and many at an exceptionally high level	All achieved to an exceptionally high level
Understanding and Exploration	Very limited understanding and/or exploration of major ideas with little or no insight and/or minimal research	Limited understanding and/or exploration of major ideas with very little insight and/or minimal research	Sound understanding and exploration, some insight and/or appropriate research	Good to very good understanding and exploration, some insight and/or thorough research. Some capacity to undertake further research	In-depth understanding, exploration, insight and/or research	Exceptional display of understanding, exploration, insight and/or research
Accuracy & Potential for Publication	Several significant inaccuracies and/or misunderstandings – minimal or no evidence of knowledge and	Some significant inaccuracies and/or misunderstandings – gaps in understanding and/or knowledge	Some minor inaccuracies and/or misunderstandings – small but not significant errors	No significant inaccuracies, misunderstandings or errors	Potential for publication / exhibition and/or ability to undertake further research	Potential for publication / exhibition and/or ability to undertake further research

Indicative percentage mark	0 – 39%	40 – 49%	50 – 59%	60 – 69%	70 – 79%	80 – 100%
University Standard	Fail	Fail / Refer	Pass	Merit	Distinction	High Distinction
	understanding of the subject					
Adherence to Assessment Tasks	Insufficient attention paid to several of the assessment criteria and some serious deviations from the specifications for the assessment task	Insufficient attention paid to some of the assessment criteria and some significant deviations from the specifications for the assessment task	Some minor deviations from the specifications for the assessment task, including word limit where appropriate	The specifications for the assessment task, including word limit where appropriate, have been adhered to	All specifications for the assessment task, including word limit where appropriate, have been adhered to	All specifications for the assessment task, including word limit where appropriate, have been adhered to
Organisation, Structure and Presentation	The work is too descriptive, poorly structured and the standard of presentation, including any subject-specific conventions where appropriate, is inadequate	The work is too descriptive, somewhat disorganised and unclear and the standard of presentation, including any subject-specific conventions where appropriate, is inadequate	The work is suitably organised and the standard of presentation, including any subject-specific conventions where appropriate, is sound	The work is well organised, coherent and the standard of presentation including any subject-specific conventions where appropriate, is good	The organisation, structure and standard of presentation of the work, including any subject-specific conventions where appropriate, are excellent throughout	The organisation, structure and standard of presentation of the work, including any subject-specific conventions where appropriate, are exemplary throughout

Indicative percentage mark	0 – 39%	40 – 49%	50 – 59%	60 – 69%	70 – 79%	80 – 100%
University Standard	Fail	Fail / Refer	Pass	Merit	Distinction	High Distinction
Communication to intended Audience	No evidence of effective communication of work	Very little evidence of effective communication of work	Little evidence of effective communication of work	Evidence of effective communication of work	Evidence of effective communication of work to specialist and non-specialist audiences	Evidence of effective communication of work to specialist and non-specialist audiences
Argument & Evidence	The work lacks supporting evidence or argument	Development of an argument is limited and often flawed	Ability to develop an argument but can lack fluency	Ability to present structured, clear and concise arguments	Convincing arguments that are likely to be at the limits of what may be expected at this level	Stimulating and rigorous arguments that are likely to be at the limits of what may be expected at this level
Approach & Execution	The work has been approached and/or executed / performed inadequately	The work has been approached and/or executed / performed inadequately	The work has been approached and/or executed / performed in a standard way with limited evidence of originality	The work has been approached and/or executed / performed in a comprehensive way with some degree of originality	The work has been approached and/or executed / performed in an original way	The work has been approached and/or executed / performed in an original way

Indicative percentage mark	0 – 39%	40 – 49%	50 – 59%	60 – 69%	70 – 79%	80 – 100%
University Standard	Fail	Fail / Refer	Pass	Merit	Distinction	High Distinction
Contextualisation , Research and Synthesis	<p>Failure to contextualise from sources</p> <p>Little or no evidence of analysis, synthesis, evaluation and critical appraisal</p>	<p>The context provided takes the form of description lacking any breadth, depth and accuracy</p> <p>Demonstrated limited ability to reach decisions and research appropriately</p> <p>Insufficient evidence of analysis, synthesis, evaluation and critical appraisal</p>	<p>Some contextualisation but with a heavy reliance on a limited number of sources and, in general, the breadth and depth of sources and research are lacking</p> <p>Evidence of study and demonstration of ability to reach appropriate decisions based on incomplete or complex evidence</p> <p>Some, but limited evidence of analysis, synthesis, evaluation and critical appraisal</p>	<p>Appropriate contextualisation, including relevant theory / literature / artefacts / performance</p> <p>Evidence of extensive study and demonstration of ability to reach appropriate decisions based on incomplete or complex evidence</p> <p>Evidence of high-quality analysis, synthesis, evaluation and critical appraisal</p>	<p>Insightful contextualisation, including relevant theory / literature / artefacts / performance</p> <p>Clear evidence of extensive study and demonstration of ability to reach appropriate decisions based on incomplete or complex evidence</p> <p>Evidence of high to very high-quality analysis, synthesis, evaluation and critical appraisal</p>	<p>Inspirational, innovative and authoritative - evidence of intellectual rigour, independence of judgement and insightful contextualisation, including relevant theory / literature / artefacts / performance</p> <p>Clear evidence of extensive study and demonstration of ability to reach appropriate decisions based on incomplete or complex evidence</p> <p>Evidence of very high-quality analysis, synthesis, evaluation and critical appraisal</p>

Indicative percentage mark	0 – 39%	40 – 49%	50 – 59%	60 – 69%	70 – 79%	80 – 100%
University Standard	Fail	Fail / Refer	Pass	Merit	Distinction	High Distinction
Problem Solving and ability to address Complexity	<p>Little or no evidence of problem-solving skills</p> <p>Failure to address complex issues</p>	<p>Little evidence of problem-solving skills</p> <p>Barely addresses complex issues</p>	<p>Some evidence of problem-solving skills</p> <p>Some evidence of ability to address complex issues adequately</p>	<p>Good or at least competent problem-solving skills – suggests alternative approaches</p> <p>Ability to address complex issues competently – explores established knowledge</p>	<p>Excellent problem-solving skills – suggests alternative approaches</p> <p>Ability to address complex issues effectively – challenges established knowledge</p>	<p>Outstanding problem-solving skills – suggests alternative approaches</p> <p>Ability to address complex issues both systematically and creatively - challenges established knowledge</p>

Presentation for Assignments

General

All assignments should

- Have a title page stating the **module name and code, title of assignment and word count** (to enable anonymous marking, please do not include your name or student number).
- Be typed, double spaced in black print no smaller than point 11.
- Have margins of 3cm on each side of the page.

Word Count

The word count is up to 2,500 words and must not be exceeded. Work will be marked up to the specified word limit, any words beyond this limit will not be marked. ***Tables and figures are not included in the main word count, but should have a maximum of 500 words in total.*** Words beyond this limit will not be marked. Referencing, bibliography and appendices are *not* included in the word count. Please show your word count on the front cover.

Appendices

One or two appendices may be submitted with the work to support or give detailed illustration of a particular model or framework. However, marks will not be awarded for these supplements.

References

Vancouver is Brighton and Sussex Medical School's official standard style of referencing. This system is the one most commonly used in other medical schools and medical journals. Vancouver offers simplicity, sympathy to the flow of language and facilitates accurate word counts which do not include citations.

To facilitate efficient and accurate referencing, the bibliographic software Endnote is provided on University of Brighton PCs for students and staff. This allows the creation of bibliographies in Microsoft Word, the searching of bibliographic databases and the organisation of references in a searchable database. For guidance on Vancouver styles see the [Cite Them Right](#) available in the BSMS Library area on My Studies.

Module Regulations

Cancellation of Module

The University reserves the right to cancel modules for any reason it deems sufficient and to alter programmes without notice. In the event of such cancellations, the full fee will normally be refunded.

Attendance

It is expected that students will watch and attend 100% of the face to face teaching and/or pre-recorded and interactive sessions respectively. In the event that you are not able to attend for all or part of a module day please contact the Module Administrator in advance explaining the reason for your absence. Please note that you are required to attend for a minimum of 80% of the taught module sessions. If you are unable to meet this requirement you will not be able to take the assessment.

Submission of Assignments

Assignment Deadline: Tuesday 6 September 2022 by 4.30pm

Please submit your assignments **electronically** to the Turnitin Assignment link and the My Studies Assignment Link on My Studies by the above deadline. The electronic submission box is closed at the above-mentioned time. It is **strongly recommended that you submit your document a few days prior to the deadline** in order to avoid any last-minute problems. Please submit just one document and make sure you read and follow the submission instructions contained in **Appendix 1 – Essay Submission Instructions**.

Please note: hard copies and submissions via email will not be accepted.

Anonymous Marking

The essay will be marked anonymously in line with University regulations, in place since academic year 2019/20. To ensure the robustness of this process, please do not include your name or student number anywhere in the document (including the file name). You should save your work with the title **MDM158**. Turnitin identifies your submission with a submission ID (not by name or student number).

Late Submissions and Extensions

Work submitted within 2 weeks after the deadline for submission (**late Submissions**) may be accepted for the consideration of the Area Examination Board. Late work may be marked and feedback provided to the student. The mark for that component will then be capped at the minimum pass mark of 50%.

If the work is submitted more than 2 weeks after the deadline for submission, it should not be accepted, and will be considered a non-submission, and a result of 0 N will be recorded. Please note that students who have already been referred and are resubmitting are **not** permitted to submit late.

Extensions to submission dates are only given in exceptional circumstances where evidence is provided and must be agreed in advance with your course leader and granted for a maximum period of one week.

If you wish to apply for an extension to the submission of assignment dates, you should contact programme administrator Kara Wheeler via MScPaediatrics@bsms.ac.uk to obtain the relevant forms and consult your Student Handbook for guidance on the procedure.

A submission box for agreed extensions and late work will be available for a period of one to two weeks respectively after the final deadline.

Results and Examination Board

Your provisional results will be available on My Studies on Tuesday 4 October 2022; results will need to be presented to our Examination Board on Tuesday 1 November 2022 before being finalised.

Full details of the BSMS Postgraduate Taught Examination and Assessment Regulations (PGTEAR) can be found on the university web page.

If you receive a 'fail' result and are permitted to repeat the module (for which you will incur a charge with attendance) your result for this repeat will be capped at 50%.

Examples of Distinction Work – Publication Policy

Please note, if you receive a distinction mark for your assignment we may post the assignment on My Studies for future cohorts as an example of good work. If you do not wish to have work posted on My Studies please contact your Programme Administrator to opt out.

Plagiarism

BSMS takes plagiarism extremely seriously. It is a matter of **academic integrity and probity**. Plagiarism is the act of taking the work or ideas from another and passing it off as your own.

Work that you submit must be free from any form of plagiarism. This includes taking passages directly from a journal, book or the internet, copying work from another student on your course, another student who studied the module previously, or another person studying elsewhere or ghost writing.

Plagiarism can also come in the form of **self-plagiarism** if you use your own old essays, reports or publications when writing a new one without referencing them properly. If you are using any of your previous work when writing an assignment you should reference it with the same level of care that you would any other source.

For those students registered with a professional regulatory body (or seeking to be in the future), such as the General Medical Council or Nursing and Midwifery Council, academic

plagiarism can have significant professional consequences with regulatory bodies taking a very keen interest in cases where, for example, a doctor's probity is called in to question.

Further information about plagiarism and academic misconduct, and related penalties can be found in the BSMS Postgraduate Taught Examination and Assessment Regulations (PGTEAR).

Additional resources on plagiarism, including resources on avoiding plagiarism, can be found on both the [University of Brighton Study Skills at The Library](#) page and the [University of Sussex Skills Hub](#) page.

The University of Brighton is registered with the JISC Plagiarism Detection Service (TurnitinUK). The Service complies with UK Data Protection Law.

BSMS reserves the right to use the TurnitinUK Plagiarism Detection Service and students' work submitted for assessment purposes **will automatically be submitted** to the Service for checking.

You will be able to view your Originality report prior to the final deadline for submission (see Appendix 1).

By clicking submit, a student declares their understanding that:

The work is original, of their own construction and not plagiarised from other sources;

Anonymity has been maintained by using a pseudonym for any patient/client referred to and have not named Trusts or clinical areas, and;

Failure to comply with above declaration may result in a referral or fail.

A Plagiarism Awareness Pack can be found under the MDM158 assessment area on My Studies and all students are advised to read this information.

Appendix I – Essay Submission Instructions

About Turnitin

Turnitin is a Web-based service that can find and highlight matching or unoriginal text in a written assignment. Turnitin checks any papers submitted against its database of materials to look for matches or near matches in strings of text. Turnitin then generates an Originality Report. The Originality Report summarises and highlights matching text.

Assignment Submission using Turnitin

Before you submit your assignment.....

- Don't forget it's always a good idea to keep a backup copy of all your work, whether you're submitting online or not.
- The front cover of your document **must include**: module code and title, assignment title and word count, please **do not** include your name or student number.
- Please name your file **MDM158**, Turnitin will recognise that the assignment belongs to you but to ensure anonymity the marker will not see any identifying information so please do not include your name/student number in the file name or the assignment itself.
- Turnitin accepts the following file types: PDF, Microsoft Word, WordPerfect, HTML, RTF, Open Office (ODT), Google Docs and plain text. Zip (compressed) files are not acceptable.
- Your file should not be larger than 40MB.
- Turnitin [portals] will not accept submission of multiple files; please submit just one file [per portal]. Any additional documents should be included as an appendix within your main file.
- To avoid any last-minute technical problems with submission, we strongly advise you to submit your assignment well before the deadline.
- You can submit your assignment multiple times up to the deadline. Your final submission before the deadline will be the one which is counted. We

recommend that you take advantage of this to avoid any problems with last-minute submission!

- If you do have technical problems with submitting your assignment, try:
 - Submitting in a different file format – we recommend PDF if you have problems with a different file type.
 - Using a different internet browser – we recommend Firefox. In particular, students have in the past experienced problems with submitting using Safari.
- If neither of these solves the problem, please contact the University of Brighton IT Service Desk (ServiceDesk@brighton.ac.uk / 01273 64 4444) or the Programme Administrator.

Declaration

By clicking submit, you confirm that you have read, understood and agreed the following declaration:

- a) the work is original, of your own construction and not plagiarised from other sources;
- b) anonymity has been maintained by using a pseudonym for any patient/client referred to and have not named Trusts or clinical areas, and;
- c) failure to comply with above declaration may result in a referral or fail.

How to submit your work to a Turnitin assignment link

For an up to date guide on how to use Turnitin, please [visit the University of Brighton eSubmission: Turnitin - Information about how to submit your work](#) library page with instructional videos.