

### Shortlisting Scoring Criteria

This document should be used by applicants to fill out the 'evidence' section of the application form on Oriel and by assessors when shortlisting applications to score each application according to the criteria.

Under each of the six domains are the questions which the applicants will have to answer on the application form. Below are the scoring criteria and how the scores will be awarded. A [glossary](#) is included at the end of the document, which provides more detail on sections of the scoring criteria.

Applicants will not be marked down on grammatical errors or written style, however, answers need to clearly address the points outlined by the scoring criteria in this document. Evidence should be linked to the sub-specialty being applied for demonstrating its relevance where possible/required. Applicants are asked to select only their best/most significant/most relevant example(s) that will allow them to score the highest number of marks in each section.

The word count for any free-text boxes is limited to 50 words maximum, in order to focus responses and allow for ease of scoring. Please note that it is not possible to format text in Oriel, so we recommend writing answers in Word or Notepad and pasting it into Oriel.

This document also includes the structure of questions, as they will be seen on the Oriel application form, including information of any drop-down sections that will need to be completed.

#### Important notes regarding use of examples/evidence:

\* The examples submitted in the following domains must be the same examples used in the confirmation of eligibility form:

- Clinical experience - Exploration of sub-specialty
- QI/Audit

This will be checked at the longlisting stage and any examples found to be different will be longlisted out. Examples must have been verified and signed off by your Educational Supervisor.

\* Applicants should not use the same example for more than one scoring section. The only exception to this will be in the publication/presentation/poster section, where the example can refer to the answers used in either the QI/Audit or Research sections.

\* Evidence of publication/presentation/poster example must be uploaded to the application form on Oriel. There is only one acceptable format for presenting this evidence - please refer to the glossary section, at the end of this document for criteria. Along with a citation and/or weblink (to be entered onto the application form) this will be used to verify the example used, against the scoring criteria.

N.B. None of the other domains require evidence to be uploaded to the Oriel application form.

**Update 28 October 2025** - To upload evidence of your publication/presentation/poster example you will receive a document upload request via an Oriel message. Evidence can be uploaded to Oriel before or after you submit your application but must be by the application deadline or within 48 hours (whichever is the later deadline). If you have not received the request within 24 hours of submitting your application please contact the College on [subspecialty@rcpch.ac.uk](mailto:subspecialty@rcpch.ac.uk)



## Scoring domains, questions and assessment criteria

### 1. Clinical experience - Exploration of sub-specialty

Provide three clear and separate examples of clinical activities/experiences from your career to date, that show your interest in your chosen sub-specialty and demonstrate your understanding of what is required to work in this area.

For each example, you will need to complete the following three sections:

- i. Describe the clinical activity/experience, including specific skills/attributes relevant to your sub-specialty application (50 words maximum)
- ii. How has the experience prepared you for a career in this sub-specialty? (50 words maximum)
- iii. How does this evidence a patient-centred approach? (50 words maximum)

N.B. Each example will be scored on a scale of 0-3, so for this section there will be a total of 9 possible points.

#### Scoring:

|  |   |
|--|---|
| No evidence or generic description of example with little relevance to the sub-specialty and/or poor attempt to explain relevance of skills  | 0 |
| Clear example of activity and evidence of skills, demonstrating relevance to the sub-specialty   | 1 |
| Clear example of activity and evidence of skills, demonstrating clear relevance to the sub-specialty and description of how it has prepared the applicant for a career in the sub-specialty  | 2 |
| Clear example of activity and evidence of skills, demonstrating clear relevance to the sub-specialty and description of how it has prepared the application for a career in the sub-specialty with explanation of a patient-centred approach | 3 |

### 2. Leadership/Management:

Describe clearly the most significant leadership or managerial role you have held in your professional life (undergraduate or postgraduate), that you have undertaken since commencing your medical career. This may therefore include roles outside or within your work environment, but importantly, should not be a clinical leadership role, where you led a clinical situation/team (this will be assessed at interview). You should also describe your individual responsibility/contribution and the time commitment involved in undertaking this role to score the points on offer.

- i. Which of the following best describes your most significant leadership/management role?  
Select one option from the drop-down menu:
  - Leadership/management role at local level
  - Leadership/management role at regional level
  - Leadership/management role at national or international level
- ii. What was the title of the role:
- iii. Briefly describe the responsibilities of the role, your contribution and time



commitment involved. (50 words max.)

**Scoring:**

|   |   |
|---|---|
| No evidence of experience in leadership/management role   | 0 |
| Leadership/management role at local level, with evidence of responsibility/contribution and time commitment                     | 1 |
| Leadership/management role at regional level, with evidence of responsibility/contribution and time commitment                  | 2 |
| Leadership/management role at national or international level, with evidence of responsibility/contribution and time commitment | 3 |

**3. QI/Audit:**

Describe your most significant quality improvement project (QIP) or audit, providing evidence where you have identified an opportunity for quality improvement and subsequently looked to improve clinical effectiveness, patient safety or the patient experience. Be sure to state your specific level of involvement with each stage in any project mentioned, highlight what has changed as a result of each project and describe what you have learnt about the quality improvement/audit process.

N.B. The scoring below applies to quality improvement/audit that you have designed and led individually or, with the support of a colleague, e.g. senior trainee or consultant. *You should use separate examples of projects for the Research and QI/Audit sections.*

- i. What is the name of your most significant quality improvement project (QIP) or audit?
- ii. How did you identify the opportunity for QIP/audit? (50 words max.)
- iii. Describe exactly what your role in the project entailed: (50 words max.)
- iv. Describe the findings, along with any changes and/or subsequent improvements in service made, as a result of the project (50 words max.)

**Scoring:**

|   |   |
|---|---|
| No projects undertaken  | 0 |
| Participation in a QIP/audit as a significant contributor, but did not design or lead the QI/audit  | 1 |
| Evidence of having designed OR led a good quality project and described the findings  | 2 |
| Evidence of having designed AND led a good quality project, and described how the need for QI/audit was identified, and what the findings were  | 3 |
| Evidence of having designed AND led a good quality project, and described how the need for QI/audit was identified, what the findings were and how they have subsequently changed local practice/guidelines and/or evidence of subsequent improvements in service | 4 |

**4. Education - Involvement in teaching:**

This domain assesses your involvement in delivering teaching and education, based on a description of the most significant example from your career in medicine to date.



- i. Briefly describe your most important/significant teaching project/experience: (50 words max.)
- ii. Which of the following best describes the level of teaching that you have delivered:  
Select one option in the drop-down menu:
  - Local departmental
  - Regional teaching
  - No experience of teaching
- iii. Which of the following best describes your personal level of involvement in your example of teaching?  
Select one option from the drop-down menu:
  - Delivered teaching
  - Designed teaching
  - Designed and delivered teaching
  - No experience of designing or delivering teaching
- iv. Briefly describe the exact nature of your involvement, including the actions you carried out: (50 words max.)
- v. Do you have any of the following formal, stand-alone, medical teaching qualifications?  
Select one option from the drop-down menu:
  - Masters
  - Degree
  - PGCert
  - PGDip
  - Other, please specify

What was the title of the course/qualification?

N.B. Teach the Teachers, Generic Instructor Course (GIC) or Train the Trainers will not be counted, nor will a qualification not in medical teaching/medical education. Medical teaching qualification only.

### Scoring:

|  |   |
|--|---|
| No experience of having designed or delivered teaching                   | 0 |
| Evidence of having designed AND/OR delivered local departmental teaching | 1 |
| Evidence of having designed OR delivered regional teaching               | 2 |
| Evidence of having designed AND delivered regional teaching              | 3 |

- Additional point(s) for a formal teaching qualification awarded on top of the score for the above criteria - i.e. They do not automatically guarantee a total score of 4 in this area

|   |    |
|---|----|
| Diploma, degree, certificate or masters in postgraduate medical education | +1 |
|---|----|

### 5. Research experience:

This domain assesses your experience in research, based on a description of the most significant example from your career in medicine to date. *N.B. You should use separate*



*examples of projects for the Research and QI/Audit sections.*

- i. Give a brief description of your most significant/relevant example of research (50 words max.)
- ii. Which of the following best describes your role/involvement in the research project you have chosen?  
Select from the drop-down menu:
  - No research
  - Limited research experience
  - Some input in a research project
  - Significant input in a research project
- iii. Briefly describe the nature of your role and the level of input involved. (50 words max.)

**Scoring:**

|   |   |
|---|---|
| No research   | 0 |
| Limited research experience   | 1 |
| Evidence of a research project of a high standard with some input by applicant        | 2 |
| Evidence of a research project of a high standard with significant input by applicant | 3 |

**6. Publications/Presentations/Posters:**

Please describe your most significant publication/presentation/poster, in accordance with the scoring criteria. N.B. This section is not about quantity, so only one example is required – it is looking for the applicant to evidence the one example that allows them to score the highest number of points.

- Provide details of peer reviewed publications with citations (anonymously) and PubMed number(s) (if available), any other publications (books, letters, abstracts, digital), presentations and posters. Please also state authorship e.g. first author, co-author, etc.
- Only published or accepted publications will receive points. Submitted publications will not earn any points.
- Abstracts relating to poster/oral presentations at national and international meetings will be awarded marks for presentations rather than publications.
- When deciding which publication/presentation/poster to evidence, please choose from those that are the most relevant to the sub-specialty, most recent and that have the highest impact factor.

**N.B. Evidence must be uploaded with your application (in the form of an email confirmation – please refer to glossary below, for clarification), otherwise this section cannot be scored.**

- i. Type of item  
Select one option in the drop-down menu:
  - Book Chapter
  - Letter
  - Peer reviewed publication
  - Poster
  - Presentation
  - Single case report
  - Other: please state



- ii. Citation (write as anonymous)  
For example:
- Poster: XX, 'Title of the Poster,' Title of the Conference/Meeting, Date, Location
  - Presentation: XX, Year, 'Presentation Title' [PowerPoint presentation] Date. Institution, Place
  - Peer reviewed publication: XX, Year, 'Article Title', Journal Title, Volume, Issue, Page(s)
- iii. PubMed (or overseas equivalent) number (If available. Please write N/A if not) and active weblink\*:

\*N.B. If no active link OR citation is provided, your example will not be able to be scored.

- iv. Authorship  
Select one option in the drop-down menu:
- N/A
  - Co-author
  - First author
  - Other: please specify
- v. National or international publication or meeting  
Select one option in the drop-down menu:
- N/A
  - International
  - National
  - Other: please specify

N.B. This is dependent on whether the organisation of the publication or meeting is national or international and not where a meeting is held. For example, an event run by the Royal College of Paediatrics and Child Health would be a national meeting regardless of where it's held.

### Scoring:

|   |   |
|---|---|
| No evidence of publication/presentation/poster  | 0 |
| Single-case report or letter in peer reviewed journal; or first author poster/oral presentation at national meeting; or co-author poster/oral presentation at international meeting   | 1 |
| Co-author of peer-reviewed publication (not case report/letter) or first author poster/oral presentation at international meeting; first author book chapter; first author peer-reviewed publication (not case report/letter) on a free open-access educational website | 2 |
| First author peer-reviewed publication (not case report/letter – not on a free open-access website)   | 3 |

The number of shortlisters for each sub-specialty may vary depending on the number of applications. Scores from each shortlister will be combined to give a total score which will then be used for the final ranking of all candidates at shortlisting to determine who is invited to interview. Shortlisting scores will not be carried over to interview.

Shortlisting scores are used to ensure candidates have attained a suitable standard to progress to interview. Once shortlisted, ranking and meeting the criteria for being appointed is determined by performance at interview which assesses potential of applicant to train in that sub-specialty rather than just prior experience.



## Annex A. Shortlisting scoring criteria glossary

N.B. For any sections that require evidence of something being ‘designed’, ‘led’, ‘delivered’ etc, it is not sufficient for an answer to simply state ‘I designed and led...’ etc – such responses will not be awarded with marks. Answers must include a succinct description of how the applicant carried out these actions, where requested.

| 1. Clinical experience - Exploration of sub-specialty   |   |
|---|---|
| Clinical activity/experience  | <p>This includes specific skills/attributes relevant to your chosen sub-specialty e.g. leadership skills used during stabilisation, demonstrating proficiency in essential procedures relevant to the sub-specialty providing examples and caring for a child unwell with a condition relevant to the sub-specialty and demonstrate good multi-disciplinary team working skills.</p> <p>Reminder: examples must be the same as those used and verified on the Confirmation of Eligibility form.</p>   |
| 2. Leadership/management  |   |
| Leadership or management role   | Applicant is able to demonstrate that they have taken on a role of responsibility in addition to their normal clinical duties where they have made significant contribution in terms of period of time that they have undertaken this role and personal input.  |
| This may therefore include roles outside your work environment, but importantly, should not be a clinical leadership role | The role should therefore be something other than where an applicant has taken a role in a clinical situation and should focus more on associated roles for example resident doctors’ representative or organisation of health campaigns or rota coordinator.   |
| Evidence of responsibility/contribution and time commitment   | <p>Must include clear evidence of both responsibility/ contribution and time commitment, in order to score.</p> <p>Evidence of time commitment could be: regular (quarterly or more) meetings/events (inc. group sessions, classes, meet-ups for non-work examples).</p> <p>Evidence of responsibility could include agenda setting/set up or additional sessions (e.g. working groups, training, one-off events); contribution to and/or oversight of papers/resources.</p> <p>Evidence of contribution could include examples of any outputs and skills learnt or employed when undertaking the role.</p> |
| Local level   | E.g. a leadership role within the applicant’s own hospital trust, for example resident doctors’ representative at trust level.  |
| Regional level  | E.g. a leadership role within the applicant’s school of paediatrics, participation in regional health campaigns.  |
| National level  | E.g. across NHSE/HEIW/NES/NIMDTA, or HSE Ireland regions, involvement in college work, national health campaigns.   |



|  |   |
|--|---|
| Wales, Scotland and Northern Ireland – differentiating between regional and national   | <p>Regional level: e.g. involvement in work across multiple trusts or representative for specific areas of the nation e.g. North Wales, South East Scotland etc</p> <p>National level: e.g. HEIW/NES/NIMDTA, or HSE Ireland representative for the national health board, being part of a government initiative or involvement in national health campaigns.</p>  |
| <b>3. Quality Improvement/Audit</b>  |   |
| Designed and led with clear description of how the need for QI/audit was identified... | <p>Applicant clearly states how they set up QIP/audit and took lead in collecting and analysing data, recruiting participants etc (this can be with support of a colleague, e.g. senior trainee, consultant etc).</p> <p>The emphasis is on having identified something and designed it, proactively, as opposed to being asked by your supervisor.</p>   |
| Designed and led... and what subsequent change in local practice/ guidelines           | As well as the above applicant describes how they disseminated information through local governance structure and what was the impact of the QIP/audit.   |
| Evidence of subsequent improvements in service   | <p>Essentially looking for evidence of completing a full cycle and re-auditing.</p> <p>N.B. Doesn't have to have been re-audited by the applicant themselves, but the question is looking for evidence of completing the loop, making some improvements if appropriate, and showing understanding of the process. .</p> <p>As such, if the findings were that no changes to practice should be made, this should be stated and will be accepted, as evidence of outcomes.</p> |
| <b>4. Education - Involvement in teaching</b>  |   |
| Local departmental teaching  | <p>At departmental level - within local organisation/ employing Trust.</p> <p>A local example will be provided to either your Team/ Department/Hospital/Trust/Health Board and may include team meetings or local teaching sessions for e.g. you taught postgraduates or undergraduates on placement in your hospital where you work.</p>   |
| Regional teaching  | <p>E.g. across NHSE/HEIW/NES/NIMDTA, or HSE Ireland regions.</p> <p>A regional example will be provided to an audience across a region and/or multi-site network (ICB/Deanery/Specialty Network/Medical School) and may be delivered at your local hospital. For example, you organised teaching at your local hospital for undergraduate paediatrics societies, not just the students on placement where you work.</p>   |
| Delivered teaching   | Applicants describe how they have facilitated/taught a group of people.   |



|  |  |
|--|--|
| Designed and delivered                       | <p>As well as above applicant clearly states the purpose of the teaching; also how and/or why put together and structured the teaching module/course.</p> <p>Emphasis is again, on proactivity and not being asked/told to by a supervisor etc.</p>  |
| Formal teaching qualifications               | Applicant can demonstrate that they have achieved a qualification in medical education.  |
| <b>5. Research achievements</b>              |  |
| Research project of a high standard          | The research project has added robust evidence to the field of medicine (doesn't have to be paediatrics) answering a novel question with an appropriate study design including appropriate ethical approval where required.  |
| Limited research experience                  | Regular (monthly) participation in journal clubs, attended research course, incorporates evidence-based approach to clinical practice but has not been directly involved in research study.  |
| Some input                                   | <p>Holds Good Clinical Practice (GCP) <u>and</u> has recruited patients into research studies and or collected research data.</p> <p>N.B. Holding GCP without evidencing additional experience will only count as 'Limited research experience'.</p>   |
| Significant input                            | <p>Investigator responsible for study design/data collection and analysis.</p> <p>N.B. This can be with the support of a colleague, e.g. senior trainee, consultant etc.</p>   |
| <b>6. Publications/Presentations/Posters</b> |  |
| Single case report                           | Single publication in a peer reviewed journal detailing a clinical case or clinical case series.   |
| Posters                                      | Including poster presentations (standing in front of your poster and talking about it) - these will be scored as a poster, not a presentation.   |
| Letter                                       | Letter to author/editor of peer reviewed journal in response to published article or topical area for discussion which has been published in peer reviewed journal.  |
| Peer reviewed publication                    | <p>Publication which has been independently appraised by relevant professionals before being accepted for publication.</p> <p>N.B. Abstracts of presentations or posters will not be counted as publications and should be marked according to whether or not the applicant was the first author for a poster or oral presentation at a national or international meeting.</p> |
| Free open-access educational website         | Examples of free open-access educational websites that could be used in this instance could be FOAMed (Free Open-Access Medical Education) or DFTB (Don't Forget The Bubbles) provided they are peer reviewed.   |
| National meeting                             | Meeting organised by a national organisation, e.g. The British Medical Association (BMA) or RCPCH.   |



|                                 |  |
|---------------------------------|--|
| Co-author                       | Applicant is listed in authorship but is not first author.   |
| International meeting           | Meeting organised by an international organisation, e.g. The European Academy of Paediatrics or the North American Society.  |
| Book chapter                    | This could be a chapter in a hard copy book, an e-book or an educational website e.g., FOAMED (Free Open-Access Medical Education) or DFTB (Don't Forget the Bubbles) provided it is peer reviewed.  |
| What evidence will be accepted? | <p>Presentations/Posters:<br/>Evidence should be in the form of written confirmation from the hosting body/publisher that the presentation/poster was accepted for the relevant conference or meeting.</p> <p>Publications (book chapter/letter/case report):<br/>Evidence should be in the form of written confirmation from the publisher that the book chapter/letter/case report was accepted for the relevant publication or website, including confirmation of authorship.</p> <p>Evidence for any of the above should be in the form of a scan or screenshot of an e-mail/letter confirmation. The e-mail itself should show evidence of being sent from an official e-mail account of the hosting body/publisher, not a personal e-mail account. If a scan of a letter, this should show an official letterhead.</p> <p>Confirmation e-mails for any of the above should standardly contain the information required.</p> <p>N.B. You should upload a single document of evidence only – if any more than one document uploaded, the section will not be scored.</p> |