



Royal College of
Paediatrics and Child Health

Leading the way in Children's Health

MRCPCH/DCH examiner misconduct policy

1. Introduction

- 1.1 MRCPCH and DCH examinations rely on Members and Fellows of the Royal College of Paediatrics and Child Health (and other Royal Colleges – DCH) to be committed and professional in all aspects of MRCPCH Clinical and DCH Clinical examinations both in the UK and Overseas.
- 1.2 MRCPCH & DCH examiners and senior examiners, including those acting on relevant committees, are expected to follow the Code of Conduct for RCPCH & DCH Clinical examiners which provides the framework against which any allegations of misconduct will be judged.
- 1.3 In the event of any allegations of examiner/faculty misconduct being made, the RCPCH will follow the process laid out in this document.

2. Allegations of Misconduct of an Examiner

- 2.1 Any allegation of misconduct of an examiner/faculty relating to attitudes, behaviours or performance during any examination may be made by candidates, other examiners/faculty or others involved in the examination process. The College regularly monitors its examinations and therefore this process may highlight other possible issues relating to examiner/faculty conduct.

3. Process of Dealing with Allegations

- 3.1 In the event of an allegation or occurrence the RCPCH will follow the process outlined below:

Informal Process

- 3.2 The Clinical Assessment Team will acknowledge all allegations and consider and assess the information provided. The informal process will be followed in the first instance for all allegations with the exception of gross misconduct. Where appropriate, the examiner/faculty will be given an opportunity to have an informal feedback session with the Officer for Examinations in the first instance. If the Officer for Examinations is not able to meet, then the Chair of the MRCPCH Clinical Examination or Chair of the DCH Clinical Examination may be permitted to meet informally with the examiner/faculty where the allegation is addressed and discussed either via the telephone or face-to-face.

- 3.3 This mutual feedback session and discussion will be noted and recorded and suggested actions to improve or modify the behaviours or attitudes of the examiner/faculty will be implemented and overseen by the Head of Clinical Assessment. Examples of this would be coaching and mentoring or additional training (although this is not an exhaustive list).
- 3.4 The complainant will be informed of the outcomes of the feedback session and be alerted to what remedial steps are to be taken.
- 3.5 All details and information surrounding the allegation will be dealt with in the strictest confidence and all documentation or summaries of meetings will be confidential and only available to key RCPCH staff, the Officer for Examinations / Chair of the relevant clinical exam and the examiner/faculty.

Formal Process

4. Allegations or occurrences of examiner/faculty misconduct which could be considered as gross misconduct will warrant a formal process to be followed by the RCPCH. Examples of gross misconduct include: intoxication, fighting or other physical abuse, indecent behaviour, theft, dishonesty, or offensive behaviour such as discrimination, harassment, bullying, abuse and violence (this list is not exhaustive). In such cases, the RCPCH will undertake an investigation governed by the following principles:

- 4.1 The investigation will be led by the Chair of the MRCPC Clinical Examinations Committee or the Chair of the DCH Committee.

The Head of Clinical Assessment will acknowledge the allegation made by the complainant and formally write to the examiner/faculty making them aware that an investigation is taking place. The examiner/faculty will be:

- offered a face-to-face interview to explain the process (remote or virtual interview options may be considered);
 - provided with a detailed written explanation as to the nature of the case under investigation and the allegations made against the examiner/faculty.
- 4.2 No definitive action will be taken against any examiner until the investigation is complete, however, in some instances it may be necessary to suspend the examiner from examining duties pending investigation.
- 4.3 The anonymity of the examiner will be protected as far as is possible.
- 4.4 Should an examiner/faculty member neglect to reply to any points raised, or at any point discontinue their involvement with the process, the investigation process may still be followed through to completion.
- 4.5 The investigation may involve asking other examiners/faculty or others involved in the exam process (where appropriate) to comment on any allegations or observations. In this case, all examiners/faculty are expected to respond to any such approaches in an open and timely manner. It is expected that all responses be received within a maximum of 5 weeks of the request being sent.

- 4.6 Other materials or statements may be obtained and considered as part of the investigation.
- 4.7 Investigations may involve requests for examiners/faculty to attend a meeting (remote or virtual interview options may be considered).
- 4.8 Investigations may involve analysis of statistical information on examiner marking and examples of completed mark sheets, bench marking forms or other related examination materials. If the investigation is related to examination content this could also include scenarios.
- 4.9 If the investigation substantiates the allegation, any subsequent action will be taken following agreement between the Officer for Examinations and the Associate Director of Assessment/Director of Education and Training, regarding the examiner or faculty members future involvement in the MRCPCH and DCH Clinical examination activities.

Outcomes and Sanctions

5. The Examiner/faculty member will be formally written to with details on the final outcome of the investigation and sanctions that have been imposed. Examples of possible sanctions are listed below, however this is not an exhaustive list.
 - A period of time allocated to modify aspects of behaviours or attitudes as outlined in the original allegation which would result in a temporary suspension of examining;
 - A mentoring and retraining programme;
 - An examiner will no longer be able to examine for any RCPCH or DCH Clinical examination either for a specified period or indefinitely;
 - Recommending to the Council that the examiner or faculty members membership of the College should be terminated or suspended;
 - Informing the examiner or faculty members employer of the investigation and outcome.

5.1 Regulatory Body

In the event that individuals have been found guilty of gross misconduct in supporting and assessing a professional examination it is possible that details of the investigation and outcome will be reported to the General Medical Council (GMC), or equivalent overseas medical body/regulator. Ordinarily the College will not take this step until its own decision-making process has been completed; however, the College reserves the right to take appropriate action at any stage particularly if the circumstances of the allegations against an individual suggest that regulatory action (e.g. suspension) may be necessary in the interests of patient safety while the College's investigation is pending.

- 5.3 In deciding which sanction to apply the panel shall consider:
 - The risks to patients from not applying each and any of the above;

- The need to preserve the integrity of RCPCH examinations as a reliable indicator of the competence of a holder of a College certificate;
- Evidence of contrition and an understanding of the nature of the offence;
- Natural justice and consistency with previous sanctions;

Appeals

- 6.1 Should an examiner/faculty wish to appeal, they must notify the Head of Clinical Assessment **within 5 weeks** of the date on which the outcome of the investigation was sent to their registered address.
- 6.2 The Appeals Panel will comprise:
 - – Chair (where appropriate Officer for Exams to chair)
 - One RCPCH senior examiner not previously involved
 - Lay representation
 - Associate Director for Assessment
 - Other members may be co-opted at the discretion of the Chair
 - Secretary – as appointed in relation to the incident.
- 6.3 If reasonably practicable, the Appeals Panel will convene within 10 weeks of an appeal being made and will consider the examiner or faculty members appeal in accordance with the principles outlined within this document.
- 6.4 The appellant is required to submit a paper outlining the basis of their appeal at least ten working days in advance of the Appeals Panel hearing.
- 6.5 At the appeal hearing, the appellant is entitled to have representation at his or her own expense.
- 6.6 The appellant will be allowed to make a closing statement to the Appeals Panel in support of their appeal. The Appeals Panel will then retire to discuss the appeal in private.
- 6.7 The Appeals Panel is empowered to accept the appeal in whole or part or to uphold the original decision. Where the appeal is upheld in part, the Appeals Panel has the power to impose another sanction.
- 6.8 The panel will, in writing, finalise its decision within 10 working days of the hearing and provide this to the appellant by sending it to the appellant's registered address.
- 6.9 **There is no further right to appeal.**